

Progression of Training and Skills Orthopedics

Preamble

The burden of suffering from musculoskeletal disease often extends over decades and even lifetimes. Consequently, the commitment to diagnosis, management and ongoing support and guidance, is at the core of family medicine. Besides, the effects of musculoskeletal trauma - contusion, sprain, dislocation and fracture, often present first to the primary care physician who must be skilled in triage, management and recognition of needed resources. Finally, communication with consultants is frequently necessary and important and the descriptive language of fractures should be utilized fluently.

The resident will have two blocks of orthopedics, one in each the second and third year. They will have 200 hours dedicated to the care of patients with a breadth of musculoskeletal problems.

Goals

- Acknowledgment of the impact of musculoskeletal disease on the practice of family medicine
- Awareness of the importance of diagnosing and treating musculoskeletal injuries in family medicine practice
- Awareness of the role of lifestyle in the progression of degenerative disease
- Awareness of proper rehabilitation of acute musculoskeletal injuries
- Knowledge of prevention strategies in the care of the musculoskeletal system
- Development of expertise in office procedures in common orthopedic presentations

Objectives

- Perform an appropriate musculoskeletal history and physical examination
- Be proficient in joint and extremity examination and be knowledgeable about specific examination techniques
- Formulate an appropriate diagnosis and recommend treatment
- Distinguish intra-articular and extra-articular effusion
- Recognize joint instability
- Basic interpretation of radiography and advanced imaging of joints and extremities
- Understand the indications for consultation and referral and be able to communicate findings and needed assistance accurately and specifically.
- Develop practical skills in splinting and casting, joint aspiration, joint and trigger-point injection
- Knowledge concerning appropriate use of analgesic and anti-inflammatory agents
- Effective and compassionate communication with patients and families

The goals and objectives are achieved through a combination of structured experience together with didactic instruction.

[Revised and approved at the Faculty Meeting April 3, 2012]

[Revised and approved at the Faculty Retreat June 20, 2014]

Required Reading:

Residents should note that there is required reading for this rotation kindly selected by Dr. Gardner.

On-line

University of California, San Diego, Online Musculoskeletal Exam Tutorial (detailed tutorial on Musculoskeletal exam by joint. Provides several anatomic and clinical photos and videos with step-by-step review of detailed examination):

<http://meded.ucsd.edu/clinicalmed/joints.htm>

University of California, Los Angeles, Online Library of Radiographic Signs (listing of radiographic signs by location and diagnosis, peer reviewed by the American Journal of Radiology):

<http://www.gentili.net/signs/>

University of West Alabama Department of Sports Medicine and Athletic Training, Online Musculoskeletal Exam List and Explanation with Video (joint-specific physical exam test listing with detailed explanations and short video clips of the exam being performed):

<http://at.uwa.edu/CurrHome/AH323/skillsshoulder.asp>

Articles

Freedman KB, Bernstein J. The Adequacy of Medical School Education in Musculoskeletal Medicine. *J Bone Joint Surg Am.* 1998 Oct;80(10):1421-7.
Giese EA, O'Connor FG, Brennan FH, Depenbrock PJ, Oriscello RG. The athletic preparticipation evaluation: cardiovascular assessment. *Am Fam Physician* 2007;75(7):1008-14. <http://www.aafp.org/afp/20070401/1008.pdf>