



**Service Priorities and Programmes**  
**Electronic Presentations**

**Convention ID:** 870

**Submitting author:** Mr Justin WONG

**Post title:** Physiotherapist II, YCH, KWC

**Enhancement of first consultation service on Frozen Shoulder**

*Wong KY*

*Fan CC*

*Yeung NC*

*Chau WM*

*Yan Chai Hospital Physiotherapy Department*

**Keywords:**

Frozen shoulder

Enhancement of first consultation

**Introduction**

Frozen shoulder is a common condition with uncertain etiology frequently seen in a physiotherapy department. A patient who is suffering from frozen shoulder is characterized by spontaneous onset of pain with progressive and significant restriction of both active and passive range of movement.

Patients in the Hospital Authority (HA) usually need to wait for at least few months before they can have their first consultation of OPD physiotherapy treatment.

Physiotherapist would then require much more time and effort to help them to regain full range of movement which prolong the suffering and rehab treatment to this type of patient.

**Objectives**

The achieved objectives :

1. Decrease the severity of pain
2. Improve shoulder mobility
3. Improve treatment efficiency by reducing the number of treatment sessions
4. Shorten the total rehabilitation period of the patient
5. Shorten the waiting time of the patient

**Methodology**

Patients recruited to this program were asked to attend the Shoulder education and exercise class within 8 week after triage. Home exercise and management on frozen shoulder advice weve given to patients.

Follow up will be arranged 3 months after the first session and outcome measures including 1)Disabilities of the Arm, Shoulder and Hand Score (DASH),2)Numeric Pain Rating Scale (NPRS) and 3)shoulder flexion range will be re-assessed.

**Result**

A total number of 88 patients who diagnosed frozen shoulder were recruited for this program.

For patients who had completed the program, there was significant reduction of NPRS

(55.8%,  $P < 0.001$ ).

Shoulder flexion range was shown significant improvement (32.1%,  $P < 0.001$ ) was found after attending the program.

There was a significant reduction in DASH Score at the end of programme ( $p < 0.001$ ). The mean percentile changes was 28.0% which shown the improvement in disability in upper limb function.

#### Conclusion

Small class size, early intervention and emphasis on appropriate self-exercise and management skills are believed to be the key success of this program. For the benefit of both patients and our department, it is worthy to continue the shoulder enhancement program in the future.