



# *Orthopedic* **JOURNAL**

2013 Volume 1

OCEAN

*Orthopedic*  
ASSOCIATES



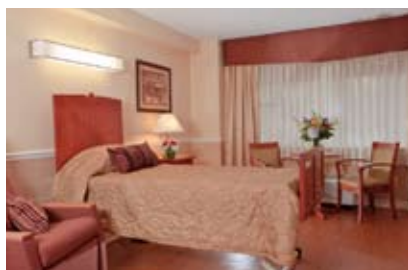


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Angie's list.



# OCEAN

# Orthopedic ASSOCIATES

## Welcome

Welcome to the first edition of Ocean Orthopedic Journal, a magazine to introduce Ocean Orthopedic Associates to our community. We would like to take this opportunity for our patients to get to know us better. Ocean Orthopedic Associates is a collection of talented, highly trained Orthopedic Surgeons and staff dedicated to serving Ocean County and beyond. Ocean Orthopedic Associates was founded in 1969 by some of the original Orthopedic Surgeons to practice in Ocean County and their commitment to excellence and dedication to orthopedic care continues today.

Our Orthopedic Surgeons are Board-Certified by the American Academy of Orthopedic Surgeons specializing in sports medicine, total joint replacement, spine surgery, pain management and adult reconstructive surgery. Our goal is to provide a comprehensive team approach in order to offer patients a continuum of care from general orthopedics and fracture care to highly specialized spine and joint reconstruction.

Our services include digital x-ray technology, open MRI, physical therapy, canes, crutches, braces and other medical equipment, pain management including radiofrequency ablation, advanced fluoroscopic imaging and ultrasound. Ocean Orthopedic Associates team includes nine orthopedic surgeons, four physician assistants, five physical therapists, an on staff radiologist, and a highly trained staff of medical assistants, nurses, radiology technicians, surgical technicians, case managers, surgical coordinators, paralegals, certified coders and various administrative personnel. Our nursing staff is outstanding, including certifications in advanced cardiac life support (ACLS) and pediatric advanced life support (PALS). We are proudly Joint Commission Accredited and NJ ambulatory care facility licensed, here for you, focused on providing the very best customer service. I hope you enjoy our Orthopedic Journal. Please share this with friends and family. We thank you for the opportunity to provide comprehensive orthopedic care to our community.

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Warmest Regards,

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Executive Director

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Karl R. Blum, M.D.	John A. Petrillo, M.D.
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Sripad H. Dhawlikar, M.D.	Christopher Passariello, M.D.
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Mary Grace Roldan, BSPT	Geraldine Retuya, BSPT
Sheila Faith Pesta, BSPT	



# LumbarSpine Conditions

- [Update on State of the Art Minimally Invasive Treatments](#) Justin P. Kubeck, M.D.

Spinal conditions, especially in the lower back or lumbar spine are extremely common. Most people, at some point in their lives have had an episode of severe back pain. These episodes of back pain can be associated with sciatica or the medical term, radiculopathy. With a radiculopathy a specific nerve leaving from the spine becomes inflamed and painful. The pain from a radiculopathy typically originated from a general area in the lower back and radiated down the thigh and leg. This description of pain is characteristic of a lumbar spine problem.

Several conditions of lumbar spine can lead to sciatica or radiculopathy. Two of the most common include a lumbar disc herniation and lumbar spinal stenosis.

## Lumbar Disc Herniation

The spinal column consists of boney elements and intervertebral discs. The front part of the spine is the vertebral body. Each vertebral body is separated by the intervertebral disc. Because we are the only creatures on earth that spends the most time upright, humans are particularly susceptible to degenerative changes in the spine as we age. The intervertebral discs can be prone to injury and herniation. With disc injury and herniation the inner part of the disc can come in contact with and irritate the nerve roots. The nerve roots leaving the spine are susceptible to this irritation. This causes the sciatica or radiculopathy. Most often this can be managed non-operatively with pain medicine, anti-inflammatory medication, and muscle relaxants. Severe or disabling leg pain or weakness can be successfully treated with surgery. Surgery for disc herniation today are done with a minimally invasive technique through an incision less than 1 inch long. Patients are typically discharged home the same day.

Lumbar disc herniation, typically occur in people of working age 20-50. As we age the spine can tend to become arthritic, stiffer and generally not susceptible to disc herniations. With aging, the intervertebral disc tends to degenerate and collapse. At the same time the lumbar facets joints can become arthritic and enlarge. Also occurring is the thickening of the yellow ligament or the ligamentum flavum. The triple hit can cause encroachment on the spinal canal and the symptoms of the lumbar spinal stenosis.

## Lumbar Spinal Stenosis

Patients with lumbar spinal stenosis are typically 60+ years old. They describe a characteristic history of leg pain, numbness, burning or heaviness that develops when they ambulate. This discomfort can significantly limit the distance they can walk. Patients typically find themselves leaning forward or sitting down to relieve this leg pain.





Today there are many treatments available for lumbar spinal stenosis. As with most spinal conditions, treatment at first is non-operative involving physical therapy, and medication. Treatment can also include epidural injections. These epidural injections are tailored for each individual patient's condition. The injections aid in both confirming the diagnosis as well as decreasing the inflammatory component and pain associated with lumbar spinal stenosis.

After some time, epidurals typically run their course and give limited utility. At this point surgery may be an option. Surgery for lumbar spinal stenosis can lead to a predictable improvement in thigh and leg complaints.

**Fortunately, most spine problems do not require surgery and can be managed with medications and physical therapy.**



Fortunately, most spine problems do not require surgery and can be managed with medications and physical therapy. At Ocean Orthopedic Associates we are experts in managing acute attacks of this type of pain. We also have a state of the art facility that allows us to offer and coordinate out care with our own physical therapy department. We can aid in expediting your evaluation with or fully digital x-rays as well as our own open MRI. This allows for us to establish a diagnosis and begin treatment in an expeditious manner, providing better patient care.





# BUILDING ON SUCCESS

AWARDED ACCREDITATION FROM THE JOINT COMMISSION

Toms River, NJ, December 2011 – Ocean Orthopedic has earned The Joint Commission's Gold Seal of Approval™ for accreditation by demonstrating compliance with The Joint Commission's national standards for health care quality and safety in ambulatory care organizations. The accreditation award recognizes Ocean Orthopedic Associates' dedication to continuous compliance with The Joint Commission's state-of-the-art standards.

Ocean Orthopedic underwent a rigorous unannounced on-site survey in October, 2011. A team of Joint Commission expert surveyors evaluated Ocean Orthopedic for compliance with standards of care specific to the needs of patients, including infection prevention and control, leadership and medication management.

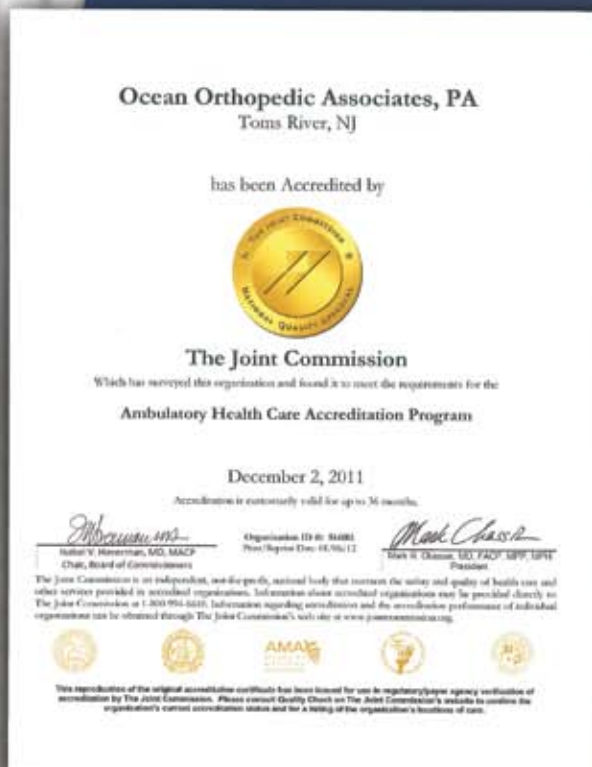
Since 1975, The Joint Commission has developed state-of-the-art standards for outpatient ambulatory care organizations. Nearly 1,900 freestanding ambulatory care organizations maintain Joint Commission accreditation.

"Organizations that strive for accreditation in ambulatory care from The Joint Commission are demonstrating the highest commitment to quality and safety to their patients, staff and their community," says Michael Kulczycki, executive director, Ambulatory Care Accreditation Program, The Joint Commission. "I commend Ocean Orthopedic for successfully achieving this pinnacle and for its dedication to continually improving patient care."

"We recognize Joint Commission accreditation as the Gold Seal for providing safe, high quality patient care. Achieving accreditation from The Joint Commission is a team effort that will bring confidence to our patients and give us a framework to provide the best care possible," says Alex Sturzebecher, MBA, Administrator. "Our staff put their hearts and minds into achieving this prestigious award."

The Joint Commission's ambulatory care standards address important functions relating to the care of patients and the management of an ambulatory care organization. The standards are developed in consultation with health care experts, providers, measurement experts and patients.

Founded in 1951, The Joint Commission seeks to continuously improve health care for the public, in collaboration with other stakeholders, by evaluating health care organizations and inspiring them to excel in providing safe and effective care of the highest quality and value. The Joint Commission evaluates and accredits more than 19,000 health care organizations and programs in the United States, including more than 10,300 hospitals and home care organizations, and more than 6,500 other health care organizations that provide long term care, behavioral health care, laboratory and ambulatory care services. The Joint Commission currently certifies more than 2,000 disease-specific care programs, focused on the care of patients with chronic illnesses such as stroke, joint replacement, stroke rehabilitation, heart failure and many others. The Joint Commission also provides health care staffing services certification for more than 750 staffing offices. An independent, not-for-profit organization, The Joint Commission is the nation's oldest and largest standards-setting and accrediting body in health care. Learn more about The Joint Commission at [www.jointcommission.org](http://www.jointcommission.org).







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# OCEAN *Orthopedic* ASSOCIATES

# Services

Ocean Orthopedic Associates is proud to be affiliated with Community Medical Center! You don't have to go far to find the # 1 Orthopedic Program in New Jersey. Community Medical Center hospital in Ocean County has earned the Joint Commission's Gold Seal of approval for Joint Replacement. At Community Medical Center, we believe the people deserve the highest quality orthopedic care. And according to Health Grades, the premier hospital rating agency in the country, that's exactly what you'll get.

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Our office can provide the medical equipment your doctor might suggest at the time of your visit. Medical equipment that is on hand consists of canes, crutches, boots, wrist guards, back & knee braces. Any other medical equipment that is not on hand, we can direct you to Community Surgical with a script of what would need to be obtained.

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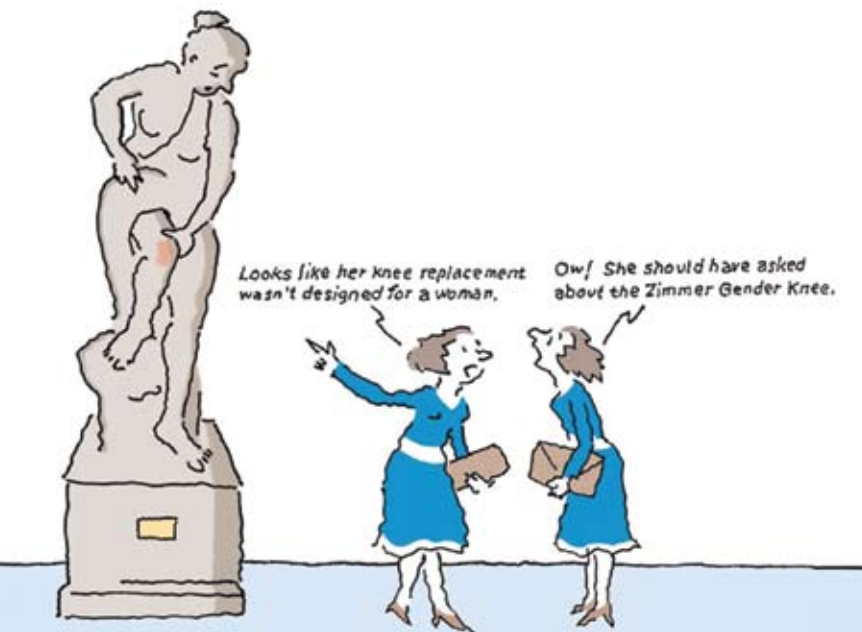
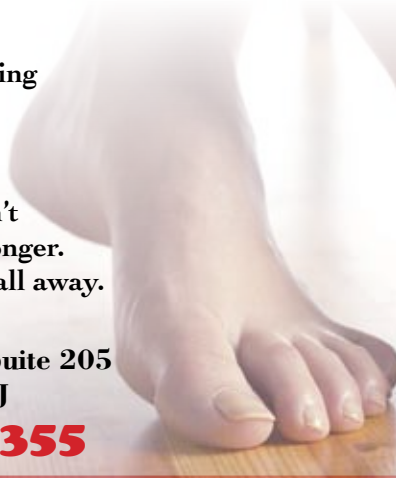
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**Important Information:** When you have severe knee pain or significant disability resulting from arthritis or injury, your orthopedic surgeon can help you determine if and when it is time for knee replacement surgery. As with every surgical procedure, there are risks and the potential for complications. Individual results may vary. Success depends on factors such as age, weight, and activity level.







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## **Osteoporosis** John Petrillo, M.D.

Osteoporosis is a disease in which bones gradually become porous, weak, and brittle.

Bone is a living tissue which is constantly undergoing remodeling. This means that there is an ongoing tug of war between old bone breaking down and new bone being formed. When the balance between bone formation and bone loss becomes out of kilter such that bone break down is greater than bone formation, the bone becomes porous and gradually weakens and becomes fragile. This condition is called osteoporosis.

Bones that are osteoporotic can fracture or break with much less force than would be necessary to break a normal bone. In the more extreme cases, a minor fall can result in a fractured wrist or a broken hip. A heavy sneeze or cough can cause a compressions fracture of the spine or a fractured rib.

When a person is starting to develop osteoporosis, they are usually unaware of what is happening because in the early stages there are no noticeable symptoms. It is only in the later stages, when the bones have weakened significantly that the symptoms become apparent, causing loss of height, a curvature of the spine (the Dowagers Hump), and fractures of the hip, wrist, or spine. The net result is often back pain, difficulty walking and loss of an active lifestyle.

People at highest risk to develop osteoporosis are females who have already had menopause because the decreasing levels of estrogen that is associated with menopause, causes a more rapid bone loss. There are other factors that increase the likelihood of developing osteoporosis, such as smoking, high alcohol consumption, inactivity or lack of exercise, being of Northern European or Asian decent, thin stature, and the use of certain medications such as steroids. Young people who have limited intake of foods rich in calcium such



as milk or cheese are more likely to develop osteoporosis later in life.

The most amazing thing about osteoporosis is that it is, for the most part, a preventable disease. Prevention requires awareness that one third of women over the age of fifty are at high risk of developing osteoporosis. Prevention is helped by a healthy lifestyle which includes taking the daily recommended amounts of calcium and Vitamin D, avoiding both smoking and excessive alcohol consumption, and a regular exercise program.

If you have risk factors for osteoporosis, you should ask your doctor to order a bone density test. A bone density test is a simple, painless test that measures the strength and hardness of your bones. A bone density test predicts the risk of experiencing a fracture in the future and it tells you if you have or are likely develop osteoporosis.

If you do have osteoporosis, you are not doomed to have weaker and weaker bones as time goes on. It is possible to reverse bone loss and increase bone density and bone strength. There are multiple classes of prescription medications that have been very effective in decreasing bone loss and restoring bone density so that the debilitating effects of osteoporosis can be decreased or prevented. The list of these medications includes Fosamax, Boniva, Actonel, Reclast, Miacalcin, Estrogen, Evista, and Forteo. If you have osteoporosis you should have a discussion with your family physician, gynecologist or orthopedic surgeon about the risks and benefits of the various medications that are available, and which are likely to be of help.

On a personal note, in 30 years as a Practicing Orthopedic Surgeon, I have



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**If you do have osteoporosis, you are not doomed to have weaker and weaker bones as time goes on. It is possible to reverse bone loss and increase bone density and bone strength.**

---

treated thousands of fractures that have occurred in patients whose bones were weakened by osteoporosis. It has always been sad to see the pain, financial hardship, and disability that these fractures have caused. It is with some degree of joy, however, that I am able to diagnose a patient with osteoporosis, treat that patient effectively with one of these various medications and then by repeating the bone density test one or two years later, confirm that her bone strength is now 4% or 6% or 8% better that it was at the previous test. This indicates not only that her bone have transitioned from becoming weaker with time to becoming stronger with time, but also that she can be spared the suffering experienced by so many patients who have had osteoporosis in the past..



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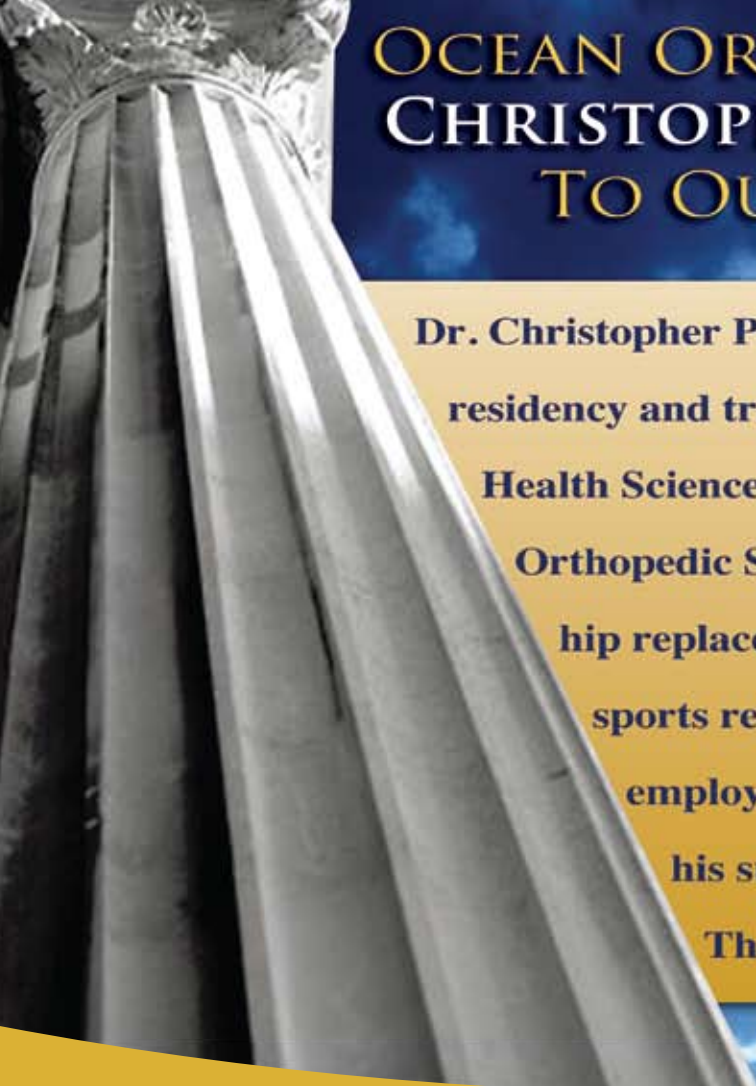
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# OCEAN ORTHOPEDIC WELCOMES CHRISTOPHER PASSARIELLO, M.D. TO OUR ORTHOPEDIC TEAM

**Dr. Christopher Passariello completed his Orthopedic residency and training at State University of New York, Health Science Center Brooklyn. He practices General Orthopedic Surgery with a special interest in knee and hip replacement. His scope of practice also includes sports related injuries as well as fractures. He employs minimally invasive techniques for most of his surgeries. Dr. Passariello is a candidate for The American Board of Orthopedic Surgery.**



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