



AO Sports Course— Principles of Sports Medicine: the Joint Is an Organ

K1.1: Suturing techniques Ao Ao Ao

Learning objective

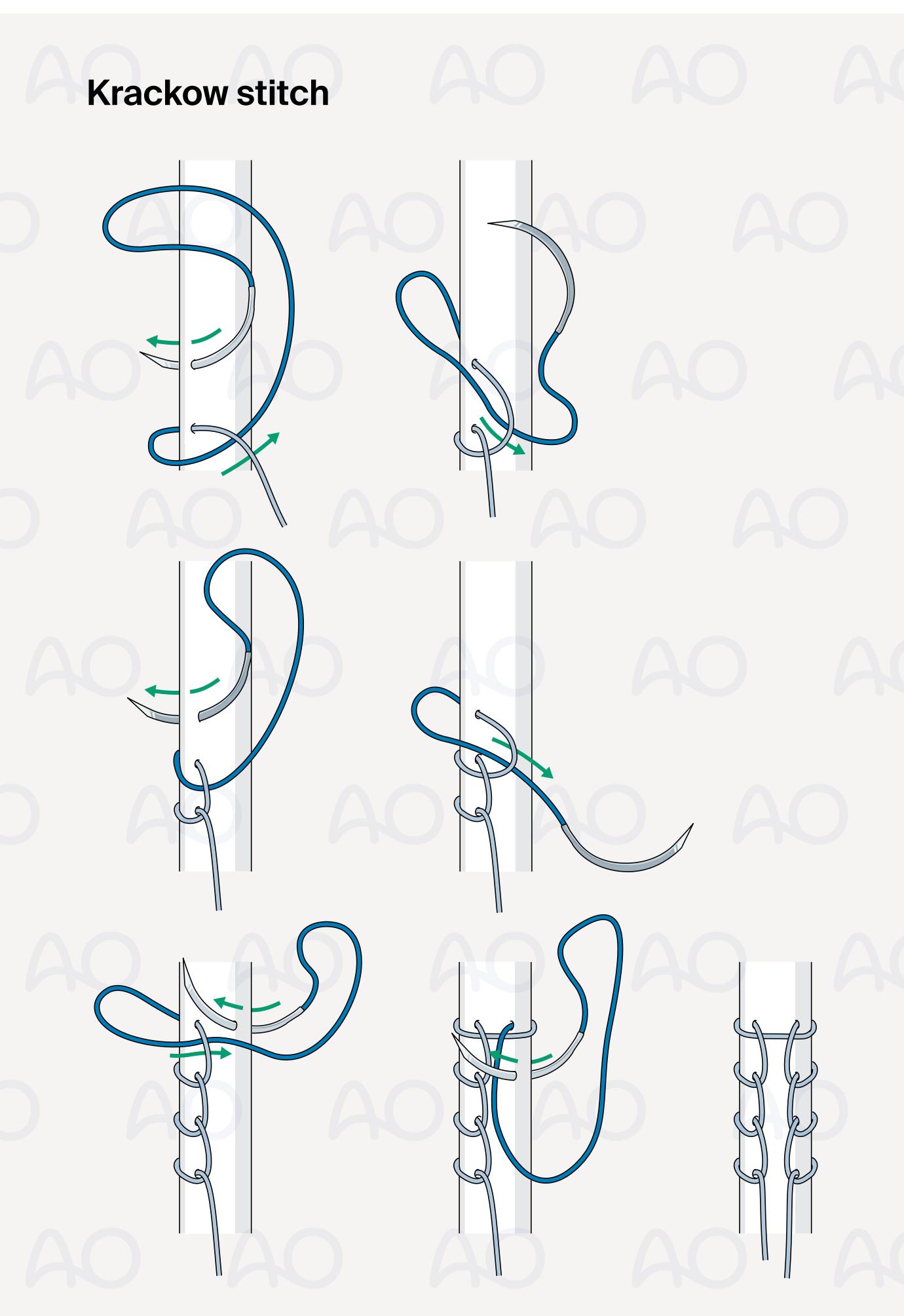
 Familiarize yourself with common sports medicine suturing techniques including the Krackow stitch and other whipstitch techniques

Task

 Practice the Krackow stitch and other whipstitch techniques using the graft preparation board as a graft holder

Take-home message

Whipstitch techniques, such as the Krackow stitch, are commonly used in sports medicine for a variety of applications including tendon repair and ligament reconstruction.



Whipstitch







Principles of Sports Medicine: the Joint Is an Organ

K1.2: Anterior cruciate ligament graft preparation

Learning objectives

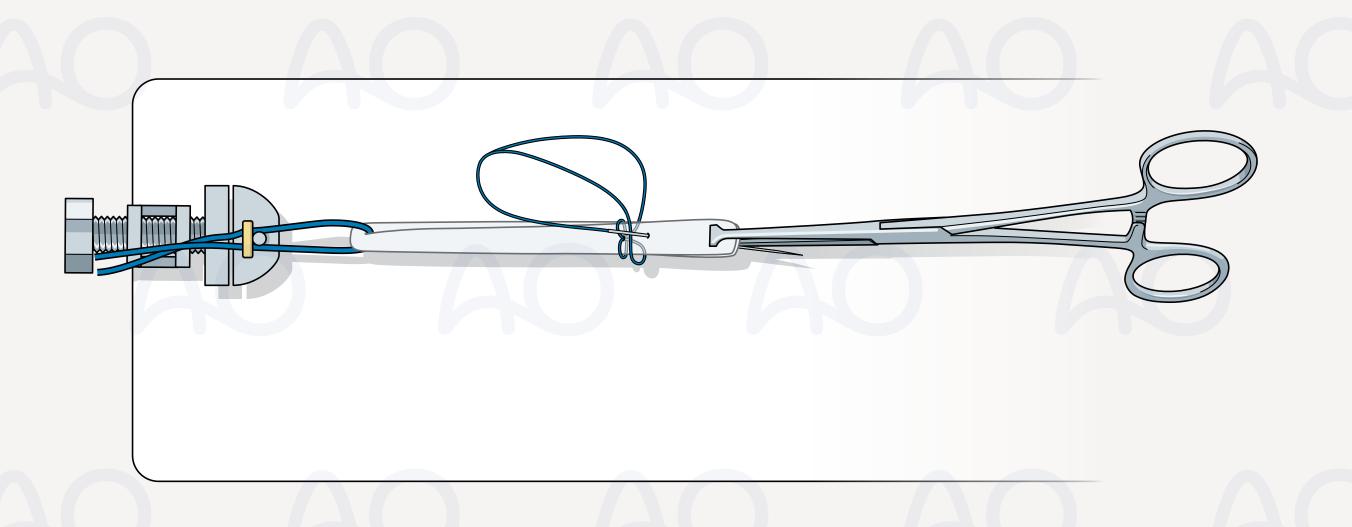
- Compare and contrast different options for anterior cruciate ligament (ACL) graft selection (ie, bone-to-bone (BTB), hamstring, quadriceps, and allograft)
- Familiarize yourself with common femoral and tibial options for ACL graft preparation

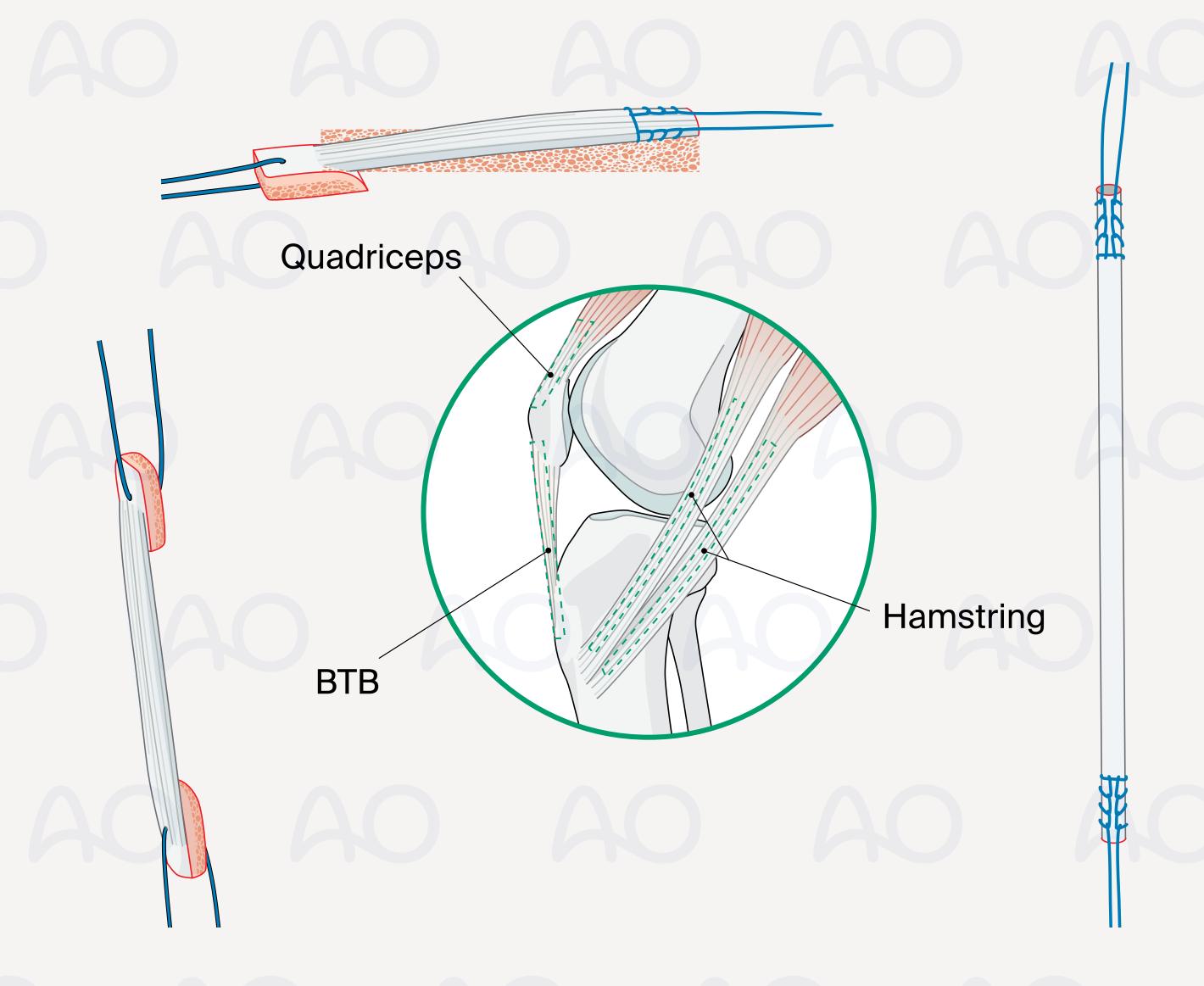
Tasks

- Prepare an ACL graft to use for ACL reconstruction
- Utilize suspensory button fixation on the femoral side and whipstitch technique on the tibial side for screw fixation
- Measure the femoral and tibial graft diameter and graft length
- Store your graft in the plastic bags provided and write your name on the bag

Take-home messages

- There are a variety of choices for ACL graft reconstruction (ie, autograft vs allograft, soft tissue vs bony fixation).
- Femoral and tibial graft preparation and fixation vary by graft type and surgeon preference (ie, suspensory cortical fixation, aperture screw fixation).
- There are pros and cons to each of the different graft choices and techniques.



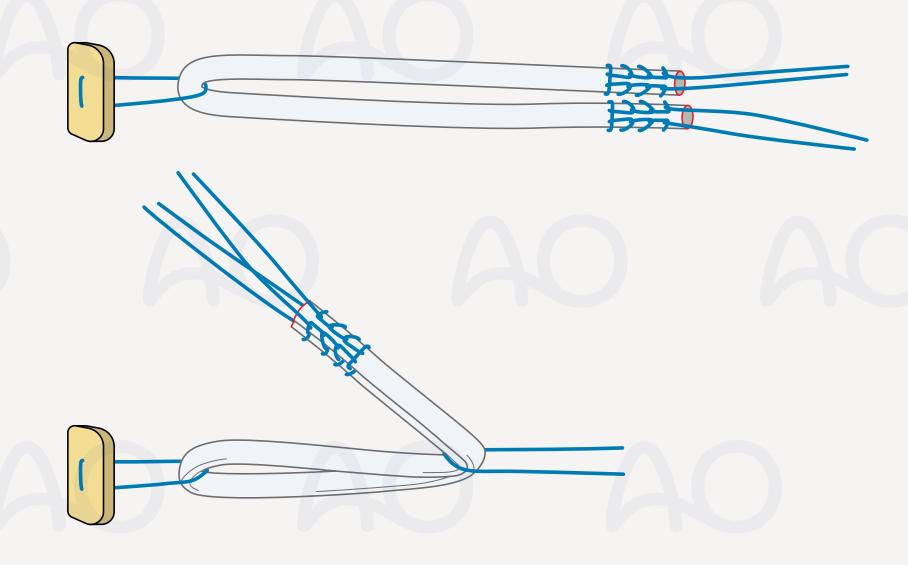


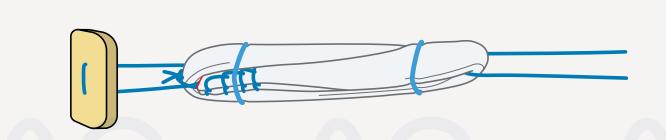
Allograft





Graft preparation









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K1.3: Arthroscopic skills training

Learning objectives

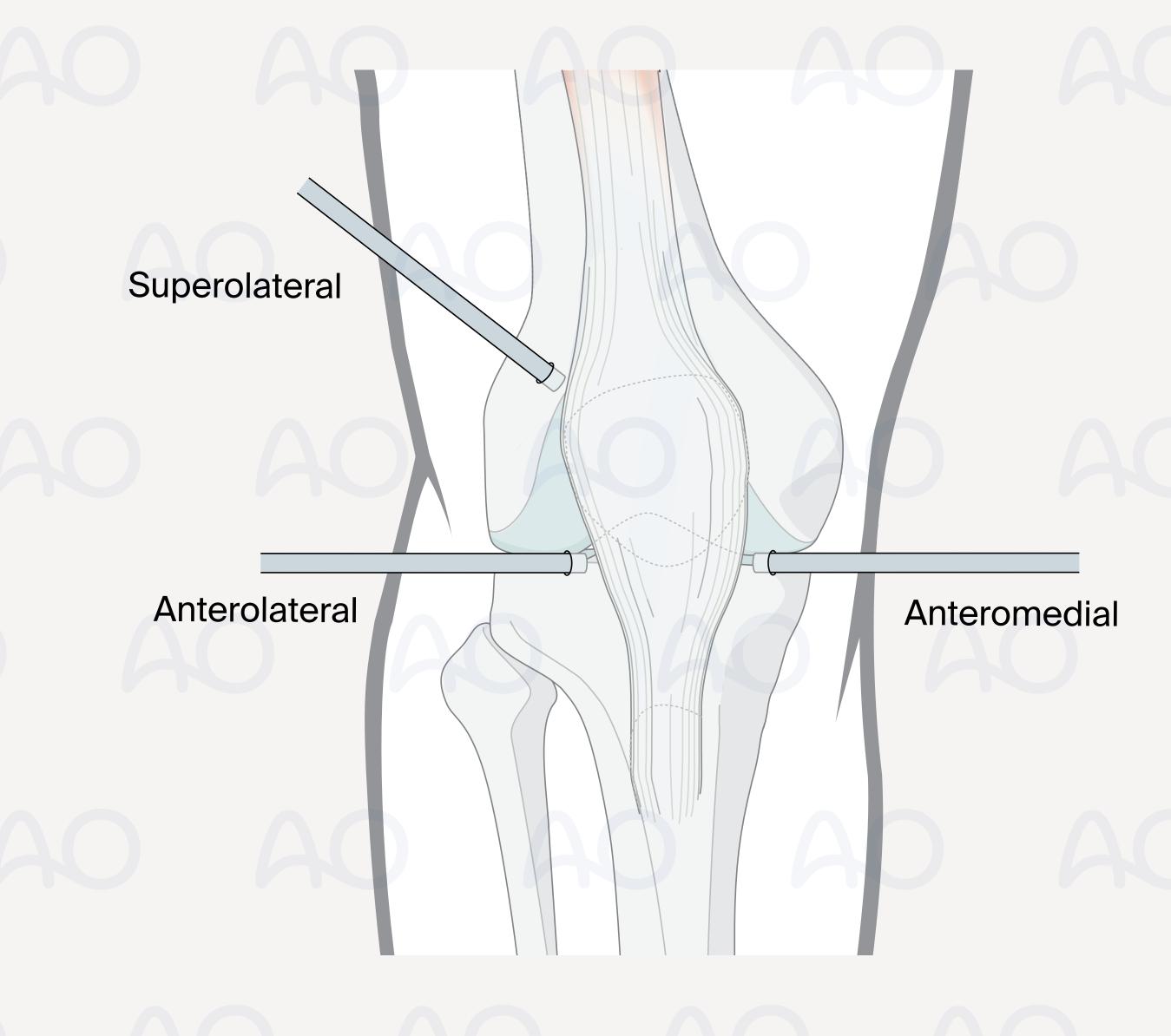
- Learn how to make common portals for knee arthroscopy
- Perform standard diagnostic arthroscopy of the knee joint
- Develop skillset in arthroscopic technique including triangulation and horizon control

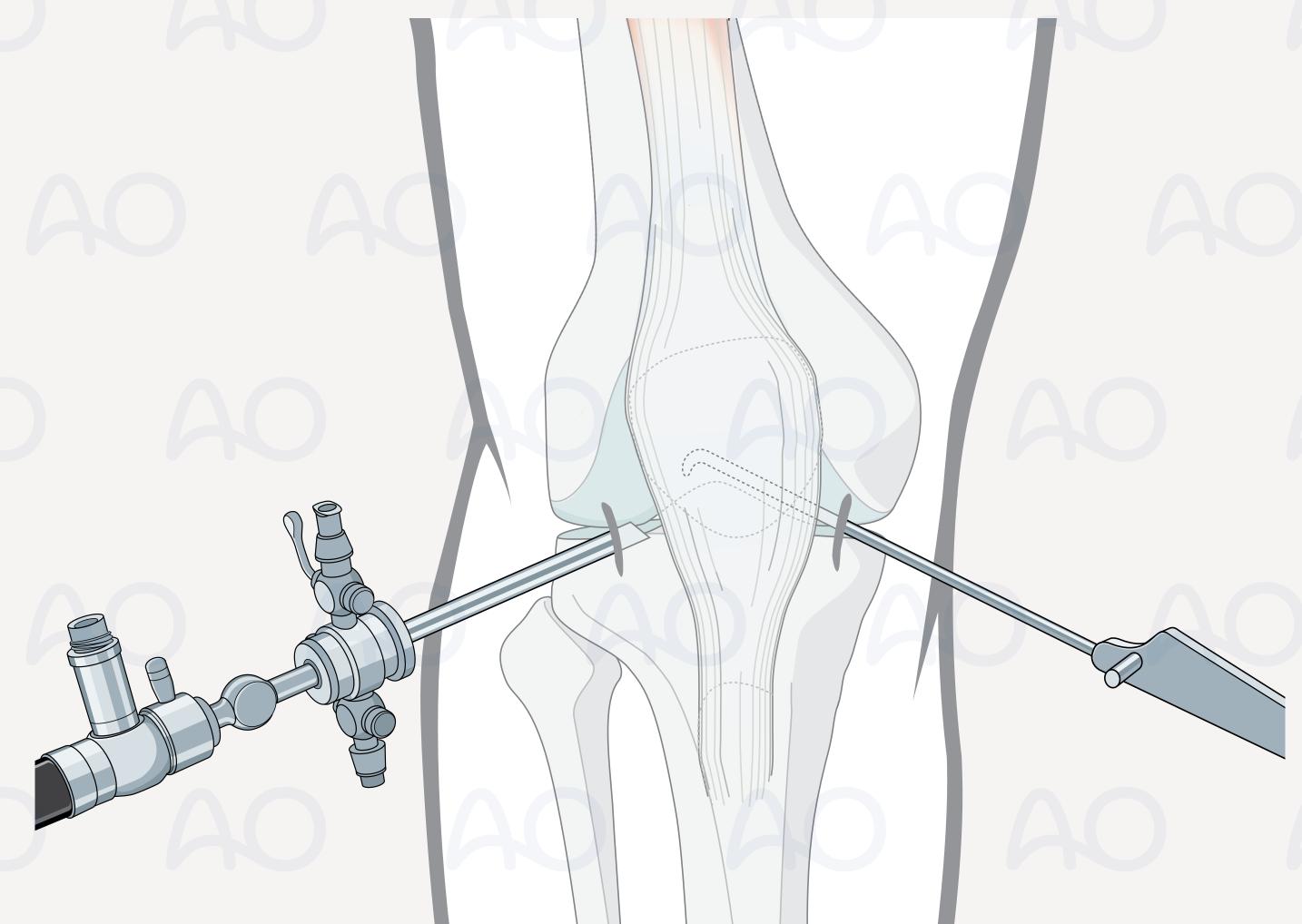
Tasks

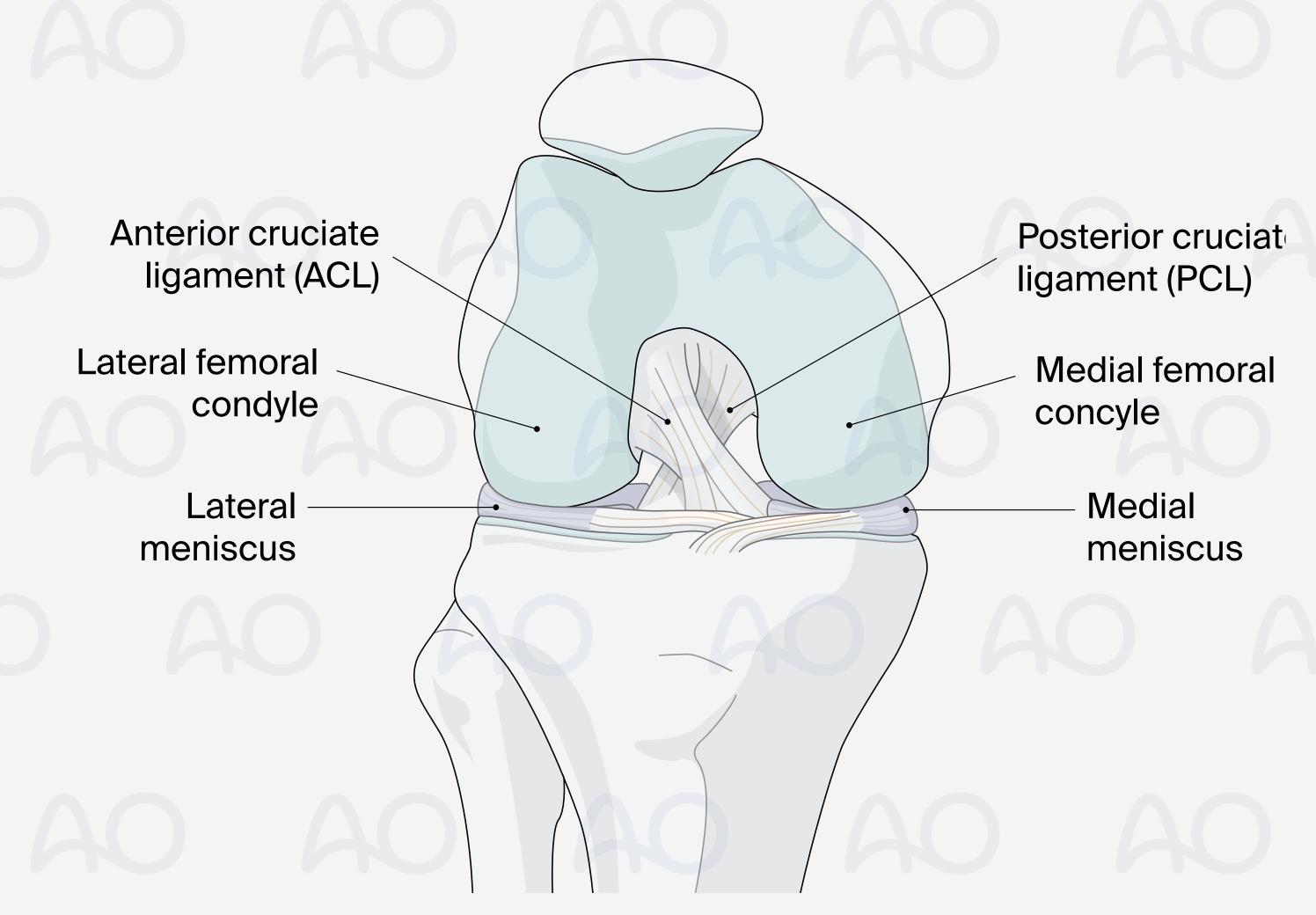
- Demarcate anatomical landmarks for arthroscopic portal placement
- Perform diagnostic arthroscopy of the knee joint identifying and palpating all critical structures
- Practice basic tasks in knee arthroscopy including probing and loose body removal
- Write your name on the skin sleeve. You will use the same sleeve for exercises on day 2

Take-home messages

- Diagnostic and therapeutic knee arthroscopy requires an understanding of surface and joint anatomy.
- Establishing proper portal placement is essential for successful knee arthroscopy.
- Triangulation and probing skills are critical tools for arthroscopic procedures.











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K2.1: Anterior cruciate ligament reconstruction

Learning objectives

- Identify the anatomical origin and insertion of the ACL footprint on the femur and tibia
- Learn different techniques for creation of tunnels and sockets for ACL reconstruction
- Explore a variety of fixation techniques for ACL reconstruction

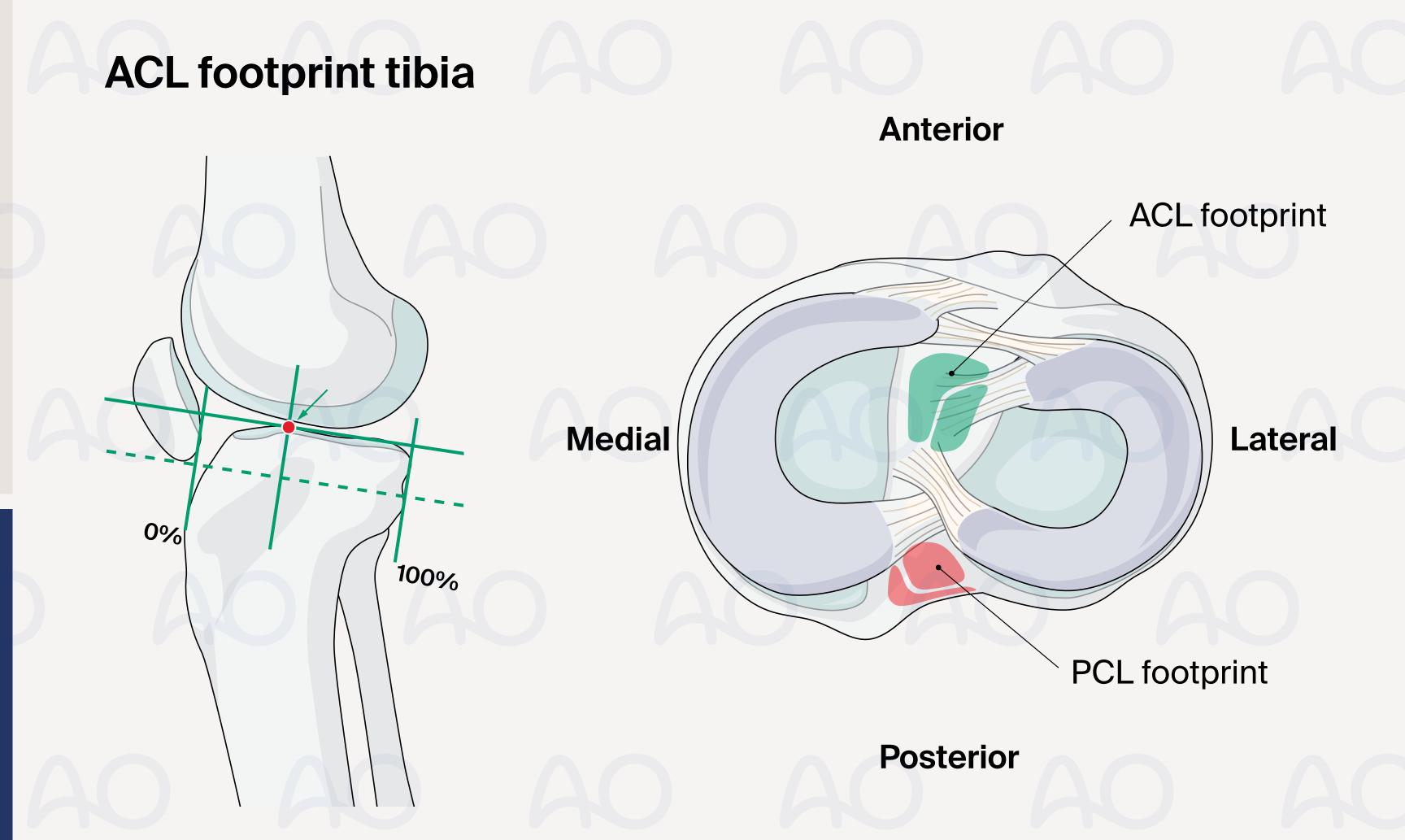
Tasks

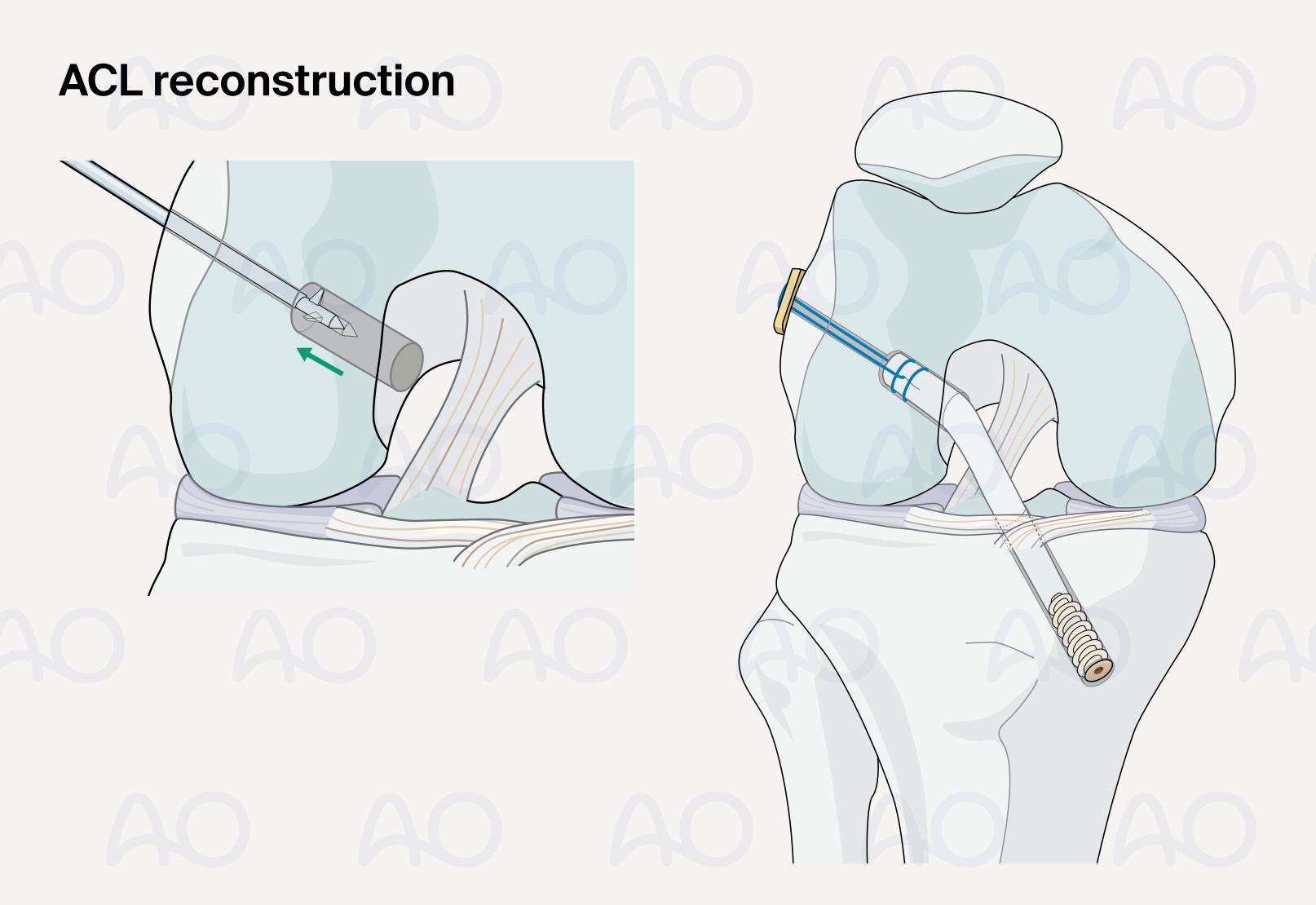
- Prepare the ACL femoral socket using a retrocutting device
- Prepare the tibial ACL tunnel using a cannulated reamer
- Fixate the ACL reconstruction using suspensory cortical fixation on the femur (suture button) and interference screw fixation on the tibia

Take-home messages

- Reconstruction of the ACL is one of the most common knee surgical procedures.
- Successful reconstruction requires an understanding of the surgical anatomy and fixation principles allowing for anatomical graft placement and biomechanical time zero strength.

ACL footprint tibia **Anterior** (high) **Distal Proximal** (shallow) (deep) Lateral intercondylar Blumensaat ridge line Lateral bifurcate ridge **Posterior** (low)









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K2.2: Meniscus repair Ao Ao Ao

Learning objectives

- Describe meniscal tear patterns based on tear location, configuration, and proximity to blood supply
- Learn indications and contraindications for meniscus repair
- Explore various types of meniscus repair options including all-inside, inside-out, outside-in, and root repair

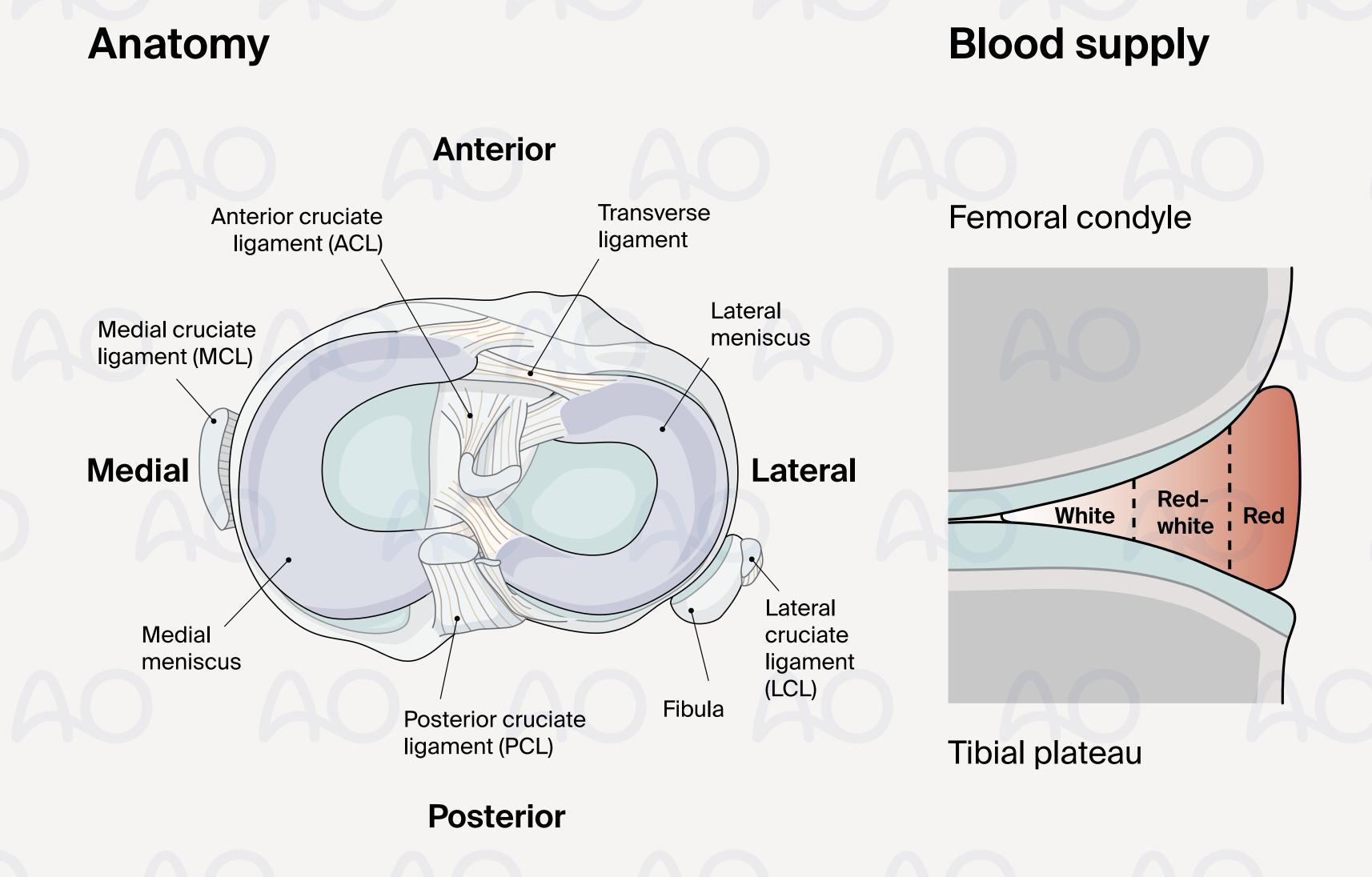
Tasks

- Perform the horizontal and vertical mattress all-inside meniscus repair
- Perform the inside-out meniscus repair and discuss safe zones for meniscal needle passage on medial and lateral side of the knee
- Perform the outside-in meniscus repair technique

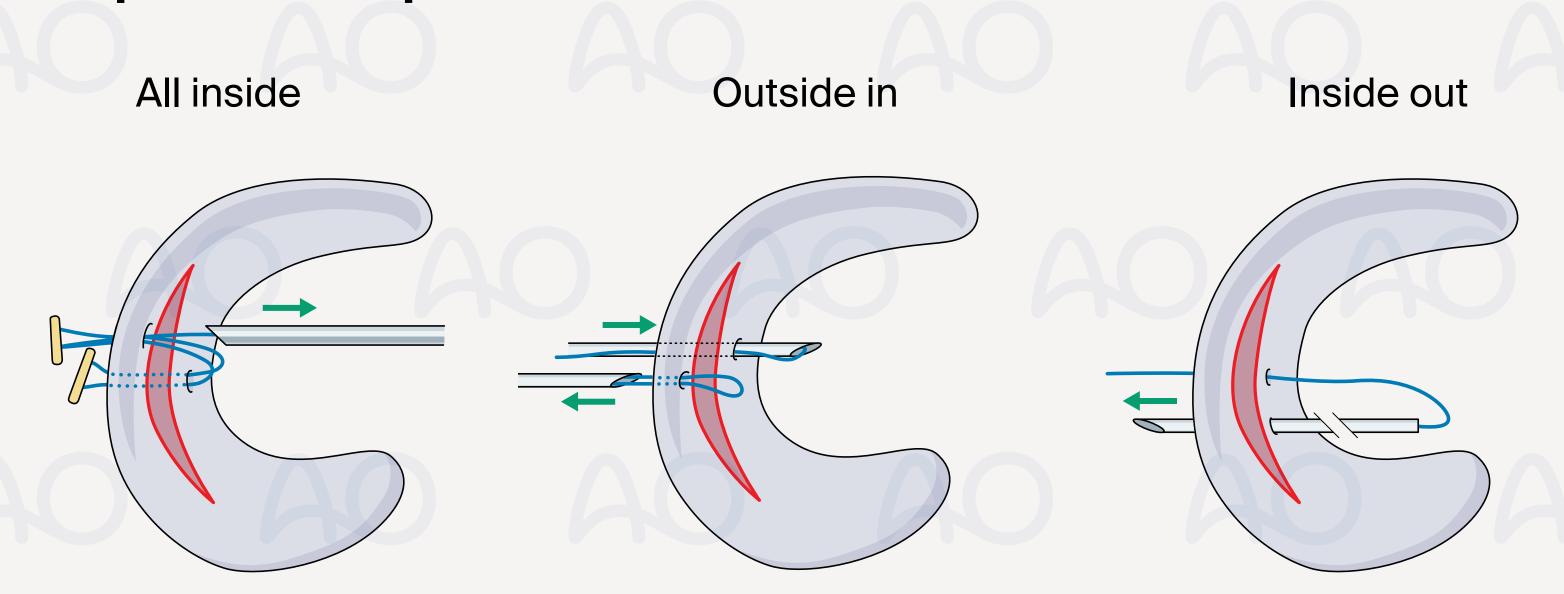
Take-home messages

- The medial and lateral meniscus play important roles in the knee joint and should be preserved whenever possible.
- There is a variety of surgical techniques and fixation strategies that are utilized for meniscus repair.

Tear patterns Vertical longitudinal Radial tear Horizontal cleavage tear Bucket handle tear Oblique parrot beak flap tear



Repair techniques







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K2.3: Knee arthroscopic meniscal procedures

Learning objectives

- Learn how to systematically evaluate for meniscus tears in an arthroscopic model
- Review the indications for meniscus repair versus meniscectomy based on tear characteristics
- Explore techniques for meniscectomy and meniscus repair including all-inside, outside-in, and root repair

Tasks

- Practice techniques to improve meniscus visualization including trephination
- Practice techniques for partial medial and lateral meniscectomy using biters and shavers
- Perform all-inside and outside-in meniscus repair in an arthroscopic setting. Perform meniscus root repair (optional)

Take-home messages

- While meniscus preservation should be attempted whenever possible, surgeons must be facile in techniques for partial meniscectomy.
- Surgeons should have a variety of techniques available for meniscus repair. Choice of repair strategy is based on tear pattern, location, tissue quality, and

