

Tips for Preventing and Managing Shoulder Injuries

This WorkCare Fact Sheet discusses ways to prevent work-related shoulder injuries and manage them at onset to improve health outcomes.

Work-related shoulder injuries are a relatively common and potentially costly occurrence in terms of medical care, productivity loss and impacts on quality of life.

[Workers' compensation claim data](#) from the National Council on Compensation Insurance show that shoulder injuries have the longest average duration of temporary disability (123 days) when compared to other body parts. A [National Safety Council study](#) found that work-related shoulder injuries resulted in a median of 28 lost work days, 10 days more than for knee injuries and 19 more days than for back strains and sprains.

Shoulder Anatomy and Risk Factors

Shoulder pain affects an estimated 18 million Americans a year. Degenerative shoulder complaints naturally develop with age. Overuse at home or at work, workplace ergonomic risks, and slip, trip and fall hazards are also contributing factors.

To help counteract these effects, WorkCare's occupational health nurses, board-certified physicians and industrial athlete specialists recommend preventive measures and follow specific, proven protocols to reduce discomfort at onset and shorten recovery times.

Shoulder anatomy is complicated. The shoulder is comprised of bones, muscles, tendons and ligaments. It contains the shoulder girdle (clavicle and scapula) and has four joints, including the ball-and-socket joint that is stabilized by rotator cuff muscles and tendons.

Employees in many types of occupations are at risk for the development of work-related shoulder complaints. Industries with shoulder injury exposure risks include construction, utilities, oil and gas production, agriculture and tree maintenance, manufacturing, assembly, transportation, mining, law enforcement and health care.

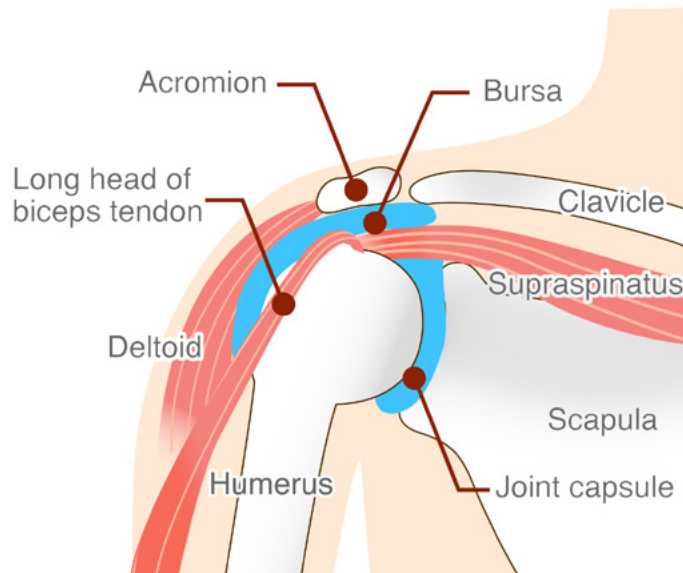
These are some of the activities that make the shoulder vulnerable to musculoskeletal disorders (MSDs) and other types of injuries:

- Doing overhead work, causing muscles to fatigue at a relatively rapid rate
- Lifting heavy or awkwardly shaped objects without any assistance
- Performing repetitive tasks such as reaching, pushing, pulling or assembling materials
- Grasping and applying pressure when using hand tools
- Playing sports and doing hobbies that require repeated arm and shoulder movement

Types of shoulder complaints include:

- Rotator cuff tears
- Dislocation or separation
- Tendinitis and bursitis
- Frozen shoulder
- Fracture
- Arthritis (osteoarthritis and rheumatoid)

Many work-related cases involve rotator cuff tears, which can occur from a mix of trauma, overuse and age-related degeneration. Smoking, high cholesterol and family history are also risk factors. (Citation: [Anatomy, Shoulder and Upper Limb](#), Shoulder; M Miniato, et al.; National Center for Biotechnology Information, StatPearls, July 24, 2023.)



Injury Prevention

A workplace safety culture that emphasizes training and reinforcement is essential for injury prevention. WorkCare's [Industrial Athlete Program](#) injury prevention specialists advise employees to work within their body's power zone to reduce shoulder injury risk. Ideally, tasks are performed using core muscle groups between the shoulders and knees for strength and stability. (Illustration 1)

In addition, employers are advised to instruct employees to:

1. Warm up and stretch before physical activity; cool down and stretch after activity.
2. Do weight training to strengthen muscles in the shoulders, wrists, arms, neck and back.
3. Take frequent microbreaks if working overhead or in an awkward posture.
4. Wear personal protective equipment as required or recommended for conditions.
5. Use scaffolding, a ladder or step stool to reduce reaching distance in all directions.
6. Always wear a seat belt as a precaution in the event of a sudden stop or accident. .
7. Use proper lifting techniques, find a buddy or use mechanical lifting aids, as needed.
8. Don't lunge for falling objects, take shortcuts or rush when walking on slick/uneven surfaces.

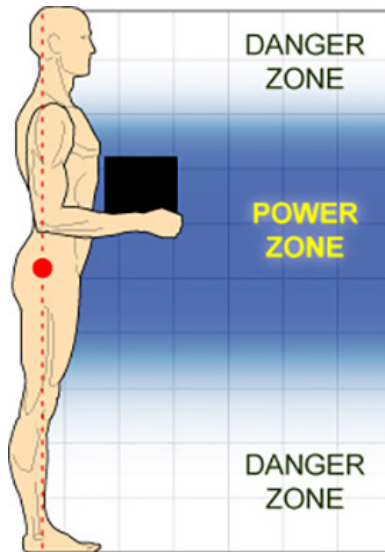


Illustration 1: Using the Power Zone

9. Alternate hands when performing repetitive activities at work or at home, as feasible.
10. Eat a nutritious diet, drink water, manage stress and get enough sleep for better overall health.

Diagnosis and Care

Adults are advised to seek emergency medical care when shoulder pain is accompanied by heart attack symptoms such as difficulty breathing and/or chest tightness, or when pain travels along nerves to the shoulder. A physician should be consulted when there is redness, sudden swelling or/intense pain, areas around the shoulder feel tender and warm, the shoulder appears deformed, the ball joint feels immobilized or the affected arm won't extend.

WorkCare's [Incident Intervention](#) telehealth triage clinicians are familiar with signs and symptoms and trained to provide care guidance (self-care at the first-aid level or referral for further diagnosis and potential treatment), as clinically appropriate. Shoulder conditions typically are diagnosed based on known cause(s), symptoms, medical history, physical examination and, as warranted, diagnostic tests such as X-rays or magnetic resonance imaging.

Initial care often involves rest, ice, compression (wrap or bandage) and elevation above heart level (RICE). Over-the-counter nonsteroidal anti-inflammatory medications (NSAIDs) may be used to help reduce swelling and relieve pain. Gentle exercises, ultrasound or electrical stimulation may be recommended. Depending on response to treatment, corticosteroid injections or surgery may be performed in some cases.

Contact WorkCare to learn more about the ways we help employers in all types of industries prevent and manage work-related injuries and illnesses before they become workers' compensation claims: info@workcare.com