

Orthopaedic Elective Rotation

A. General Information

1. Duration of Rotation: 2 weeks
2. Attending Faculty: Members of Des Moines Orthopedic Surgeons, P.C.
Steve Taylor, M.D., Course Organizer
3. Logistics:

Sandi McCleary should be contacted prior to the start of the rotation to arrange a schedule for the rotation. She can be reached at **224-5220**. Residents may spend four days each week working with different members of the group in the sports medicine area and the more specialized areas of spine related concerns, upper extremity concerns, and foot and ankle concerns.

4. First Day Orientation

Residents should report to DMOS office at 6001 Westown Parkway in West Des Moines at the time determined with Sandi McCleary prior to the start of the rotation. Dr. Taylor and/or his office staff will provide orientation on the first day.

B. Objectives and Description of Rotation

This rotation can provide a broad exposure to basic orthopedics and sports injuries. Residents will become familiar with those aspects of care in this area that are appropriately diagnosed and managed by general internists and those that should be referred to, or managed jointly with, orthopedic specialists.

1. Areas of Emphasis
 - a. Musculoskeletal examination skills & techniques.
 - b. Acute injuries and regional pain of the neck, lower back, shoulder, elbow, wrist, hand, hip, knee, foot and ankle areas.
 - c. Indications for, and limitations of, supplemental orthopedic tests including arthrocentesis, arthrograms, arthroscopy, simple and complex radiographs of joints and spine, and nuclear medicine procedures.
 - d. Therapeutic injection indications and techniques.
 - e. The role of physical therapy and occupational therapy intervention techniques.
 - f. The indications for surgical interventions (such as total joint replacement) in common orthopedic conditions.
2. Residents can rotate with orthopedists of different specialty interest and training to assure a broad exposure to sports medicine, spine problems and more joint-specific patient problems or they may limit their experience to the sports injuries area.
3. Residents will first evaluate patients, obtaining a focused history and doing a limited

orthopedic examination. They will then staff these patients with a supervising orthopedist and important details of the history and physical examination will be reinforced to them. They will be involved in discussing diagnosis and treatment plans with these patients and will then assist in completing the appropriate medical record of that visit as directed by the supervising orthopedist.

C. Ancillary Education Materials

1. Essentials of Musculoskeletal Care (2nd Edition, 2001) published by the American Academy of Orthopedic Surgeons is available in the IMMC Resident Library and may be checked out for review during the rotation.
2. Didactic teaching conferences addressing common orthopedic problems will be provided by supervising faculty related to patients being seen in clinic.
3. Additional orthopedics textbooks will be available on-site for review during the rotation.

D. Patient Care

1. Patient Numbers: This will vary depending on scheduling concerns for the day and the complexity of the patients assigned to the resident for evaluation on a given day.
2. Medical Records: The resident will assist in completing the record for each patient visit they are involved with, as directed by the supervising orthopedist.
3. Continuity of Care Clinics: Residents are to attend their weekly continuity clinics during this rotation.

E. Methods for Evaluation

At the end of the rotation, the resident will be evaluated by the supervising faculty. Personal feedback will be provided and an electronic evaluation form will be completed and returned to the residency office. The evaluation form will be reviewed and signed by the resident.

The resident will be evaluated by faculty in each of the required six general competency areas as follows:

1. Patient Care: Demonstrate ability to effectively interview and examine patients with a variety of different sports medicine concerns.
2. Medical Knowledge: Demonstrate understanding of common orthopedic problems encountered in patients and understand indications for referral.
3. Practice-Based Learning: Demonstrate ability to identify gaps in knowledge and skills in the care of patients with common sports medicine concerns and demonstrate real-time strategies to address these gaps.
4. Interpersonal and Communication Skills: Demonstrate adequate communication abilities in dealings with patients seen during the rotation. Demonstrate timely and complete medical records.

5. Professionalism: Demonstrate respectful behavior towards patients and families, colleagues, nurses and other allied health personnel. Always protect patient confidentiality and provide informed consent.
6. Systems-Based Practice: Collaborate with nursing and other allied health care providers to assure timely, comprehensive care provided and assure proper follow-up is arranged.