Pre-Wrap - Announcements:

Upcoming Home Varsity Sports:
Men's Basketball: Wednesday November 30 at 7 pm vs Rutgers (Fighting HR Powells)

FINAL FALL CLINICAL EVALUATIONS!

Preceptors:
You will receive an email from Qualtrics Survey System today with the Final Clinical Evaluation of your student(s). Your individual link will be in that email. It is the students responsibility to arrange a meeting time with you this week or next week to meet with you to review and complete their final clinical evaluation. All evaluations are due by Friday December 9.

Students:
You will receive an email from Qualtrics Survey System today with your Clinical Site and Preceptor Evaluation. Your individual link will be in that email. Please complete the clinical site and preceptor evaluation prior to meeting with your preceptor to review your individual final clinical evaluation. All evaluations are due by December 9.

Final Exams Schedule:
Final exams begin on Thursday December 8 and conclude on Wednesday December 14. Wednesday December 7 is a reading day. No university sponsored meetings with students should be scheduled on reading days.

Student Clinical Binders:
Students’ final binders are due to Mr. Tatman’s office in Max Orozvit no later than 5 pm on Friday December 9.

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**Weekly Clinical Pearl:**

**Humeral Torsion and its relationship to Upper Extremity injury in overhead athletes (baseball)**

Humeral Torsion as a Risk Factor for Shoulder and Elbow Injury in Professional Baseball Pitchers

http://ajs.sagepub.com/content/44/9/2214.full.pdf+html

Numerous studies have demonstrated that humeral retrotorsion is increased in the dominant arms of throwing athletes. No study has clearly defined the relationship between humeral retrotorsion and shoulder and elbow injury.

Humeral Torsion (HT) was assessed using indirect ultrasonographic techniques and was measured prospectively in 255 pitchers. During the course of the study, 60 arm (30 shoulder; 30 elbow) injuries were observed.

The results of this study show a contrast in dominant humeral retrotorsion between pitchers who suffered shoulder and elbow injuries compared with those without an injury. Pitchers who sustained shoulder injuries had less dominant humeral retrotorsion compared with non-injured pitchers. In contrast, pitchers who sustained time-loss elbow injuries displayed increased humeral retrotorsion compared with non-injured pitchers. Together, these results suggest that increased adaptive humeral retrotorsion is protective against shoulder injuries but a harmful contributor for elbow injuries in professional pitchers.

This is the first study to show differing injury risk profiles for shoulder and elbow injury.

**Clinical Take Home:** Given the access to ultrasonographic measurement of humeral torsion, overhead athletes (pitchers) who display increased dominant arm humeral torsion (beyond normal adaptations) should be enrolled in an elbow injury prevention program and closely monitored for elbow injuries. In contrast, those with decreased dominant humeral torsion should be placed in a shoulder mobility programs to prevent shoulder injury including secondary impingement.


**AT Weekly Trivia:**

**For Senior Students:** While protein and carbs provide 4 cal/g, fat provides what ratio of fat calories/gram?

**For Junior Students:** Ecchymosis around what bony prominence is indicative of basilar skull fracture?

**For the inquisitive preceptor:** In high doses, this classification of drugs can cause CNS and respiratory depression that can lead to respiratory and cardiac arrest.

**Last Week’s Answers:**

**Hyphema** is pooling of blood in the anterior chamber of the eye;  
The **Iliacus** muscle originates on the upper iliac crest (anterior portion) and inserts into the lesser trochanter of the femur? (Bonus: The iliacus primary movement is hip flexion and his ER, it also completes trunk flexion on a fixed femur, it is innervated by the Femoral nerve);  
The **Eustachian Tube** is horizontal and shorter at birth and becomes more vertical and lengthens as a patient ages (Which causes increased incidence of middle ear infections in the adolescent population.)