



Jefferson

HOME OF SIDNEY KIMMEL MEDICAL COLLEGE

THOMAS JEFFERSON UNIVERSITY

DEPARTMENT OF ORTHOPAEDIC SURGERY

SPORTS MEDICINE FELLOWSHIP

HANDBOOK

2024-25

Updated: 8/1/24

I. INTRODUCTION

Congratulations and welcome to Thomas Jefferson University Hospital, Department of Orthopaedic Surgery, Sports Medicine Fellowship. This handbook will provide you with valuable information concerning your Sports Medicine Fellowship. After reading it, you should be familiar with your responsibilities with respect to your time commitments and coverage of office hours, surgeries, and after hour activities. We hope this will assist you during your time here with us.

Core Faculty:

Michael G. Ciccotti (Sr), MD,
The Everett J. and Marian Gordon
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Co-Director, Sports Medicine Fellowship
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The Rothman Institute
925 Chestnut Street, 5th Floor
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267-297-2440

II. WEEKLY SCHEDULE

Your fellowship year will be divided into three rotations. Below is the daily schedule for each rotation as of Summer 2024. It is possible that small changes may occur from time to time to accommodate changes in Attendings' clinical schedules.

Fellow A	Attending	Location
Monday	Dodson OR	Navy Yard
Tuesday	Ciccotti Office SJU Training Room (1-3pm)	Rothman CC/SJU Training Room
Wednesday	Ciccotti OR	Navy Yard
Thursday	Dodson OR	Navy Yard
Friday	Hammoud OR	Bryn Mawr ASC/ROSH
Fellow B		
Monday	Freedman Office	Bryn Mawr
Tuesday	Freedman OR Eastern Training Room (4-5:30pm)	Bryn Mawr ASC/Hospital; New Britain ASC; Drexel Training Room
Wednesday	Mazur OR	Paoli Hospital
Thursday	Brahmabhatt Office	Willow Grove
Friday	Cohen OR	Navy Yard
Fellow C		
Monday	Salvo OR	Navy Yard/Cherry Hill
Tuesday	TJ OR/Office Drexel Training Room (4-5:30pm)	ARMC Mainland/COS/EHT; Eastern Training Room
Wednesday	Tucker/Pepe OR	COS/ARMC-Mainland
Thursday	Pepe OR/Salvo Office	Cherry Hill/Washington Twp
Friday	TJ OR	COS

*Core faculty mentor for each rotation is in bold.

III. OFFICE HOURS/CLINIC RESPONSIBILITIES

Your responsibilities in office hours are primarily to assist the physicians in evaluating patients. It is the fellow's responsibility to evaluate all new patients. The fellow is responsible for evaluating all available imaging and obtaining new x-rays if indicated. A history and examination should be obtained and written in long hand on the blank paper accompanying the chart. The history should include facts related to the patient's problem or injury, the past medical history, past surgical history, review of systems, social history, allergies, and family history. Family history consists of history of heart disease, lung disease, diabetes, cancer, and any other pertinent comorbidities. The examination should be directed to the involved joint or extremity. The fellow is also responsible for seeing postop patients. The purpose of this postoperative visit is often primarily to assess the wounds. All arthroscopies have the sutures removed at week one or according to the protocol of the attending surgeon. Arthroscopic photographs and drawings should then be reviewed in detail with the patient and all the patient's questions should be addressed. You should approach the patient as if the patient was your own patient and you should explain the procedure as well as the potential implications or consequences of the surgery. The patient is then seen with the attending. The attending may have you dictate the encounter via the eClincialWorks mobile app.

Any cases that you find particularly interesting can be saved for subsequent presentation at didactic conferences

IV. ON-CALL RESPONSIBILITIES

The Rothman Institute, Thomas Jefferson University Hospital

At the Rothman Institute, the fellow is required to take two days per month phone call as first call. There will be an attending physician available as second call at all times. All established patient interactions must be appropriately documented in the practice EMR.

Hospital/ER Call

The fellow is not routinely required to take emergency room call. The fellow, however, should have their cell phone at all times and be available for any emergency sports medicine cases if requested by a Sports Medicine attending on their rotation.

V. OPERATING ROOM RESPONSIBILITIES

Patients usually arrive one hour prior to surgery and initial surgical preparation begins 30 minutes prior to the scheduled operative time. The fellow is expected to be at the operating room 30 minutes prior to the scheduled surgery time to begin preparation for surgery and to review the patient. The fellow is responsible for evaluating the patient in the pre-op holding area and for expediting the patient's delivery into the operating room. A preoperative evaluation of every patient, especially patients not seen in the office should be carried out. The fellow is responsible for a preoperative examination of the patient and a discussion of the procedure to be undertaken. All surgical consents should be confirmed to be wholly accurate and any concerns should be directed to the attending surgeon. If ACL reconstruction is to be performed, all patients should have confirmation preoperatively of whether an allograft or autograft is to be used. Patients undergoing shoulder arthroscopy should be examined for weakness and range of motion. Patients undergoing rotator cuff surgery should specifically have weakness assessed as well as tenderness at the AC joint. Once anesthesia is induced, the appropriate examination under anesthesia should be carried out including assessment of joint range of motion and stability. Shoulder examination should be carried out while the patient is supine prior to positioning, and compared to the opposite extremity.

Thomas Jefferson University Hospital Main OR

The main OR is located on the 7th floor of the Main Building.

AtlantiCare Regional Medical Center

The operating room is located in the main hospital building on the 2nd Floor. OR typically begins at 7:00am. The fellow is responsible for the cases in their assigned room for the day (including patient positioning, surgical prep, and surgical procedure).

Jefferson at the Navy Yard Surgical Center

The operating room is located on the 3rd floor.

Riddle Surgical Center

The operating room is located on the 4th floor.

Bryn Mawr Surgical Center/Bryn Mawr Hospital

The Surgery Center is directly adjacent to the parking garage. The Surgery Center operating room is located on the 4th floor. Visit the front desk to obtain locker room access.

The Main Hospital OR is across the street within the Main Hospital. The OR is located on the 1st floor. Visit the OR front desk to obtain scrubs.

Paoli Hospital

The main OR is located on the first floor with the entrance located to the left of the lobby. Parking is open and accessible across the street from the main entrance. Scrub access will need to be obtained prior to or the day of arrival through the command center.

Jefferson Cherry Hill Surgical Center

The operating room is located on the 2nd floor.

VI. PATIENT ROUNDING

Patient rounds are not typically required of the Sports Medicine fellow. These vary from one sports medicine site to another. Prior to leaving the OR on any day, the fellow should confirm/coordinate with their attending/PA that no patients require rounding that day or the following day.

VII. FACULTY VACATIONS/ABSENCES

This is a year-long fellowship, and maximizing your education during this year is integral to your success. It takes a full 365 days in the year to learn the craft of sports medicine. If the faculty member you are covering is not there for a particular office or OR day, it is incumbent upon the fellow to find alternate coverage for that particular day to maximize the fellowship experience. We have a multitude of faculty at the Rothman Orthopaedic Institute, all of whom are interested in the education of our fellows. Please reach out to Dr. Tjoumakaris regarding alternate coverage for days when your faculty mentor is not providing clinical care.

VIII. EDUCATIONAL CONFERENCES

- 1) Sports Medicine Journal Club/Cadaver Lab (Alternating monthly)
 - 2nd Tuesday of every month (in the evening following clinical responsibilities)
 - Sports Attendings, Sports Fellows
 - Review AJSM, OJSM, Arthroscopy, JSES, JBJS articles
 - Attending's home/Cadaver Skills Lab (Arthrex, Mitek)
- 2) Sports Research Conference
 - 2nd Monday of each month (6:15AM – 7:30AM) – be prepared to discuss all projects
 - Sports Attendings, Sports Clinical Fellows, Sports Research Fellows
 - Review research principles, initiate research project selection, review data collection, edit for presentation and manuscript form
 - Delivered via Zoom conference
- 3) Combined Orthopaedic/Primary Care Sports Didactic Conference
 - 1st, 3rd, 5th Monday of each month (6:30AM – 7:15AM)
 - Sports Attendings and Sports Fellows
 - Review ACGME Sports Syllabus
 - Delivered via Zoom conference
- 4) TJUH Dept of Orthopaedic Surgery Grand Rounds
 - 1st, 2nd, 4th Friday (7AM – 8AM)
 - Academic schedule e-mailed weekly by Administrative Chief Resident (contact Kelly Quici if not included on emails)
 - All Attendings, Fellows, Residents
 - Virtual versus Rothman Institute, 5th floor, Historic Conference Room
- 5) TJUH Orthopaedic Morbidity & Mortality Conference
 - 3rd Friday of every month (7AM – 8AM)
 - Academic schedule e-mailed weekly by Administrative Chief Resident (contact Kelly Quici if not included on emails)
 - All Attendings, Fellows, Residents
 - Virtual versus Rothman Institute, 5th floor, Historic Conference Room
- 6) Philadelphia Orthopaedic Society for Sports Medicine
 - This conference is held quarterly at 7:00 PM alternating between U Penn and TJUH/RI. This conference is case-based by host site. This meeting is for all sports medicine physicians in the Philadelphia area and reviews a variety of sports medicine topics. Jefferson fellows will be asked to present cases at this meeting. At the end of the academic year, all sports fellows from the Philadelphia programs will present their respective research at this meeting.
- 7) Philadelphia Orthopaedic Society
 - Nationally prominent orthopaedic specialists are invited to discuss their area of expertise followed by a Q&A period. Fellows are invited to attend.
 - Listed on weekly Departmental academic schedule from Administrative

IX. TEAM COVERAGE

One of the greatest strengths of the Thomas Jefferson University Sports Medicine Fellowship is an incredibly robust experience in sports coverage. A spectrum of high school, collegiate, amateur, and professional teams are covered by the sports medicine attending staff. You will be involved in the pre-season evaluation and seasonal care of these athletes. This is an important aspect of your sports medicine training and should be thoroughly utilized.

Arrive approximately 1 – 1½ hours before professional athletic events; attire should be professional at all events – confirm with Head Team Physicians; credentials and specific protocols for each team will be provided by Head Team Physicians.

St. Joseph's University training room clinic is every Tuesday from 1:00 – 3:00 PM at St. Joseph's University, Michael J. Hagan Athletic Center, 5600 City Line Avenue, Philadelphia, PA 19131; Head ATC is Bill Lukasiewicz (bill.lukasiewicz@sju.edu). The fellow on the A rotation attends this training room.

Eastern University (1300 Eagle Road, St. David, PA) training room clinic is every Tuesday from 4-5:30pm. Head ATC is John Post (610) 213-3972 (jpost@eastern.edu). The fellow on the B rotation attends this training room.

Drexel University Training room clinic is every Tuesday from 4:00pm – 5:30pm at Drexel University. Head ATC is Michael Westerfer (mw97@drexel.edu). The fellow on the C rotation attends this training room.

Head Team Physicians:

Dr. Michael Ciccotti:

The Philadelphia Phillies Baseball Team (Medical Director) (MLB)
St. Joseph's University Athletics (Medical Director) (NCAA)

Dr. Steven Cohen

The Philadelphia Phillies Baseball Team (MLB)

Dr. William Emper:

Villanova University (NCAA)

Dr. Sommer Hammoud:

The Philadelphia Marathon
St. Joseph's University Athletics (NCAA)
Drexel University Athletics (NCAA)

Dr. Christopher Dodson

Eastern University (NCAA)

X. RESEARCH

The Sports Medicine division at the Rothman Orthopaedic Institute and Thomas Jefferson University is highly academic and significant participation on the part of the fellows is expected as part of the fellowship experience. To provide the full breadth of research opportunities, it is expected that fellows will complete the following research projects during their year. There are many resources to help this process:

- Completion of 2 original research projects (prospective or retrospective)
- Completion of 2 ongoing research projects (retrospective or prospective)
- Completion of at least 1 systematic review
- Completion of at least 1 book chapter(s) (as assigned)
- Completion of 2 surgical technique videos for journal submission (see Appendix I)

It is anticipated that each project will result in the publication of a manuscript/video.

Monthly research meetings will be held with all involved staff. The following general schedule should be used for most projects:

Month #1:	Selection of project
Month #2:	Preliminary proposal/protocol
Month #3:	Pilot study results/initial data collection
Month #4:	Data collection update
Month #5:	Data collection complete/preliminary discussion
Month #6:	Written study

While the majority of our research is performed within the department and is clinical in nature, occasionally you may participate in cadaveric, basic science, or collaborative projects with other institutions. During your time with Jefferson Sports Medicine you may also carry out research with Dr. Lynn Snyder-Mackler at the University of Delaware. Dr. Snyder-Mackler is the Head of the School of Physical Therapy at the University of Delaware. Her lab allows study to be carried out with EMG, Vicon, Force plate, and Instron evaluations. You may also be involved with biomechanical research at Drexel University.

Kevin Freedman, MD is the Director of Sports Medicine Research. The research department supports sports medicine projects by defining the project protocol and organizing necessary elements for the project. Statistical analysis for these projects is also provided. While these aspects may be performed by research staff, they should be supervised and engaged by the supervising fellow. Assistance in the preparation of abstracts, manuscripts and posters is also available. The Director of Research routinely reviews the status of all research projects with the individual resident/fellow. The Division of Sports Medicine has two full time research fellows throughout our offices in PA/NJ to assist with research projects during your tenure. They are available to assist with projects and in many instances can help drive the projects to completion. Our current fellows are:

Gaston Davis: gaston.davis@rothmanortho.com ; gfd003@students.jefferson.edu
Nathaniel Tchangou: Nathaniel.tchangou@rothmanortho.com; Nmt86@drexel.edu

XI. CASE LOG/JOURNAL

The fellow should keep a list of all patients operated on during the fellowship year. On a monthly basis, you should enter your cases into the ACGME/ADS Case Log System. The ACGME will give you a sign-on and password at the beginning of August. Each month your cases will be reviewed by the Administrative Office to assure that you are entering your cases.

It is also highly recommended that you keep a personal journal of your time here, including all pertinent surgical techniques, clinical diagnostic pearls, rehabilitation protocols, and cases of particular interest. Many fellows work with their co-fellows to collaboratively record these.

XII. FELLOW EVALUATION

Evaluation of your progress through your year is an important aspect of this fellowship experience. At any time during the year, you may choose to meet with Michael G. Ciccotti (Sr.) or Fotios Tjournakaris, Co-Directors of the Fellowship, to discuss problems or concerns. Evaluations are done in New Innovation and completed by the faculty every four months. You will have your evaluation discussed by your core faculty mentor on each rotation. They are anonymous and placed in with the resident evaluations. You will meet on a regular basis with Dr. Ciccotti or Dr. Tjournakaris to discuss your progress.

XIII. VACATION POLICY/TRAVEL ARRANGEMENTS

The vacation policy for the Department of Orthopaedic Surgery house staff is as follows:

1. Each house staff officer receives four weeks of vacation per year.
2. There is no vacation during the last two weeks of June and the entire month of July.
3. Chief residents and fellows on the same service should make sure that vacations are not scheduled at the same time. A fellow or chief resident must always be here.
4. Requests for vacation must be submitted in writing with the signed approval of the affected attending surgeons to Kelly Quici at least one month in advance. No fellow or resident can be away without this form being completed and approved by Kelly.
5. You are allowed one additional week for travel to meetings.
6. Fellows will be reimbursed for travel to AAOS (all days except specialty day) and AOSSM. Maximum flight reimbursement is \$500. Per diem is set to \$300/day (includes hotel). Any other meetings are to be pre-approved and are reimbursement is subject to availability of funds.

XIV. DRESS CODE

You will be expected to dress professionally for all activities during your fellowship. Jewelry and hairstyles should remain professional for all fellows. Each athletic event requires appropriate attire. Please discuss this with the appropriate staff member or trainer prior to attending the event. This is of particular importance for the professional teams.

XV. ADMINISTRATIVE SUPPORT

Ms. Kelly Quici, is the Administrator for the Department of Orthopaedic Surgery and Administrator of the Residency and Fellowship Program of the Department. Kelly is also Educational Coordinator for the Department. Her office is located on the 5th Floor of 925 Chestnut St within the suite of Rothman Orthopaedics administrative offices by the Historic Conference Room. The academic office is willing to assist you with your office and research needs and will direct you to the appropriate people if necessary. Kelly will assist you with any problems you encounter or any help you need. The academic office phone number is (267) 297-2440 and the fax number is (267) 479-1379.

Thomas Jefferson University

The Academic Office of the Department of Orthopaedic Surgery will coordinate your office needs when you arrive. There are two computers available for the residents/fellows use in the academic office. You may also use the copy/fax machine for business purposes at the office.

The Rothman Institute

Please see Deborah Bauer, Administrative Assistant, regarding any work you need completed by the administrative assistant staff.

XVI. MEDICAL RECORDS/DICTATIONS

Responsibility for medical records and dictation varies from site-to-site. Generally, the fellow is not responsible for dictating operative reports or discharge summaries.

The EMR for Rothman Orthopaedics is eClinicalWorks. You may be asked to dictate office visits by your attending. You are responsible for appropriate documentation of on-call interactions with established patients.

You will also be provided with access/credentials for the necessary EMRs of the various clinical sites.

Each fellow is responsible for completing all necessary trainings assigned to obtain and maintain EMR access.

XVII. WORK HOURS AND LEARNING ENVIRONMENT

The Thomas Jefferson University Sports Medicine Fellowship adheres to all ACGME guidelines regarding appropriate work hour restrictions of house officers and fellowship physicians. While on rotation, the fellow will be adequately supervised in the clinic and operating room by the attending physician of record. This supervision requires that the faculty member be present for all key aspects of surgical cases and decision making and planning for outpatient clinical office visits. The fellow will always have access to the attending/faculty member either by direct contact or by electronic/telephonic means. The fellow will have graduated responsibility commensurate with their level of experience in both the operating room and office. This level of supervision extends to the field of play while covering games off-site from Jefferson or affiliated facilities. At all times during game coverage, the fellow will have direct access to the head team physician of the team being covered through telephonic or direct person-to-person communication. The faculty member or head team physician is responsible for the fellow while they are on rotation or while providing sideline coverage. If, at any time, the attending physician is not available to provide supervision, he or she will arrange appropriate coverage for the fellow and directly communicate this to the fellow prior to any scheduled event or clinical session. The ultimate responsibility of patient care falls to the supervising faculty physician; however, it is expected that each fellow share in this responsibility and uphold the highest standards of patient care.

XVIII. CLINICAL COMPETENCY COMMITTEE (CCC)

The clinical competency committee is composed of three faculty members who are responsible for overseeing the fellowship trainees. The purpose of this committee is to provide critical feedback and performance-based assessments to the program director regarding the performance and abilities of trainees in the fellowship program. The committee will meet semi-annually and review the evaluations of the current fellows to make recommendations to the program director. The committee will prepare an annual report and help to perform the milestone

evaluations of the fellows during their fellowship experience. The committee can also recommend any adverse action that may be necessary, whether that be suspension, disciplinary action, and in rare instances, termination from the program. Appropriate documentation and the strictest adherence to confidentiality during all deliberations will be performed and upheld.

The current competency committee consists of:

Sommer Hammoud, MD (Chair)
John Salvo, MD
Kevin B. Freedman, MD

XIX. PROGRAM EVALUATION COMMITTEE (PEC)

The objective of the PEC is to oversee curriculum development and program evaluations for the sports medicine fellowship. The PEC will meet twice yearly to discuss:

- Educational programs of the fellowship (planning, implementing, evaluating)
- ACGME standards (compliance, etc.)
- Faculty and fellow evaluations of the program
- Fellow performance
- Faculty performance/development
- Graduate performance
- Program quality
- Clinical competency committee evaluations
- Progress in achieving goals from prior years action plan

The PEC will report and make recommendations to the program director based upon the criteria and a yearly action plan will be developed for the fellowship program. The PEC will essentially perform annual reviews of the program; clinical fellow input is strongly encouraged in this committee.

The 2024-2025 program evaluation committee consists of:

Fotios Tjoumakaris, MD (Chair)
Michael G. Ciccotti (Sr.), MD
Steven Cohen, MD
Kevin Freedman, MD
Chris Dodson, MD
Matthew Pepe, MD
Bradford Tucker, MD
Sommer Hammoud, MD
John Salvo, MD
Don Mazur, MD
Shyam Brahmabhatt, MD
Michael C. Ciccotti (Jr.), MD
Kelly Quici
Christian Peterson (Fellow)

XX. ADDRESS DIRECTORY

Rothman Offices:

<i>Center City</i>	925 Chestnut Street, 5 th Floor, Philadelphia, PA 19107
<i>Media</i>	Health Center 4, 1098 W Baltimore Ave, Media, PA 19063
<i>Bucks/ROSH</i>	3300 Tillman Dr, Bensalem, PA 19020
<i>Marlton</i>	999 NJ-73, Marlton, NJ 08053
<i>Egg Harbor Township</i>	2500 English Creek Ave #1300, Egg Harbor Township, NJ 08234
<i>Washington Township</i>	43 Hurffville - Cross Keys Rd, Sewell, NJ 08080

OR/ASC Facilities:

<i>Riverview/Navy Yard Surgery Center</i>	3 Crescent Dr #310, Philadelphia, PA 19112
<i>Bryn Mawr Surgery Center</i>	130 S. Bryn Mawr Ave Bryn Mawr PA, 19010
<i>ROSH</i>	3300 Tillman Dr, Bensalem, PA 19020
<i>AtlantiCare Regional Medical Center</i>	65 W Jimmie Leeds Rd, Pomona, NJ 08240
<i>AtlantiCare COS Surgery Center</i>	2500 English Creek Ave, Bldg 1200 EHT, NJ 08234
<i>PhyCare Specialty Hospital</i>	454 Enterpris Drive, Royersford, PA 19468
<i>Bryn Mawr Hospital</i>	130 S Bryn Mawr Avenue, Bryn Mawr, PA 19010
<i>Abington Hospital</i>	1200 Old York Road, Abington, PA 19001
<i>Riddle Surgery center</i>	1118 W Baltimore Pike, Media, PA 19063
<i>New Britain Surgery Center</i>	1200 Manor Drive, Chalfont, PA 18914

APPENDIX I - VIDEO SUBMISSION OPTIONS

- Journals:
 - o VJSM
 - § Link to the list of requirements for the video submission:
<https://us.sagepub.com/en-us/nam/video-journal-of-sports-medicine/journal203716#submission-guidelines>
 - § Case report/abstract style manuscript with a background, indications, technique description, results, discussions section and video transcript.
 - § Video length 8-10 minutes
 - § Open access only (\$900 for submission, \$600 for submission if AOSSM or affiliate member).
 - o JBJS EST (Essential Surgical Techniques)
 - § Link to the list of requirements for the video submission:
<https://journals.lww.com/jbjses/Pages/Instructions-for-Authors.aspx>
 - § Example:
https://journals.lww.com/jbjses/Abstract/2020/12000/Endoscopic_Approach_to_Proximal_Hamstring_Avulsion.5.aspx?context=LatestArticles
 - § Accepts video submissions with the following caveat: "The outcomes of the procedure being described and/or demonstrated must have been reported in a clinical study that has been published, or accepted for publication, in a peer-reviewed journal. *JBJS EST* does not publish "stand-alone" technique articles or videos unsupported by published outcomes."
 - § Similar manuscript as VJSM must be submitted.
 - § Video length 10-15 minutes
 - § Open access option (\$2400-\$2,850 per submission).
 - o Arthroscopy Techniques
 - § Link to the list of requirements for the video submission:
<https://www.arthroscopytechniques.org/content/authorinfo>
 - § Example: [https://www.arthroscopytechniques.org/article/S2212-6287\(20\)30177-8/fulltext](https://www.arthroscopytechniques.org/article/S2212-6287(20)30177-8/fulltext)
 - § Similar manuscript as VJSM and JBJS.
 - § Maximum video length of 4.5 minutes.
- Societies
 - o AOSSM
 - § <https://videolibrary.sportsmed.org/Users/LearningActivity/LearningActivityDetail.aspx?LearningActivityID=7Xt%2fX9NVPtBH1YI5PwQ2NA%3d%3d>
 - § Link to video library and submission
 - § Emailed AOSSM (Alexandra Campbell) for specific guidelines. Essentially said to use prior videos as a template
 - o AAOS
 - § OVT Plus
 - "OVT Plus video submissions undergo an extensive peer review by experts in the specialty area. Acceptance into the collection comes with benefits, including presentation at the Annual Meeting, opportunity for award-winning designation, video abstract inclusion in JAAOS, and availability to include the published video on your C.V."
 - <https://submissions2.mirasmart.com/AAOS2021/Splash.aspx>

- Link to submission and guidelines. Two video guidelines for the author and theater committee perspective.
- Submission is currently closed

§ OVT Now Content

- “OVT Now video submissions offer you a chance to share your lectures and latest surgical techniques with a rapid peer-review process and publication to the site. This is the fastest way for you to share your video and for colleagues to access and discover your work. OVT Now Content Guidelines are available for your reference.”
- <https://www.aaos.org/%2fvideos%2fupload%2fovt-now-content-guidelines%2f>
- OVT Now videos must meet certain minimum requirements:
 - o OVT Now videos must display the technique/presentation with acceptable quality. The narration must be clear and easy to understand. The recommended maximum length of a video program is fifteen (15) minutes.
 - o The video content must be educational. The procedure presented must be indicated for the patient featured in the video. The technique highlighted must be within the expected standards of care. The video must not contain content with unacceptable bias (commercial or otherwise).
 - o Patient Identifier information, including patient’s faces, tattoos, names, initials, birthdate and date of service (except year), social security number, address, medical record numbers, any other unique identifying number, characteristic, or code must not appear in the video.
 - o Recommended video export settings: h.264 codec .mp4 file with a bit rate of 10-40Mbps (depending on resolution). We recommend a maximum file size of 500 MB, but will accept up to 2 GB.
- Submission is currently open.

- VuMedi

§ Upload de-identified surgical technique videos. Web based application.

APPENDIX II – JOURNAL CLUB GUIDELINES

As part of the fellowship, we aim to hold 4-5 journal clubs each academic year. These are typically hosted by attendings at their homes, involve food and socializing, but also provide an important opportunity to engage with the Orthopaedic Sports Medicine literature.

Responsibility for coordinating the logistics for journal club falls on the fellow currently on the Fellow A/MGC rotation. This involves contacting the hosting attending to determine place and time, emailing an invitation and reminders, and selection of articles. Typically, we will plan to review 4 articles. Journal clubs will take one of two forms: 1) themed or 2) no theme. If themed, all articles will focus on a particular pre-determined topic. If there is no theme, the fellow will be free to select articles covering a variety of topics. Three articles should be new research (avoiding systematic reviews and meta-analyses in favor of original research) and 1 article should be a classic Orthopaedic Sports Medicine study. Articles should be primarily selected from AJSM, OJSM, Arthroscopy, or JSES. Occasional high-quality articles may be selected from JBJS, CORR, or other journals.

At journal club, the fellows will each be responsible for presenting selected articles and then we will open things up to discussion. The goal should be to concisely present the paper – to do so requires preparation. Appropriate, thorough preparation of an article for journal club may take time but the results are easily appreciable when it comes time to present. Taking this time allows you to present cogently, confidently, and succinctly. This will likely require reading your assigned paper multiple times and possibly reading additional background papers. It will likely require preparing notes.

Presenting should be similar to a well-designed, streamlined AAOS/Academy podium presentation. No longer than 2-5 minutes and with good command of the paper/topic. Faculty questions should be anticipated. Always begin by writing comprehensive notes and continue to distill them down. Distill them to the bare minimum at which point any further distillation would begin to compromise your audience's ability to understand the paper. You can always provide greater detail in response to a specific question if your notes are comprehensive.

Remember that your audience here is full of practicing Orthopaedic Sports Medicine surgeons. As a result, we do not need to spend unnecessary time on well-understood background.

Outline for Presentation:

Title

Notable Authors

Dates during which study was performed (often valuable for historical context) Institution(s) at which the study was performed

Any industry support involved in the study that might serve as a potential bias

Introduction

Brief context that introduces the clinical problem that the study seeks to address. Ideally this should only be 1-3 brief sentences.

Methodology

What is the population with a few *key* demographics?

What were inclusion and exclusion criteria? *Do not list - Only pertinent highlights*

What are the outcomes of interest? Primary vs secondary?

How were these outcomes measured? Have a brief and a more detailed version

Results

Summarize the results of the paper – think of pertinent positives and negatives rather than reciting the entirety of the results in a long list

Often if you look at the authors' discussion, they distill the results

Also consider results that the authors did not focus on which may cast the conclusions in a different light

Discussion

What were the authors conclusions based on the data they collected – brief 1-3 sentences

Are the authors conclusions reasonable or unreasonable?

What were the strengths of the study?

What were potential or real limitations/biases/weaknesses of the study?

Clinical Value

This is your chance to briefly editorialize – in a single sentence, attempt to place the authors conclusions back into the clinical context you provided in your introduction and state how this might change/impact a typical surgeon's clinical practice.

i.e. "We all know that X is a common problem encountered by orthopaedists and based on the findings of this paper, it may be appropriate to change our practice in Y way or further research should be focused on Z."

APPENDIX III – CADAVER LABS

Cadaver labs alternate with Journal clubs and typically occur on the evening of the 2nd Tuesday of the month. These are hosted by Arthrex or Mitek.

Liberty Surgical/Arthrex 835 Lincoln Ave #4, West Chester, PA 19380

Mitek/Depuy Synthes 1302 Wrights Ln E, West Chester PA 19380

Each lab will focus on a single joint with 2-3 surgical procedures. You will be provided with materials to review 1-2 weeks prior to the lab. Thorough review of these materials will result in excellent preparation for the lab.

Each fellow should arrive at the lab fully prepared to do each procedure, start to finish - not with the expectation that an attending/faculty member is going to walk you through it. Faculty will be present to help when challenges are encountered as well as to provide wisdom/pearls/pitfalls. This will require preparation but you'll gain far more from it as a result. Please do not wait to review the resources below - begin reviewing them as soon as they are received as it will take time to get through them.

It is recommended to carefully review each resource but write your own surgical steps in your own words using the greatest amount of detail you can manage – you can refine these over time and will find them invaluable when you are early in practice.