In total, 22 different combinations of diagnoses were observed. Mean age was 56 years. **Conclusion** Patients with SAPS often present with concomitant shoulder diagnoses. The clinical importance of this remains uncertain, but the high prevalence underpins the need for further investigations on the role of concomitant diagnoses in relation to prognosis and response to current treatment paradigms.

**Introduction** Patients with subacromial pain syndrome (SAPS) are typically referred to physiotherapy as first line of treatment. Only half of patients get a satisfactory treatment outcome from this. Acromial morphology, poor scapular control, and impingement are pathophysiological factors associated with SAPS. These are expressed varyingly in SAPS-patients, and could be associated to treatment outcome. The aim was to investigate if acromial morphology, scapular control, and ultrasonographic impingement were associated with outcome from 3-months of treatment, in SAPS-patients. These are expressed varyingly in SAPS-patients, and could be associated to treatment outcome. The aim was to investigate if acromial morphology, scapular control, and ultrasonographic impingement were associated with outcome from 3-months of treatment, in SAPS-patients.

**Materials and Methods** Patients were referred to 3-months physiotherapy. Acromial morphology, scapular control and ultrasonographic impingement were analyzed, through multiple linear regression, for an association to change in SPADI before and after treatment. Potential confounders were addressed in the analyses. **Results** 69 patients were included in the analysis for scapular control, and after treatment. Potential confounders were addressed in the analyses. **Conclusion** Acromial morphology was associated to the outcome after physiotherapy, with increasing acromial curve associated to poorer SPADI-scores. Ultrasonographic impingement and scapular control were not associated to treatment outcome. The exact relationship between acromial morphology and non-surgical treatment outcome needs to be explored further to confirm findings and determine the clinical implications.