



THE UNIVERSITY OF TOLEDO MEDICAL CENTER

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Osgood Schlatter Disease

An apophysis is found where major tendons and ligaments attach to bone. The tibial tubercle is an apophysis and is an insertion for the patellar tendon. The tibial tubercle apophysis is a secondary ossification center. It is not part of the knee joint and it is subjected to traction stress.

TIBIAL TUBERCLE OSSIFICATION

- Below 11 years of age the tibial tubercle is cartilaginous.
- Between 11-14 years of age the apophysis is formed.
- Between 14-18 years of age the apophysis fuses with the tibial epiphysis.
- More than 18 years of age the epiphysis and apophysis fuses with the rest of the tibia.

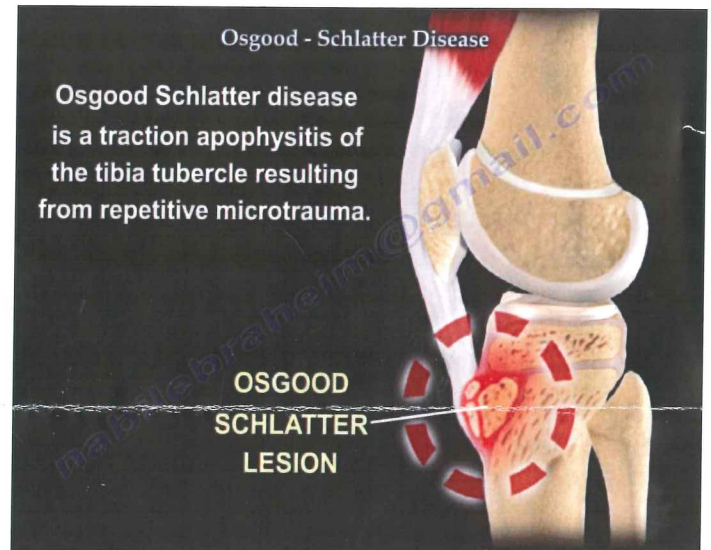
Osgood Schlatter disease is a traction apophysitis of the tibia tubercle resulting from repetitive microtrauma. It is an overuse syndrome that results in inflammation of the insertion of the patellar tendon on the tibial tubercle. Osgood Schlatter disease is more common in boys between the ages of 12 to 15 years. The condition is less common in girls and it occurs between the ages of 8-12 years in girls. It is bilateral in about 20% of the cases.

RISK FACTORS

Sports aggravate the condition like in jumpers, soccer, and sprinters

PRESENTATION

- Pain, swelling, and tenderness localized over the tubercle on the anterior aspect of the knee.
- Tibial tubercle may appear enlarged.
- The pain is increased with physical activity and sports.
- If unilateral rule out infection.
- Trauma.
- Tumor.
- Check lateral x-ray for fragmentation and irregularity of the tibial tubercle.



PROGNOSIS

- It is a self-limiting disease.
- It occurs with increased demand on the immature skeleton.
- It is resolved when the patient stops growing.

TREATMENT

- Reduction of activity until it heals.
- Short period of limited activity may be sufficient.
- Knee immobilizer, physiotherapy, hamstring stretching.
- Do not inject or use steroids! It may cause fatty necrosis; necrosis and disfigurement of the skin.
- The condition may become chronic and cause residual pain, swelling and joint tenderness.
- X-ray.
- Separate ossicle over the tubercle (operation of the painful ossicle may be needed).

Service Recovery in Healthcare

Service recovery refers to the positive actions taken by a service provider in response to a service failure. It is important to learn excellent service recovery steps in order to deal with disappointed patients.

Service failure can occur even in the best organizations. If you are providing a service, some failure of that service is inevitable. Service failure occurs when the performance falls below the patient's expectations. This will influence the patient's loyalty and the patient's satisfaction.

All patients are not the same! Circumstances are not the same and the patient's expectations are not the same. The entire process is heterogeneous and subjective. It is not the quality of the care provided; it is the satisfaction of the patient that is lacking. Avoiding and minimizing the consequences of that failure is important!

Thirty per cent of new patients could come from former patients. We need to learn from recovery experiences and lost patients. Improve and refine your process. A well designed, well documented service recovery strategy shared by your entire system will help in improvement efforts for providing excellent service.

Organizations that encourage and track patient complaints have an opportunity to implement a real process for improvement which keeps the patient happy.

1. Make the Service Fail-Safe!

Do it right the first time. This is the most important step of service recovery. It indicates and presents elegance of service quality and the highest level of a genuine authentic service. It holds the highest standard of service to the patient without excuses or blame, with zero tolerance for affecting the wishes of the patient to have outstanding service.

Make sure the patient is happy, comfortable, and attracted to your system. If you do not make the system fail-safe, the employee and organization will be demoralized by the continuation of failures that occur. Making the same mistakes and continuing the same failures is detrimental to the system. You can't keep making the same mistakes over and over again and expect a different result.

2. Track and Encourage Complaints

A large number of patients may experience difficulty during the health care delivery, however, they do not complain. Track and encourage complaints for improvement and act quickly. Nobody likes complaints or negative comments, however complaints are a road map to show us if the service is on track.

When performance falls below patient expectation it is the time to listen and act! These patients may switch to another provider or to another hospital. If you encourage the patient to complain, it will be healthy for your organization because you will learn from the patient's complaint.

3. Act quickly by listening first

Listen first and treat patients properly! The patient wants a response and they don't want to be shuffled from one employee to another, one layer to another layer, or from agency to agency.

ADVICE

Be a patient advocate!

Think for yourself.

Never assume anything and check the facts.

Don't be a box checker, think outside the box!

Be innovative and embrace change.



Act human and treat the patient as human. When a crisis occurs, the patient will treat you as a neighbor if you are doing your best when the circumstances are beyond your control, especially if you accept responsibility.

When answering the phone, make sure the caller is satisfied...no matter what! Be sure to close the loop!

The solution of the problem may take multiple steps; however, you may want to cut that vicious cycle by acknowledging the patient's complaint and tell the patient that we are going to act quickly. Tell the patient that you are committed to fixing the problem! Time is important to the patient. Do not use policy as a shield and do not put up roadblocks! Tell the patient why the service failed! They will understand, appreciate, and forgive if you give them a logical, believable and adequate explanation.

4. Treat the patient fairly

The patient could rate the service bad, even if the service recovery is done perfectly. The patient will want justice in the procedure, the interaction and in the outcome.

The patient will want justice in the procedure which means:

The procedure should be done quickly.

It should be convenient for the patient.

There should be a follow-up.

The patient will want justice in the interaction which means:

- "You will need to do this."

- "You will have to do this."

- "I do not support this."

Instead, use words like this:

- "I would like to ask you to consider."

- "I think the best solution for us is."

- "Here is what I can do for you."

Improve and cultivate a relationship with the patient.

-A stronger relationship with the patient will allow the patient to be more forgiving.

-It is a buffer when failures occur.

-It restores their confidence and trust.

The patient has diverse values and preferences that vary from day to day and from circumstance to circumstance. Do not quarrel with the patient! The temptation is to quarrel with the patient, but instead realize that listening to the patient is a small fortune that you need to protect. Let the patient vent! Let the patient get it out and do not rush to answer. Maintain eye contact and healthy body language with the patient.

Ask open-ended questions and consider the patient's emotions. Explain to the patient that you are committed to making things right. Hit the pause button and fix the problem! If you are wrong, roll out the red carpet and hope it will work. Even if you are not wrong, fix the situation and look like a hero.

If you do a lot of service, you will have failures. Effective complaint handling and crisis intervention is important. Do not posture or deny! Take the responsibility with a smile!

Here is a way that may solve the problem:

Listen, acknowledge, apologize, and express disappointment that the system did not meet the expectations of the patient.

You should ask questions and acknowledge the patient's unhappiness with the service and then express disappointment to the patient. You should work with the patient and offer solutions to the problem. NO excuses, NO blame and show the patient that you are committed to making things right; then act quickly and find the solution. Effective complaint handling creates patient loyalty and satisfaction.

Service Recovery Paradoxical Effect

A patient with an initial service failure that experiences a high level of service recovery will have more loyalty and satisfaction.

Service failure can occur at any point of the patient care delivery. Anyone involved in patient care can cause or contribute to a service failure. Training in the concept of service recovery is necessary...It is important to ask questions like: What happened? Why did it happen? What can I do to prevent it from happening again?

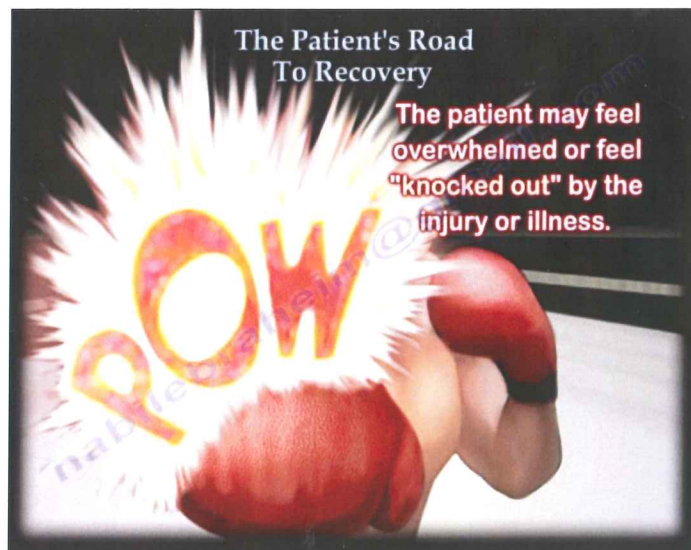
ADVICE

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Patient's Road to Recovery in Healthcare

Overcoming injury or illness can sometimes be a challenge for the patient. It can become discouraging to the patient when setbacks in their recovery are discovered or if full recovery is not happening quickly enough. The patient may feel overwhelmed or feel "knocked out" by the injury or illness. Sometime these patients may require psychological support or aid from a social worker in order to help them get back on their feet again. The path to recovery can often feel much like a palm tree being blown by a hurricane.

Overcoming the effect of bad health or injury can be a long process. Often the best things for patient recovery are to surround themselves with friends, family and trust in their faith. Focus on positive ways to overcome an injury or illness with determination to get back to yourself again. Difficult times during the path to recovery are only temporary setbacks. A nasty wind may sometimes be blowing in your life, but eventually things turn around. Just like the palm tree, you can always bounce back when you hold on to your faith in the recovery process. As a patient, you may get knocked down, but not knocked out!





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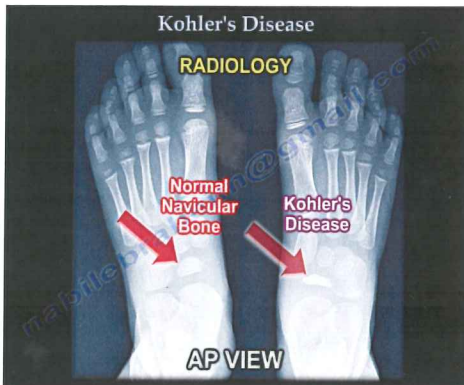
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KOHLER'S DISEASE

See Dr. Nabil Ebraheim's YouTube video on Kohler's Disease:

Everything You Need To Know - Dr. Nabil Ebraheim: <http://t.co/pEcEIHDGak> via @YouTube



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