

Queen's University – Division of Orthopedics

Rotation Specific Objectives: Sports Medicine

The following document is intended to guide you in some of the specific knowledge and skills you should develop on this rotation. This document is intended to augment but not replace the "Objectives of Training and Specialty Training Requirements in Orthopedic Surgery" and the "Specific Standards of Accreditation for Residency Programs in Orthopedic Surgery". A copy of these documents is supplied in your residency handbook and is also available on the Royal College website.

The resident is expected to be able to describe the rotation specific objectives prior to or at the commencement of the rotation.

It is understood that a residency in Orthopedics is a continuum. Senior residents will be able to meet the same objectives as junior residents as well as the senior objectives.

1. Medical Expert

At the conclusion of residency, the resident should meet all of the following objectives in spite of variations in rotation durations and resident exposure.

• Cognitive & Diagnostic

o Junior Resident

- Understand the anatomy and pathophysiology of acute and chronic Soft Tissue Injury:
 - Rotator Cuff and Elbow Tendinopathy
 - Low back pain
 - Groin injury (Tendinopathy)
 - Isolated Knee Ligaments
 - Meniscal injuries of the knee
 - Patellofemoral Disorders
 - Ankle Sprain
 - Achilles tendon
- Understand the anatomy, pathophysiology and assessment of:
 - Articular Cartilage Injury
 - Upper and lower extremity joint instability

o Senior Resident

- Understand the anatomy, pathophysiology, assessment and management of acute and chronic soft tissue injury and instability:
 - Complex/revision knee ligaments
 - Lower extremity malalignment
 - Multidirectional shoulder instability
 - Failed shoulder reconstruction
 - Chronic instability of the elbow
 - Chronic ankle instability



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- Understand the management of Articular Cartilage Injury including osteochondritis
- Understand the principles of rehabilitation including return to sports and nonoperative management including gender related issues

• <u>Technical</u>

o Junior Resident

- Performance of appropriate upper and lower extremity physical examinations
- Performance of diagnostic and therapeutic joint injections
- Perform diagnostic arthroscopy of the knee and shoulder
- Repair of simple tendon rupture

o Senior Resident

- Performance of:
 - diagnostic and operative shoulder, knee and ankle arthroscopy
 - ACL reconstruction
 - ankle ligament reconstruction
 - patella realignment
 - lower extremity realignment
 - shoulder reconstruction for instability
 - surgical management of rotator cuff pathology
 - repair of complex tendon rupture

2. COMMUNICATOR

- Ability to communicate to patients in clear and straightforward manner
- The ability to obtain an appropriate informed consent for patients undergoing interventions.

3. COLLABORATOR

- Be able to interact within the medical team efficiently and to consult effectively.
- Delegate effectively to other members of the health care team
- Communication with allied health professionals (physiotherapists, nurses, trainers)
- Ability to communicate in writing appropriate rehabilitation prescriptions

4. MANAGER

- Cost effective use of investigative tools and therapeutic modalities including complimentary and alternative therapies and procedures
- Effective time management for patient care and lifestyle balance



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5. HEALTH ADVOCATE

- Identify and advise on risk factors for prevention of injury including issues specific for gender, age and return to activity
- Counsel athletes on the risks and side effects of performance enhancing drugs and substance abuse.

6. SCHOLAR

 Ability to teach and supervise patients, students, colleagues and other healthcare professionals

7. PROFESSIONAL

- Sensitivity and respect for diversity of age, gender, religion, culture and the elite athlete
- Understand the principles of:
 - Ethics in sports
 - Substance abuse
 - Performance enhancing drugs