SHOULDER PUSH STABILIZATION SCREEN

Objective: To examine stabilization of the scapulothoracic joint during closed-kinetic-chain pushing movements

Instructions:

- Briefly discuss the protocol so the client understands what is required.
  - ✓The client presses his or her body off the ground as the trainer evaluates the ability to stabilize the scapulae against the thorax (ribcage) during pushing-type movements.
- Instruct the client to lie prone on the floor with arms abducted in the push-up position or bent-knee push-up position.
- Ask the client to perform several push-ups to full arm extension.
  - ✓Subjects should perform full push-ups; modify to bent-knee push-ups if necessary.
  - ✓It is important to remember *not* to cue the client to use good technique, but instead observe his or her natural movement.
  - ✓Repetitions need to be performed slowly and with control.

Observations (see table at right):

- Observe any notable changes in the position of the scapulae relative to the ribcage at both end-ranges of motion (i.e., the appearance of scapular "winging")
- Observe for lumbar hyperextension in the press position.

General interpretations:

- Identify the origin(s) of movement limitation or compensation.
- Evaluate the impact on the entire kinetic chain.

Shoulder push stabilization screen

Shoulder push stabilization screen with scapular winging

Shoulder Push Stabilization Screen

View		Joint Location	Compensation	Key Suspected Compensations
☐	Sagittal	Scapulothoracic	Exhibits "winging" during the push-up movement	Inability of the parascapular muscles (i.e., serratus anterior, trapezius, levator scapula, rhomboids) to stabilize the scapulae against the ribcage. Can also be due to a flat thoracic spine.
☐	Sagittal	Trunk	Hyperextension or "collapsing" of the low back	Lack of core, abdominal, and low-back strength, resulting in instability

Sources: Sahrmann, S.A. (2002). *Diagnosis and Treatment of Movement Impairment Syndromes.* St. Louis, Mo.: Mosby; Kendall, F.P. et al. (2005). *Muscles Testing and Function with Posture and Pain* (5th ed.). Baltimore, Md.: Lippincott Williams & Wilkins.