

Shoulder Reduction Basics, part 4: THE PRAKASH METHOD



THE BASICS

- According to Dr Prakash, successful in 100% (!) of attempts
- May be attempted without pre-medication
- Does not require an assistant
- *ALWAYS* examine neurovascular status *before* and *after* reduction (finger grip and sensation over deltoid)

PATIENT POSITION

- Patient seated in chair without armrests

REDUCTION TECHNIQUE

PANEL ONE:

- Patient's affected arm should be flexed at elbow to 90 degrees
- Grasp patient's affected arm at proximal forearm and wrist
- Assistant may stand behind patient to try scapular tilt

PANEL TWO:

- Slowly externally rotate affected shoulder to maximum patient tolerance
- Hold external rotation for a minimum of 3 minutes – by the clock – to fatigue spasmed muscles

PANEL THREE:

- Slowly adduct arm while maintaining external rotation until elbow is brought in front of patient's body
- Most reductions will occur at this point

PANEL FOUR:

- Internally rotate affected arm so that patient's fingertips touch opposite shoulder
- According to Dr Prakash, "the shoulder glides in majestically without any audible clicks, clunks, or sounds."

