NEWSLETTER OF THE AMERICAN ORTHOPAEDIC SOCIETY FOR SPORTS MEDICINE

sportsmedicine UPDATE

JULY/AUGUST 2013



PHYSICIAN ASSISTANTS & ATHLETIC TRAINERS

Boost Your Orthopaedic Practice

Doctors Respond at Boston Marathon

Washington Update

2013 Annual Meeting Recap

AOSSM

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Integrating Physician Assistants and Athletic Trainers into Your Orthopaedic Practice

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SPORTS MEDICINE UPDATE is a bimonthly publication of the American Orthopaedic Society for Sports Medicine (AOSSM). The American Orthopaedic Society for Sports Medicine–a world leader in sports medicine education, research, communication, and fellowship–is a national organization of orthopaedic sports medicine specialists, including national and international sports medicine leaders. AOSSM works closely with many other sports medicine specialists and clinicians, including family physicians, emergency physicians, pediatricians, athletic trainers, and physical therapists, to improve the identification, prevention, treatment, and rehabilitation of sports injuries.

This newsletter is also available on the Society's website at www.sportsmed.org.

TO CONTACT THE SOCIETY: American Orthopaedic Society for Sports Medicine, 6300 North River Road, Suite 500, Rosemont, IL 60018, Phone: 847/292-4900, Fax: 847/292-4905.

FROM THE PRESIDENT



It is an honor to serve as AOSSM's 42nd president. The Society has provided me with many opportunities to participate as member, researcher, educator, author, and leader. AOSSM members have also served as my mentors, collaborators, and colleagues and have contributed greatly to my professional development. For these reasons, it is especially gratifying to lead the Society at this unique time in its history.

Every president gets to reap the benefit of the labor of those who proceed them, and to plant the seeds for programs that will germinate and mature after their term ends. Recent events highlight this point:

The month that I became president coincided with the closing on the property purchased for the construction of a new orthopaedic headquarters and learning center. We have kept the membership updated on this unique collaboration between AOSSM, AAOS, AANA, AHHKS, and the OLC. Groundbreaking is set for August 8 and construction should be underway by the time you receive this newsletter.

The discussion and vetting of this project transcended the presidencies of Chris Harner, Pete Indelicato, and Bob Stanton. Their vision and leadership allowed the AOSSM to secure its future headquarters needs while providing cost-effective, quality office and learning environments that orthopaedic organizations can benefit from, regardless of their equity position. I am especially pleased to announce that Russ Warren, MD, and Freddie Fu, MD, have agreed to lead AOSSM's efforts on the Capital Campaign committee. As past presidents, Freddie and Russ epitomize accomplishment, vision, and leadership.

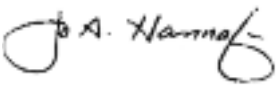
In other news, *AJSM* continued its amazing history of success when we were recently notified that the journal's 2012 Impact Factor (IF) was 4.439, compared to its 2011 IF of 3.792. This is an extraordinary jump of .647 and the highest two-year IF of any orthopaedic journal, ever. *AJSM* is now ranked first among orthopaedic journals (1/63) and is fifth among sports science journals (5/84)! Congratulations to Editor-in-Chief Bruce Reider and the entire *AJSM* team for this accomplishment!

AOSSM's newest journal, *The Orthopaedic Journal of Sports Medicine (OJSM),* also enjoyed a strong launch during its first two months with the publication of nine articles from well-recognized authors from Japan, Denmark, France, England, and the United States. Our vision of publishing high quality, peer-reviewed articles has been embraced by multiple professional societies that have made it their official journal. I urge you to bookmark the *OJSM* site (www.ojsm.org) so that you can utilize this important resource. The AOSSM Medical Publishing Group Board of Trustees, led by Doug Brown, MD, and *OJSM* editors Bruce Reider, Allen Anderson, and Mark Steiner, should be commended for their vision and leadership.

We also have some new member benefits to be aware of, including CME credits now being forwarded to your AAOS Learning Portfolio and consolidation of disclosures between AAOS and AOSSM. More details on these new benefits are highlighted in this issue of *SMU*.

While I have the pleasure of highlighting these new and exciting events in my first President's Column, the development of these programs occurred during Chris Harner's tenure as AOSSM president. The Society owes him tremendous gratitude for the progress and growth we've achieved under his leadership. Not to be overlooked in all of these developments is the capstone of Chris' tenure, the 2013 Annual Meeting. This meeting was successful on every level and clearly reflected the hard work and vision of Chris, his program chair, Mark Miller, and the entire program committee. The program and city of Chicago provided a wonderful array of activities to renew our sense of family and professional collegiality.

I thank Chris for his leadership this past year, and for the dedication and commitment of the many others who have provided AOSSM and our profession with an abundance of opportunity. I could not be more pleased to be AOSSM's president and excited for the year ahead as we scale new heights as a profession.



Jo A. Hannafin, MD, PhD



Integrating Physician Assistants and Athletic Trainers into Your Orthopaedic Practice

How to Add Clinical and Financial Value and Meet the Evolving Demands of Health Care

FORREST PECHA MS, ATC
St. Luke's Sports Medicine
Boise, Idaho

JOE GREENE MS, ATC
University of Wisconsin Healthcare
Owner of OrthoVise: Optimizing Orthopedic Practices

JASON DALEY, PA-C
St. Luke's Sports Medicine
Boise, Idaho

KEVIN SHEA, MD
St. Luke's Sports Medicine
Boise, Idaho

As the national healthcare environment continues to change, providers and practices must continuously adapt to meet the needs of patients, regulatory agencies, and payers. There is constant pressure on orthopaedic and sports medicine practice administrators and physicians to improve access, maintain volume, and improve quality, all while limiting the costs associated with healthcare delivery.

Compounding the financial challenges, as patient outcomes become a stronger and more important measure of physician success, practices are forced to increase data collection and evaluation. They must transform their clinical processes to provide care more effectively and efficiently. Ultimately, maintaining an ever higher level of patient care and satisfaction while concurrently adding financial value is critical.

Staffing is, and always has been, a primary concern that must be optimized as part of the development of a lean and efficient operational model. Ideal staffing models should be designed with the patient as the highest priority and at the center of care. Clinic flow should be as streamlined as possible with a staffing model that provides the highest quality and efficiency. The right staffing model will allow a practice to increase patient volumes and yield the greatest financial reward. From a business perspective, ancillary staff must work within the full scope of their practice and at their highest possible level of care. Midlevel providers should be working in autonomous roles that allow them to garner the greatest return on investment for their services. Other ancillary staff members should be enabled so that they most effectively support the physician and the clinical needs of the patient.

This article will focus on the utilization of physician assistants (PA) and athletic trainers (AT) as complimentary clinicians who can work in tandem to support the orthopaedic sports medicine physician. Both professionals work under the direction of a supervising physician, and have a medical-based education model. PAs are highly trained and skilled, and are recognized by the Center of Medicare and Medicaid Services (CMS), allowing them the ability to see patients independently, diagnose, treat, order and interpret tests, perform minor procedures, prescribe medications, and assist in surgery. The training of ATs emphasizes musculoskeletal injury prevention, clinical diagnosis and evaluation, immediate care, treatment, rehabilitation and conditioning, organization and administration, and professional responsibility of musculoskeletal injuries. Recently, post-degree residency programs have been created to train ATs in the specialty skill sets to work in the orthopaedic and sports medicine practice setting as physician extenders.







Physician assistants are utilized throughout the healthcare environment, working in every medical specialty and have been increasing in demand as providers within orthopaedics. A recent evaluation performed at The University of Wisconsin Hospital Department of Orthopedics and Rehabilitation reviewed the utilization of its ancillary staff. PAs who worked in conjunction with their physicians had variable and limited ability to generate revenue independently.[1] While the role of all staff continues to evolve, physician assistants are transitioning into more autonomous roles that allow them to improve access, optimize collections, and also streamline care for surgeons. This autonomy allows for better patient access, and allows for surgical conversion rates to improve as new surgical patient slots are used more effectively. To the greatest extent achievable, it is important to minimize the instances where two billable providers are seeing the same patient during the same visit in a clinic setting.

Physicians and administrators increasingly recognize the versatile and comprehensive skill set that athletic trainers possess and bring to the physician clinic setting. At the same time athletic trainers are seeking out positions in clinic settings. These factors have caused the physician extender setting of athletic training to be the fastest growing area of employment in the AT profession. Recent studies have shown the addition of ATs in the physician clinics have provided increased patient throughput on average of close to 20 percent.[2] Patient satisfaction studies have also been completed showing ATs have received high satisfaction scores.[3]

The AT is an ideal clinician to work in conjunction with the physician when they are seeing patients in clinic. Their musculoskeletal background allows ATs

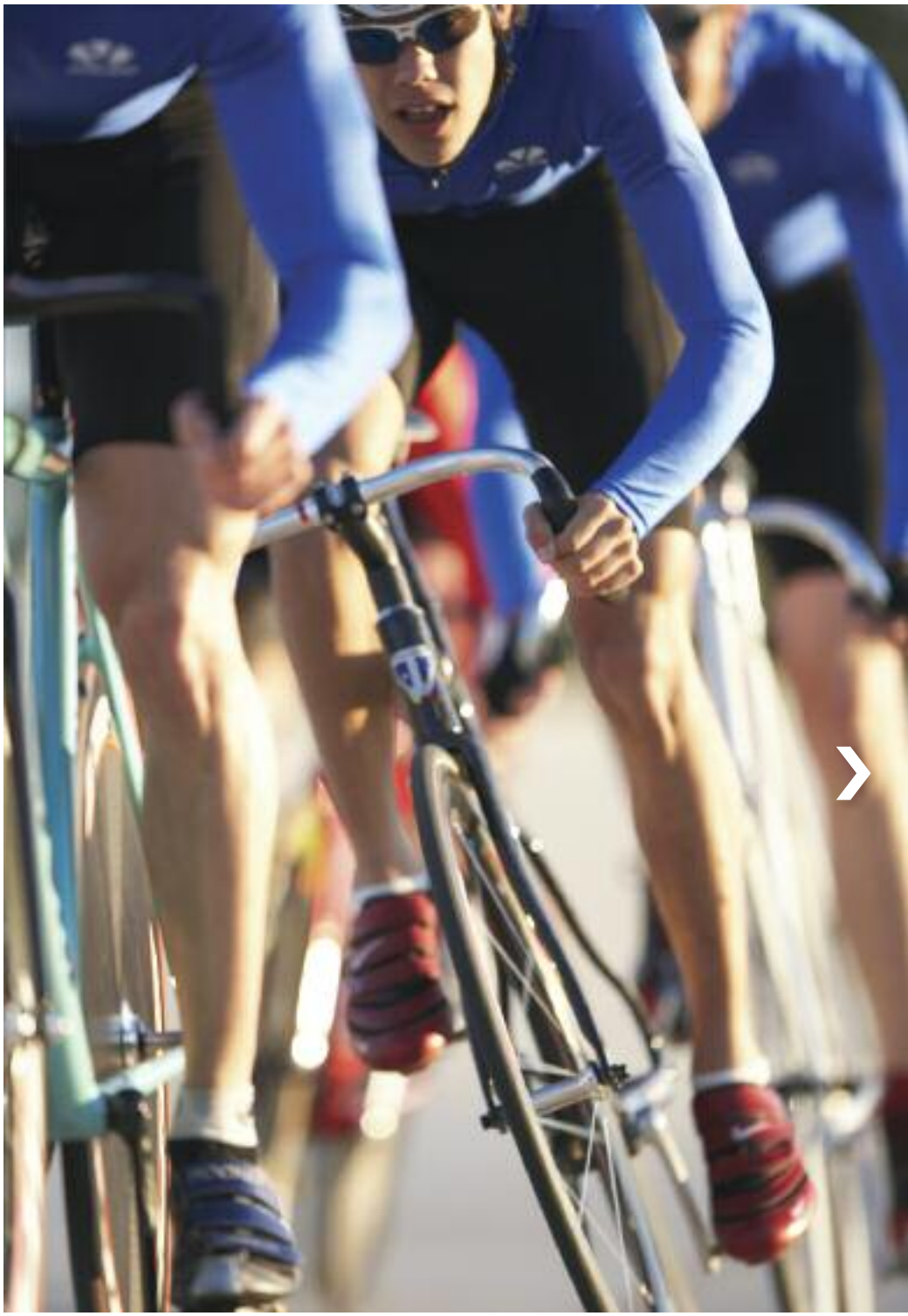
81,420

Physician assistants working in the United States in 2010. This is a 29% increase in 4 years.

www.educationnews.org/career-index/physician-assistant-schools/

to take thorough histories, perform musculoskeletal exams, and order appropriate tests to present to the physician prior to them seeing the patient, thus improving clinic efficiency. Their skills also include fitting and applying braces and teaching home exercise programs to patients. This allows the PA to work in autonomous roles and run concurrent clinics with their own independent case-load to improve patient access and increase clinic volumes. In the operating room, PAs can assist the physician with Medicare patients and cases assured to be reimbursed for assist fees. Depending on hospital credentialing regulations ATs may be able to assist in the operating room. They may be best suited for providing operating room efficiency and assisting in non-reimbursable cases when available. ATs can also be utilized to deliver care for postoperative visits, which is especially beneficial during the postoperative global period saving time generally spent by the physician or PA.

In conclusion, both PAs and ATs can provide substantial benefits to a physician practice. Optimizing these practices is dependent on the clinic's willingness to change and shift their current practice models.



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3. Lane S, Karas SG, Labib S, Xerogeanes JW, Pecha FQ. Patient Perceptions of Certified Athletic Trainers and Orthopedic Medical Residents as Primary Clinical Support Staff in a Sports Medicine Practice: A Randomized Double Blinded Prospective Study. Poster Presentation: Southern Orthopedic Association Annual Meeting, June 16-19, 2010, Fajardo, Puerto Rico.



NEW Supporting Organizations of STOP Sports Injuries Campaign

MAY–JULY 2013

Child Safety Organization

Sport Safety International
Wayne, New Jersey

Medical Institution

Rockingham Memorial Hospital
Harrisonburg, Virginia

Sports Medicine Practices

360 Sports Medicine A Program of Rady Children's Hospital–San Diego
San Diego, California

Advance Sports & Spine Therapy
Wilsonville, Oregon

Central Oregon Pediatric Associates
Bend, Oregon

Dr. Brilakis Clinic for Arthroscopy and Minimal Invasive Orthopaedic Surgery
Athens, Greece

Dr. Tim Vinyard
Des Moines, Iowa

Dynamic Neuromuscular Rehabilitation
New York, New York

GMP Fitness
Saddle River, New Jersey

Grove Spine & Sports Care
Tysons Corner, Virginia

Hop's Athletic Performance
Warwick, Rhode Island

Indiana Sports Medicine and Orthopaedics
Fort Wayne, Indiana

Irvine Orthopaedic Associates
Irvine, California

Midwest Bone Joint Spine Institute
Oak Brook, Illinois

Momentum Physical Therapy LLC
Bend, Oregon

Onward Physical Therapy and Wellness Center
San Diego, California

Orthopaedic and Sports Medicine Clinic of Kansas City
Fairway, Kansas

Orthopedic & Sports Medicine Associates
Sherman, Texas

PhysioFit
Windsor, Ontario, Canada

Pinnacle Orthopaedics
Austell, Georgia

PT360
Williston, Vermont

Regeneration Orthopedics
Chesterfield, Missouri

Southern California Orthopaedic Institute
Van Nuys, California

Sport, Spine and Rehab
Eliot, Maine

St. Charles Orthopaedic Surgery
O'Fallon, Missouri

The University of West Alabama
Livingston, Alabama

Triangle Chiropractic and Rehabilitation Center
Raleigh, North Carolina

Valley Spine & Sport
Appleton, Wisconsin

West Rehab and Sports Medicine
Richmond Hill, Georgia

Sports and Recreation Organization

WECMRD Field House at Edwards
Edwards, Colorado

STOP Sports Injuries thanks the following companies for their support of the campaign:

Arthrex

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NEW AOSSM Disclosure System Now Available

The next time you log in to www.sportsmed.org to update your disclosure, request that your current disclosure information on record with the AAOS be shared with AOSSM. Just click the "Sign Up to Disclose through the AAOS Disclosure System" link! All of your current disclosure information will then be sent to AOSSM for inclusion in educational activities and Board of Directors' meeting information per AOSSM bylaws and CME requirements.

Pay Your AOSSM Membership Dues Online

Due to the increasing cost of postage, the Society has decided to send dues notices via e-mail. Remember that dues are to be paid within 30 days of receiving your notice. You should see your dues notice at the beginning of August in your inbox. Please contact the Society if you have recently changed your e-mail address or wish to have it sent to a different address.

Send questions to Debbie Czech, Manager, Member Services, at debbie@aossm.org.

AOSSM CME Transcript Transfer Available

Would you like for all of your CME certificates to be located in one convenient location? The AOSSM and the AAOS are collaborating on transferring AOSSM CME credit to a comprehensive CME transcript in the AAOS Learning Portfolio. The AAOS Learning Portfolio helps you track CME credits you have earned. Now all of your AOSSM and AAOS CME certificates will be available in one location.

If you would like AOSSM to transfer your CME credit to your AAOS Learning Portfolio, please log in to www.sportsmed.org and select "Get My CME Transcript" in the dropdown menu, under My AOSSM. When your AOSSM CME Transcript opens, click the "Transfer My CME Credit" link. You'll be prompted to log in to the AAOS site using your AAOS member ID and password. Once you've successfully logged in, you'll receive a confirmation message.

When you opt in to the CME transfer, AOSSM will begin sending the AAOS your CME credits for the last 3 years. This time span matches the ABOS reporting timeline. Each time you complete an AOSSM CME activity, your credit will automatically be transferred to your AAOS Learning Portfolio.

Questions, contact Susan Brown-Zahn, Director of Education, at susan@aossm.org.

ARE YOU A FAN OR A FOLLOWER?

AOSSM, AJSM, Sports Health, and *OJSM* are all on Facebook and Twitter. Join the conversation and learn about the latest news and articles.

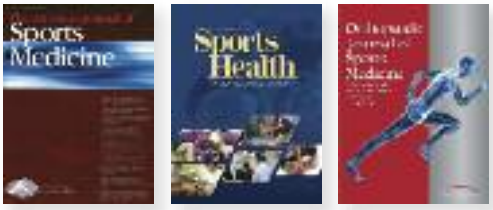
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Apps Now Available for *AJSM, Sports Health,* and *OJSM*

New iPad apps for *AJSM, Sports Health,* and *OJSM* are now available! Online publication has leveraged the versatility, reach, and demand for our journal content, and the new apps provide an amazingly convenient and rich way to store and read multiple issues on a single device. The apps combine the pleasure of reading content from the page while providing the benefits of a digital format. The apps are free to members and subscribers.



If you haven't tried them out, visit www.AJSM.org, www.sportshealthjournal.org, and www.OJSM.org, and click on the app access link for complete download instructions.

Give Your Patients the Best Sports Medicine Tips—Send Them *In Motion*

In Motion is available to be personalized with your practice name and logo. For just $300, you will receive four personalized issues (Spring, Summer, Fall, Winter) and the high and low resolution PDFs to send to a patient's inbox, post on your website, or print and place in your waiting room. For more information, contact Lisa Weisenberger, Director of Communications, at lisa@aossm.org.





AOSSM/NFL Meeting Tackles Tough Football Topics

More than 200 individuals gathered in Boston in May to learn the latest in the treatment and prevention of football injuries. Topics covered included pre-season conditioning, performance-enhancement healing, trauma injuries, concussion, and foot, ankle, upper extremity, hip, and spine issues. Individuals also heard presentations from NFL Commissioner Roger Goodell and New England Patriots Head Coach Bill Belichick.

Would You Like New Patients to Find You More Easily?

Update Your AOSSM Profile.

Be sure to update your demographic information and areas of expertise online by logging into My AOSSM and going to the "Edit My Profile" link. By updating your information, the public will be able to more easily search for and see appropriate doctors on our "Find A Doctor" listing.

NAMES IN THE NEWS

AOSSM Member Awarded Research Prize

Steven P. Arnoczky, DVM, was awarded the Werner Müller International Knee Prize at the 2013 meeting of the Magellan Society in conjunction with the International Society of Arthroscopy, Knee Surgery, and Orthopaedic Sports Medicine meeting held in Toronto, Ontario, Canada in May. The award recognizes lifetime contributions to the art and science of knee surgery and is named after Professor Werner Müller whose pioneering work in knee anatomy, function, and ligament reconstruction is the foundation on which current surgical techniques of the knee are based. Dr. Arnoczky is the fourth recipient of the award and the first non-physician to receive it. Previous awardees were Professor Werner Müller, Dr. John Feagin, and Dr. Ejnar Eriksson.



In Memoriam

Paolo Aglietti, MD, was inducted into the AOSSM Hall of Fame in 2008 and was considered one of the foremost knee surgeons and researchers in the world. He was a founding member of both the Italian Arthroscopy Society (SIA) and the Italian Society of Knee Surgery (SICG). He passed away in April.

Lewis A. Yocum, MD, a long-time AOSSM member and one of baseball's most renowned orthopaedic surgeons, who saved the careers of the Washington Nationals' young pitching stars, Stephen Strasburg and Jordan Zimmermann, and numerous other major leaguers, passed away at his home in Manhattan Beach, California, in May. He was 65.

AOSSM Milestone of 20 Years of Service



Congratulations to **Pat Kovach,** AOSSM Education Coordinator, who for more than 20 years has helped meeting faculty and attendees not only obtain their CME certificates or show up at the right spot at the right time, but also kept everyone up to date on changes and meeting requirements. Thanks Pat for all your hard work!

Reider Selected for Starkey Award



Congratulations to *AJSM* Editor-in-Chief **Bruce Reider, MD,** for his selection as the Starkey Duncan Service Award Winner from the University of Chicago. The award is presented to a current or emeritus faculty or staff member who has consistently gone above and beyond the call of duty to touch the lives of student-athletes. The winner exemplifies the concern for students and the passion for athletics that personified Starkey Duncan's life.

Frank Jobe, MD, Receives Special MLB and La Sierra University Award

AOSSM founding member and Hall of Fame inductee, **Frank Jobe, MD,** received two unique awards recently, including selection as Alumnus of the Year from La Sierra University in April and honorary induction into the National Baseball Hall of Fame in Cooperstown, New York, in July. Congratulations!

Got News We Could Use? *Sports Medicine Update* Wants to Hear from You!

Have you received a prestigious award recently? A new academic appointment? Been named a team physician? AOSSM wants to hear from you! *Sports Medicine Update* welcomes all members' news items. Send information to Lisa Weisenberger, AOSSM Director of Communications, at lisa@aossm.org, fax to 847/292-4905, or contact the Society office at 847/292-4900. High resolution (300 dpi) photos are always welcomed.

Sports Medicine Training Takes a Whole New Turn During Boston Marathon Bombing



Most people who serve as a medical volunteer during a major, large scale athletic event such as a marathon, don't anticipate having to treat severed legs and shrapnel wounds. However, that's just what happened to AOSSM member, Lyle Micheli, MD, Director of the Division of Sports Medicine, Department of Orthopaedic Surgery at Boston Children's Hospital and a 38-year veteran volunteer of the Boston Marathon.

"I was at the finish line about 20 yards from the first bomb. When we first heard it, I didn't think much about it, then I heard the second one and realized this was a whole new situation. We shifted gears immediately from basic sports medicine treatment for hydration and muscle strains to mass casualty. We were using whatever we could as tourniquets, including T-shirts from the running store that was at the bomb blast site," said Micheli.

Brian FitzGerald, BSN, ATC, Athletic Trainer and Community Outreach Coordinator for the Department of Orthopaedic Surgery, Sports Medicine Division at Boston Children's Hospital also had 35 years of service to the marathon and was one of the many other individuals working at the finish line. "It was surreal. When you see the devastation that these types of bombs can create, it's shocking. All of the medical volunteers just went to work. We only had one EMS stretcher at the finish line, but did have 20 student athletic trainers with wheel chairs and did whatever we could to treat and transport victims as quickly as possible. At the end of the day we evacuated 97 victims through medical tent A in 22 minutes to nine area hospitals," said FitzGerald.



Most of the injuries that were treated were of the lower extremity, including severed limbs, shrapnel embedment, and burns. There was a large age range for the individuals who were treated from 20 through 60 years old. In all, more than 200 people were treated at the finish line.

"The medical tent was transformed into a triage unit in a matter of minutes. Volunteers and medical personnel did what they are trained to do. It was very quiet—no screaming and shouting just people working through it. One girl had a huge laceration and we moved her to the medical tent and she didn't say a word except 'thank you,' " said Micheli.

Both Micheli and FitzGerald treated the injured at the scene and then went back to help in the other medical tents. Dr. Micheli then went on to Boston Children's Hospital. However, because there were so many medical personnel on the scene and on-call, Micheli's services were not needed at the hospital. "People were already there or on their way by the time we were done treating people at the scene. The doctors and nurses were just showing up at hospitals so we didn't even have to go into our emergency action plan," said Micheli.

Even with all of the injuries, shock and magnitude of the event, both Micheli and FitzGerald aren't letting it dampen their desire to treat athletes in these large scale events. "I've been there since 1975 and plan on going back. Some people might be hesitant but most won't," said Micheli.

FitzGerald also noted, "All 130 of the athletic trainers on my team have already said to make sure their name is on the list for next year's race. We aren't going to let this stop us. Boston Strong!"



WASHINGTON UPDATE

By Jamie Gregorian, AAOS Senior Manager, Specialty Society Affairs and Research Advocacy

Washington is in the final stretch of its summer season before breaking for most of August through Labor Day. In that time, however, Congress will have plenty to consider, not the least of which will be an SGR-repeal proposal from the House Energy and Commerce Committee.

A Simple (SGR) Plan

The House Energy and Commerce Committee released an advanced legislative draft filling in some details of a proposal to replace the sustainable growth rate. The plan would repeal the SGR and replace it with an "improved fee for service" system in which providers develop quality measures. The biggest hurdle the plan has is the lack of a pay-for. Current Congressional Budget Office estimates place the cost of SGR repeal at just under $140 billion.

The Devil Is in the Details

The House Energy and Commerce Health Subcommittee held a markup July 22 of the SGR repeal bill, a step forward in repealing the unpopular current formula. The subcommittee markup would be the first in several years on a plan to repeal and replace SGR. What is not yet clear is how Congress intends to cover the estimated $139 billion price tag. Budgetary offsets are not expected to be made public until this fall.

Will Obamacare Meet Its Deadline?

Gary Cohen, head of the Center for Consumer Information and Insurance Oversight at the Centers for Medicare and Medicaid Services, insisted recently that the implementation of the Affordable Care Act will happen on time, this despite a recent GAO report suggesting a potentially rocky rollout. "We are going to be ready. We are on schedule. Things are proceeding well with all the aspects of what we need to do to create the marketplaces in all the states," said Cohen.

Home Health Takes a Hit

Medicare payments to home health agencies in 2014 will fall by 1.5 percent, or $290 million below calendar 2013 levels, according to a new proposed rule. The rule comes as home health agencies and other post-acute care providers have faced added scrutiny from the Medicare Payment Advisory Commission and members of Congress. The Senate Finance and House Ways and Means committees recently asked for ideas to revise Medicare payments to the industry.

Financial Impact of Health Research

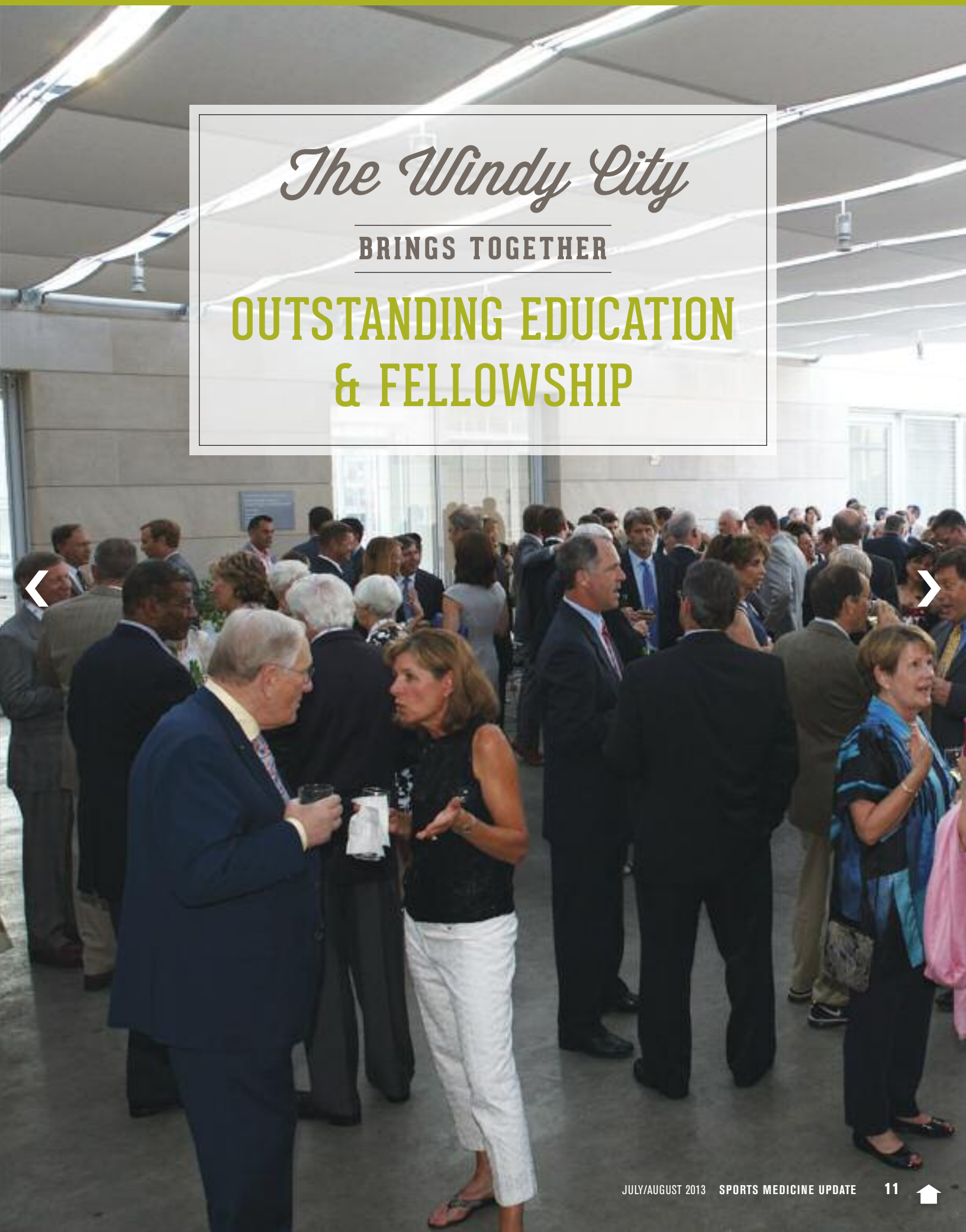
Advocates for more federal funding for biomedical research are pointing to a new report that says that work related to the human genome project has had an overall economic impact of $965 billion from 1988 through 2012. It was released on June 12 by the advocacy group United for Medical Research.

ACA Employer Mandate Delay

The Obama administration announced on July 2 that it is delaying a key part of the Affordable Care Act. Businesses will now have another year to prove that they are providing health insurance—or that their employees otherwise have health insurance from some other source. Companies had complained that the reporting requirements to prove this were too complicated and burdensome.

Individual Mandate Remains

While the House agreed with the President's delay of the employer mandate, they also voted 251–174 for a measure that would delay the individual mandate—the requirement on individuals to buy health insurance for a year as well. That will almost assuredly die in the Senate, and if it did not, the President said he would veto.



The Windy City

BRINGS TOGETHER

OUTSTANDING EDUCATION & FELLOWSHIP

The AOSSM 2013 Annual Meeting brought together more than 1,300 outstanding sports medicine researchers and educators along with their families for four days of excitement in the Windy City of Chicago.













The annual meeting began on Wednesday afternoon with the pre-conference workshop in collaboration with SPTS on "Bringing the Team Approach to Sports Medicine."

On Thursday, AOSSM President Christopher Harner, MD, and Program Chair Mark Miller, MD, welcomed everyone to the official start of the meeting and began the morning's session with an engaging discussion on ACL reinjury rates and reconstruction. A variety of other topics were discussed on Thursday, including allograft versus autograft, surgeon coaching, and sports hip treatments.

During Thursday's business meeting, new members were accepted and several individuals were confirmed as new additions to the Board of Directors and Medical Publishing Board of Trustees, including:

- **Medical Publishing Board of Trustees**
  Champ L. Baker, Jr., MD, Member-at-Large
- **Board of Directors**
  Allen F. Anderson, MD, AOSSM Vice President
  E. Lyle Cain, Jr., MD, AOSSM Member-at-Large Under 45
- **Council Chairs**
  Robert F. LaPrade, MD, PhD, Research
  Charles A. Bush-Joseph, MD, Education
  Brett D. Owens, MD, Communications

Nominees for the nominating committee were also selected by the membership, including:

- Matthew Provencher, MD
- Edward McDevitt, MD
- Scott Rodeo, MD
- Dean Taylor, MD
- Eric McCarty, MD
- Augustus Mazzocca, MD
- Claude T. Moorman, MD
- Michael Maloney, MD

Chair of the nominating committee will be Peter Indelicato, MD, and Past Chair is Robert Stanton, MD. Voting for who will serve on the Nominating Committee will take place online in mid-September.

One of the biggest highlights of the day was the afternoon's engaging educational workshops. The live surgical demonstrations on the upper extremity had more than 150 attendees who were able to learn new surgical skills and tips from top professionals. AOSSM thanks Arthrex and Smith & Nephew for their educational grants and in-kind support of the workshop along with in-kind support from ConMed Linvatec, Stryker, Arthrocare, DePuy Synthes, and DePuy Synthes Mitek Sports Medicine.

The *AJSM/Sports Health* Reviewers Workshop was at capacity with more than 100 individuals learning about epidemiology studies from James L. Carey, MD, MPH, and femoroacetabular impingement literature from Marc Safran, MD.

The first day concluded with the a welcome reception supported by Breg, Inc., on the Chicago Riverwalk deck and Exhibit Hall in the Sheraton. The event was a huge success with attendees having the opportunity to experience the exhibit hall after hours and get an outstanding view of the city with near perfect weather.

Friday's session began with a scientific session on shoulder instability and then two Aircast Awards. (see details on page 17). The Thomas A. Brady Award for excellence in education was also presented to Past President, Arthur Boland, MD, along with a Hall of Fame Award presented to George Davies, DPT, SCS, ATC, FAPTA.

Dr. Harner's presidential address highlighted the need for members lifelong quest for learning and the importance of defining yourself through who you are foremost with your family and then professionally. The Young Sports Medicine Workshop also took place on Friday afternoon with more than 100 in attendance to discuss the best ways to get a practice started. Additionally, more than 150 individuals took advantage of the industry-sponsored symposiums on Friday afternoon.

It wasn't all education, all the time in Chicago. Attendees were also able to take in the magnificent weather and a multitude of family-friend activities with easy access to parks, museums, Navy Pier, and architectural boat tours to learn some history on this amazing city.

On Saturday morning attendees headed back to the Sheraton Ballroom for discussions and presentations on concussions, imaging, ACL tear treatment, and articular cartilage research. One of the biggest highlights of the meeting also occurred on Saturday, with Presidential Guest Speaker, Tony Dungy, former NFL head coach and commentator, discussing the ups and downs of his coaching career and life.

Following the speech, the late William Grana, MD, received the Robert E. Leach, MD Mr. Sports Medicine Award, one of the Society's highest honors, for his outstanding career in sports medicine. Dr. Jo Hannafin was also inducted as the 42nd AOSSM President and first woman to hold the office.

Conference Resources

All Annual Meeting materials, including abstracts, outlines, and posters can be viewed by logging into your MyAOSSM page at www.sportsmed.org and clicking on the Annual Meeting 2013 Meeting Materials link. Instructional Course handouts can be found in the Resources tab of the MyAOSSM page.

Conference Evaluation

The Society strives to provide you with the best educational experience possible. You should have received an e-mail from the Society asking for your comments on the meeting and how we can improve for next year. Please be sure to take a few minutes to fill this evaluation out, so we can continue to make our meetings the best in sports medicine. You should also be receiving an e-mail from the Society regarding your CME credit by the middle of August. Thank you!















Awards were also given for outstanding posters to the following individuals:

First Prize ($750)—Poster 53
A Prospective Randomized Trial of Functional Outcomes Following Rotator Cuff Repair With and Without Acromioplasty: Minimum 2-Year Follow-Up
Elizabeth Tetteh, MD; Kristen Elizabeth Hussey, BS; Geoffrey D. Abrams, MD; Anil K. Gupta, MD, MBA; Aman Dhawan, MD; Vasili Karas, BS; Brian J. Cole, MD, MBA; Anthony A. Romeo, MD; Nikhil N. Verma, MD, Rush University, Chicago, Illinois, University Orthopaedic Associates, Wall, New Jersey

Second Prize ($500)—Poster 16
Risk Factors for Recurrent Anterior Cruciate Ligament Reconstruction: A Population Study in Ontario, Canada, with 5-Year Follow-Up
David Wasserstein, MD, MSc, FRCSC; Amir Khoshbin, MD; Tim Dwyer, MD; Jaskarndip Chahal, MD, FRCSC; Rajiv Gandhi, MD, FRCSC; Nizar Mahomed, MD; Darrell Ogilvie-Harris, MD, FRCSC; University of Toronto, Toronto, Ontario, Canada, and Toronto Western Hospital, Toronto, Ontario, Canada

Third Prize ($250)—Poster 51
Reduction in Muscle Fiber Force Production, Disruption of Muscle Cell Architecture and Accumulation of Fatty Macrophages in Patients with Chronic Rotator Cuff Tears
Asheesh Bedi, MD; Stuart M. Roche, BS; Evan B. Lynch, BS; Elizabeth R. Sibilsky Enselman, MEd, ATC; Christopher Mendias, PhD, ATC; University of Michigan, Ann Arbor, Michigan

The day ended with a fun-filled boat ride on the Odyssey. This outstanding event was an experience for kids of all ages, including a sunset cruise along the lakefront and an awe-inspiring fireworks show. With a live band, magician, outstanding fellowship, and fun, this was an evening to remember.

The meeting concluded on Sunday with the presentation of the George D. Rovere Award to Richard Hawkins, MD, FRCSC, the Systematic Review Awards, and the T. David Sisk Awards (see details on pages 17–18). In addition, papers were presented on COI, hand/wrist injuries, and affordable care alternatives for the future.

AOSSM would like to thank all of our sponsors and exhibitors for their ongoing Annual Meeting support. The next AOSSM Annual Meeting will be in Seattle, July 11–15, 2014. Escape the grind with us next year!











PHOTOS from the Annual Meeting will be available for viewing at www.photographyg.com. Select the link on the bottom of the page to View the AOSSM Event. You will create a new account or if you viewed pictures from the 2012 Annual Meeting you can simply sign in. Many photos of the scientific sessions, award presentations, and family fun are there for your enjoyment and to purchase.














Thank
You



Awards

Past AOSSM President, William A. Grana, MD, MPH, Receives Highest AOSSM Honor



AOSSM past president and Hall of Fame inductee, **William A. Grana, MD, MPH,** was presented posthumously with the 2013 Robert E. Leach Mr. Sports Medicine award during this year's Annual Meeting. This prestigious award is given annually to honor those who have made a significant contribution to the world of sports medicine and includes a $5,000 donation to the winner's charity of choice. It is one of the top awards the Society presents each year. Dr. Grana was the 40th recipient of this distinguished award. His wife, Susan was on hand to accept the award in his honor.

Dr. Grana began his medical studies at Harvard University and completed his residency in orthopaedic surgery at Washington University's Barnes Hospital in St. Louis. He then performed his fellowship in sports medicine under Don O'Donoghue, MD, at the University of Oklahoma and began his teaching career. In 2000, he left his clinical professorship and director of sports medicine position with the university to become the head of the orthopaedic surgery department at the University of Arizona in Tucson, Arizona, where he was a tenured professor before his death in February 2013.

In addition to running a private practice and publishing more than 100 scientific papers and three books, Dr. Grana served as an orthopaedic consultant for the University of Arizona Athletic Department, Oklahoma State University, Oklahoma City University, Texas Rangers, Oklahoma Redhawks, and the Chicago White Sox. He was a physician member of the U.S. Olympic Committee's 1985 Winter World University Games Team in Bulluno and Cortina, Italy, a member of the 1986 Olympic Festival medical staff in Houston, Texas, head physician for the U.S. team at the 1987 Pan American Games in Indianapolis, Indiana, and the USOC's medical staff for the 1988 Olympics in Seoul, South Korea.

He served on numerous boards and committees for the AOSSM, including president from 2005 to 2006 and as a member of the AOSSM Medical Publishing Board of Trustees. During his appointments on other committees and boards he assisted with the development of online educational tools, as well as a certificate in orthopaedic science for graduate students studying physiology and engineering.

Sports Medicine Physical Therapy Leader, George J. Davies, DPT, SCS, ATC, CSCS, FAPTA, Inducted into Hall of Fame



George J. Davies, DPT, ATC, CSCS, PES, FAPTA, was inducted into the AOSSM Hall of Fame on Friday, July 12. AOSSM Hall of Famers are individuals in the sports medicine community who have contributed immensely and set themselves apart from others in the field.

Dr. Davies began his sports medicine career almost 50 years ago when he started as a student, assistant, and then head athletic trainer. He has been involved in the clinical practice of sports physical therapy/athletic training, since 1965. He still maintains an active clinical practice at Coastal Therapy in Savannah, Georgia, and Gundersen Lutheran Sports Medicine in LaCrosse, Wisconsin. He has been actively involved in sports coverage as an athletic trainer/sports physical therapist at a variety of sporting events, including:

- 1980 Winter Olympics, Lake Placid, New York
- 1986 Pan American Games, Indianapolis, Indiana
- 2002 Salt Lake City Winter Olympics
- 2003 Volunteer athletic trainer at the USOTC, Lake Placid, New York
- 2005 member, USA Medical Staff for Summer World University Games in Izmir, Turkey
- 2008 Paralympic Games in Beijing, China
- 2012 Educational workshop presenter for clinicians at the London Olympic Games

Dr. Davies was the original co-founder and co-editor of *The Journal of Orthopaedic and Sports Physical Therapy*. He also is one of the original associate editors for *Sports Health: A Multidisciplinary Approach.*



He has been a member of the AOSSM for more than 25 years and published in *AJSM,* presented several instructional courses, served on the Education Committee, and developed the AOSSM-SPTS Pre-Conference course at the Annual Meeting in 1994. Dr. Davies is also a United States Marine Corps veteran.

Research Awards Presented at Annual Meeting

In order to recognize and encourage cutting-edge research in key areas of orthopaedic sports medicine, the AOSSM presented ten research awards and seven grants during its Annual Meeting. AOSSM annually provides more than $350,000 to research initiatives and projects around the country. For more information on AOSSM research projects and awards please visit www.sportsmed.org and click on the Research tab. Highlights of this year's award recipients include:

2013 AOSSM Young Investigators Grant

The Young Investigator Grant (YIG) is designed to support young researchers who have not received prior funding. This year AOSSM selected **Ermias Abebe, MD,** University of Pittsburgh, for "The Effects of ACL Deficiency on Meniscal Strain and Cartilage Deformation," a study designed to investigate how ligament and meniscus injuries and treatment affect the knee joints.

2013 AOSSM Sandy Kirkley Clinical Outcomes Research Grant

To honor the memory and spirit of Dr. Kirkley, AOSSM established a grant of $20,000 that provides start-up, seed money, or supplemental funding for an outcome research project or pilot study. This year's recipient is **E. Todd Schroeder, PhD,** University of Southern California. His project, "Testosterone Administration and ACL Reconstruction in Men" will determine if testosterone treatment for men undergoing ACL repair will help optimize the rehabilitation process and allow for a full return to health and knee function.

2013 AOSSM/Sanofi Biosurgery Osteoarthritis Grant

The third-annual Sanofi Biosurgery Osteoarthritis Grant was awarded to **Asheesh Bedi, MD,** University of Michigan, for his planned research entitled "Changes in Biomarkers of Cartilage Degeneration and Inflammation Following Arthroscopic Decompression of Femoacetabular Impingement." The AOSSM/Sanofi Biosurgery Osteoarthritis Grant funds investigations related to early osteoarthritis and/or prevention of OA progression. This one-year award of $50,000 supports a lab/basic science project and is chosen by the AOSSM Research Committee.

2013 AOSSM/ConMed Linvatec Research Mentoring Program

AOSSM initiated a research mentoring program in 2012 that will bring together individuals who have shown scientific promise at an early stage of their careers with senior clinician-scientists who have highly successful research programs. The first class of award winners include mentee **Alfred Atanda, MD,** A.I. DuPont Hospital for Children, with mentor **Mininder Kocher, MD, MPH,** Boston Children's Hospital; mentee **Cory Edgar, MD, PhD,** Boston University, with mentor **Kurt Spindler, MD,** Vanderbilt University; and mentee **Joseph DeAngelis, MD,** Beth Israel Deaconess Medical Center with mentor **Warren Dunn, MD, MPH,** University of Wisconsin.

AOSSM/RTI Biologics Three-Year Research Initiative Grant

AOSSM's Research Initiative Grant supports extended research projects with five installments of $50,000 over a three-year period (2013–2015). The latest grant was presented to **Alexander Scott, PhD,** to support his ongoing research titled "Intratendinous Injections of Platelet-Poor Plasma, or Platelet-Rich Plasma With or Without Leukocyte Enrichment for Patellar Tendinopathy: A Multi-Center, Double-Blind, Randomized Controlled Trial," which explores the use of PRP therapy in treating sports injuries.

Aircast Award for Basic Science

Voted by the AOSSM Fellowship Committee, this year's winning paper is: "Conjoined Tendon Transfer Versus Modified Bristow in a Glenoid Bone Loss Model: A Biomechanical Study," by **Anand P. Panchal, DO,** Triangle Orthopaedic Associates, PA, Durham, North Carolina; **Daryl C. Osbahr, MD,** MedStar Union Memorial Hospital, Baltimore, Maryland; **Wiemi Douoguih, MD,** Washington Hospital Center, Washington, D.C.; and **Brent G. Parks, MSC,** Union Memorial Hospital, Baltimore, Maryland.

Aircast Award for Clinical Science

Voted by the AOSSM Fellowship Committee, this year's winning paper is: "Risk Factors for Anterior Glenohumeral Instability," by **Brett D. Owens, MD,** Keller Army Hospital, West Point, New York; **Scot Campbell, MD,** Wilford Hall Medical Center, San Antonio, Texas; and **Kenneth L. Cameron, PhD, MPH, ATC,** Keller Army Hospital, West Point, New York.






Research Awards Continued–

Cabaud Memorial Award

Given to the best paper researching hard or soft tissue biology, this award is selected by the AOSSM Awards Subcommittee with awardees receiving $2,000. This year's winning paper is: "Use of a Bioactive Scaffold to Stimulate Healing also Minimizes Post-Traumatic Osteoarthritis After Surgery," by **Martha M. Murray, MD,** Children's Hospital, Boston, and **Braden C. Fleming, PhD.**

Excellence in Research Award

This award is selected by the AOSSM Awards Subcommittee for the best paper submitted by a first author under 40 years of age. This year's winning paper was from the Hospital for Special Surgery in New York and titled "Development and Validation of a Pediatric Sports Activity Rating Scale." Study authors included: **Peter D. Fabricant, MD, MPH; Alex Robles, BS; Timothy Downey-Zayas, BS1; Huong T. Do, MA; Robert G. Marx, MD, MSc; Roger F. Widmann, MD;** and **Daniel W. Green, MD, MS.**

O'Donoghue Sports Injury Research Award

This award is given annually to the best overall paper that deals with clinical based research or human in vivo research. In 2013 it is given to authors: **Daryl C. Osbahr, MD; E. Lyle Cain, Jr., MD; B. Todd Raines, MA, ATC; Dave Fortenbaugh, PhD; Jeffrey R. Dugas, MD;** and **James R. Andrews, MD,** for their paper "Long-Term Outcomes After Ulnar Collateral Ligament Reconstruction in Competitive Baseball Players: Follow-Up with a Minimum of 10 Years." The awardee is selected by the AOSSM Awards Subcommittee with recipients receiving $2,000.

Hughston Award

This year's recipients of the Hughston Award are **Mohsen Hussein, MD; Carola F. van Eck, MD; Andrej Cretnik, MD, PhD; Dejan Dinevski, PhD;** and **Freddie H. Fu, MD,** for their paper "Prospective Randomized Clinical Evaluation of Conventional Single-Bundle, Anatomic Single-Bundle and Anatomic Double-Bundle Anterior Cruciate Ligament Reconstruction: 281 Cases with 3- to 5-Year Follow-up." The award, chosen by a panel of *AJSM* editors and reviewers, is given to the most outstanding paper published in the *American Journal of Sports Medicine* and receives $5,000.

AJSM Systematic Review Awards

This year, a panel of *AJSM* editors and reviewers chose two papers and awarded each $5,000. The papers included: "Is Magnetic Resonance Imaging Reliable in Predicting Clinical Outcome After Articular Cartilage Repair of the Knee? A Systematic Review and Meta-analysis," by **Tommy S. deWindt, MD; Goetz H. Welsch, MD; Mats Brittberg, MD, PhD; Lucienne A. Vonk, PhD; Stefan Marlovits, MD, MBA; Siegfried Trattnig, MD;** and **Daniel B.F. Saris, MD, PhD,** as well as "The Influence of Age on the Effectiveness of Neuromuscular Training to Reduce Anterior Cruciate Ligament Injury in Female Athletes: A Meta-Analysis," by **Gregory D. Myer, PhD, FACSM, CSCS; Dai Sugimoto MS, ATC, CSCS; Staci Thomas;** and **Timothy E. Hewett, PhD.**

T. David Sisk Award for Best Original Research Paper

The winners were selected from the best papers in original research submitted to *Sports Health: A Multidisciplinary Approach.* The award will include a $2,500 cash prize and a plaque. This year's winner is "Serum CTXii Correlates with Articular Cartilage Degeneration After Anterior Cruciate Ligament Transection or Arthrotomy followed by Standardized Exercise," by authors **Christian H. Coyle, PhD; Sarah E. Henry, MD; Amgad M. Haleem, MD; Michael J. O'Malley, MD;** and **Constance R. Chu, MD.**

T. David Sisk Award for Best Review Paper

The winners were selected from the best review papers submitted to *Sports Health: A Multidisciplinary Approach.* The award will include a $2,500 cash prize and a plaque. This year's recipient is "Prospective Predictors of Patellofemoral Pain Syndrome: A Systematic Review with Meta-Analysis" from authors **Evangelos Pappas PT, PhD, OS,** and **Wing M. Wong-Tom PT, MS, OCS.**

T. David Sisk Award for Best International Paper

The winners were selected from the best international papers submitted to *Sports Health: A Multidisciplinary Approach.* The award will include a $2,500 cash prize and plaque. This year's winner of the best international research paper is "Clinical Outcomes and Return-to-Sports Participation of 50 Soccer Players After Anterior Cruciate Ligament Reconstruction Through a Sport-Specific Rehabilitation Protocol," by **Stefano Della Villa, MD; Lorenzo Boldrini, MD; Margerita Ricci, MD; Furio Danelon, MD; Lynn Snyder-Mackler, PT, ScD, FAPTA; Gianni Nanni, MD;** and **Giulio Sergio Roi, MD.**






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Thank you to these AOSSM members for their service to the Society's committees in 2012–2013.

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2013

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AOSSM/AAOS Board Review for Subspecialty Certification in Orthopaedic Sports Medicine
Chicago, Illinois
August 9–11, 2013

Advanced Team Physician Course
Las Vegas, Nevada
December 5–8, 2013

AOSSM Specialty Day
New Orleans, Louisiana
March 15, 2014

Surgery for the Athlete's Knee
Orthopaedic Learning Center
Rosemont, Illinois
April 26–27, 2014

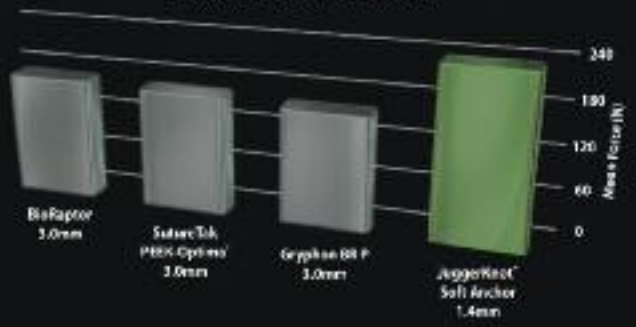


It's small. It's strong.[1,2] And it's all suture.

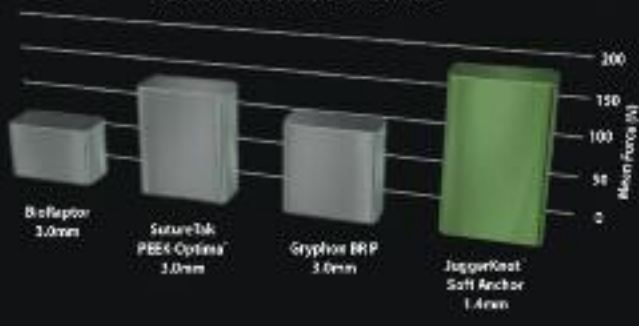
Size is **not** indicative of strength! Ants can carry more than 50 times their body weight. The 1.4mm JuggerKnot™ Soft Anchor has been shown to be stronger than comparable 3mm anchors.[1,2] The JuggerKnot™ Soft Anchor represents the next generation of suture anchor technology. This 1.4mm anchor is completely suture-based and the first of its kind.



Cortical Loads to Failure[1,2]



Cancellous Loads to Failure[1,2]



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1. Barber FA, Herbert MA, Beavis RC, and Ono TB: "Suture Anchor Materials, Eyelets, and Designs: Update 2008." Arthroscopy Vol. 24, No. 8 pp 859-867, 2008
2. Barber FA, Herbert MA, Hapa O, Rapley JH, Barber CA, Bynum JA, Hrnack SA: "Suture Anchor Update 2010." Arthroscopy 2010: In Press.

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6300 North River Road
Suite 500
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AOSSM thanks Biomet for their support of *Sports Medicine Update.*