

Male Professional Baseball Player with Osteochondritis Dissecans of the Knee

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Abstract

A 19 year-old male professional baseball player injured his left knee when sliding head first into second base. The athlete had no previous history of injuries to his lower extremity. An on-field evaluation was performed by the athletic trainer revealed that the athlete was unable to flex or extend his left knee due to pain and a mechanical block. The athlete did not have any radiating symptoms or vascular impairment and was assisted off the field for further evaluation. An evaluation in the training room revealed severely limited left knee range of motion, a grade of 3.5/5 on a manual muscle break test, tenderness and swelling at the lateral joint line. The athlete was assessed with a knee contusion and given crutches and an ace wrap when leaving the training room. The athlete later visited an orthopedic physician to have x-rays and a MRI. Imaging revealed a large OCD on the medial femoral condyle with a loose body in the intercondylar notch. Athlete underwent surgical intervention to repair the OCD lesion with internal fixation. The athlete went through rehabilitation during the offseason and was just

Introduction

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Purpose

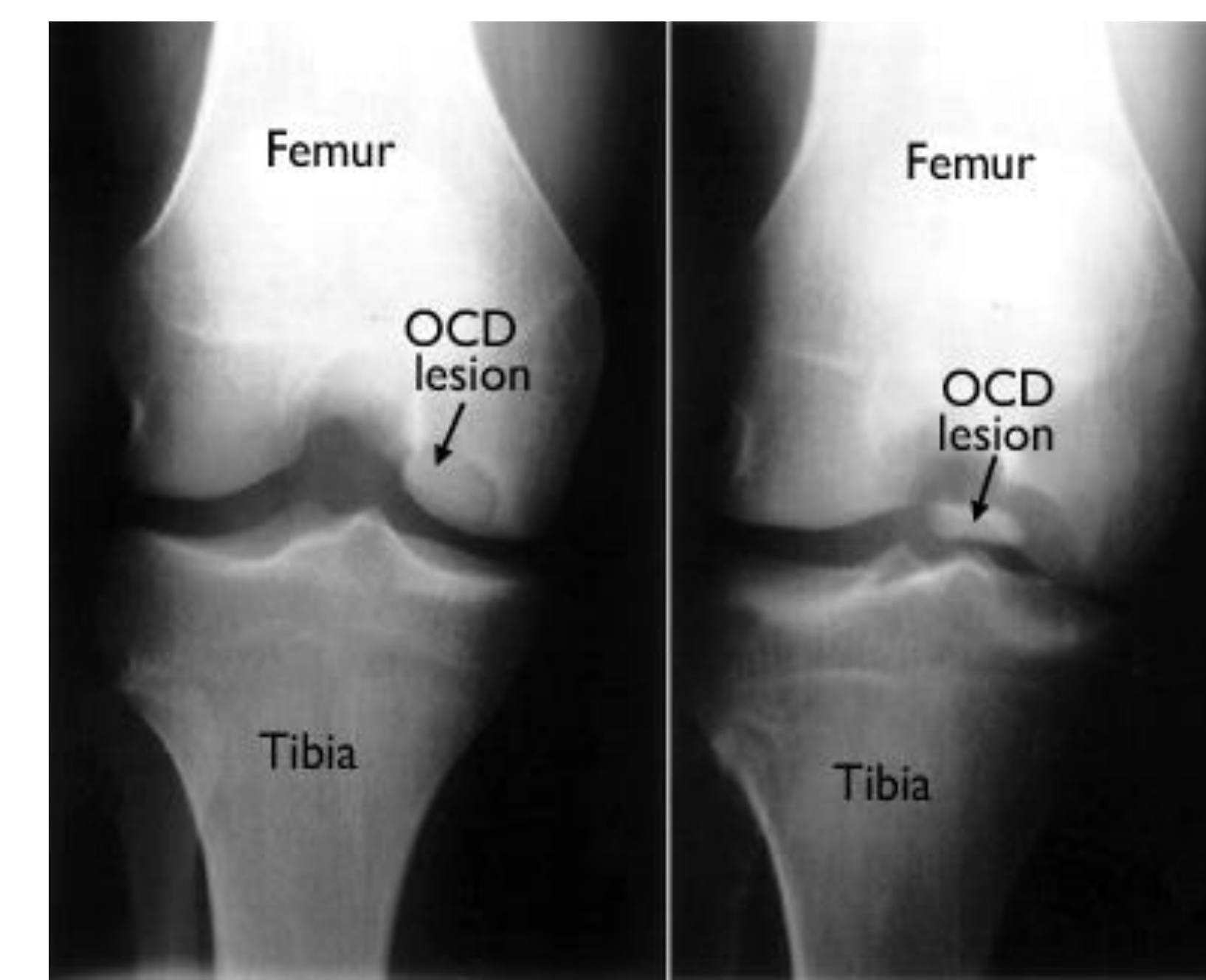
The purpose of this case report is to show the importance of acute injury recognition and management. Domain III of athletic training competencies covers immediate and emergency care. The athletic trainer must be able to provide proper care and know when to refer to other

Background

- 19-year old male
- Outfielder
- No previous history of knee injuries
- First professional season

Differential

- Diagnosis
- OCD of the knee
 - Meniscus tear
 - Knee contusion



Clinical Evaluation

An evaluation in the athletic training room revealed severely limited left knee range of motion, a grade of 3.5/5 on a manual muscle break test, tenderness and swelling at the lateral joint line.

Rehabilitation

Rehabilitation following surgery focused on restoring ROM, quadriceps, hamstring, hip flexor, and gluteal strengthening. Gameready was used early on to reduce swelling then used sparingly. Functional testing included T-test, line hops, ladder drills, broad jumps, single-leg triple hops, and baseball activities such as hitting, fielding, throwing and baserunning.

Conclusion

This case presents a rare injury to the athletic population, effecting only 29 people per 100,000. OCD occurs more frequently in males than females at a 5:3 ratio. This athlete recently completed his rehabilitation after 7 ½ months and has been cleared to participate in spring training by the medical staff.