

Dr. Oscar Oeding Bermudez



Specialties:

Orthopedics Surgeon

Education & Training

- **Bachelor's degree:** Colegio de La Salle. Cartagena. Colombia. 1984. VERIFIED

- **Surgeon Physician:** Universidad del Norte. Barranquilla. Colombia. De 1984 a 1991.
 - Titulo Homologado por la Universidad de Costa Rica el 13 de Febrero de 1997.
 - Reconocido por el Colegio de Médicos y Cirujanos de Costa Rica desde el 07 de noviembre de 1997. VERIFIED 11/15/2006

- **Internado Rotatorio.** Realizado en el Hospital Universitario de Barranquilla, del 12 de Junio de 1989 al 11 de Junio de 1990, en Barranquilla, Colombia. VERIFIED 12/02/2006

- **Orthopedist Specialist in Orthopedic and Traumatology:**
 - Universidad de Costa Rica. De 1992 a 1996. Titulo avalado por el Hospital San Juan de Dios, la Caja Costarricense del Seguro Social, el Centro de Desarrollo Estratégico e Información en Salud y Seguridad Social (CENDEISS) y la Fundación para la Docencia en Ciencias de la Salud (FUCODOCSA). Reconocido por el Colegio de Médicos y Cirujanos de Costa Rica desde el 07 de noviembre de 1997. VERIFIED 11/14/2006
 - 1984 –1991Universidad del Norte, Colombia, S. A. Barranquilla, Col
 - ⊗ Licdo en Medicina y Cirugia.
 - 1992 – 1996 Costa Rica University San Jose , CR

- **International Affiliate Member of the American Academy of Orthopedic Surgeons – membership current.**

Professional Experience

Orthopedic Procedures 2005 - 1833

- # Arthroscopic Knee (Meniscal Repair) - 340
- # ACL Repair - 210
- # Total Knee Replacements - 378
- # Total Hip Replacements - 495
- # Shoulder Surgeries (arthroscopic and open) – 410

Percentage Patients:

- Costa Rica 64%
- USA 15%
- South America 8%
- Canada 4%
- Other 8%

Languages Spoken:

- English
- Spanish
- French

FAQ's

1. **Are you board certified?**
 - Yes, medical license # 4990.
2. **What happens in case of a medical emergency (if something goes wrong)?**
 - We have emergency protocols to deal with them.
3. **What is the typical follow up for your most commonly performed procedures and what do those include?**
 - 10 days follow up, with physical therapy and control visits.
4. **Are your surgeries assisted? If so by whom and what are their credentials?**
 - My assistants are board certified orthopedic surgeons also.
5. **Do you specialize in certain procedures (more so than others)?**
 - Shoulder and knee arthroscopy; hip, shoulder and knee replacements.
6. **How many procedures do you perform a day?**
 - Three or four per day.
7. **How will I get my care and medication when I'm discharged from the clinic/hospital?**
 - I'll do follow up visits and take care of any problem.
8. **Are there consultation fees?**
 - If you pay for a procedure that includes follow up visits.
9. **Do you speak English?**
 - Yes, I do.
10. **Do I need to purchase any supplies for my recovery, such as ice packs, recovery garments, etc? []Yes [XXX]No If yes, what do I need to buy and what is the cost?**
11. **Are there fees for follow-up visits? []Yes \$_____ [xxx]No**