



**JB&JS**  
Clinical Classroom



**BUILD YOUR ORTHOPEDICS SURGERY  
KNOWLEDGE AND STAY UP-TO-DATE**

<https://thieme.in/jbjs-cc>

## UNLIKE ANY OTHER STUDY TOOL

**JBJS Clinical Classroom on Area9 Rhapsode™** is an adaptive learning platform combining gold-standard content with efficient, engaging, and effective best practices helping orthopaedists, residents, and other members of the orthopaedic care team master and retain knowledge, stay on top of an ever changing field.

## WHY ADAPTIVE LEARNING?

With the ever-changing health-care environment, physicians must adapt and learn new ways to solve different and more complex clinical problems. Use of the metacognitive approach — the ability to think about learning based on understanding what you know and what you don't know — is gaining traction in many areas of education including health care education.

**JBJS Clinical Classroom on Area9 Rhapsode™** is a new lifelong orthopaedic learning solution that empowers you to:

- Make the right diagnosis and best decision with every patient
- Prepare comprehensively and efficiently for credentialing exams
- Recharge your knowledge at selected time intervals

## BUILT BY EXPERTS

The content in JBJS Clinical Classroom is held to the same high standards as The *Journal of Bone & Joint Surgery*, with our esteemed editors rigorously selecting and vetting every item. You can be sure that our questions are:

- Clinically relevant
- Based on best-available evidence
- Comprehensive for certification
- Free from commercial influence

## FEATURES



**Progress:** Review individual progress and track performance your residency program



**Library:** Contains all the learning resources with direct access to all the information.



**Quiz:** Construct your own quiz or access quizzes that are assigned by faculty or program director



**Recharge:** Brush up your topics you were struggling before



**Reports:** Get detailed feedback helps to assess individual and institutional progress with information about additional learning needs



**Responsive Design:** Available on mobile + web, meaning you can study on-the-go

“Users of JBJS Clinical Classroom may spend up to 50% less time than users of traditional e-learning methods to learn the same material.”

## SAMPLE QUESTION & ANSWER

A 50-year-old male presents for persistent Achilles tendon pain. You saw him 1 year ago and diagnosed him with noninsertional Achilles tendinitis. He has tried physical therapy, activity modification, rest, immobilization, and shockwave therapy. He continues to have pain, and has been unable to return to his running program. He has 10° of ankle dorsiflexion, both with the knee flexed and extended. Magnetic resonance imaging confirms the diagnosis of noninsertional Achilles tendinosis. Which of the following is the next step in management?

CHOOSE THE CORRECT ANSWER

Achilles tendon debridement, calcaneal exostectomy, and flexor hallucis longus transfer

Continued nonoperative treatment with aggressive physical therapy

Gastrocnemius recession

Operative debridement of the Achilles tendon with or without a flexor hallucis longus transfer

I KNOW IT

THINK I KNOW IT

NOT SURE

NO IDEA

# 11

Modules

# 2800+

Learning Objectives

# 4300+

Questions/Probes

Content is updated and added regularly, and all users have access to new content in the modules to which they have subscribed.

## Path to Proficiency

A 50-year-old male presents for persistent Achilles tendon pain. You saw him 1 year ago and diagnosed him with noninsertional Achilles tendinitis. He has tried physical therapy, activity modification, rest, immobilization, and shockwave therapy. He continues to have pain, and has been unable to return to his running program. He has 10° of ankle dorsiflexion, both with the knee flexed and extended. Magnetic resonance imaging confirms the diagnosis of noninsertional Achilles tendinosis. Which of the following is the next step in management?

Not there yet...

Correct Answer

**Operative debridement of the Achilles tendon with or without a flexor hallucis longus transfer**  
 After extensive nonoperative treatment, surgery should be considered. A flexor hallucis longus transfer should be considered if >50% of the tendon is involved.

✖ Your Answer

**Continued nonoperative treatment with aggressive physical therapy**  
 After extensive nonoperative treatment, surgery should be considered.

Other Answer

**Achilles tendon debridement, calcaneal exostectomy, and flexor hallucis longus transfer**  
 This would be appropriate for insertional tendinitis with a Haglund deformity, not for noninsertional tendinitis.

Other Answer

**Gastrocnemius recession**  
 His ankle dorsiflexion does not decrease with knee extension. This is not consistent with a gastrocnemius contracture and, therefore, a gastrocnemius recession would not be indicated.

Learn more here: ☐ Non-Insertional Achilles Tendinopathy

No Idea

CHALLENGE US

NEXT

## CONTENT

JBJS Clinical Classroom contains **10 orthopaedic subspecialty modules** with a bonus module in Ethics. Each subspecialty module was developed based on learning objectives written by an expert in that subspecialty to reflect areas within the subspecialty that are critical to competent practice.

### Modules

- |                              |                           |                                      |
|------------------------------|---------------------------|--------------------------------------|
| 1. Trauma                    | 5. Pediatric Orthopaedics | 9. Spine                             |
| 2. Sports Medicine           | 6. Hand & Wrist           | 10. Basic Science/Pathology          |
| 3. Adult Hip Reconstruction  | 7. Foot & Ankle           | 11. Ethics                           |
| 4. Adult Knee Reconstruction | 8. Shoulder & Elbow       | 12. Oncology ( <i>Coming Soon!</i> ) |

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## USING JBJS CLINICAL CLASSROOM IN RESIDENCY PROGRAMS

JBJS Clinical Classroom's adaptive algorithm works the same way for residents as it does for individual clinicians. It can be used independently or incorporated into a program's curriculum.

### ADVANTAGES FOR RESIDENTS:

- JBJS Clinical Classroom is user-friendly and completely mobile. Residents can use Clinical Classroom anywhere, at any time on their phone or tablet.
- The content in JBJS Clinical Classroom is developed by clinical experts, peer-reviewed and based on the best-available, clinically relevant information.
- Residents can access Clinical Classroom on their own to answer questions and they can access resources and references to see where they can improve,
- Residents can use Clinical Classroom throughout their residency and continue to do so as they prepare for board certification.



### ADVANTAGES FOR EDUCATORS:

- Residency directors can provide clinically relevant and up-to-date knowledge to their residents
- Track the performance of the residents in each specialty area with the help of robust reporting system
- Residency directors and faculty can assign random or customized quizzes to any or all residents for assessment and remediation.
- Clinical Classroom can be incorporated into the curriculum by adding an assessment component to clinical rotations.

Ask for a Trial  
[marketing@thieme.in](mailto:marketing@thieme.in)

#### Contact information

Name: .....

Email address: .....

Contact number: .....

#### Licensing

- Available to institutions and individuals through username access

For more information or to sign-up for an trial, please visit:  
<https://thieme.in/jbjs-cc>

To access the JBJS Clinical Classroom, please visit:  
<https://clinicalclassroom.jbjs.org>



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