

“Whether shoulder, ankle or knee injury – most athletes who receive good care and rehabilitation are able to return to competition.”

Getting athletes safely back in the game.

Written by Board Certified Orthopedic Surgeon
Brent Adams, MD, ABOS



First, the good news! Fall athletics have returned! Now, the bad news: Unfortunately, with them comes injury. Below is a summary of three of the most common injuries that we see in our clinic and the treatment for them.

SHOULDER SEPARATION VS. SHOULD DISLOCATION

Many different injuries can happen to the shoulder region as a result of an athletic injury. One of the more common injuries is a shoulder separation, which is often confused with a shoulder dislocation. A shoulder separation is an injury to the acromioclavicular joint or the joint that joins the collarbone to the shoulder blade or scapula. This injury can often be treated with non-operative management usually consisting of rest and physical therapy. A shoulder dislocation is a much different injury and can require sedation to have the joint reduced or put back in place. Often, the result of a shoulder dislocation is a labral tear. This is a tear to the tissue around the socket of the joint and can make an athlete more susceptible to future dislocation. A labral tear can be fixed surgically, but is often

managed with physical therapy and bracing during the season.

ANKLE INJURIES

Ankle injuries are very common in fall athletic activities such as basketball, football, soccer and volleyball. The most common injury is an ankle sprain. There are ligaments on the lateral side of the ankle that provide most of the stability to the ankle. Most of the time, ankle sprains are managed conservatively with rest, ice

and elevation. However, a simple ankle sprain can mask a more serious injury such as an injury to the cartilage in the joint. Therefore all severe ankle sprains should have a low threshold for obtaining radiographs of the ankle. Other injuries to the foot ankle may also be discovered with an x-ray that may otherwise be missed. Physical therapy following an ankle sprain can also be instrumental in avoiding future ankle sprains and should



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be strongly considered with all ankle sprains.

KNEE INJURIES

Knee injuries are very common in fall sports. Specifically, football and soccer are common sports for injuries to the knee because of the cutting and stopping that is required in these activities. The most infamous injury to the knee is an ACL injury otherwise known as anterior cruciate ligament injury. The ACL is one of the four major ligaments in the knee. ACL injuries typically occur when there is

a twisting maneuver and/or a lateral blow to the knee. Examples of this include a football player who has another player fall on the outside of his knee, or someone who slips on the ice and twists his or her knee. Typically there is a sensation of a “pop” in the knee and significant swelling follows. An ACL deficient knee is unstable, and an athlete will be unable to “make a cut” on the knee without it giving way. The only way to return successfully to competitive athletics is to have a surgical reconstruction of the ACL, which is done arthroscopically,

rather than “open knee” surgery. This is a straightforward operation done with a scope, and with a successful surgery and disciplined physical therapy the athlete should be able to return to competition in 6 months.

Whether shoulder, ankle or knee injury – most athletes who receive good care and rehabilitation are able to return to competition. Our orthopedic team at the Yankton Medical Clinic, P.C. is here to help you get back on the field as safely, and as soon as possible.

For more information or to schedule an appointment please call 605-665-1722.