Course program

AOTrauma Course - Advanced Principles of Fracture Management

September 30 – October 3, 2015  Brdo pri Kranju, Slovenia
Value statement

AOTrauma is committed to improve patient care outcomes through the highest quality education. We strive to combine the right knowledge and surgical skills that empower the orthopedic and trauma surgeons to put theory into practice and to improve fracture management for the benefit of the patient.

7 Principles of Education

1. Based on needs
2. Motivates to learn
3. Relevant
4. Interactive
5. Provides feedback
6. Promotes reflection
7. Leads to verifiable outcomes

The AO principles of fracture management

Fracture reduction and fixation to restore anatomical relationships.

Fracture fixation providing absolute or relative stability, as required by the “personality” of the fracture, the patient, and the injury.

Early and safe mobilization and rehabilitation of the injured part and the patient as a whole.

Preservation of the blood supply to soft tissues and bone by gentle reduction techniques and careful handling.
Dear course participants,

We have the honor to welcome you to the AOTrauma Course—Advanced Principles of Fracture Management, which is planned and delivered to meet your needs using a competency-based curriculum approach and the AO’s seven principles for high-quality education.

AO Trauma’s innovative approach to education has been further strengthened as a result of the successful collaboration with the AO Education Institute in the application of state-of-the-art educational concepts in curriculum planning and all faculty development programs.

This course is one of our many educational activities for providing lifelong learning, from the Residents Education Program through to specialized Continuing Professional Development (CPD) for practicing surgeons and clinicians.

We believe that your active engagement in this course will result in improved care for your patients. Your current level of knowledge and skills will be challenged by the activities and throughout the entire event. We are confident that the combination of education principles and relevant content from our curriculum, as well as your interaction with colleagues and expert faculty will provide an effective learning experience that meets your needs.

This course is part of an overall competency-based educational program that includes many other activities and resources for self-directed learning. The educational activities in each program are developed by an international taskforce of clinical experts and educationalists and made available to you through the Education section of www.aotrauma.org.

We hope you enjoy the course and benefit from the networking opportunities it provides for you to share experiences with your colleagues.

Kodi Kojima  
Chairperson AOTrauma Education Commission

John (Jack) Wilber  
Chairperson AOTrauma International Board

If you enjoy the experience during your course and would like to stay in touch with the organization and its international network of surgeons, we invite you to become a member of AOTrauma. The benefits of membership, including options to get involved in new opportunities that advance trauma care are described at www.aotrauma.org.
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10 Saturday, October 3, 2015
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Goal of the course

The AOTrauma Course—Advanced Principles of Fracture Management builds upon the AO principles and techniques learned in the AOTrauma Course—Basic Principles of Fracture Management and focuses on the principles and techniques of operative fracture management in more complex injuries.

Target participants

The AOTrauma Course—Advanced Principles of Fracture Management is targeted at surgeons who are at the threshold of becoming independent surgeons and taking over decision-making responsibility for the treatment of complex injuries. Participants must have already completed the AOTrauma Course—Basic Principles of Fracture Management and must be actively involved in trauma management.

Course objectives

At the end of this course, participants will be able to:

- Apply reduction techniques in fracture management with attention to soft tissues
- Assess and treat complex diaphyseal and (peri)articular fractures using advanced application techniques
- Demonstrate strategies for assessing and treating open fractures and soft-tissue injuries
- Initiate appropriate management for patients with pelvic injuries and polytrauma
- Recognize complications and manage accordingly

Course description

Online precourse self-assessment prepares participants for the course and allows the faculty to tailor the course to the needs of the participants. Before attending the course, participants are expected to complete an online module on fracture reduction.

The course will be taught in a modular format. Each module consists of several evidence-based lectures, which will cover the key information required. In practical exercises participants will be trained in the application of various techniques. Discussing cases in small groups will help participants to understand decision-making and management skills.

After the course an online postcourse self-assessment will provide participants an opportunity to review the important topics from the course. In order to support self-directed learning, a range of additional online resources will be offered.
Chairpersons

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Prinčič Janez, Slovenia
### AOTrauma Course — Advanced Principles of Fracture Management

**Wednesday, September 30, 2015**

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<thead>
<tr>
<th>TIME</th>
<th>AGENDA ITEM</th>
<th>WHO</th>
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<tbody>
<tr>
<td>07:00–08:00</td>
<td>Registration</td>
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<tr>
<td>08:00–08:15</td>
<td>Welcome and introduction</td>
<td>D Brilej, A Kristan</td>
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<tr>
<td>08:15–08:30</td>
<td>Review of principles of fracture management</td>
<td>A Kristan</td>
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<tr>
<td>08:30–08:45</td>
<td>Tissue vitality and effect of injury</td>
<td>D Brilej</td>
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<tr>
<td>08:45–09:00</td>
<td>Pre op planning</td>
<td>M Cimerman</td>
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</tbody>
</table>
| 09:00–10:35  | **Practical exercise 1**  
Reduction techniques                                            | P Rupar              |
| 10:35–10:55  | **COFFEE BREAK**                                                           |                      |
| 10:55–12:10  | **Small group discussion 1**  
Reduction techniques — concepts and application                          |                      |
|              | Group 1                                                                      |                      |
|              | Group 2                                                                      |                      |
|              | Group 3                                                                      |                      |
| 12:10–12:25  | MIO—Minimizing surgical footprints                                          | R Arora              |
| 12:25–12:40  | Clinical indications for locked plating                                      | N Cohen              |
| 12:40–14:00  | **LUNCH BREAK**                                                             |                      |
| 14:00–14:15  | Proximal humerus fractures—to fix, to replace, or treat nonoperatively?     | N Cohen              |
| 14:15–14:30  | Distal humerus—intraarticular fractures and complications                   | J Pšenica            |
| 14:30–14:45  | Fracture dislocation of the elbow                                           | M Kastelec           |
| 14:45–15:00  | Distal radial fractures                                                     | T Havliček           |
| 15:00–15:15  | Summary or case-based comment                                               | T Havliček           |
| 15:15–15:35  | **COFFEE BREAK**                                                            |                      |
| 15:35–17:00  | **Practical exercise 2**  
Fixation of a four-fragment fracture in the proximal humerus using a proximal humerus interlocking system (PHILOS) plate | L Kovačič            |
| 17:00–18:30  | **Small group discussion 2**  
Upper extremity fractures — decision making and methods of stabilization   |                      |
<p>|              | Group 1                                                                      |                      |
|              | Group 2                                                                      |                      |
|              | Group 3                                                                      |                      |</p>
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<th>WHO</th>
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</thead>
<tbody>
<tr>
<td>08:00–09:30</td>
<td><strong>Practical exercise 3</strong>&lt;br&gt;Fixation of intraarticular distal radius fracture (LCP)</td>
<td>T Havliček</td>
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<tr>
<td>09:30–09:50</td>
<td><strong>COFFEE BREAK</strong></td>
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<tr>
<td>09:50–10:05</td>
<td>Femoral neck fractures—different patients; different problems</td>
<td>A Fabjan</td>
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<tr>
<td>10:05–10:20</td>
<td>Intertrochanteric fractures—treatment options and outcomes</td>
<td>R Arora</td>
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<tr>
<td>10:20–10:35</td>
<td>Current treatment and options of subtrochanteric fractures</td>
<td>I Movrin</td>
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<tr>
<td>10:35–10:50</td>
<td>Distal femoral fractures—treatment options and outcomes</td>
<td>N Cohen</td>
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<tr>
<td>10:50–11:05</td>
<td>Summary or case-based comment</td>
<td>N Cohen</td>
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<tr>
<td>11:05–12:45</td>
<td><strong>Small group discussion 3</strong>&lt;br&gt;Fractures of the femur&lt;br&gt;Group 1&lt;br&gt;Group 2&lt;br&gt;Group 3</td>
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<tr>
<td>12:45–14:30</td>
<td><strong>LUNCH BREAK</strong></td>
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<tr>
<td>14:30–16:00</td>
<td><strong>Practical exercise 4</strong>&lt;br&gt;Distal femur: fixation of an intraarticular type 33-C2.1&lt;br&gt;fracture using an LCP distal femoral plate or the LISS system</td>
<td>A Čretnik</td>
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<tr>
<td>16:00–16:20</td>
<td><strong>COFFEE BREAK</strong></td>
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<tr>
<td>16:20–16:35</td>
<td>Tibial shaft fractures (proximal, distal and segmental)</td>
<td>M Kovač</td>
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<tr>
<td>16:35–16:50</td>
<td>Complex tibial plateau fractures</td>
<td>L Kovačić</td>
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<tr>
<td>16:50–17:05</td>
<td>Early and definitive treatment of pilon fractures</td>
<td>D Brilej</td>
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<tr>
<td>17:05–17:20</td>
<td>Complex malleolar fractures</td>
<td>T Havliček</td>
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<tr>
<td>17:20–17:35</td>
<td>Calcaneus fracture - predicting and avoiding complications</td>
<td>M Andoljšek</td>
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<tr>
<td>17:35–17:50</td>
<td>Summary or case-based comment</td>
<td>M Andoljšek</td>
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<tr>
<td>TIME</td>
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<td>WHO</td>
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<tr>
<td>08:00–09:30</td>
<td><strong>Practical exercise 5</strong>&lt;br&gt;Management of a type 41-C3 bicondylar tibial plateau fracture using an LCP Practical exercise</td>
<td>A Fabjan</td>
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<tr>
<td>09:30–09:50</td>
<td>COFFEE BREAK</td>
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<tr>
<td>09:50–11:10</td>
<td><strong>Small group discussion 4</strong>&lt;br&gt;Fractures of the tibia, ankle and foot&lt;br&gt;Group 1&lt;br&gt;Group 2&lt;br&gt;Group 3</td>
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<tr>
<td>11:10–11:25</td>
<td>Mangled extremity management</td>
<td>B Sluga</td>
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<tr>
<td>11:25–11:40</td>
<td>Evaluation and emergency management of pelvic ring injuries</td>
<td>M Cimerman</td>
</tr>
<tr>
<td>11:40–11:55</td>
<td>Principles of acetabular fracture management</td>
<td>A Kristan</td>
</tr>
<tr>
<td>11:55–12:10</td>
<td>State of the art in the management of multiple-injured patients</td>
<td>D Krušič</td>
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<tr>
<td>12:10–13:40</td>
<td>LUNCH BREAK</td>
<td></td>
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<tr>
<td>13:40–15:10</td>
<td><strong>Practical exercise 6</strong>&lt;br&gt;Management of a type 43-C3.2 pilon tibial fracture using an LCP distal tibia plate</td>
<td>I Movrin</td>
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<tr>
<td>15:10–15:30</td>
<td>COFFEE BREAK</td>
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<tr>
<td>15:30–15:45</td>
<td>Treatment of metaphyseal and diaphyseal nonunions</td>
<td>I Gril</td>
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<tr>
<td>15:45–16:00</td>
<td>Violation of principles</td>
<td>R Arora</td>
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<tr>
<td>16:00–16:15</td>
<td>Infection ORIF</td>
<td>B Sluga</td>
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<tr>
<td>16:15–16:30</td>
<td>Periprosthetic fractures</td>
<td>M Cimerman</td>
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<tr>
<td>16:30–16:45</td>
<td>DVT Profilaxis</td>
<td>P Rupar</td>
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<tr>
<td>16:45–17:00</td>
<td>Closing remarks</td>
<td>D Brilej, A Kristan</td>
</tr>
<tr>
<td>18:30</td>
<td>AO NIGHT</td>
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### Special Academy of the 50th anniversary of pelvic surgery in Slovenia

**Saturday, October 3, 2015**

<table>
<thead>
<tr>
<th>TIME</th>
<th>AGENDA ITEM</th>
<th>WHO</th>
</tr>
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<tbody>
<tr>
<td>09:00–09:30</td>
<td>Pelvic and acetabular Surgery in Ljubljana – historic overview</td>
<td>J Prinčič</td>
</tr>
<tr>
<td>09:30–10:00</td>
<td>Severe Pelvic Injuries - How can we predict the outcome</td>
<td>M Cimerman</td>
</tr>
<tr>
<td>10:00–10:30</td>
<td>COFFEE BREAK</td>
<td></td>
</tr>
<tr>
<td>10:30–11:15</td>
<td>Bicolumnar Fracture of Acetabulum - My experience</td>
<td>K Mayo</td>
</tr>
<tr>
<td>11:15–12:00</td>
<td>Circulation of Femoral Head and Acetabulum - Trochanteric Flip Osteotomy</td>
<td>E Gautier</td>
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<tr>
<td>12:00–14:00</td>
<td>LUNCH</td>
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</table>
Course organization

AO Foundation, AOTrauma
Clavadelerstrasse 8, CH-7270 Davos,
Switzerland
www.aotrauma.org

AOTrauma Chapter Slovenia

Course venue

Venue
Kongresni center Brdo
Predoslje 39
SI-4000 Kranj, Slovenia
Phone +386 (0)4 260 15 01
www.brdo.si

Course information

Course fee
Early registration before July 1st EUR 600,00
Late registration after July 1st EUR 700,00
Included in the course fee are conference bag with
documentation, coffee breaks, lunches and course
certificate.

Accreditation
An application has been made to the UEMS-EACCME®
for CME accreditation of this event.

Evaluation guidelines
All AOTrauma courses apply the same evaluation
process, either audience response system (ARS)
or paper and pencil questionnaires. This will help
AOTrauma to ensure that we continue to meet your
training needs. In some regions, CME accreditation is
dependent on the participant’s evaluation results.

Intellectual property
Course materials, presentations, and case studies are
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Recording, photographing, or copying of lectures,
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Participants must understand that in this context
they may appear in these recorded materials. The AO
Foundation assumes participants agree that these
recorded materials may be used for AO marketing and
other purposes, and made available to the public.

No insurance
The course organization does not take out insurance to
cover any individual against accidents, theft, or other risks.

Mobile phone use
Mobile phone use is not allowed in the lecture halls
and in other rooms during educational activities. Please
be considerate of others by turning off your mobile
phone.

Dress code
Casual

Course language
English
Driving excellence and empowering the next generation

AOTrauma membership
Discover the advantages of joining the leading global trauma and orthopedic community, providing its members with education, research and networking opportunities worldwide.

Apply for membership at www.aotrauma.org

Join us and share your passion

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