



orthopedic

SERVICES



orthopedic

SERVICES

Our Orthopedic Team

Our orthopedic team is a group of highly trained and experienced surgeons, physicians, athletic trainers, and physical and occupational therapists dedicated to providing excellence in the treatment of orthopedic conditions for our region. Using the latest technology and treatment practices, the orthopedic team is equipped and ready to help get you back to doing the activities of daily living, work and recreation.

We're Specialists In Orthopedic Care

We offer a broad range of comprehensive orthopedic care, both surgical and non-surgical, and we have physicians who are specialists in treating hip, knee, shoulder, hand/wrist, and foot/ankle conditions that cause pain and limit movement.



We hope you will visit our website at www.urphysiciangroup.org where you'll find more information on the services we offer. We look forward to serving your orthopedic needs with outstanding care and caring.

For information about making an appointment, please call 940-764-5400.



Shoulder • Your shoulder is made up of three bones: your upper arm bone (humerus), your shoulder blade (scapula), and your collarbone (clavicle). The head of your upper arm bone fits into a rounded socket in your shoulder blade. This socket is called the glenoid. A combination of muscles and tendons keeps your arm bone centered in your shoulder socket. These tissues are called the rotator cuff. They cover the head of your upper arm bone and attach it to your shoulder blade. Shoulder pain comes from swelling, inflammation; tearing or bone spurs around the four tendons that make up the rotator cuff.

Common causes of this type of pain



- Tendonitis
- Arthritis
- Bursitis
- Fractures
- Dislocations

Hand and Wrist • The hand consists of eight bones in the wrist (carpals), five bones in the palm of your hand (metacarpals), and 14 bones in the fingers (phalanges) – 27 bones all together. Every bone and tendon plays an important part in the movement of your hand. When an injury of the hand occurs, it is vital to seek help in order to alleviate pain and increase function.

Conditions



- Carpal Tunnel Syndrome
- Trigger finger
- Arthritis
- Dupuytren's Contracture
- Fractures
- De Quervain Syndrome
- Ganglion cyst
- Tendonitis/tendinitis

Foot and Ankle • Foot pain can have a profound impact on quality of life. Half of all adults say that foot pain has restricted their activities—like walking, exercising, working, or playing with grandchildren—in some way. We treat diseases, injuries, and deformities of the foot and ankle, as well as the foot problems experienced most often including heel pain, plantar fasciitis, and nail fungus.

Conditions



- Achilles tendonitis
- Arthritis
- Diabetic foot
- Warts and skin conditions
- Bunions
- Heel spurs
- Ingrown toenails
- Fracture

Hip • The hip, a ball-and-socket joint, is one of the body's largest joints. Hip pain can be caused by a wide variety of problems like arthritis, injuries, or pinched nerves, to name a few. If you are experiencing hip pain, our team is ready to diagnose your symptoms and relieve your pain.

Conditions that cause pain and affect movement



- Osteoarthritis
- Bursitis
- Muscle strain
- Dislocation
- Fracture

Knee • With the knee being one of the most complex joints of the body and a vital contributor for movement, it is important to keep your knees healthy. Three bones meet to form your knee joint: your thighbone (femur), shinbone (tibia), and kneecap (patella). Your knee cap sits in front of the joint to provide some protection. There are four ligaments in the knee that act like strong ropes to hold the bones together and keep the knee stable. Knee ligament sprains or tears to the ACL (Anterior Cruciate Ligament), MCL (Medial Collateral Ligament) and tears of the Meniscus (Cartilage) are the most common injuries that occur.

Conditions that cause pain and affect movement



- Arthritis
- Fractures
- Dislocation
- Ligament tears

Non-Surgical Treatment Options for Orthopedic Conditions

Some orthopedic conditions can be successfully treated with non-surgical options. There are a variety of non-surgical treatment options to help with pain and loss of function. Our physicians have the experience and expertise to provide these specialized treatments.



Physical Therapy

Once a proper diagnosis occurs, the physicians and physical therapists will create a program suitable for your needs. This could include rest, reducing activity that could further injure your affected joint or condition, stretching and strengthening exercises, and splinting and bracing. These techniques are designed to alleviate your pain, regain strength, and also help prevent future injuries.



Hands-On Therapy

- Friction massage
- Joint mobilization/manipulation
- Neuromuscular therapy
- Myofascial release
- Trigger point therapy
- Muscle energy techniques
- Ultrasound
- Heat
- Ice
- Electrical nerve stimulation



Medication

Medicine might be prescribed to help treat certain conditions and alleviate pain.



Injections

Some conditions can be helped with injections directly into the affected hip, knee or shoulder joint to help with pain control and improve functioning.

Non-Operative Orthopedic Physicians

There are many orthopedic conditions that do not require surgery to help alleviate pain and improve functioning. Whether these injuries stem from trauma, age, or overuse, chronic conditions present their own set of challenges. Sometimes physical therapy, medication and injections may greatly help your condition. And, when you are hurting you want to be treated as soon as possible.



Jason Holinbeck, MD

Dr. Jason Holinbeck received his Doctor of Medicine from the Medical College of Wisconsin in Milwaukee. He completed his family medicine residency at Columbia St. Mary's, also in Milwaukee; he then completed a primary care sports medicine fellowship at CHRISTUS Santa Rosa in San Antonio, Texas.

Dr. Holinbeck is a non-operative orthopedic specialist and sports medicine physician specializing in joint injuries and conditions of the shoulder, knee, hip and ankle. He is board certified by the American Board of Family Medicine.

Dr. Holinbeck comes to United Regional from San Antonio, where he was a team physician for a number of high schools, universities, and professional teams, including the San Antonio Spurs, the Stars, and the Rampage.

Dr. Holinbeck is also trained in the following procedures:

- Interventional joint injections with and without ultrasound
- Viscosupplementation of the knee degeneration
- Regenerative medicine including platelet rich plasma injections
- Trigger point injections



Brandon Ohman, MD

Dr. Brandon Ohman attended Texas Chiropractic College in Pasadena where he received a Bachelor of Science in Human Biology and a Doctor of Chiropractic Medicine. He went on to earn a Doctor of Medicine from Ross University School of Medicine, Portsmouth, Dominica. Dr. Ohman's medical training also included a residency in Family Medicine at Texas Tech University and a Sports Medicine fellowship at John Peter Smith Hospital, Fort Worth, Texas.

Dr. Ohman is a non-operative orthopedic specialist and sports medicine physician specializing in joint injuries of the shoulder, knee, hip and ankle; back and neck injuries associated with conditions that limit patient function; and a concussion specialist. In addition, Dr. Ohman specializes in pain management procedures allowing his patients who are not surgical candidates or who are not ready to consider surgery, pain relieving options to help them enjoy a better quality of life.

Dr. Ohman is also trained in the following procedures:

- Interventional joint injection under fluoroscopy and ultrasound
- Viscosupplementation for knee degeneration
- Trigger point injections
- Radiofrequency ablation



SURGERIES PERFORMED:

Shoulder

- **Arthroscopic Surgery**

Arthroscopic surgery allows the doctors to see your shoulder joint by making small incisions and inserting a small camera in the incisions. The camera then displays a video picture onto a video screen. This is used to diagnose and treat a wide variety of shoulder problems such as labral tears. The surgeon can then go in with miniature surgical instruments to complete the surgery. Using small incisions, instead of large incisions, results in less pain, less joint stiffness, and often shortens the recovery time.

- **Shoulder Replacement**

Shoulder pain and disability can be caused by arthritis, a torn rotator cuff, and fractures. If you have severe shoulder pain that interferes with everyday activities, such as dressing, moderate to severe pain while resting, and loss of motion and weakness in the shoulder which has not improved with other treatments such as anti-inflammatory medications, injections, or physical therapy, you may want to consider joint replacement.

What Happens During Shoulder Replacement Surgery?

Your shoulder is made up of three bones – your upper arm bone (humerus), your shoulder blade (scapula), and your collarbone (clavicle).

In shoulder replacement surgery, the damaged parts of your shoulder are removed and replaced with artificial components. The treatment options are either a replacement of just the head of the humerus bone (ball), or a replacement of both the ball and the socket (glenoid).

- **Another Option: Reverse Shoulder Replacement**

Orthopedic surgeons at United Regional offer a surgical solution for patients who have significant pain and little or no movement in their shoulder.

The reverse shoulder prosthesis is used for patients with rotator cuff arthropathy, a medical condition in which the rotator cuff muscles (the muscles around the shoulder joint) have torn to a point where they can no longer move the shoulder joint and allow it to function normally, often in conjunction with arthritis.

What Is The Difference In A Reverse Shoulder Replacement?

In a healthy shoulder, the upper arm bone (humerus) ends in a ball shape. This fits into a socket formed by the shoulder blade (scapula). Together the ball and socket form the shoulder.

With the reverse shoulder prosthesis, the positions of the ball and socket are switched. The implant is designed so that the ball portion is attached to the scapula and the socket is placed at the upper end of the humerus. This procedure can also be used in revision surgery, for failed shoulder replacement and shoulder fractures.

SURGERIES PERFORMED:

Hand and Wrist

- Carpal Tunnel Syndrome
- Finger conditions and injuries
- Finger reattachment
- Ganglion cyst
- Hand joint repair
- Joint fusions
- Ligament tears
- Nerve repair
- Sports injuries to upper extremities
- Tendon repair
- Tennis elbow/ulnar nerve transposition
- Trigger finger



Foot and Ankle

- Fractures
- Ankle fusion
- Arthritis fusion treatment
- Biomechanical exams
- Bunion surgery
- Charcot reconstruction
- Diabetic foot care
- Fasciotomy
- Foot and ankle reconstruction
- Foot care including warts and skin conditions
- Foot injuries
- Hammertoes
- Heel pain/spurs
- Ingrown toenails
- Ligament Tears
- Neuromas
- Pediatric foot care
- Plantar Fasciitis
- Sports-related injuries
- Tendon repairs
- Trauma reconstruction
- Wound care





SURGERIES PERFORMED:

Hip

- **Arthroscopic Surgery**

Arthroscopic surgery allows the doctors to see your hip joint by making small incisions and inserting a small camera in the incisions. The camera then displays a video picture onto a video screen. This is used to diagnose and treat a wide variety of hip problems. The surgeon can then go in with miniature surgical instruments to complete the surgery. Using small incisions, instead of large incisions, results in less pain, less joint stiffness, and often shortens the recovery time.

- **Minimally Invasive Hip Replacement**

Once you've decided to have a hip replacement, you may be eligible for a minimally invasive procedure. This type of replacement is one of the least invasive procedures which has proven to be a surgical technique that minimizes the pain and the time from surgery to recovery. Be sure to discuss this surgical option with your orthopedic surgeon.

How Is A Minimally Invasive Hip Replacement Performed?

The minimally invasive approach to hip replacement surgery allows the surgeon to reach the hip joint from the front of the hip as opposed to the side or the back of the hip. This way, the hip can be replaced without detaching muscle from the pelvis or femur during surgery. The surgeon simply works through the natural opening between the muscles. The most important muscles for hip function, the gluteal muscles that attach to the pelvis and femur, are left untouched and therefore do not require a healing process to recover from the trauma of surgery.

hip

SURGERIES PERFORMED:**Knee**

- **Arthroscopic Surgery for ACL, MCL and Meniscus tears**

Arthroscopic surgery allows the doctors to see your knee joint by making small incisions and inserting a small camera in the incisions. The camera then displays a video picture onto a screen. This is used to diagnose and treat a wide variety of knee problems such as a torn meniscus or a bone spur. The surgeon can then go in with miniature surgical instruments to complete the surgery. Using small incisions, instead of large incisions, results in less pain, less joint stiffness, and often shortens the recovery time.

- **Knee Replacement**

How Is Knee Replacement Performed?

Your knee joint is made up of the femur (thigh bone), patella (knee cap), tibia (shin bone), cartilage tissue between bones that provides cushioning, synovium tissue that provides lubricating fluid to the joint, and ligaments that are flexible tissue that holds the knee joint together.

In knee replacement surgery, the end surface of the femur and end surface of the tibia are replaced with metal and a plastic liner is inserted between the femur and the tibia. The patella (knee cap) is resurfaced with plastic.

- **Another Option: The “Uni” Knee**

“Uni” knee replaces only the inner or outer knee joint and is an excellent option if you have arthritis in only one compartment of the knee joint. The benefits of a “uni” knee are that the surgery may be done through a smaller incision which can mean faster rehabilitation and a shorter hospital stay than a standard knee replacement. Discuss this option with your orthopedic surgeon to find out if you are a candidate for a “uni” knee.



knee

For Joint Replacement Patients

United Regional provides education prior to joint replacement surgery so that patients and their families feel well prepared for the procedure and during recovery.



Joint Camp

Preparing You for Your Joint Replacement

We want the outcome of your joint replacement surgery to be as successful as possible. Knowing what to expect prior to and after the surgery helps make your hospital stay and the transition home the best it can be. Therefore, we strongly encourage you to attend the pre-surgical Joint Camp class.

Pre-Surgical Joint Camp Class

- Introduction to Joint Camp
- Your pre-admission visit and before surgery information
- Day of surgery information (before surgery, during surgery, in recovery)
- Pain control during your hospital stay
- What to expect during your hospital stay and after surgery –
A day-by-day look
- Nutrition during your hospital stay
- Rehabilitation during your hospital stay – Joint Camp
- Discharge planning with your case manager

In-Hospital Joint Camp

Day of Surgery

Initial physical therapy evaluation in your room after surgery

Days One and Two

Joint Camp in the rehabilitation gym on the fourth floor of the Bethania Building, twice a day at 10 a.m. and 2 p.m.

Joint Camp includes:

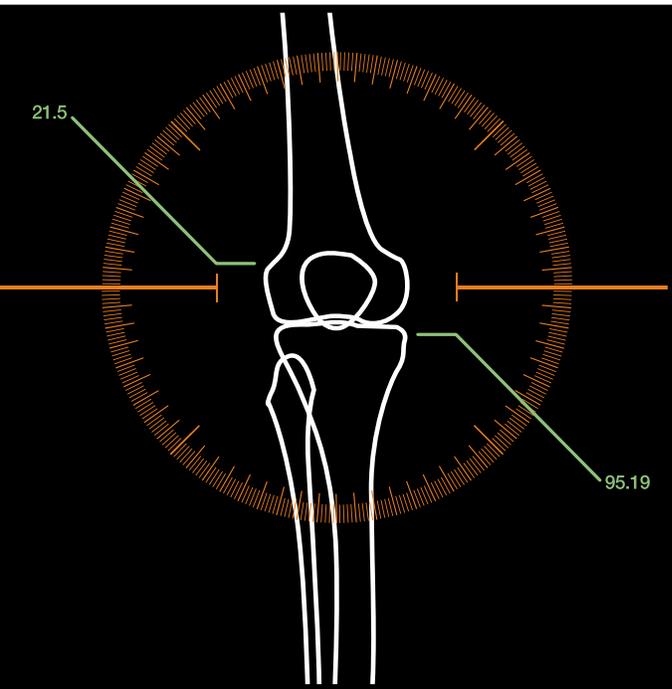
- Wheelchair transport or walking to and from your room and the rehabilitation gym
- Joint-specific exercises using mats, bikes, and other equipment
- Learning joint precautions while walking and moving
- Managing the climbing of steps
- Proper and safe gait techniques

Day Two

- Discharge home

Surgical Technology

Tremendous advances have been made in joint replacement surgery



Stryker Navigation System

Here Is How It Works

The technology uses the advancements in science and computer engineering to make the procedure more accurate than joint surgery without it. As the surgeon moves an instrument within your joint, special infrared trackers calculate its position and wireless instruments instantaneously transfer the data to a computer in the operating room.

This information is then displayed on a monitor as an interactive model of the anatomy or “blueprint” that supplies the surgeon with all angles, lines and measurements of your unique anatomy. The surgeon will then replace the diseased bone with new, artificial joint components, often called prostheses or implants. Joint implants are engineered to replicate a normal, healthy joint.



Mako Robot

For Total Hip and Total Knee Replacement Surgery

The addition of the MAKO Robot demonstrates United Regional’s commitment to precision medicine and expands our regional leadership in robotic surgery.

Patients Have a Plan Personalized

It all begins with a CT scan of your joint that is used to generate a 3D virtual model of your unique anatomy. This virtual model is loaded into the Mako system software and is used to create your personalized pre-operative plan.

In the Operating Room

During surgery, the surgeon guides the robotic-arm while preparing the hip or knee socket and positioning the implant based on your personalized pre-operative plan. The Mako system also allows your surgeon to make adjustments to your plan during surgery as needed. When the surgeon prepares the bone for the implant, the Mako system guides the surgeon within the pre-defined area and helps prevent the surgeon from moving outside the planned boundaries. This helps provide more accurate placement and alignment of your implant.

After Surgery

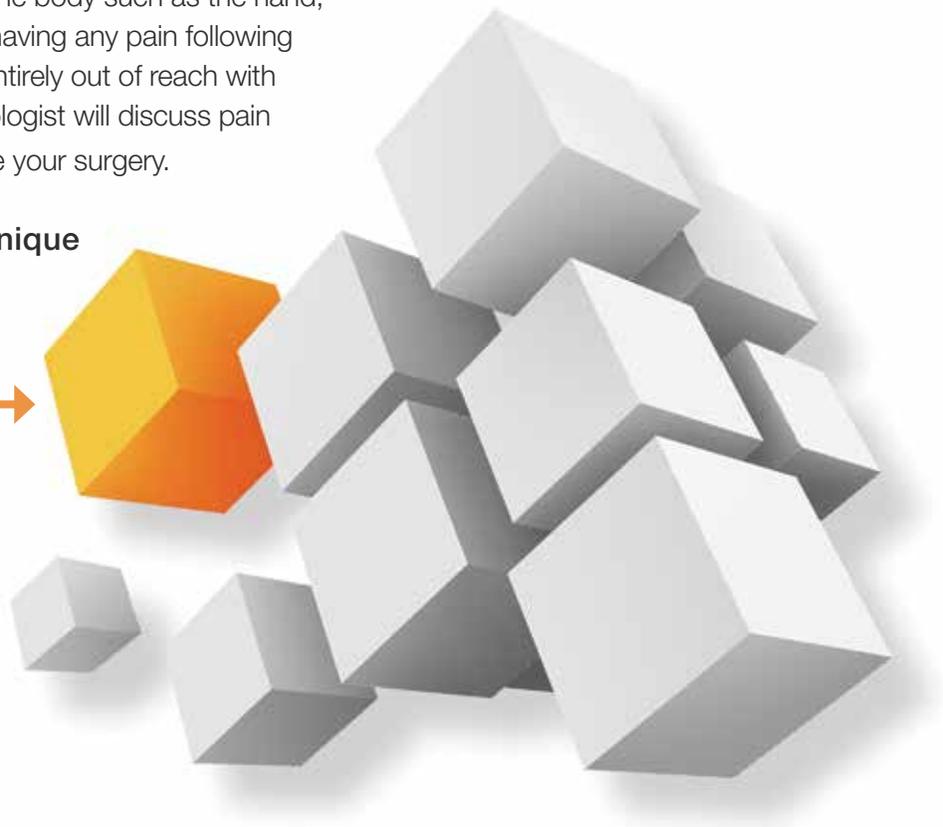
After surgery, your surgeon, nurses and physical therapists will set goals with you to get you back on the move. They will closely monitor your condition and progress.

Regional Anesthetics

Imagine having surgery on a part of the body such as the hand, arm, shoulder, knee or foot and not having any pain following the surgery. Such a scenario is not entirely out of reach with regional anesthetics. Your anesthesiologist will discuss pain management options with you before your surgery.

Regional anesthesia is a technique in which only a portion of the body is numbed.

This “blocking” of the nerves is accomplished by placing a local anesthetic medication near the nerves, which send impulses for feeling and movement, to that portion of the body.



Although not all patients who receive regional anesthesia rate their pain at zero, a reduction in oral pain medication required to keep the patient comfortable is seen. Regional anesthesia is particularly appealing to patients undergoing orthopedic procedures.

Regional anesthesia can be used during surgery to cause numbness at the site of the surgery but is more commonly used after surgery as part of a post-operative pain management plan.

Nerve blocks, injections of numbing medication, can be placed before or after surgery and will numb feeling in the areas below the site of the block. In shoulder replacement surgery, patients have nerve blocks during their hospital stay and may also go home with a disposable pump system.

Why Choose United Regional for Orthopedic Surgery

United Regional offers patients and their families value-added services to help ensure the best possible surgical experience.

For All Surgical Patients – Keeping The Family Informed

It's important for family members to be kept informed of the progress of their loved one while in surgery. United Regional provides three ways to help families stay connected.



EASE App

EASE (Electronic Access to Surgical Events) is a free messaging app that updates the status of patients undergoing procedures via texts, photos and videos to family members and friends. Ease makes the waiting easier because family and friends can stay connected to what is happening in the operating room. Encrypted texts, photos and videos are sent by our OR team through a secure server and disappear after 45 seconds. EASE app allows nothing to ever be stored on any mobile device.

With the click of a button users are able to add up to 10 family members and friends to keep them informed and relaxed throughout a loved one's surgical procedure. The EASE app is especially beneficial for those who cannot be present at the hospital during the procedure.



Tracker Board

In the Surgery Guest Seating area, family and friends of patients also can track the progress of their loved one's surgery through an electronic tracking board. Patients are assigned confidential numbers at check-in. Numbers are displayed on the electronic board and show if the patient is in pre-op, a surgical suite, recovery room, patient room or ready for discharge.



Patient Liaison Nurse

A surgical nurse travels between operating rooms to learn each patient's status, then visits with families to provide updates. Family members and friends appreciate the personal updates that provide peace of mind while their loved one is in surgery.



Our Experienced Surgeons



Steven Klumb, DPM

Dr. Steven Klumb earned a Doctor of Podiatric Medicine from the Ohio College of Podiatric Medicine. He completed his surgical residency at University Hospitals, Richard Medical Center and Kent State College of Podiatric Medicine in conjunction with the Cleveland Clinic Foundation in Ohio. Dr. Klumb is board certified by the American Board of Podiatric Medicine and is an Associate Member of the American College of Foot and Ankle Surgeons.

Dr. Klumb is a surgical podiatrist who specializes in foot and ankle surgery, trauma, wound care and sports medicine.



Joshua Schacter, DO

Dr. Schacter, a native of Norman, Oklahoma, is a board-certified orthopedic surgeon, through the American Osteopathic Association, with a special interest in orthopedic sports medicine and reconstructive surgery. After completing the Doctor of Osteopathic Medicine program at the Oklahoma State University College of Osteopathic Medicine, Dr. Schacter completed his orthopedic surgery residency at Doctor's West/Grant Medical Center in Ohio. He is a member of the American Academy of Orthopedic Surgeons, the American Osteopathic Academy of Orthopedics and the Arthroscopy Association of North America.

Dr. Schacter specializes in joint arthroscopy and reconstructive procedures of the extremities. He currently provides medical care for sports programs of many area schools.



Michael R. Sheen, MD

Dr. Michael R. Sheen graduated from the George Washington University School of Medicine and is board certified in orthopedic surgery by the American Board of Medical Specialties. Dr. Sheen completed his residency and internship at Barnes Hospital, Washington University in St. Louis, Missouri.

His expertise in all fields of orthopedic medicine has made him a valuable asset to the community. Dr. Sheen is proficient in advanced shoulder and knee reconstruction and joint replacement and utilizes many advanced technologies to care for his patients, their health and their rehabilitative needs.

When not in the clinic, you can find Dr. Sheen doing what he loves—working with young athletes. Dr. Sheen is the team physician for the athletic departments of Midwestern State University, Hirschi High School and Rider High School.



Edward Walker, MD

Dr. Edward Walker earned a Doctor of Medicine from the University of Illinois School of Medicine at Rockford, Rockford. He completed his residency in Orthopedic Surgery from the University of California San Francisco in Fresno, before completing a Sports Medicine fellowship at Houston Methodist in Houston, TX.

Dr. Walker has provided team coverage for the Houston Astros, Dynamos, and Texans, to name a few. He served in the Army National Guard in California, Texas, and Illinois. Dr. Walker enjoys many outdoor activities as well as scuba diving.

