

BOOKS

Micheli: Oxford Textbook of Sports Medicine

-excellent overview of all conditions and diagnosis. limited surgical technique.

Garret: Principles and Practice of Sports Medicine

-Classic surgeons text written by former UNC chair and Duke Sport's Surgeon

Snyder: Shoulder Arthroscopy

-bread and butter, first generation shoulder scoping

Jackson: Reconstructive Knee Surgeries

-older, but classic for open surgery of knee.

Andrews: Arthroscopic Surgery

-classic "old school" intro to Arthroscopy (all joints)

OKU: Sports, General, Shoulder & Elbow

-essential for boards

ATHLETIC HEAD and SPINE INJURIES

1. On-the-Field Management of Athletic Head Injuries. Pierre Durand, Jr and Gregory J. Adamson. J Am Acad Orthop Surg May/June 2004; 12:191-195.

6. Concussion in Sports. Am J Sports Med. 1999 Sep-Oct;27(5):676-87.E. Wojtys, D. Horda, G. Landry, et al.

SHOULDER

Rotator Cuff

18. Predictors of failure of nonoperative treatment of chronic, symptomatic, full-thickness rotator cuff tears. Dunn WR, et al. J Shoulder Elbow Surg. 2016 Aug;25(8):1303-11. Patient's perception of the effectiveness of PT predicts failure of conservative therapy.

27. Clinical and structural outcomes after arthroscopic single-row versus double-row rotator cuff repair: a systematic review and meta-analysis of level I randomized clinical trials. Millett PJ, Warth RJ, Dornan GJ, Lee JT, Spiegl UJ. J Shoulder Elbow Surg. 2014 Apr;23(4):586-97. Single-

row repairs resulted in significantly higher re-tear rates compared with double-row repairs, especially with regard to partial-thickness re-tears.

39. Clinical results of arthroscopic superior capsule reconstruction for irreparable rotator cuff tears. Mihata T, Lee TQ, Watanabe C, Fukunishi K, Ohue M, Tsujimura T, Kinoshita M. Arthroscopy. 2013 Mar;29(3):459-70. ASCR restored superior glenohumeral stability and function of the shoulder joint with irreparable rotator cuff tears.

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59. The Societal and Economic Value of Rotator Cuff Repair. Mather et al. JBJS 2013 Nov 20; 95(22). RCR produces a net societal saving in patients under 61

67. Arthroscopic surgery of irreparable large or massive rotator cuff tears with low-grade fatty degeneration of the infraspinatus: patch autograft procedure versus partial repair procedure. Mori D, Funakoshi N, Yamashita F. Arthroscopy. 2013 Dec;29. Patch autograft had 8% re-tear rate vs 40% with partial repair.

78. Clinical success of biceps tenodesis with and without release of the transverse humeral ligament. Sanders B, Lavery KP, Pennington S, Warner JJ. J Shoulder Elbow Surg. 2012 Jan;21(1):66-71. Subpec vs intra-articular biceps tenodesis.

84. The superior capsule of the shoulder joint complements the insertion of the rotator cuff. Nimura A, Kato A, Yamaguchi K, Mochizuki T, Okawa A, Sugaya H, Akita K. J Shoulder Elbow Surg. 2012 Jul;21(7):867-72. The shoulder capsule is thickest at the posterior border of the infraspinatus (9.7mm). At the anterior border of the supraspinatus it is 5.9mm thick.

90. Biceps tenotomy versus tenodesis: clinical outcomes. Slenker NR, Lawson K, Ciccotti MG, Dodson CC, Cohen SB. Arthroscopy. 2012 Apr;28(4):576-82. Equivalent outcomes with higher deformity in tenotomy group.

97. The role of platelet-rich plasma in arthroscopic rotator cuff repair: a systematic review with quantitative synthesis. Chahal J, Van Thiel GS, Mall N, Heard W, Bach BR, Cole BJ, Nicholson GP, Verma NN, Whelan DB, Romeo AA. Arthroscopy. 2012 Nov;28(11):1718-27. No difference in rate of re-tear or outcomes scores.

107. Outcomes of single-row and double-row arthroscopic rotator cuff repair: a systematic review. Saridakis P, Jones G. J Bone Joint Surg Am. 2010 Mar;92(3):732-42. Structural healing in double row repair is better but outcomes are no different to single row. Large tears may benefit from double row repair.

118. Arthroscopic GraftJacket repair of rotator cuff tears. Wong I, Burns J, Snyder S. J Shoulder Elbow Surg. 2010 Mar;19(2 Suppl):104-9. Arthroscopic RCR using the allograft acellular human dermal matrix for irreparable cuffs.

124. Arthroscopic rotator cuff repair. Burkhart SS, Lo IK. J Am Acad Orthop Surg. 2006 Jun;14(6):333-46. Basic concepts for rotator cuff repairs.

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162. The partial-thickness rotator cuff tear: is acromioplasty without repair sufficient? Cordasco FA1, Backer M, Craig EV, Klein D, Warren RF. Am J Sports Med. 2002 Mar-Apr;30(2):257-60. Partial thickness bursal sided tears fail at a higher rate than articular sided tears. 2B tears (3-6 m deep, less than 50%) failed at 38% percent.

166. Surgical Treatment of Tears of the Rotator Cuff in Athletes. Tibone, Elrod, and Jobe et al. J Bone Joint Surg Am. 1986 Jul;68(6):887-91. 56% of Athletes return to same level of sport after open RCR.

Impingement

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Instability and Labral Pathology

211. Do Arthroscopic and Open Stabilization Techniques Restore Equivalent Stability to the Shoulder in the Setting of Anterior Glenohumeral Instability? A Systematic Review of Overlapping Meta-analyses. Chalmers PN, Mascarenhas R, Leroux T, Sayegh ET, Verma NN, Cole BJ, Romeo AA. *Arthroscopy.* 2015 Feb;31(2):355-363. No difference between arthroscopic and open stabilization for anterior instability.

220. Postoperative restoration of upper extremity motion and neuromuscular control during the overhand pitch: evaluation of tenodesis and repair for superior labral anterior-posterior tears. Chalmers PN, Trombley R, Cip J, Monson B, Forsythe B, Nicholson GP, Bush-Joseph CA, Cole BJ, Wimmer MA, Romeo AA, Verma NN. *Am J Sports Med.* 2014. Tenodesis restored the normal pattern of muscular activation better than SLAP repair.

233. Surgical Treatment of Symptomatic Superior Labrum Anterior-Posterior Tears in Patients Older Than 40 Years: A Systematic Review. Erickson J, Lavery K, Monica J, Gatt C, Dhawan A. *Am J Sports Med.* 2014 Jun 24. Patients > 40 and workers comp have worse outcomes; Biceps tenotomy or tenodesis better than SLAP repair in patients with cuff tear.

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323. Nonoperative treatment of primary anterior shoulder dislocation in patients forty years of age and younger. A prospective twenty-five-year follow-up. Hovelius L, Olofsson A, Sandström B, Augustini BG, Krantz L, Fredin H, Tillander B, Skoglund U, Salomonsson B, Nowak J, Sennerby U. J Bone Joint Surg Am. 2008 May;90(5):945-52. 60% of subjects re-dislocated a second time. Greater tuberosity fracture was associated with a better prognosis. 50% of subjects less than 25 years old required operative stabilization.

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Os Acromiale

478. Internal fixation of symptomatic os acromiale: a series of twenty-six cases. Peckett WR, Gunther SB, Harper GD, Hughes JS, Sonnabend DH. *J Shoulder Elbow Surg.* 2004 Jul-Aug;13(4):381-5. Results of tension band fixation.

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ELBOW

498. Ulnar collateral ligament injuries in the throwing athlete. Bruce JR, Andrews JR. *J Am Acad Orthop Surg.* 2014 May;22(5):315-25. Review of the anatomy, biomechanics, and treatment of UCL injuries.

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KNEE

Meniscal Pathology

554. Survival and reoperation rates after meniscal allograft transplantation: analysis of failures for 172 consecutive transplants at a minimum 2-year follow-up. McCormick F, Harris JD, Abrams GD, Hussey KE, Wilson H, Frank R, Gupta AK, Bach BR Jr, Cole BJ. Am J Sports Med. 2014 Apr;42(4):892-7. 32% reoperation rate with simple arthroscopic debridement being the most common surgical treatment. 95% allograft survival rate at 5 years.

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Anterior Cruciate Ligament

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Posterior Cruciate Ligament

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Posterolateral Corner

849. The posterolateral corner of the knee: repair versus reconstruction. Stannard JP, Brown SL, Farris RC, McGwin G Jr, Volgas DA. Am J Sports Med. 2005 Jun;33(6):881-8. High failure rate of posterolateral corner repair when compared to reconstruction.

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Major Daniel M. Veltri and Russell F. Warren, M.D.

Multiligament Knee Injuries

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Bruce A. Levy, Gregory C. Fanelli, Daniel B. Whelan, James P. Stannard, Peter A. MacDonald,
Joel L. Boyd, Robert G. Marx, Michael J. Stuart, and The Knee Dislocation Study Group
J Am Acad Orthop Surg. April 2009 ; 17:197-206.

MCL

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