**Supplementary File S1:** Read Codes: Traumatic anterior shoulder dislocations

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| S41.. | (Dislocation or subluxation of shoulder), |
| S410. | (Closed traumatic dislocation of shoulder), |
| S4100 | (Closed traumatic dislocation shoulder joint, unspecified), |
| S4101 | (Closed traumatic dislocation shoulder joint, anterior(sub-coracoid)), |
| S410z | (Closed traumatic dislocation of shoulder NOS), |
| S41z. | (Dislocation of shoulder NOS) |

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| **Supplementary file S2:** Operational definitions used in the study | |
| **Term** | **Operational definition** |
| FTASD | Did your shoulder come out of its socket? |
| Previous shoulder instability event | Has your shoulder come out of its socket before? YES/NO |
| Hand dominance | What hand do you throw with? |
| Occupation | What do you do during the day? |
| Family history | Has anybody else in your family also had a shoulder dislocation |
| Hypermobility | Do you consider yourself to be hypermobile( for example can you place your hands flat to the floor with your knees straight when standing?) |
| Period of immobilisation | How long did you wear a sling for? |
| Number of physiotherapy sessions | How many physio sessions did you attend? |
| Recurrent Instability | 1-no instability event,  2-feels loose but no instability event,  3-shoulder has come out of its socket but relocated without external force (subluxation),  4-shoulder came out of its socket and was relocated by friend/family member (dislocation)  5- shoulder came out of its socket and was relocated by medical professional (dislocation).  Groups 1 and 2 were categorised as no recurrent instability and groups 3 through 5 were categorised as recurrent instability. |

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| **Supplementary file 3.** Sample size calculation based upon Robinson et al.[12] | | | | | |
| **Robinson et al.12** | | | **Assumptions to power this study at 90%** | | |
| **Age (years)** | **Recurrence rate (95% CI)** ± | **N** | **Recurrence rate** | **Sample size** | **Assuming a non-response rate of 50%¥** |
| **16-20** | 52.0 (41.5-62.5) | 92 | 50 | 26 | 39 |
| **21-25** | 40.8 (29.6-52.1) | 79 | 50 | 26 | 39 |
| **26-30** | 15.9 (5.1-26.7) | 47 | 25 | 10 | 15 |
| **31-35** | 21.2 (7.3-35.3) | 34 | 25 | 11 | 17 |
| **36-40** | Unknown | - | 25 | 11 | 17 |
| **TOTAL** |  |  |  | 84 | 127 |
| Power = 90%, alpha=0.05, sides =2, ± Observedrecurrence rate from Robinson et al.[12] | | | | | |
| ¥ Adding 50% more the sample size to account for the non-response rates | | | | | |

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| **Supplementary file 4.** Ethnicity of participants | | | | | | |
| **Ethnicity** | **N** | **Mean age** | **Overall Rate of Recurrent instability** | **Recurrent Instability** | **No recurrent Instability** | **Loss to follow-up** |
| Asian | 7 | 25.7 | 42.7% | 3 | 4 | 0 |
| European Other | 13 | 32.9 | 15.4% | 2 | 11 | 0 |
| NZ European | 71 | 24.7 | 45.9% | 28 | 33 | 10 |
| NZ Māori | 19 | 27.1 | 57.1% | 8 | 6 | 5 |
| Other | 2 | 22.5 | 50.0% | 1 | 1 | 0 |
| Pasifika | 15 | 22.5 | 33.3% | 4 | 8 | 3 |