

June 10, 2020

***Letter to Editor***

**Dale Elizabeth Jarka, MD,CM, FRCSC, FAAOS**

Children's Mercy Kansas City, Kansas City, MO

**Other Contributors:**

**Lisa K. Cannada, MD, FAAOS, FAOA**

Hughston Clinic, Novant Health, Jacksonville, FL

June 9, 2020

Dear Dr. Swiontkowski,

RE: Is "Spring Training" Necessary for Surgeons After a Long COVID-19 Off-Season?

Thank you and your journal for the efforts at adapting to educate your readers on COVID-19 on current orthopaedic practice. We all turn to The Journal of Bone and Joint Surgery as a trusted resource of accurate and up to date research and articles which would directly affect one's clinical practice. In addition, we know you have assembled a world class Editorial Board and reviewers. At times, authors know better than to submit research to JBJS due to the high rigorous standards resulting in a publication in your journal.

That being said, we are quite disappointed in a recent article in the Orthopaedic Forum, by Robert Schultz and Paul Lachiewicz on "Spring Training", speculating on the time off from operating during the coronavirus pandemic and its possible effect on surgical skills.

At first glance, the article may appear thought provoking. But it really is ignorant of, and excludes diversity and the common reality of maternity leave for women (and could apply to time off for illness in male or female surgeons). There is not objective data demonstrating untoward results for patients after a female returns from maternity leave.

The most disturbing fact is, when evaluating an article, one must look at the authors and their background in determining the "trust" and "Believability" factor. That is a failure of JBJS in this instance. Dr. Robert Schultz has not performed orthopedic surgery since 2004, hence there is no credibility in any contribution of his to the article. And the second author, Paul Lachiewicz is a quite senior, more experienced surgeon – perhaps discussion of an older surgeon returning to the operating room warrants a different conversation than spring training for all.

As physicians we take the Hippocratic Oath, with the first tenet being "Do no harm". It is up to each one of us to uphold this, and determine and ask for assistance if needed in retuning to surgery after an absence. An article suggesting the need for "spring training", written by a surgeon over 65 and a surgeon who has not operated in 16 years, has no credibility and does not belong in a journal such as yours. ***We suggest before any article is published, the authors' current job status and qualifications to be an author of a research article commentary such as this be confirmed by editor.***

Disclaimer: e-Letters represent the opinions of the individual authors and are not copy-edited or verified by JBJS.

Regards,

Dale Elizabeth Jarka, MD,CM, FRCSC, FAAOS

Dejarka@cmh.edu

Children's Mercy Kansas City

Kansas City, MO

Lisa K. Cannada MD, FAAOS, FAOA

[Cannada.lisa@gmail.com](mailto:Cannada.lisa@gmail.com)

Hughston Clinic

Novant Health

Jacksonville, FL

Conflict of Interest: None Declared

---

### **Article Author Response**

15 June 2020

*Article Author(s) to Letter Writer(s)*

Dear Dr Cannada,

As stated previously, there was no intent on our part, to cast "shade" on women surgeons returning from maternity leave. We would also like to clarify two items: Dr Robert Schultz has been an active surgeon from 2004, when he relocated from New Jersey to North Carolina, to the present, at the Durham VA

Hospital. He performs arthroscopic and open surgery of the shoulder and knee, and occasional general orthopaedic cases, with the Duke orthopaedic residents. Sometimes, teaching is more difficult than doing the procedure yourself. Despite being a "senior surgeon", Dr Lachiewicz continues to perform complex primary and revision hip and knee arthroplasty at a high level. Please note that there are other many "senior" members of the Hip Society and Knee Society who continue active surgical practices.

Dr Robert Schultz and Dr Paul Lachiewicz