

Keeping you... *Active*

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Sports Medicine • Orthopedic Excellence

Keeping you...

Active

...is a quarterly newsletter from West Tennessee Bone & Joint Clinic.

The clinic's nine physicians specialize in sports medicine and orthopedic problems.

For more copies of the newsletter, contact Adam Kelley at the clinic at 731-661-9825.

Past copies of the newsletter are online at www.wtbjc.com.

Is cheerleading the most dangerous high school and collegiate sport?

New studies have shown that the rate of serious injury associated with cheerleading accidents is considerably higher than any other sport in which there is female participation. North Carolina's National Center for Catastrophic Sports Injury Research cites 67 fatal or life-threatening injuries due to cheerleading since 1982. This makes cheerleading, by far, the most dangerous high school and college-age sport in which female athletes participate.

The rate of catastrophic injury has actually been higher than that of football over the last several years. In fact, cheerleaders suffered more serious and life-threatening injuries than all other

female sports participants combined. This study, as

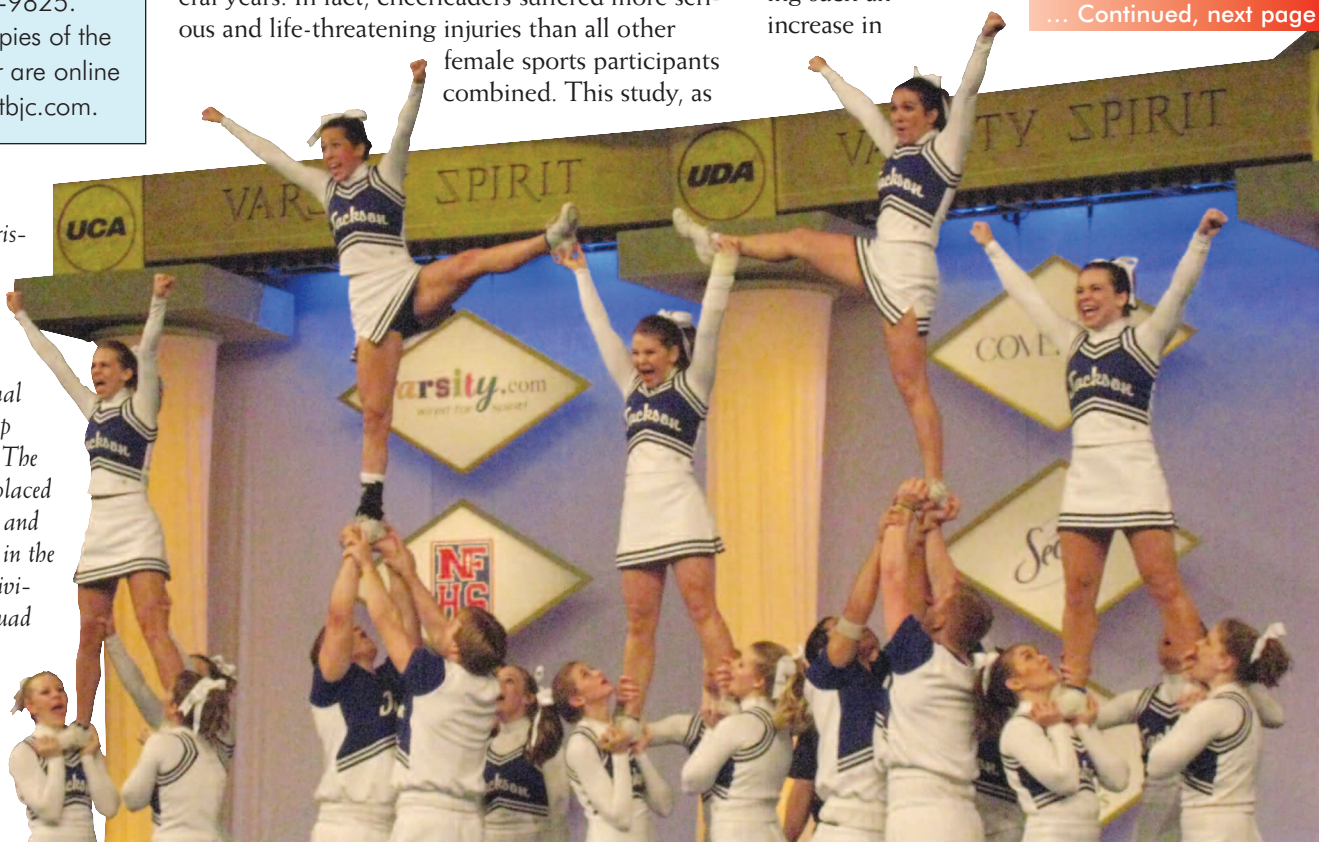
By Jason T. Hutchison, M.D.

well as news reports, have brought attention to the dangerous side of the sport and caused many of us in the healthcare profession to ask ourselves, "Are we doing enough to help prevent these injuries and educate the participants and coaches?"

The types of injuries in cheerleading vary from simple sprains, strains and muscle injuries all the way up to brain injury, skull fracture and spinal cord injuries. A study, which has looked at the utilization of emergency room visits by cheerleaders between 1990 and 2002, noted a 110 percent increase. So, the questions loom, why are we seeing such an increase in

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Jackson Christian School coed cheerleaders perform at the UCA national championship competition. The JCS squad placed 3rd in 2007 and 5th in 2008 in the small coed division. The squad has been nationally ranked for the past eight years.



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Take precautions with cheerleading...

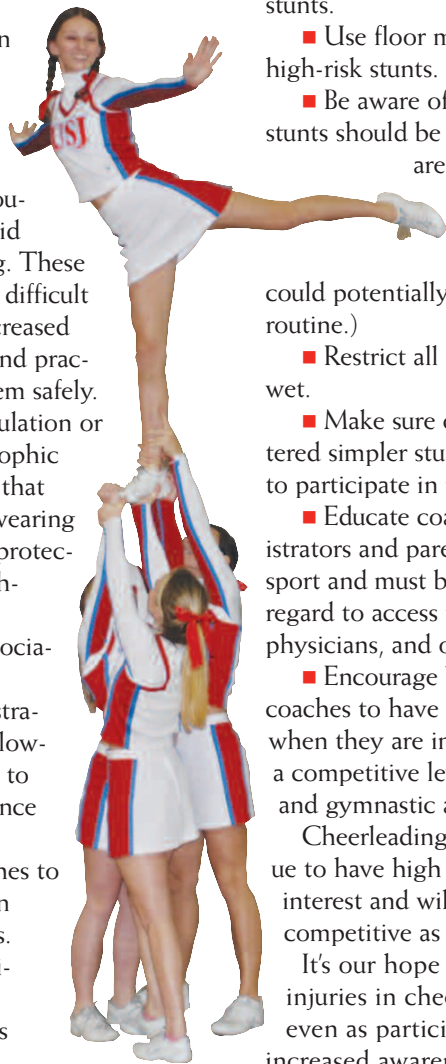
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injuries in cheerleaders and what can we do to prevent it?

These days, cheerleading is certainly much more than standing on the sidelines leading cheers for the fans. It has developed into a true sport with complex gymnastic routines, stunting, pyramid building and tumbling. These types of complex and difficult maneuvers require increased athleticism, training and practice in order to do them safely. Likewise, any miscalculation or error can have catastrophic results, given the fact that cheerleaders are not wearing helmets, pads or any protective gear like other athletes.

The American Association of Cheerleading Coaches and Administrators has issued the following recommendations to help decrease the chance of injury...

- Encourage coaches to be certified and safe in cheerleading practices.
- Develop a conditioning and flexibility program that precedes and follows all cheerleading activities.
- Take time to train spotters and, for high risk stunts, use



University School of Jackson cheerleader Courtney Byrd cheers at a basketball game.

only spotters who have a significant amount of experience with high-risk maneuvers.

- Use floor mats when learning new stunts.
 - Use floor mats when performing high-risk stunts.
 - Be aware of the surroundings. (Some stunts should be performed only in open areas, such as during half-time, rather than along the sidelines where crowd involvement could potentially interfere with the stunt routine.)
 - Restrict all stunting when surfaces are wet.
 - Make sure cheerleaders have mastered simpler stunts before allowing them to participate in more complex stunts.
 - Educate coaches, participants, administrators and parents that cheerleading is a sport and must be treated as such with regard to access to athletic trainers, team physicians, and other medical staff.
 - Encourage both volunteer and paid coaches to have certifications in safety when they are involved in cheerleading at a competitive level where complex stunts and gymnastic activities are required.
- Cheerleading undoubtedly will continue to have high levels of participation and interest and will likely become more competitive as the years go on. It's our hope that the rate of serious injuries in cheerleading will decrease even as participation increases, with increased awareness on behalf of coaches and participants, safety equipment such as mats and training aids, further training of coaches and research into proper teaching safety standards.

Cheerleading

Q & A

Q What types of injuries are most common in cheerleading?

A Ankle injuries are the most common injuries, followed closely by knee injuries. Upper extremity injuries also are becoming more prevalent due to increased popularity of tumbling routines while cheering.

Q What can I do to prevent injuries while cheerleading?

A All cheerleaders should participate in a year-round fitness program, which includes strength and flexibility training and core (lower back and abdomen) conditioning.

Q Does the type of shoes I wear matter?

A Yes. Well-fitted shoes with good cushioning and a stable base are preferred. Cross-trainers or running shoes are good choices. Keep in mind, shoes should be chosen for function and not solely for aesthetics.

Q If I roll my ankle while cheerleading, should I continue to cheer if I am having mild/moderate pain/swelling?

A No. Obviously, no athlete enjoys being sidelined due to injury, but it is important that, when injuries do occur, the athlete be properly evaluated and treated. Failure to acknowledge an injury could likely lead to further injury.

Information provided by Marty Grooms, OTR/L

Facing knee surgery?

The Orthopedic Surgeons at West Tennessee Bone & Joint Clinic have the experience and expertise to repair your knee problems and return you to the activities you like to do as soon as possible.

In fact, Dr. Lowell Stonecipher, Dr. Michael Cobb, Dr. David Pearce and Dr. Jason Hutchison have received training in a new procedure – the Oxford Unicompartmental Knee System – that is less invasive than regular knee implants,

reduces recovery time and improves mobility after surgery.

The Oxford Knee System is the only FDA-approved, free floating, meniscal unicompartmental knee system available in the United States, and Dr. Stonecipher, Dr. Cobb, Dr. Pearce, and Dr. Hutchison are the only orthopedic surgeons in Jackson trained to use the Oxford Knee System.

For more information, call us at 731.661.9825 or 888.661.9825.

West TN Bone & Joint Clinic joins Physicians Surgery Center

The Physicians Surgery Center in Jackson, at 207 Stonebridge Boulevard in Jackson has become a multi-specialty facility with the addition of West TN Bone & Joint Clinic.

The Physicians Surgery Center, established September 1, 1995, by ophthalmologists at The Eye Clinic in Jackson, is a state-of-the-art, ambulatory surgery facility providing the highest quality, cost efficient and convenient surgical care, says Raymond Kee, Administrator of the Physicians Surgery Center. "Over the past 13 years, we have experienced that patients prefer the simplified admissions and discharge procedures of an outpatient facility. They really like the ability to return home quickly and resume normal activities after their surgery."

"The mission at West Tennessee Bone & Joint Clinic has always been to provide the best care possible for our patients," said Donna Klutts, Practice Administrator at West Tennessee Bone & Joint Clinic. "Joining with this facility has helped us reach our goals."

Technology and research has created advancements in orthopedic surgery over the past few decades. "The biggest change in orthopedic medicine has been the shift from open surgeries to arthroscopic surgeries with the use of mini-invasive equipment," said Dr. David Johnson, an orthopedic surgeon at West Tennessee Bone & Joint Clinic. "Although many orthopedic procedures and surgeries are still performed in the hospital setting accompanied with a hospital stay, more and more cases will be performed at convenient outpatient centers."

"The patients typically have better clinical outcomes and enjoy the efficiency, convenience and ease of having their care at



these smaller facilities," said Dr. Jason Hutchison, an Orthopedic Surgeon who practices with Dr. Johnson.

Dr. Harold Antwine, who also practices at the clinic, stated that the Physicians Surgery Center has the latest in high-definition cameras and

scopes. "We get to choose the equipment and materials that we feel are appropriate for our patients instead of someone else. The Physicians Surgery Center will be convenient for patients and their families because of accommodating scheduling processes and less potential for the delay of procedures."

"West Tennessee Bone & Joint Clinic physicians wanted to be able to truly oversee every aspect of the patient's care," Klutts said. With patient resources like physical therapy, the dexascaner and MRI at the clinic, and now the Physicians Surgery Center, the physicians can do their best to make sure that their patients are taken care of conveniently and efficiently, she added.

The Orthopedic Surgeons at West Tennessee Bone & Joint Clinic will continue to perform surgeries and admit their patients at both hospitals in Jackson.

With the Physicians Surgery Center, however, "it is comforting to know that you will receive the best care possible in a facility specifically designed for same-day surgery," says Klutts. "Because of the center's efficiency, the expense for the patient is usually far less than at a hospital facility."

"The nine board-certified orthopedic surgeons at West Tennessee Bone & Joint Clinic are dedicated in providing the most advanced specialized care available," Dr. Johnson said. "We have become one of the most well respected and premiere orthopedic clinics in Tennessee."

Knee injury delays plans

... From the back page

Carson started physical therapy at the Bone & Joint Clinic within a week of surgery.

Throughout his recovery, Carson has turned his attention from soccer to his old love of trap shooting. He had been a member of the 2006 Junior Olympic trap shooting development team. Since his injury, he has been trying to re-qualify for the team.

This summer, he took first place in the state trap shooting tournament and second place

at the state Olympics.

For Carson, it seems soccer, much like the orange clay targets he shoots in trap shooting, is up in the air. His focus now is on finishing physical therapy and qualifying in the winter for the Junior Olympic trap shooting team development camp.

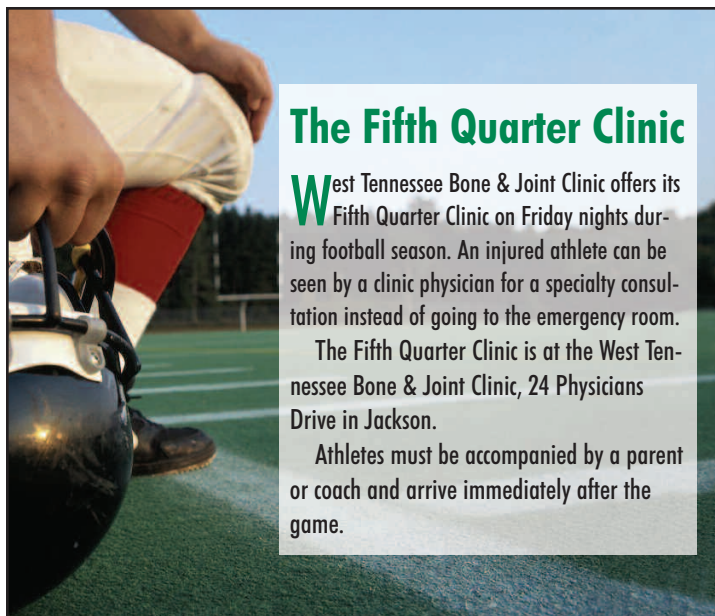
He expects Dr. Pearce to release him from therapy in late October. "According to Dr. Pearce, I am doing great," says Carson. "He is pleased with my progress, and if he is pleased, I am pleased."

The Fifth Quarter Clinic

West Tennessee Bone & Joint Clinic offers its Fifth Quarter Clinic on Friday nights during football season. An injured athlete can be seen by a clinic physician for a specialty consultation instead of going to the emergency room.

The Fifth Quarter Clinic is at the West Tennessee Bone & Joint Clinic, 24 Physicians Drive in Jackson.

Athletes must be accompanied by a parent or coach and arrive immediately after the game.



Knee injury delays college soccer plans

As a senior at McKenzie High School in the spring of 2007, Carson Rider had big plans to play college soccer. A turn of events, you might say, changed those plans.

Carson had committed to play soccer at the University of the South at Sewanee. In June, he dislocated his right kneecap during a footwork drill. This untimely injury caused his knee to be irritated for several months and forced him to delay his plans to play soccer.

"Looking back, I probably should have had surgery to fix my knee," says Carson. "But I had a 50-50 chance that it would heal on its own, and the soccer coach at Sewanee wanted me to take that option."

Carson decided to transfer to Union University until his knee could heal and strengthen enough to begin training for soccer again. He had physical therapy over the summer in McKenzie and,

when he started school at Union in the fall, continued his therapy at the West Tennessee Bone & Joint Clinic. By the end of September, Carson's knee, although it still bothered him some, was strong enough for him to begin training again for soccer, this time with the hope of playing for Union.

All was going well until late March when he re-injured his knee while playing soccer with friends. "I knew immediately it was hurt," Carson says. "My parents and I felt that the West Tennessee Bone & Joint Clinic was the best place for me to go for treatment, so I called and got an appointment with Dr. David Pearce."

An MRI and x-rays of Carson's right knee indicated Carson had a slightly loose medial patella femoral ligament (MPFL), which is one of the ligaments that act to stabilize the knee cap.

In May, Dr. Pearce planned surgery

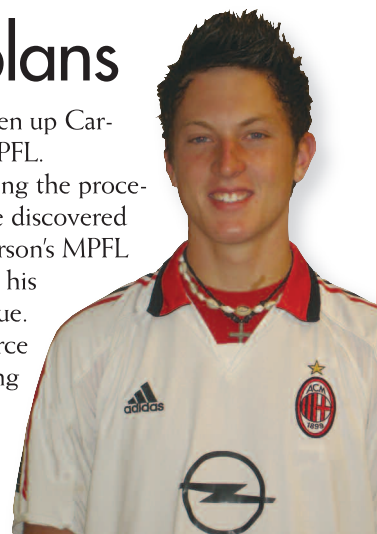
to tighten up Carson's MPFL.

During the procedure, he discovered that Carson's MPFL was not his only issue.

Dr. Pearce was using arthro-

scopy, which uses small

incisions and a small camera to look inside a joint. "With the scope, we found that the bottom left of Carson's kneecap had chipped away, something that had not shown up on the MRI or the x-rays," says Dr. Pearce. "We ended up doing an extensor realignment as well as a replacing the MPFL."



... Continued, inside

Celebrating 35 years of providing quality patient care



Pictured, left to right, are Dr. John Everett, Dr. Kelly Pucek, Dr. Michael Cobb, Dr. David Johnson, Dr. Lowell Stonecipher, Dr. David Pearce, Practice Administrator Donna Klutts, Dr. Adam Smith, Dr. Harold Antwine III and Dr. Jason Hutchison.



Keeping You Active

The physicians at West Tennessee Bone & Joint Clinic, P.C., specialize in comprehensive orthopedic care. They diagnose and treat diseases and injuries of the bone, muscles, tendons, nerves and ligaments in adults and children. They are Board Certified in Orthopedic Surgery.

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