



**The American Orthopaedic Society
for Sports Medicine's**

EDUCATIONAL CURRICULUM

*Developed by the Education Committee and
Approved by the Collective Leadership
of the American Orthopaedic Society
for Sports Medicine*

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Explanation of the Orthopaedic Sports Medicine Curriculum for AOSSM Members

OVERVIEW

This Curriculum for learning in sports medicine has organized and prioritized topics for continuing education. We have rated topic areas in two ways: knowledge and instruction.

Fundamentally, there are three types of knowledge: 1) knowing what (declarative knowledge); 2) knowing how (procedural knowledge); and 3) knowing when and why (conditional knowledge). A command of all three types of knowledge is required for surgical practice. Procedural knowledge (i.e. knowing the steps one is to follow in doing a particular procedure as described in Campbell's) and being able to do the procedure are very distinct. Knowing the relevant declarative, procedural, and conditional knowledge is necessary but not sufficient for being able to do orthopaedic sports medicine proficiently.

A "scoring key" was developed to breakdown the curriculum topics into a functional (depth of knowledge) and instructional (instructional guide) rating categories. The curriculum is designed to separate topics which should be mastered by all sports medicine practitioners (rating of '1') and those topics in which mastery is expected only in sub-specialists who have a particular interest in that area (rating of '2'). The instructional rating describes the level to which our association should plan instruction. Instructions for topics with an "A" rating should deal with declarative, procedural and conditional knowledge, but also provide psychomotor skills training. Instruction for topics with a "B" rating should deal with declarative, procedural and conditional knowledge, but do not require psychomotor skills training. These should deal with declarative knowledge. Topics rated "C" are suitable for electronic or print media.

Particular care needs to be taken in advertising and introducing hands-on surgical CME courses to warn participants that what they learn in a particular course is intended to contribute to their becoming proficient in using particular types of equipment and/or doing specific types of procedures. The course is not, however, intended to, nor should it be construed to, guarantee such proficiency. For such proficiency to be attained, additional learning may well be necessary, and engaging in that additional learning is each participant's responsibility. Professional societies, such as AOSSM, may or may not choose to provide some or all of the needed, additional learning experiences to fill that gap.

A valid orthopaedic sports medicine curriculum intersects other curricula (i.e. arthroscopic surgery, foot and ankle, pediatric medicine, non-orthopaedic sports medicine). Nevertheless, the intersecting content takes on specialized meaning in the practice of sports medicine.

THE CURRICULUM AND ITS USE

In their response to the 1996 membership survey, AOSSM members put a relatively high priority on the educational offerings of the Society. Many such offerings are made available

each year. Most of them have been presented in traditional continuing medical education (CME) formats such as slide talks in large sessions, panel presentations, and instructional courses (didactic with or without hands-on experiences). Some offerings have utilized less traditional formats such as anomaly-based workshops, traveling fellowships, and one-on-one or small group, Society-sponsored several day apprenticeships with experts.

Educational offerings of the Society have tended to be based on what was assumed to have been needed, what has been well received, and/or what popular and, in some cases, what charismatic presenters have wanted to or were willing to present. The Society leaders feel that significant improvement in the current system can be made by better prioritizing its educational programs by developing a curriculum that more systematically addresses the needs of its members. The goal of the Education Sub-Committee has been to provide such a curriculum along with a recommended strategic plan to implement and periodically update it.

The term “curriculum” is potentially confusing. A continuing medical education (CME) curriculum is different from a schooling curriculum (kindergarten through university level including residency and fellowship training). A CME curriculum is a program or sequence of courses or other instructional activities covering several years (Good, 1959).

The development of the Orthopaedic Sports Medicine Curriculum for AOSSM members utilized concepts and formats from previously developed orthopaedic education curricula including: Noyes and Farmer, 1992; Green, Herndon and Farmer, 1991; Gross and Farmer, 1990; and those published in 1991 by the Arthroscopy Association of North America and in 1989 by the Canadian Orthopaedic Association. All of those curricula pertained to resident or fellowship training. In contrast, the Orthopaedic Sports Medicine Curriculum for AOSSM members pertains to continuing medical education (CME).

In order for a sound CME curriculum to be developed and updated, it is necessary for the nature and extent of potential content and alternative ways of delivering such content to be made explicit along with a plan for prioritizing potential offerings and related strategic decisions. Deciding what educational content to offer and how without a sound curriculum is like doing research without making explicit the population from which the sample is selected.

Much of what is needed (Ruesch, 1975; Baskett and Marsick, 1992; Eraut, 1994, 1985) in orthopaedic practice generally and orthopaedic sports medicine, more specifically, is “knowledge in action” and not merely knowledge or action. Essential in developing, updating, and implementing sound CME curricula is determining whether knowing about something (i.e., sports and sports rules) is necessary and sufficient or knowing and being able to do something (i.e., perform an arthroscopic ligament repair) proficiently and knowledgeable is necessary (Ruesch, 1975; Baskett and Marsick, 1992; Eraut, 1985, 1994) for particular types of orthopaedic sports medicine providers.

Being able to understand and deal with a particular type of injury or illness proficiently means using one or more acceptable (as defined by the profession) procedures or processes while avoiding unacceptable practices. Expertise may evolve from such proficiency as a result of extensive experience and, in some cases, specialized training. The basic goal of CME is

establishing, as necessary, and maintaining proficiency. Developing expertise is a specialized goal. This means that all the Society's members should be helped to develop, as necessary, and retain proficiency as orthopaedic sport medicine providers and that those who choose to do so should be helped to attain expertise in specialized aspects of orthopaedic sports medicine.

Fundamentally, there are three (3) types of knowledge: knowing what (declarative knowledge); knowing how (procedural knowledge); and knowing when and why (conditional knowledge). Often confusing and potentially problematic for CME is the relationship between knowing how (procedural knowledge) and being able to deal proficiently with a particular type of injury or illness. Procedural knowledge (i.e., knowing the steps one is to follow in doing a particular procedure as described in Campbell's or in another relevant source) and being able to implement the procedure proficiently are both important in orthopaedic sports medicine. Knowing the relevant declarative, procedural, and conditional knowledge is necessary but not sufficient for being able to do orthopaedic sports medicine proficiently.

The rating used in this curriculum applies a functional rating to topic areas. The curriculum is designed to separate topics which should be mastered by all sports medicine practitioners (Rating of '1') and those topics in which mastery is expected only in sub-specialists who have a particular interest in that area (Rating of '2'). The instruction rating describes the level to which our association should plan instruction. Instructions for topics with an "A" rating should deal with declarative, procedural and conditional knowledge, but also provide psychomotor skills training. Instruction for topics with a "B" rating should deal with declarative, procedural and conditional knowledge, but do not require psychomotor skills training. These should deal with declarative knowledge. Topics rated "C" are suitable for electronic or print media.

Major topics covered in the curriculum include sports medicine education and inquiry; research; general sports medicine; and musculoskeletal topics. For the musculoskeletal section, a template was developed to cover each anatomical area (e.g., ligament, cartilage, tendon, muscle, bone, nerve and vessel) of each specific joint. For each anatomical area, consideration is given to the relevant basic science (anatomy, biomechanics and biology) and clinical topics including classification of injury/disease, evaluation and management (non-operative and operative) as well as operative and non-operative management. Ratings of specific topics take into consideration unique issues to orthopaedic sports medicine such as return to play and sports-specific outcomes research.

Particular care needs to be taken in advertising and introducing hands-on surgical CME courses to warn participants that what they learn in a particular course is intended to contribute to their becoming proficient in using particular types of equipment and/or doing specific types of procedures. The course, however, is not intended to nor should it be construed to guarantee such proficiency. For such proficiency to be attained, additional learning may well be necessary, and engaging in that additional learning is each participant's responsibility. Professional societies, such as AOSSM, may or may not choose to provide some or all of the needed, additional learning experiences to fill that gap.

Reportedly, many general surgeons were taught about how to do diagnoses and certain surgical treatments in the abdomen using endoscopic techniques (i.e., cholecystectomy). The main way they were taught was through society-sponsored short CME courses that included didactic presentations supplemented by hands-on experience. Unfortunately, this new technology lead to an alarming increase in the number of intraoperative and post operative complications (Soper, Brunt, and Kerbel, 1994). What was concluded when the matter was reviewed was that they had become somewhat knowledgeable about the use of such equipment but not technically proficient in its use as a result of what they learned mainly in the short CME courses.

A valid orthopaedic sports medicine curriculum intersects other curricula (i.e., arthroscopic surgery; foot and ankle; pediatric medicine; non-orthopaedic sports medicine). Nevertheless, the intersecting content takes on specialized meaning and is often used somewhat differently because of it being related to sports, on the one hand, and orthopaedics, on the other.

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Scoring Key

Topic Scoring

Depth of Knowledge:

1 = All should have in-depth knowledge.

2 = All should be aware of this item, but only those who sub-specialize in a particular aspect of orthopaedic sports medicine need in-depth knowledge.

Instructional Guidelines:

A = In-depth instruction provided, *including* psychomotor skill development.

B = In-depth instruction provided, without psychomotor skill development.

C = Instruction provided through the use of electronic or print media.

Musculoskeletal

Basic Science*:

Anatomy
 gross
 functional
Biomechanics
 mechanical properties
 kinematics
 In situ forces
Biology of Healing
 injury
 healing
 repair

Evaluation**:

History
Physical Exam
Imaging
Additional Studies

Management***:

Non-Operative^A
 medication/injection
 brace/splint/cast
 rehabilitation
 return to play
 outcomes
Operative^B
 indications
 techniques
 rehabilitation
 complications
 return to play
 special considerations
 outcomes

General Sports Medicine Topics

<u>TOPIC</u>	<u>SCORE</u>	
	<u>Knowledge</u>	<u>Instruction</u>
I. Medical Aspects of Sports Medicine		
A. Cardiac	2	C
B. Dermatology	2	C
C. Pulmonary	2	C
D. Infection	2	C
E. Nutrition		
1. Eating Disorders	2	C
2. Hydration	1	C
3. Anabolic Steroids	1	C
4. Nutritional Supplements	2	C
5. Ergogenic Aids	2	C
F. Drug Testing/Banned Substances	2	C
G. Environmental Exposure		
1. Hypothermia	2	C
2. Heat Injuries	1	B
3. Altitude Sickness	2	C
4. Decompression Sickness	2	C
II. Exercise Physiology		
A. Response to Exercise	2	C
B. Fitness Level	2	C
C. Training	2	C
D. Adaptation	2	C
E. Motor Skills	2	C
F. Performance Factors	2	C
III. Athletic Populations		
A. Female Athletes	1	B
B. Disabled Athletes	1	B
C. Aging Athletes	1	B
IV. Pediatric and Adolescent Issues in Sports	1	B
V. Preventative Sports Medicine		
A. Pre-participation Guidelines	1	C
B. Rules of Sports	2	C
C. Protective Equipment	1	C
VI. Sports Specific Trauma		
A. Eye, Ear, Mouth & Face	2	B
B. Head: Concussion, Closed Head Injury	1	B
C. Chest		
1. Rib	1	B
2. Cardiac Contusion	2	B
3. Pneumothorax	2	B
D. Abdomen		
1. Spleen	2	B
2. Liver	2	B
4. Other Organ Injury	2	B
E. Genito-Urinary		
1. Male	2	B
2. Female	2	B

VII. Protective Equipment Including Braces

A. Head Gear - Football Helmet

- | | | |
|----------------------|---|---|
| 1. Design | 1 | B |
| 2. Removal | 1 | B |
| 3. Protective Effect | 1 | B |

B. Head Gear - Other Sports (Hockey, Boxing, etc.)

- | | | |
|----------------------|---|---|
| 1. Design | 1 | C |
| 2. Protective Effect | 1 | C |

C. Neck - Soft Orthoses

- | | | |
|-------------------------------|---|---|
| 1. Use of Collars in Football | 1 | B |
| 2. Use of Rolls in Football | 1 | B |

D. Neck - Spine Boards

- | | | |
|------------------------|---|---|
| 1. Indications for Use | 1 | B |
| 2. How to Apply | 1 | B |
| 3. How to Transport | 1 | B |

E. Lumbar Spine

- | | | |
|---|---|---|
| 1. Corset | 1 | B |
| 2. Brace for Spondylosis in Adolescent Adults | 1 | B |

F. Ribs

- | | | |
|----------------|---|---|
| 1. Flak Jacket | 1 | B |
|----------------|---|---|

G. Shoulder

- | | | |
|--|---|---|
| 1. Use of Harness to Prevent
Glenohumeral Instability in Football, Hockey, etc. | 1 | B |
|--|---|---|

H. Elbow

- | | | |
|-------------------------|---|---|
| 1. Hyperextension Brace | 1 | B |
|-------------------------|---|---|

I. Hand & Wrist

- | | | |
|---|---|---|
| 1. Plastic and Silicone Materials for Navicular Fractures
and Game Keepers Thumb in Football, Skiing, etc. | 1 | B |
|---|---|---|

J. Knee

- | | | |
|--------------------|---|---|
| 1. Patella Brace | | |
| a. How to Apply | 1 | B |
| b. Function | 1 | B |
| 2. Sleeves | 1 | B |
| 3. Ligament Brace | | |
| a. Classification | | |
| i. Prophylactic | 1 | B |
| ii. Rehabilitation | 1 | B |
| iii. Functional | 1 | B |
| b. Design | 2 | C |
| c. Objective Data | | |
| i. Biomechanical | 1 | B |
| ii. Clinical | 1 | B |

K. Ankle

- | | | |
|----------------------|---|---|
| 1. Taping | | |
| a. Techniques | 1 | B |
| b. Effects | 1 | B |
| c. Results | 1 | B |
| 2. Air Stirrup Brace | 1 | B |
| 3. Lace-up Support | 1 | B |

L. Foot

- | | | |
|-------------------------|--|--|
| 1. Orthoses for Runners | | |
|-------------------------|--|--|

a. Different Materials	1	B
b. Indications	1	B
2. Heel Protectors	1	B
3. Foot Wear	1	B
4. Plantar Fascia Braces	1	B
VIII. Team Physician Issues		
A. Traveling Team Physician	1	C
B. Pre-participation Physical	1	C
C. Medical/Legal Issues	1	C
D. Ethics	1	C
E. Re-certification	1	C
F. Sports Environment and Facilities	2	C
G. Interaction with Ancillary Medical Personnel	2	C
H. Policies on Blood Borne Pathogens	2	C
I. Policies on Drug Abuse	2	C
J. Rules of Sports as it Pertains to Medical Coverage	1	C
K. Emergency Plans at Sporting Events	1	C
L. Medical Guidelines		
1. State High School	2	B
2. NCAA/Collegiate	2	B
3. Professional Sports	2	B
IX. Practice Management		
A. Office	1	B
B. Billing/coding	1	B
X. Information Technology	1	B

Sports Medicine Research

TOPIC

- I. Critical Appraisal of Literature
- II. Bias
- III. Study Design
- IV. Statistics
- V. Computers

SCORE

<u>Knowledge</u>	<u>Instruction</u>
1	B
1	B
1	B
1	C
1	B

Sports Medicine Education And Inquiry

TOPIC

SCORE Knowledge Instruction

I. Educating the members about how to educate the following about orthopaedic sports medicine:

2

B

- A. Medical Students
- B. Residents
- C. Fellows
- D. AOSSM Members
- E. Other Physicians and Surgeons
- F. Other Allied Health Personnel (ATCs, PTs, EMTs, etc.)
- G. Patients
- H. Coaches
- I. The Public
- J. The Media

II. Helping members engage in inquiry* about important aspects of orthopaedic sports medicine about which:

2

B

- A. Little is known
- B. What is known is problematic

* In the past decade, AOSSM has sponsored such inquiry which was conducted in "anomaly-based workshops" on topics such as: the female athlete, sports-induced soft-tissue inflammation, extraarticular support of the ACL, therapeutic modalities for sports injuries, intensive participation in children's sports, and strength training for pre-pubescent athletes.

Musculoskeletal

See "Template for the Musculoskeletal Section of the Educational Curriculum" for an explanation of this section's format.

TOPIC

SCORE

Knowledge Instruction

SHOULDER/glenohumeral

I. Ligament (IGHL, MGHL, SGHL, Labrum)

A. Basic Science*

1 B

B. Clinical - Instability

1. Classification of Injury/Disease

1 B

a. Traumatic

i. Instability

aa. Direction

1 B

bb. Degree

1 B

cc. Timing

1 B

dd. Acute/chronic

1 B

ee. Associated pathology

1 B

ff. Frequency

1 B

b. Inflammatory

i. Adhesive capsulitis

ii. Post-trauma/surgery

c. Other

2. Evaluation**

1 A

3. Management***

a. Non-Operative^A

i. Unidirectional

aa. Anterior

1 B

bb. Posterior

1 B

cc. Inferior

1 B

ii. Multidirectional

1 B

iii. Adhesive capsulitis

1 B

b. Operative^B (open/arthroscopic)

i. Unidirectional

aa. Anterior

1 A

bb. Posterior

2 A

cc. Inferior

2 A

ii. Multidirectional

2 A

iii. Adhesive capsulitis

2 A

II. Cartilage

A. Articular (chondral, osteochondral)

1. Basic Science*

1 B

2. Clinical

a. Classification of Injury/Disease

1 B

i. Etiology

aa. Traumatic

1 B

bb. Degenerative

1 B

cc. Inflammatory

1 B

dd. Other (tumor, infection, OCD, AVN)

1 B

ii. Location (size/depth)

1 B

b. Evaluation**

1 B

	c. Management***		
	i. Non-Operative ^A		
	aa. Traumatic	1	B
	bb. Degenerative	1	B
	cc. Inflammatory	2	B
	dd. Other (OCD, etc.)	2	B
	b. Operative ^B		
	aa. Traumatic	2	A
	bb. Degenerative	2	A
	cc. Inflammatory	2	A
	dd. Other	2	C
B. Labral (superior, anterior, posterior)			
1. Basic Science*		1	B
2. Clinical			
a. Classification of Injury/Disease			
1. Traumatic (SLAP, Bankart)		1	A
2. Degenerative		1	A
b. Evaluation**		1	B
c. Management***			
i. Non-Operative ^A		1	B
ii. Operative ^B			
aa. Traumatic (SLAP, Bankart)		1	B
bb. Degenerative		2	B
III. Tendon (rotator cuff, biceps)			
A. Basic Science*		1	B
B. Clinical			
1. Classification of Injury/Disease			
a. Traumatic-tear		1	B
b. Inflammatory			
i. Mech. impingement		1	B
ii. Calcific tendonitis		1	B
iii. Assoc. pathology			
aa. GH arthritis (cuff arthropathy)		1	B
bb. AC joint arthritis		1	B
cc. Bicep tendon		1	B
dd. GH instability		1	B
c. Other - tumor		1	B
2. Evaluation**		1	B
3. Management***			
a. Non-Operative ^A			
i. Impingement/tendonitis		1	B
ii. Rotator cuff tear (partial to full)		1	B
iii. Rotator cuff arthropathy		1	B
iv. Instability/tendonitis		1	B
v. Bicep tendonitis/rupture		1	B
b. Operative ^B			
i. Impingement/tendonitis		1	A
ii. Rotator cuff tear (partial to full)		1	A
iii. Rotator cuff arthropathy		2	B
iv. Instability/tendonitis		1	A

	v. Bicep tendonitis/rupture	1	A
IV. Muscle (extrinsic muscles (i.e. not rotator cuff) Pec major, deltoid, trapezius)			
A. Basic Science*		1	B
B. Clinical			
1. Classification of Injury/Disease (traumatic, inflammatory, tumor)		1	B
a. Traumatic			
b. Inflammatory			
c. Other - tumor			
2. Evaluation**		1	B
3. Management***			
a. Non-Operative ^A			
i. Strains/ruptures (eg. pec major)		1	B
ii. Tumors		2	C
b. Operative ^B			
i. Strains/ruptures		1	B
ii. Tumors		2	C
V. Bone (humerus)			
A. Basic Science*		1	B
B. Clinical			
1. Classification of Injury/Disease			
a. Traumatic (intra articular, extra articular)			
i. Stress fracture		1	B
ii. Macro fracture		1	B
b. Disease			
i. Metabolic		2	C
ii. Infectious		2	C
iii. Tumors		2	C
2. Evaluation**		1	B
3. Management***			
a. Non-Operative ^A			
i. Traumatic			
aa. Intra articular (glenohumeral)		1	B
bb. Extra articular (humerus,tuberosities)		1	B
ii. Disease			
aa.Metabolic		2	C
bb. Infectious		2	C
cc. Tumors		2	C
b. Operative ^B			
i. Traumatic			
aa. Intra articular (glenohumeral)		2	B
bb. Extra articular			
Humerus		2	B
(stress function, macro function)			
Tuberosities		2	B
IV. Nerve (Brachial plexus, peripheral, axillary, supra scapular n., long throacic n.)			
A. Basic Science*		1	B
B. Clinical			
1. Classification of Injury/Disease			
a. Traumatic		2	C

	b. Inflammatory	2	C
	c. Other - tumor	2	C
	2. Evaluation**	1	C
	3. Management***		
	a. Non-Operative ^A		
	i. Traumatic (neuropraxia to axonotmesis)		
	aa. Brachial plexus		
	i. Stingers	1	B
	ii. Thoracic outlet	2	C
	bb. Suprascapular n. entrapment	2	B
	cc. Long thoracic n.	2	B
	ii. Inflammatory		
	aa. Brachial plexopathy	2	C
	iii. Tumor	2	C
	b. Operative ^B		
	i. Traumatic (neuropraxia to axonotmesis)		
	aa. Brachial plexus	2	C
	bb. Suprascapular n. entrapment	2	C
	cc. Long thoracic n.	2	C
	ii. Inflammatory	2	C
	iii. Tumor	2	C
VII. Vessel (subclavian, axillary)			
A. Basic Science*		1	C
B. Clinical			
1. Classification of Injury/Disease			
a. Traumatic (rupture, external compression)		1	C
b. Inflammatory (included occlusion)		2	C
c. Tumor		2	C
2. Evaluation**		1	C
3. Management***			
a. Non-Operative ^A			
i. Traumatic		1	C
ii. Inflammatory		2	C
iii. Tumor		2	C
b. Operative ^B			
i. Traumatic		2	C
ii. Inflammatory		2	C
iii. Tumor		2	C

SHOULDER/acromioclavicular

I. Ligament

A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
a. Traumatic (sprains/separations (I-IV))	1	B
b. Inflammatory	1	B
c. Tumor	1	B
2. Evaluation**	1	B
3. Management***		
a. Non-Operative ^A		
i. Traumatic (sprains/strains)	1	B
ii. Inflammatory	1	B
iii. Tumor	2	C
b. Operative ^B		
i. Traumatic	1	B
ii. Inflammatory	1	B
iii. Tumor	2	C

II. Cartilage (articular, meniscal)

A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
a. Traumatic (post-traumatic, OA)	1	B
b. Inflammatory (DJD, osteolysis, etc.)	1	B
c. Tumor	2	C
2. Evaluation**		
3. Management***		
a. Non-Operative ^A		
i. Traumatic	1	B
ii. Inflammatory (DJD, osteolysis, etc.)	1	B
iii. Tumor	2	C
b. Operative ^B		
i. Traumatic	1	B
ii. Inflammatory	1	B
iii. Tumor	2	C

III. Tendon - Not applicable

IV. Muscle - Not applicable

V. Bone (includes acromion, clavicle and joint)

A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
a. Traumatic - fractures, non-unions		
i. Intra articular	1	B
ii. Extra articular	1	B
b. Inflammatory		
i. Osteolysis	1	B
ii. Os acromiale	1	B
c. Tumor	2	C
2. Evaluation**	1	B

3. Management***

a. Non-Operative^A

i. Traumatic (fractures)

aa. Intra articular

1 B

bb. Extra articular

Clavicle

1 B

Acromion

1 B

ii. Inflammatory

aa. Osteolysis

1 B

bb. Os acromiale

1 B

iii. Tumor

2 C

b. Operative^B

i. Traumatic (fracture)

aa. Intra articular

2 C

bb. Extra articular

Clavicle

1 B

Acromion

1 B

ii. Tumor

2 C

VI. Nerve

VII. Vessel

SHOULDER/scapulothoracic

I. Ligament - Not applicable

II. Cartilage - Not applicable

III. Tendon - Not applicable

IV. Muscle -

A. Basic Science*

2 C

B. Clinical

1. Classification of Injury/Disease

a. Traumatic

1 B

b. Inflammatory

1 B

c. Tumor

2 C

2. Evaluation**

3. Management***

a. Non-Operative^A

i. Traumatic

2 C

ii. Inflammatory

2 C

iii. Tumor

2 C

b. Operative^B

i. Traumatic

2 C

ii. Inflammatory

2 C

iii. Tumor

2 C

V. Bone

A. Basic Science*

2 C

B. Clinical

1. Classification of Injury/Disease

a. Traumatic fractures

i. Scapula fractures

1 B

ii. Rib fractures

1 B

b. Inflammatory (bursitis)

1 B

	c. Tumor	2	C
	2. Evaluation**	1	B
	3. Management***		
	a. Non-Operative ^A		
	i. Traumatic	2	C
	aa. Scapula fracture	1	C
	bb. Rib fracture	1	C
	ii. Inflammatory (bursitis)	1	C
	iii. Tumor	2	C
	b. Operative ^B		
	i. Traumatic	2	C
	aa. Scapula fracture	2	C
	bb. Rib fracture	2	C
	ii. Inflammatory (bursitis)	2	C
	iii. Tumor	2	C
VI. Nerve			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease		
	a. Traumatic (winging of the scapula)	1	B
	b. Inflammatory	1	B
	c. Tumor	2	C
	2. Evaluation**	1	B
	3. Management***		
	a. Non-Operative ^A	1	B
	b. Operative ^B	1	B
VII. Vessel - See Glenohumeral Joint			
SHOULDER/sternoclavicular			
I. Ligament			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease		
	a. Traumatic	1	B
	b. Inflammatory	1	B
	c. Other - tumor	2	C
	2. Evaluation**	1	B
	3. Management***		
	a. Non-Operative ^A		
	i. Traumatic		
	aa. Strains/sprains	1	B
	ii. Inflammatory	1	C
	iii. Tumor	2	C
	b. Operative ^B		
	i. Traumatic		
	aa. Strains/sprains	2	C
	ii. Inflammatory	2	C
	iii. Tumor	2	C
II. Cartilage			
	A. Basic Science*	1	B

B. Clinical			
1. Classification of Injury/Disease			
a. Traumatic	1		B
b. Inflammatory	1		B
c. Other - tumor	2		C
2. Evaluation**	1		B
3. Management***			
a. Non-Operative ^A			
i. Traumatic	1		B
ii. Inflammatory(arthritis,infection)	1		B
iii. Tumor	2		C
b. Operative ^B			
i. Traumatic	2		C
ii. Inflammatory	2		C
iii. Tumor	2		C
III. Tendon - Not applicable			
IV. Muscle - Not applicable			
V. Bone			
A. Basic Science*	1		B
B. Clinical			
1. Classification of Injury/Disease			
a. Traumatic	1		B
b. Inflammatory	1		B
c. Other - tumor	2		C
2. Evaluation**	1		B
3. Management***			
a. Non-Operative ^A			
i. Traumatic (fractures)			
aa. Intraarticular	1		B
bb. Epiphyseal	1		B
ii. Inflammatory	1		B
iii. Tumor	2		C
b. Operative ^B			
i. Traumatic	2		C
ii. Inflammatory	2		C
iii. Tumor	2		C
VI. Nerve - See Glenohumeral Joint			
VII. Vessel - See Glenohumeral Joint			

Musculoskeletal

See "Template for the Musculoskeletal Section of the Educational Curriculum" for an explanation of this section's format.

<u>TOPIC</u>	<u>SCORE</u>	
	<u>Knowledge</u>	<u>Instruction</u>
ELBOW		
I. Ligament		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease	1	B
2. Evaluation**	1	A
3. Management***		
a. Non-OperativeA		
i. Acute medial rupture	1	B
ii. Chronic medial instability	2	B
iii. Dislocations	1	C
b. OperativeB		
i. Acute medial rupture	2	B
ii. Acute lateral rupture	2	B
iii. Chronic medial instability	2	B
iv. Dislocation	2	C
II. Cartilage		
A. Basic Science*	1	C
B. Clinical		
1. Classification of Injury/Disease		
a. OCD (Loose bodies)	1	B
b. DJD	2	C
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. OCD	1	B
ii. DJD	2	C
b. OperativeB (open/arthroscopic)		
i. OCD	2	B
ii. DJD	2	C
III. Tendon		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
a. Epicondylitis	1	B
b. Biceps/triceps - tendinitis	1	B
c. Biceps/triceps - ruptures	1	B
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. Lat. Epicondylitis	1	B
ii. Medial (Flexor/Pronator) tendinitis	1	B
iii. Biceps tendinitis/triceps	1	C
iv. Tendon rupture	1	C
b. OperativeB		

	i. Lat. Epicondylitis	2	B
	ii. Medial tendinitis	2	B
	iii. Biceps rupture	2	B
	iv. Tendon rupture	2	B
IV. Muscle - Not applicable			
V. Bone			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease		
	a. Supracondylar fracture	1	C
	b. Radial head fracture	1	C
	c. Olecranon fracture	1	C
	2. Evaluation**	1	B
	3. Management***		
	a. Non-OperativeA		
	i. Supracondylar fracture	1	B
	ii. Radial head fracture	1	B
	iii. Olecranon fracture	1	B
	iv. Coronoid fracture	1	B
	v. Tumors (benign)	2	C
	b. OperativeB		
	i. Supracondylar fracture	2	C
	ii. Radial head fracture	2	B
	iii. Olecranon fracture	2	C
	iv. Coronoid fracture	2	C
	v. Tumors (benign)	2	C
	vi. Tumors (malignant)	2	C
VI. Nerve			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease	1	B
	2. Evaluation**	1	B
	3. Management***		
	a. Non-OperativeA		
	i. Ulnar n. entrapment	2	B
	ii. Post. interosseous n. entrapment	2	B
	b. OperativeB		
	i. Ulnar n. entrapment	2	B
	ii. Post. interosseous n. entrapment	2	C
VII. Vessel - Not applicable			

Musculoskeletal

See "Template for the Musculoskeletal Section of the Educational Curriculum" for an explanation of this section's format.

<u>TOPIC</u>	<u>SCORE</u>	
	<u>Knowledge</u>	<u>Instruction</u>
WRIST/HAND		
I. Ligament		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
a. Carpal instability	2	B
b. Thumb MCP instability	2	B
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. Wrist sprain	1	B
ii. DRUJ sprain	2	B
iii. Thumb MCP sprain	1	B
iv. Finger sprain	1	C
v. Finger dislocation	1	C
b. OperativeB		
i. Wrist instability (acute/chronic)	2	C
ii. DRUJ instability(acute/chronic)	2	C
iii. Skier's thumb(Thumb UCL Sprain)	2	B
iv. Thumb RCL sprain	2	C
v. Finger dislocation	1	C
II. Cartilage		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease	2	C
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. TFC tear	2	B
ii. DJD - thumb - CMC	2	C
iii. DJD - carpals	2	C
iv. DJD - fingers	2	C
b. OperativeB (open/arthroscopic)		
i. TFC tears	2	B
ii. DJD - thumb - CMC	2	C
iii. DJD - fingers	2	C
III. Tendon		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
a. Hand lacerations	1	B
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. DeQuervain's	2	C

	ii. Flexor strains	2	B
	iii. Extensor strains	2	B
	iv. Mallet finger	1	C
	v. Lacerations	2	B
	vi. Trigger finger	2	C
	b. OperativeB		
	i. DeQuervain's	2	C
	ii. Mallet finger	2	B
	iii. Lacerations	2	C
	iv. Trigger finger	2	C
IV. Muscle			
V. Bone			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease		
	a. Distal radial	1	B
	b. Thumb MC	2	B
	c. Finger	1	C
	d. Scaphoid	1	C
	2. Evaluation**	1	B
	3. Management***		
	a. Non-OperativeA		
	i. Distal radial fracture	1	B
	ii. Scaphoid fracture	2	B
	iii. Hamate fracture	2	B
	iv. Thumb MC fracture	2	B
	v. MC fracture	2	C
	vi. Phalanx fracture	1	C
	vii. Lunate AVN (Kienbock's)	2	C
	viii. Tumors (benign)	2	C
	b. OperativeB		
	i. Distal radial fracture	1	B
	ii. Scaphoid fracture	2	C
	iii. Hamate fracture	2	B
	iv. Thumb MC fracture	1	C
	v. Phalanx fracture	1	C
	vi. Lunate AVN	2	C
	vii. Tumors (benign)	2	C
	viii. Tumors (malignant)	2	C
VI. Nerve			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease	1	C
	2. Evaluation**	1	B
	3. Management***		
	a. Non-OperativeA		
	i. Carpal tunnel	1	C
	ii. Ulnar n. compression	1	C
	b. OperativeB		
	i. Carpal tunnel	2	B
	ii. Ulnar n. compression	2	C

	iii. Digital n. laceration	2	C
VII. Vessel			
	A. Basic Science*	1	B
	B. Clinical		
	1. Evaluation**	1	B
	2. Management***		
	a. Non-OperativeA		
	i. Raynaud's Syndrome	2	C
	ii. Thrombosis	2	C
	iii. Laceration	1	C
	b. OperativeB		
	i. Laceration	2	C

Musculoskeletal

See "Template for the Musculoskeletal Section of the Educational Curriculum" for an explanation of this section's format.

<u>TOPIC</u>	<u>SCORE</u>	
	<u>Knowledge</u>	<u>Instruction</u>
HIP		
I. Ligament		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
a. SI sprain	1	B
b. Hip subluxation/dislocation	1	B
c. Osteitis Pubis	1	B
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. Ligamentous sprain	1	B
ii. SI joint sprain	1	B
iii. Osteitis Pubis	1	B
b. OperativeB		
i. Osteitis Pubis	2	C
II. Cartilage and Labral Injuries		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. Loose bodies	1	B
ii. Chondral lesions	1	B
iii. Degenerative arthritis	1	B
iv. Labral tear	1	B
b. OperativeB		
i. Loose bodies	2	C
ii. Chondral lesions	2	C
iii. Degenerative arthritis	2	C
iv. Labral tear	2	C
III. Tendon		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. Greater trochanteric bursitis	1	B
ii. "Snapping hip" syndrome	1	B
b. OperativeB		
i. Greater trochanteric bursitis	2	C
ii. "Snapping hip" syndrome	2	C
IV. Muscle		

	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease		
	a. Strain	1	B
	b. Contusion	1	B
	2. Evaluation**	1	B
	3. Management***		
	a. Non-OperativeA		
	i. Strain	1	B
	ii. Contusion	1	B
V. Bone			
	A. Basic Science*		
	B. Clinical		
	1. Classification of Injury/Disease		
	a. Pelvic Ring fractures	1	B
	b. Avulsion fractures	1	B
	c. Hip fractures	1	B
	d. Stress fractures	1	B
	e. Hip dislocations	1	B
	f. Avascular Necrosis	1	B
	g. Slipped Capital Femoral Epiphysis	1	B
	2. Evaluation**		
	3. Management***		
	a. Non-OperativeA		
	i. Pelvic Ring fractures	1	B
	ii. Avulsion fractures	1	B
	iii. Acetabular fractures	1	B
	iv. Femoral head fractures	1	B
	v. Femoral neck fracture	1	B
	vi. Trochaneric fractures	1	B
	vii. Hip dislocation	1	B
	viii. Avascular Necrosis	1	B
	ix. Slipped Capital Femoral Epiphysis	1	B
	b. OperativeB		
	i. Pelvic Ring fractures	2	C
	ii. Avulsion fractures	2	C
	iii. Acetabular fractures	2	C
	iv. Femoral head fractures	2	C
	v. Femoral neck fracture	2	C
	vi. Pertrochaneric fractures	2	C
	vii. Hip dislocation	2	C
	viii. Avascular Necrosis	2	C
	ix. Slipped Capital Femoral Epiphysis	2	C
VI. Nerve			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease		
	2. Evaluation**	1	B
	3. Management***		
	a. Non-OperativeA		
	i. Femoral nerve	1	B

	ii. Sciatic nerve	1	B
	iii. Obturator nerve	1	B
	b. OperativeB		
	i. Femoral nerve	2	C
	ii. Sciatic nerve	2	C
	iii. Obturator nerve	2	C
VII. Vascular Injuries			
A. Basic Science*		1	B
B. Clinical			
	1. Classification of Injury/Disease		
	2. Evaluation**	1	B
	3. Management***		
	a. Non-OperativeA		
	i. Femoral artery and vein	1	B
	b. OperativeB		
	i. Femoral artery and vein	2	C

Musculoskeletal

See "Template for the Musculoskeletal Section of the Educational Curriculum" for an explanation of this section's format.

<u>TOPIC</u>	<u>SCORE</u>	
	<u>Knowledge</u>	<u>Instruction</u>
KNEE/tibioemoral		
I. Ligament (ACL, PCL, MCL, LCL/posterolateral corner)		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease(traumatic, inflammatory, tumor)	1	B
2. Evaluation**	1	B
3. Management***		
a. Non-Operative ^A		
i. Isolated		
aa. ACL	1	A
bb. PCL	1	A
cc. MCL	1	A
dd. LCL/Posterolateral	1	A
ii. Combined injuries	1	A
iii. Dislocated knee	2	A
iv. Arthritis/Instability	2	A
b. Operative ^B		
i. Isolated		
aa. ACL	1	A
bb. PCL	2	A
cc. MCL	2	A
dd. Posterolateral	2	A
ii. Combined injuries		
aa. ACL/medial	2	A
bb. ACL/lateral	2	A
cc. PCL/medial	2	A
dd. PCL/lateral	2	A
iii. Dislocated knee	2	A
iv. Arthritis/Instability	2	A
II. Cartilage/Articular (chondral, osteochondral)		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease	1	B
a. Etiology		
i. Traumatic	1	C
ii. Degenerative	1	C
iii. Inflammatory	1	C
iv. Tumor	1	C
v. Other	1	C
b. Timing		
i. Acute vs. chronic		
c. Location		
i. Depth/size		
2. Evaluation**	1	B
3. Management***		

	a. Non-Operative ^A	1	B
	b. Operative ^B		
	i. Traumatic (acute/chronic)		
	aa. Chondral	1	A
	bb. Osteochondral	1	A
	ii. Degenerative	1	A
	iii. Inflammatory	1	A
III. Meniscal			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease (see articular cartilage)	1	B
	2. Evaluation**	1	B
	3. Management***		
	a. Non-Operative ^A	1	B
	b. Operative ^B		
	i. Meniscectomy	1	A
	ii. Meniscal repair	1	A
	iii. Meniscal replacement	2	A
IV. Tendon (quadriceps, patellar, hamstring, popliteus)			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease (traumatic, Inflammatory, Other)	1	B
	2. Evaluation**	1	B
	3. Management***		
	a. Non-Operative ^A		
	i. Traumatic		
	aa. Partial tear	1	B
	bb. Complete tear	1	B
	ii. Inflammatory(tendinitis, bursitis)		
	aa. Acute	1	B
	bb. Chronic	1	B
	iii. Other	2	C
	b. Operative ^B		
	i. Traumatic		
	aa. Partial tear	2	B
	bb. Complete tear	2	B
	ii. Inflammatory(tendinitis, bursitis)		
	aa. Acute	2	B
	bb. Chronic	2	B
	iii. Other	2	C
V. Muscle (thigh, lower leg)			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease		
	a. Traumatic		
	i. Strain	1	B
	ii. Contusion	1	B
	b. Inflammatory	1	B
	c. Disease	1	B
	2. Evaluation**	1	B

3. Management***

a. Non-Operative^A

i. Traumatic

aa. Strain	1	B
bb. Contusion	1	B
cc. Compartment syndrome - chronic & acute	1	B

ii. Inflammatory

aa. Post exercise	1	B
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iii. Disease

aa. Tumor	2	C
bb. Infection	2	C
cc. Neuropathic	2	C

b. Operative^B

i. Traumatic

aa. Strain	2	B
bb. Contusion	2	B

ii. Inflammatory

	2	C
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iii. Disease

aa. Tumor	2	C
bb. Infection	2	C
cc. Neuropathic	2	C

VI. Bone (femur, intra-articular, tibia, fibula)

A. Basic Science*

	2	B
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B. Clinical

1. Classification of Injury/Disease

a. Traumatic (intra articular, extra articular)

i. Fracture	1	B
ii. Stress fracture	1	B

b. Disease

i. Metabolic	1	B
ii. Infectious	1	B
iii. Tumors	2	C

2. Evaluation**

	1	B
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3. Management***

a. Non-Operative^A

i. Traumatic

aa. Fracture	1	B
bb. Stress fracture	1	B

ii. Disease

aa. Metabolic	2	C
bb. Infectious	2	C
cc. Tumors	2	C

b. Operative^B

i. Traumatic

aa. Fracture	1	B
bb. Stress fracture	1	B

ii. Disease

aa. Metabolic	2	C
bb. Infectious	2	C

	cc. Tumors	2	C
VII. Nerve (sciatic, femoral, tibial, peroneal)			
A. Basic Science*		1	C
B. Clinical			
1. Classification of Injury/Disease (traumatic, inflammatory)		1	C
2. Evaluation**		1	C
3. Management***			
a. Non-Operative ^A			
i. Injury			
aa. Rupture		2	C
bb. Entrapment		2	C
ii. Disease			
aa. Inflammatory		2	C
bb. Tumor		2	C
iii. Other			
b. Operative ^B			
i. Injury			
aa. Rupture		2	C
bb. Entrapment		2	C
ii. Disease			
aa. Inflammatory		2	C
bb. Tumor		2	C
VIII. Vessel (popliteal, geniculates, tibial)			
A. Basic Science*		2	C
B. Clinical			
1. Classification of Injury/Disease			
a. Traumatic		1	B
b. Inflammatory		1	B
c. Tumor		2	C
2. Evaluation**		1	B
3. Management***			
a. Non-Operative ^A			
i. Traumatic			
aa. Partial rupture (intimal tear)		1	B
bb. Complete		1	B
ii. Inflammatory (incl. occlusion) (e.g. PUT, arterial orcle)		1	C
iii. Tumors		2	C
b. Operative ^B			
i. Traumatic			
aa. Partial rupture (intimal tear)		2	C
bb. Complete		2	C
ii. Inflammatory (incl. occlusion)		2	C
iii. Tumors		2	C
<i>KNEE/patello femoral</i>			
I. Ligament (ACL, PCL, MCL, LCL/posterolateral corner)			
A. Basic Science*		1	B
B. Clinical			
1. Classification of Injury/Disease(traumatic, inflammatory, tumor)		1	B

2. Evaluation**	1	B
3. Management***		
a. Non-Operative ^A		
i. Isolated		
aa. ACL	1	A
bb. PCL	1	A
cc. MCL	1	A
dd. LCL/Posterolateral	1	A
ii. Combined injuries	1	A
iii. Dislocated knee	2	A
iv. Arthritis/Instability	2	A
b. Operative ^B		
i. Isolated		
aa. ACL	1	A
bb. PCL	2	A
cc. MCL	2	A
dd. Posterolateral	2	A
ii. Combined injuries		
aa. ACL/medial	2	A
bb. ACL/lateral	2	A
cc. PCL/medial	2	A
dd. PCL/lateral	2	A
iii. Dislocated knee	2	A
iv. Arthritis/Instability	2	A
II. Cartilage/Articular (chondral, osteochondral)		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease	1	B
a. Etiology		
i. Traumatic	1	C
ii. Degenerative	1	C
iii. Inflammatory	1	C
iv. Tumor	1	C
v. Other	1	C
b. Timing		
i. Acute vs. chronic	1	B
c. Location		
i. Depth/size	1	B
2. Evaluation**	1	B
3. Management***		
a. Non-Operative ^A	1	B
b. Operative ^B		
i. Traumatic (acute/chronic)		
aa. Chondral	1	A
bb. Osteochondral	1	A
ii. Degenerative	1	A
iii. Inflammatory	1	A
III. Meniscal		
A. Basic Science*	1	B
B. Clinical		

1. Classification of Injury/Disease (see articular cartilage)	1	B
2. Evaluation**	1	B
3. Management***		
a. Non-Operative ^A	1	B
b. Operative ^B		
i. Meniscectomy	1	A
ii. Meniscal repair	1	A
iii. Meniscal replacement	2	A
IV. Tendon (quadriceps, patellar, hamstring, popliteus)		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease (traumatic, Inflammatory, Other)	1	B
2. Evaluation**	1	B
3. Management***		
a. Non-Operative ^A		
i. Traumatic		
aa. Partial tear	1	B
bb. Complete tear	1	B
ii. Inflammatory(tendinitis, bursitis)		
aa. Acute	1	B
bb. Chronic	1	B
iii. Other	2	C
b. Operative ^B		
i. Traumatic		
aa. Partial tear	2	B
bb. Complete tear	2	B
ii. Inflammatory(tendinitis, bursitis)		
aa. Acute	2	B
bb. Chronic	2	B
iii. Other	2	C
V. Muscle (thigh, lower leg)		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
a. Traumatic		
i. Strain	1	B
ii. Contusion	1	B
b. Inflammatory	1	B
c. Disease	1	B
2. Evaluation**	1	B
3. Management***		
a. Non-Operative ^A		
i. Traumatic		
aa. Strain	1	B
bb. Contusion	1	B
cc. Compartment syndrome - chronic & acute	1	B
ii. Inflammatory		
aa. Post exercise	1	B
iii. Disease		

	aa. Tumor	2	C
	bb. Infection	2	C
	cc. Neuropathic	2	C
	b. Operative ^B		
	i. Traumatic		
	aa. Strain	2	B
	bb. Contusion	2	B
	ii. Inflammatory	2	C
	iii. Disease		
	aa. Tumor	2	C
	bb. Infection	2	C
	cc. Neuropathic	2	C
VI. Bone (femur, intra-articular, tibia, fibula)			
A. Basic Science*		2	B
B. Clinical			
1. Classification of Injury/Disease		1	B
a. Traumatic (intra articular, extra articular)			
i. Fracture			
ii. Stress fracture			
b. Disease			
i. Metabolic			
ii. Infectious			
iii. Tumors			
2. Evaluation**		1	B
3. Management***			
a. Non-Operative ^A			
i. Traumatic			
aa. Fracture		1	B
bb. Stress fracture		1	B
ii. Disease			
aa. Metabolic		2	C
bb. Infectious		2	C
cc. Tumors		2	C
b. Operative ^B			
i. Traumatic			
aa. Fracture		1	B
bb. Stress fracture		1	B
ii. Disease			
aa. Metabolic		2	C
bb. Infectious		2	C
cc. Tumors		2	C
VII. Nerve (sciatic, femoral, tibial, peroneal)			
A. Basic Science*		1	C
B. Clinical			
1. Classification of Injury/Disease (traumatic, inflammatory)		1	C
2. Evaluation**		1	C
3. Management***			
a. Non-Operative ^A			
i. Injury			
aa. Rupture		2	C

		bb. Entrapment	2	C
	ii. Disease	aa. Inflammatory	2	C
		bb. Tumor	2	C
	iii. Other			
	b. Operative ^B			
	i. Injury	aa. Rupture	2	C
		bb. Entrapment	2	C
	ii. Disease	aa. Inflammatory	2	C
		bb. Tumor	2	C
VIII. Vessel (popliteal, geniculates, tibial)				
	A. Basic Science*		2	C
	B. Clinical			
	1. Classification of Injury/Disease			
	a. Traumatic		1	B
	b. Inflammatory		1	B
	c. Tumor		2	C
	2. Evaluation**		1	B
	3. Management***			
	a. Non-Operative ^A			
	i. Traumatic	aa. Partial rupture (intimal tear)	1	B
		bb. Complete	1	B
	ii. Inflammatory (incl. occlusion) (e.g. PUT, arterial orcle)		1	C
	iii. Tumors		2	C
	b. Operative ^B			
	i. Traumatic	aa. Partial rupture (intimal tear)	2	C
		bb. Complete	2	C
	ii. Inflammatory (incl. occlusion)		2	C
	iii. Tumors		2	C

Musculoskeletal

See "Template for the Musculoskeletal Section of the Educational Curriculum" for an explanation of this section's format.

<u>TOPIC</u>	<u>SCORE</u>	
	<u>Knowledge</u>	<u>Instruction</u>
TIBIA/FIBULA (proximal)		
I. Ligament - Not applicable		
II. Cartilage - Not applicable		
III. Tendon - Not applicable		
IV. Muscle		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. Posterior tibial tendonitis	1	B
ii. Peroneal tendonitis	1	B
iii. Compartment syndromes	1	B
iv. Gastrosoleus muscle tendon injuries	1	B
b. OperativeB		
i. Posterior tibial tendonitis	1	A
ii. Peroneal tendonitis	1	A
iii. Compartment syndromes	1	A
iv. Gastrosoleus muscle tendon injuries	1	A
V. Bone		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
a. Fractures of the lower leg	1	B
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. Stress reactions	1	B
ii. Stress fractures	1	B
iii. Fractures	1	B
b. OperativeB		
i. Stress fractures	1	A
ii. Fractures	1	A
VI. Nerve - Not applicable		
VII. Vessel - Not applicable		
ANKLE		
I. Ligament		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. Ankle sprains	1	B

		b. OperativeB		
		i. Ankle sprains		
		aa. Acute	1	A
		bb. Chronic	1	A
II. Cartilage				
	A. Basic Science*		1	B
	B. Clinical			
	1. Classification of Injury/Disease			
	a. Traumatic			
	i. OCD		1	B
	ii. Osteochondral fractures		1	B
	iii. Chondral injury		1	B
	b. Degenerative			
	i. DJD		1	B
	ii. Loose bodies		1	B
	2. Evaluation**		1	B
	3. Management***			
	a. Non-OperativeA		1	B
	b. OperativeB			
	i. Open/arthroscopic		1	A
III. Tendon				
	A. Basic Science*		1	B
	B. Clinical			
	1. Classification of Injury/Disease			
	2. Evaluation**		1	B
	3. Management***			
	a. Non-OperativeA			
	i. Tendinitis			
	aa. Achilles		1	B
	bb. Posterior tibial		1	B
	cc. Peroneal		1	B
	dd. Bursitis		1	B
	ee. Retrocalcaneal bursitis		1	B
	b. OperativeB			
	i. Achilles tendon rupture/tendinitis		1	A
	ii. Posterior tibial tendinitis/rupture		1	A
	iii. Peroneal tendinitis/rupture		1	A
	iv. Retrocalcaneal bursitis		1	A
IV. Muscle				
	A. Basic Science*		1	B
	B. Clinical			
	1. Classification of Injury/Disease			
	2. Evaluation**		1	B
	3. Management***			
	a. Non-OperativeA			
	i. Tendinitis			
	aa. Achilles		1	B
	bb. Posterior tibial		1	B
	cc. Peroneal		1	B
	ii. Bursitis		1	B
	aa. Retrocalcaneal bursitis		1	B

		b. OperativeB		
		i. Tendinitis		
		aa. Achilles tendinitis/rupture	1	A
		ii. Posterior tibial tendinitis/rupture	1	A
		iii. Peroneal tendinitis/rupture	1	A
		ii. Bursitis		
		iv. Retrocalcaneal	1	A
V. Bone				
	A. Basic Science*		1	B
	B. Clinical			
	1. Classification of Injury/Disease			
	2. Evaluation**		1	B
	3. Management***			
	a. Non-OperativeA			
	i. Osteochondritis dissecans of the talus		1	B
	ii. Talar dome fractures		1	B
	iii. Stress reactions - talus		1	B
	iv. Fracture - talus		1	B
	v. Fracture - malleoli		1	B
	b. OperativeB			
	i. Osteochondritis dissecans of the talus		2	A
	ii. Talar dome fractures		2	A
	iii. Fracture - talus		1	A
	iv. Fracture - malleoli		1	A
VI. Nerve - Posterior MB, Saphenous, Peroneal tarsal tunnel				
VII. Vessel - Not applicable				

Musculoskeletal

See "Template for the Musculoskeletal Section of the Educational Curriculum" for an explanation of this section's format.

<u>TOPIC</u>	<u>SCORE</u>	
	<u>Knowledge</u>	<u>Instruction</u>
FOOT		
I. Ligament		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
2. Evaluation**	1	B
3. Management***		
a. Non-Operative ^A		
i. Mid-foot - sprains and diastasis (Lisfranc injuries)	1	B
ii. Plantar fascia	1	B
b. Operative ^B		
i. Mid-foot - sprains and diastasis (Lisfranc injuries)	2	A
ii. Plantar fascia	2	A
II. Cartilage - Chondral injuries		
DJD - Hallux rigidus	2	B
III. Tendon - Ruptures		
Flexor tendons	2	B
Extensor tendon	2	B
IV. Muscle - Compartment syndrome	2	B
V. Bone		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease		
2. Evaluation**	1	B
3. Management***		
a. Non-Operative ^A		
i. Toe injuries		
aa. Turf toe	1	B
bb. Hallux rigidus	1	B
cc. Sesamoid injuries	1	B
ii. Forefoot injuries		
aa. MTP joint injuries	1	B
bb. Bunions	1	B
cc. Metatarsal stress fracture	1	B
dd. Fractures	1	B
ee. Fractures at the base of the 5th metatarsal	1	B
ff. Osteonecrosis	1	B
gg. Tarsal coalition	2	B
iii. Midfoot injuries		
aa. Stress fractures	1	B
bb. Accessory navicular	1	B
iv. Hindfoot injuries		

	aa. Pes planus	1	B
	bb. Tarsal bossing	1	B
	cc. Calcaneal stress fracture	1	B
	dd. Plantar fasciitis	1	B
	b. Operative ^B		
	i. Toe injuries		
	aa. Hallus rigidus	2	C
	bb. Sesamoid injuries	2	C
	ii. Forefoot injuries		
	aa. Bunions	2	C
	bb. Metatarsal stress fractures	2	C
	cc. Fractures	2	C
	dd. Fractures at the base of the 5th metatarsal	2	A
	ee. Osteonecrosis	2	C
	iii. Midfoot injuries		
	aa. Stress fractures	2	C
	bb. Accessory navicular	2	C
	iv. Hindfoot injuries		
	aa. Pes planus	2	C
	bb. Tarsal bossing	2	C
	cc. Calcaneal stress fracture	2	C
	dd. Plantar fasciitis	2	A
VI. Nerve			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification - nerve entrapment syndromes	1	B
	2. Evaluation**	1	B
	3. Management***		
	a. Non-Operative ^A		
	i. Interdigital neuroma	1	B
	ii. Tarsal tunnel syndrome	1	B
	b. Operative ^B		
	i. Tarsal tunnel syndrome	2	C
VII. Vessel - Not applicable			
VIII. Skin			
	A. Basic Science*	1	B
	B. Clinical		
	1. Evaluation**	1	B
	2. Management***		
	a. Non-Operative ^A		
	i. Blisters	1	B
	ii. Hard corns	1	B
	iii. Soft corns	1	B
	iv. Tinea pedis	1	B
	v. Plantar warts	1	B
	vi. Ingrown toenails	1	B
	b. Operative ^B		
	i. Blisters	2	A
	ii. Hard corns	2	A

iii. Soft corns	2	A
iv. Plantars warts	2	A
v. Ingrown toenails	2	A

Musculoskeletal

See "Template for the Musculoskeletal Section of the Educational Curriculum" for an explanation for this section's format.

<u>TOPIC</u>	<u>SCORE</u>	
	<u>Knowledge</u>	<u>Instruction</u>
CERVICAL SPINE		
I. Ligament		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease	1	B
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. Neck sprains	1	B
ii. Facet subluxation/dislocation	1	B
iii. Dislocation	1	B
b. OperativeB		
i. Facet subluxations/dislocations	2	C
II. Cartilage - Not applicable		
III. Tendon - Not applicable		
IV. Muscle - Not applicable		
V. Bone		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease	1	B
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. C-1 fractures	1	B
ii. Odontoid fractures	1	B
iii. Spinous process fractures	1	B
iv. Fractures & dislocations of the cervical spine	1	B
v. Spinal Stenosis	2	C
b. OperativeB		
i. C-1 fractures	2	C
ii. Odontoid fractures	2	C
iii. Spinous process fractures	2	C
iv. Fractures & dislocations of the cervical spine	2	C
v. Spinal Stenosis	2	C
VI. Nerve		
A. Basic Science*	1	B
B. Clinical		
1. Classification of Injury/Disease	1	B
2. Evaluation**	1	B
3. Management***		
a. Non-OperativeA		
i. Brachial plexus injuries		
aa. Burners & stingers	1	B
bb. Traumatic avulsions	1	B
cc. Herniated Disk	1	B

	ii. Spinal cord injury to include paralysis	1	B
	b. OperativeB		
	i. Brachial plexus injuries	2	C
	ii. Spinal cord injury to include paralysis	2	C
	iii. Herniated Disk	2	C
VII. Vessel - Not applicable			
SPINE			
I. Ligament			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease	1	B
	2. Evaluation**	1	B
	3. Management***		
	a. Non-OperativeA		
	i. Thoracolumbar sprains	1	B
	ii. Lumbosacral sprains	1	B
II. Cartilage - Not applicable			
III. Tendon - Not applicable			
IV. Muscle			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease	1	B
	2. Evaluation**	1	B
	3. Management***		
	a. Non-OperativeA		
	i. Strains	1	B
	ii. Contusions	1	B
V. Bone			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease		
	2. Evaluation**	1	B
	3. Management***		
	a. Non-OperativeA		
	i. Kyphosis	1	B
	ii. Scoliosis	1	B
	iii. Spinous process fracture	1	B
	iv. Vertebral compression fractures of the thoracolumbar spine	1	B
	v. Fracture/dislocations of the thoracolumbar spine	1	B
	vi. Spondylolysis	1	B
	vii. Spondylolisthesis	1	B
	viii. Spondylitis and sacroiliitis	1	B
	b. OperativeB		
	i. Spinous process fractures	2	C
	ii. Vertebral compression fractures of the thoracolumbar spine	2	C
	iii. Fracture/dislocation of the thoracolumbar spine	2	C

	iv. Spondylolysis	2	C
	v. Spondylolisthesis	2	C
VI. Nerve			
	A. Basic Science*	1	B
	B. Clinical		
	1. Classification of Injury/Disease		
	2. Evaluation**	1	B
	3. Management***		
	a. Non-OperativeA		
	i. Sciatica	1	B
	ii. HNP	1	B
	b. OperativeB		
	i.HNP	2	C
VII. Vessel - Not applicable			