

Glenohumeral Annotated Bibliography

Citation: Kim SH, Park JS, Jeong WK, Shin SK. The Kim test: a novel test for posteroinferior labral lesion of the shoulder--a comparison to the jerk test. *Am J Sports Med.* 2005;33:1188-92.

The article looks into the difficult assessment of labral lesions, specifically posterior inferior labral lesions. The research wanted to find the diagnostic values for a new shoulder special test called the Kim Test for diagnosing posterior inferior labral lesions. The article compared this test to the Jerk test.

In the study Jerk and Kim tests were performed on 172 consecutive shoulders at the examiners center. All patients had prior arthroscopic surgery. After the tests were performed all 172 patients underwent arthroscopic examination from a surgeon who was blinded from the results of the Jerk and Kim tests. Out of the 172 patients 30 ended up having a posterior inferior labral lesion. The prevalence of this lesion in painful shoulders is 17% from this data. The results found a sensitivity for the Kim test as 80%, specificity of 94%, positive predictive value of .73, negative predictive value of .96, positive likelihood ratio of 13.3 and negative likelihood ratio of .21. For the jerk test sensitivity was 73%, specificity was 98%, positive predictive value of .88, negative predictive value of .95, positive likelihood ratio of 36.5, and a negative likelihood ratio of .28. When the 2 tests were combined the sensitivity was 97% for detecting posterior inferior labral lesions. The article was graded using the *AAOS Levels of Evidence for Primary Research Question* and is considered level 2 evidence. The study used consecutive patients and the gold standard of diagnosis was arthroscopy since the accuracy for detecting posterior inferior labral lesions with MRI is low. Only outside factor is the creator of the Kim test was also the writer of this article, so I think further study needs to be done to validate the results that Kim got.

In athletic training the Kim test can be used as a Spin test for ruling in posterior inferior labral lesions. The jerk test can also be used as a Spin test to rule in posterior inferior labral lesions. In athletic training both tests can be combined to make an accurate Snout test to rule out posterior inferior labral lesions. These tests will be helpful because of the poor accuracy of MRI for posterior inferior labral tears and since the gold standard is arthroscopic evaluation for the most accurate diagnosis which is very invasive.