Orthopedics Rotation

Goals:

Assist in orthopedic Clinic through patient care responsibilities.

Improve in medical knowledge in orthopedics as it pertains to the practice of family medicine.

Be exposed to selected orthopedic skills appropriate for a family medicine physician.

Know when to refer family medicine patients to the orthopedic service and be able to effectively communicate pertinent patient information to the orthopedist.

(For abbreviations of competencies see key below)

Knowledge

Objective: Upon completion of the training the resident will demonstrate the following competencies.

1) Perform a focused history and physical examination commonly encountered orthopedic conditions: (MK)

 low back pain 	• wrist pain	• arm pain	 elbow pain
 shoulder pain 	\cdot hand pain	· heel pain	\cdot foot pain
 neck pain 	· ankle pain	· hip pain	· leg pain

2) Learn the basic terms that are used to describe/discuss orthopedic conditions: (MK)

· proximal/distal	· abduction/adduction	 diaphysis
· medial/lateral	· volar-flexion/dorsiflexion	 epiphysis
 anterior/posterior 	 radial/ulnar deviation 	 metaphysic
· vargus/valgus	 subluxation/dislocation 	

3) Become familiar with the indications and use of plain radiographs in the evaluation of orthopedic conditions and know the definition of the following terms that are used to describe radiographical findings. (MK)

 scoliosis 	 spondylolisthesis 	 osteophytes 	 dislocation
 spondylitis 	 spondylolysis 	 fractures 	 syndesmosis

4) Become familiar with indications and cost effective usage of studies in the evaluation of specific orthopedic conditions. (MK)

\cdot nerve Conduction	Velocity studies	· bone dexa scans
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- \cdot CT Scans \cdot bone scans
- \cdot MRI

5) Become familiar with indications and use of the laboratory tests in the evaluation of selected orthopedic cases: (MK)

· rheumatoid factor	· CRP	· ANA	\cdot cell count of joint
			fluid
 rheumatoid panel 	· CBC	 SLE panel 	· C & S of joint fluid
• uric acid	\cdot sed rate		· crystals in joint fluid

- 6) Recognize emergent or non-emergent orthopedic conditions that are commonly referred to the orthopedist and effectively explain the patient's condition to the orthopedist: (MK)
- 7) Identify commonly used medications to manage commonly encountered orthopedic conditions in a family medicine setting. · Muscle relaxants · NSAIDS · Toradol IM infection · Acetaminophen · Tramadol · Steroid IM infection
- 8) Identify severely painful chronic orthopedic conditions that are commonly referred to the pain management clinic. (MK)

Skills

Objective: Upon completion of the training the resident will demonstrate the following competencies.

I.	Be exposed to orthopedic skills and techniques and be able to performed (PC)		
	\cdot long and short arm splinting	• aspiration of fluid for olecranon bursitis	
	 long and short leg splinting thumb spica splinting long and short arm casting long and short leg casting 	 immobilization technique for knees, ankles, shoulders wrists, elbows, digits steroid injections for subacronial bursitis 	
	\cdot thumb spica casting		

- II. Have a basic understanding of the following arthritides, and identify cases that are commonly referred to the orthopedist or the rheumatologist and effectively explain the patient's condition to the specialist: (PC)
 - · inflammatory arthritis · crystalline arthritis · infectious arthritis · osteoarthritis

Attitude

Objective: Upon completion of the training the resident will demonstrate the following competencies.

- 1. Demonstrate the ability to effectively communicate medical ideas, information and care plans to patients in lay terms. (P, SBP, PBLI)
- 2. Demonstrate the ability to effectively communicate with medical specialists. (P, SBP, PBLI)

<u>Key</u>

- a) Professionalism (P)
- b) System Base Practices (SBP)
- c) Interpersonal Communication Skills (ICS)
- d) Patient Care (PC)
- e) Medical Knowledge (MK)
- f) Practice Base Learning & Improvement (PBLI)