

# UPDATE

JULY  
2017

## 2017 ANNUAL MEETING PREVIEW

## INSIDE



*White Marble Happy Buddha, Hilton Anatole Art Collection*

## YOUR INVITATION TO THE **AAHKS** 2017 ANNUAL MEETING

November 2-5 | Dallas, Texas

### **Mark I. Froimson, MD, MBA** **AAHKS President**

I have the honor to invite you to the 2017 AAHKS Annual Meeting that will take place November 2–5, 2017, in Dallas. This meeting is the highlight of the year for our organization, and has continued to draw record numbers of members, industry partners, and guests each year. This year, we are planning a full, but compact agenda of cutting-edge educational material that spans our field. Learn about effective surgical techniques, innovations in digital health, diagnostic advances and the latest from the research and advocacy fronts.

The AAHKS Annual Meeting continues to attract hip and knee surgeons from around the world who come to Dallas to learn from peers, exchange ideas and reconnect with friends. This year's Program Chair, Robert M. Molloy, MD, and Education and Communications Council Chair, Bryan D. Springer, MD, are working with their committees to put together the stellar scientific sessions, symposia, posters and surgical technique videos to round out the four-day program.

We will return to the Hilton Anatole with an updated approach to maximizing the benefits of this facility. With convenient access to the airports and within the downtown Design District, this hotel provides both a vibrant learning environment as well as plenty of opportunities to interact with colleagues.

As AAHKS President, I can assure you that our entire board, our numerous committees and our many volunteer reviewers are working tirelessly to bring you the very best in hip and knee educational content. Please mark your calendar now and plan to join us for this engaging event.

It is through the participation and ideas of our members that our association has become the most vibrant and impactful in the field. Thank you for all you do for AAHKS, I look forward to seeing you in Dallas!

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# AAHKS

## 2018 SPRING MEETING

MAY 4 – 5, 2018 • MIAMI, FLORIDA, USA

# SAVE THE DATE

### The InterContinental Miami

- Case-based learning
- Small-group setting
- Peer-to-peer education
- Expert faculty

Visit [www.AAHKS.org](http://www.AAHKS.org)  
for meeting details



# THE 2017 PROGRAM: ESSENTIAL TO PRACTICE

**Robert M. Molloy, MD, Program Chair**  
**Bryan D. Springer, MD, Education and Communications Council Chair**

The 2017 AAHKS Annual Meeting submission period ended with a record 1,387 abstracts, 24 symposia and 8 videos submitted. Abstracts are undergoing a blind review process, and those selected for presentation will be announced on the AAHKS website soon. The Program Committee will select approximately 60 abstracts for paper presentations at the podium during the general session and 200 abstracts to be displayed as posters.

The committee is also wrapping up review and selection of the symposia and surgical technique videos that round out this extraordinary educational experience. Symposia range from clinical to healthcare management topics—total hip and knee arthroplasty, revision surgery, pain management, international perspectives, infection, and health policy among others.

In addition, industry-supported symposia featuring renowned faculty will fill out the schedule of options on Thursday and Friday before the start of the general session on Friday afternoon. The lineup of presentations covers topics from surgical techniques to practice management to patient satisfaction.

The “Ask the Experts” case sessions take place on Friday in new meeting rooms that can accommodate their growing popularity. Participants can present and discuss complex primary and revision hip and primary and revision knee cases with total joint experts. If you would like to show a case, please RSVP to [meeting@aaahks.org](mailto:meeting@aaahks.org), and bring along your case files on a USB flash drive.

“The Business of Total Joint Replacement: Surviving and Thriving” has become an essential component of the Annual Meeting. Co-chaired by Jay R. Lieberman, MD and William A. Jiranek, MD, FACS especially for hospital, practice and out-patient surgery center administrators, payors and surgeons, this course focuses on improving quality, reducing cost, and standardizing patient care.

Clinical professionals have joined AAHKS as members and come to Dallas each year to learn alongside their peers in the Orthopaedic Team Member Course. Sponsored by AAHKS, this course is the only program specifically focused on adult reconstructive content for orthopaedic team members. Jason M. Hurst, MD, Chair, and James A. Browne, MD, Co-Chair encourage PAs, RNs, surgical assistants and physical therapists to register early as this course fills up fast. Clinical Affiliate members of AAHKS may also choose to register for the Annual Meeting general session at a reduced rate.

AAHKS members rely on the mobile-friendly AAHKS website before, during and after the Annual Meeting for meeting details. Be sure to visit [www.AAHKS.org/Meeting](http://www.AAHKS.org/Meeting) to get updates on the program and events that make the Annual Meeting essential to every orthopaedic hip and knee professional.



## REGISTRATION & TRAVEL

### Meeting Registration

Register for the Annual Meeting, the Orthopaedic Team Course and Business of Total Joint Replacement Course on the AAHKS website.

- 1 Go to [www.AAHKS.org/Meeting](http://www.AAHKS.org/Meeting)
- 2 Log in using your AAHKS username and password. Click the **Forgot username or password?** link to reset.

If you need assistance with registration, please email [meeting@aaahks.org](mailto:meeting@aaahks.org) or call 847-698-1200.

### Hotel Reservations

The location of the 2017 AAHKS Annual Meeting is the Hilton Anatole at 2201 Stemmons Freeway in Dallas, Texas, USA. Make hotel reservations by going to [www.AAHKS.org/Meeting](http://www.AAHKS.org/Meeting), and log in to access the room block reservation link, or call the hotel directly at 214-748-1200.

**About unauthorized solicitations:** AAHKS has contracted with Hilton Anatole to manage the AAHKS room block for the Annual Meeting. The hotel is the **only** source that can guarantee your reservation.

### SuperShuttle Airport Transportation

Meeting attendees can book the SuperShuttle shared ride shuttle from both airports to the Hilton Anatole. One-way rides to and from DFW are \$14 and Dallas Love Field are \$12 from October 29–November 14, 2017. Reservations must be made online to receive these rates. There is a \$2 service fee for reservations made by phone at 800-258-3826.

### Meeting Check-in

Prior to arriving in Dallas, you will receive an email with your AAHKS ID number to check in to the meeting. Bring this with you to streamline the check-in process and receive your badge.



## SAVE THE DATE: FUN RUN TO BENEFIT FARE

The “Orthos on the Move” 5K Fun Run and 1-Mile Walk takes place on Saturday, November 4 at 6:00 a.m. The course is on the Trinity Strand Trail that runs through the Dallas Design District near the Hilton Anatole. Proceeds will benefit the Foundation for Arthroplasty Research and Education (FARE).

# INDUSTRY SYMPOSIA PRELIMINARY SCHEDULE

Information is subject to change. Please visit the AAHKS website for the latest updates.

## Thursday, November 2, 2017

7:30–9:30 a.m.

### **Hip Fracture: Pain Management Impacting Delirium, Morbidity, and Mortality**

*Halyard Health*

*Grand Ballroom Section*

Attendees will gain a deeper understanding of the pain management therapy impacting delirium, morbidity, and mortality. In addition, there will be new data on morbidity and mortality for hip fracture patients. Discussion will include new data on morbidity and mortality, pain management best practices, collaboration with anesthesia and a hip fracture alert program.

12:30–2:30 p.m.

### **Enhancing Patient Care and Surgeon Quality of Life through Industry Partnerships**

*DJO Global*

*Grand Ballroom Section*

Health care in the U.S. continues to change and is being moved from a procedural-based to a value-based health care delivery model. A partnership between surgeons and Industry is now even more critical in order to succeed in this new era of value-driven decisions.

12:30–2:30 p.m.

### **Optimizing the Episode: Improving Total Joint Outcomes and Cost in the Era of Bundled Payments**

*Medtronic*

*Grand Ballroom Section*

The intent of this course is to provide an overview of bundled payment programs and the impact they have on orthopedic practices and hospitals. Faculty will share strategies for optimizing the episode of care, improving patient outcomes, reducing cost, and identifying and managing high-risk patients. Faculty will also discuss the role of surgeon leadership in designing total joint episodes of care and how to establish alliances between surgeons and hospitals.

3:00–5:00 p.m.

### **Same-Day Surgery: Transitioning to Outpatient Total Joints**

*Medtronic*

*Grand Ballroom Section*

The intent of this program is to provide rationale and discuss innovative methods used to perform outpatient total joint procedures. Course faculty will share their experiences transitioning to same-day surgery. Topics addressed include but are not limited to patient selection, pain management, reimbursement considerations, blood management, and utilization of physical therapy to optimize patient outcomes. The course is intended to give healthcare providers additional tools and confidence to perform same-day total joint replacements.

3:00–5:00 p.m.

### **From Theory to Reality: Successfully Delivering Value-Based TJA in a Non-Hospital Setting**

*Muve Health*

*Grand Ballroom Section*

In this symposium, we will discuss the application of outcome-focused, value-driven outpatient Total Joint Arthroplasty. Through the sharing of practical experience and verified patient outcomes, our clinical, patient education and program design expert panelists will aim to answer the following question: “Can you really succeed at performing value-based TJA in a non-acute care setting?” Our Discussion will focus on exploring and sharing successes, obstacles overcome, and lessons learned regarding value-based TJA program design, as well as the demonstration of Muve Health patient outcomes data as proof that you can successfully implement value-based TJA outside of a hospital setting.

## INDUSTRY SYMPOSIA PRELIMINARY SCHEDULE (CONT.)

**Friday, November 3, 2017**

**7:30–9:30 a.m.**

### **The Value of Sitting and Standing Images in the THA Care Pathway**

*EOS Imaging*

*Grand Ballroom Section*

During the symposium, you will hear presentations from THA experts covering:

- The value of full body, weight-bearing, low dose, 3D imaging in the THA care pathway
- The importance of global assessment to better understand the relationship between the spine and lower limbs' pathologies
- The benefits of 3D planning and post-operative assessment with EOS images and hip EOS online software
- Standing and sitting analysis and its impact on THA range of motion

**7:30–9:30 a.m.**

### **Novel Non-Opioid Techniques for Chronic Knee and Hip Pain for Non-Operative Patients**

*Halyard Health*

*Grand Ballroom Section*

Introduction into a non-opioid minimally invasive technique to help address non-operative patients suffering from chronic knee and hip pain. COOLIEF\* Cooled Radiofrequency is FDA indicated to treat OA knee pain and provides durable pain relief to those patients who are not surgical candidates.



**7:30–9:30 a.m.**

### **Full Function Faster: Optimizing Care Pathways in the Outpatient Setting**

*MicroPort*

*Grand Ballroom Section*

In this symposium, surgeons and HCP panelists will discuss care pathways in the outpatient setting, including pre-, intra and post-operative protocols and more. Surgeons will also discuss these care pathways as it relates to different surgical approaches such as direct superior and Portal Assisted THA and the Medial Pivot Knee System.





**10:00 a.m. – 12:00 p.m.**  
**Outpatient Total Joint Arthroplasty: Economics, Protocols, and Challenges**

*Corentec*  
 Grand Ballroom Section

This symposium, which has convened experts with many years of experience in outpatient TJA, will provide the audience with a general and specific outlook on the rationale behind outpatient TJA, the issues that stand in the way of implementing outpatient TJA. Experts will share their clinical path protocols.

**10:00 a.m. – 12:00 p.m.**  
**Mako Total Knee: Live Robotic-Arm Assisted Surgery**

*Stryker*  
 Grand Ballroom Section

This symposium will feature a live surgical demonstration of a Mako Total Knee procedure and interactive dialogue with surgeon faculty. The Mako Total Knee application is the newest application available on the Mako System and has been used clinically for over a year with over 3,500 cases completed through May 2017. The surgeon faculty will provide an update on the learnings from the empathic study, early clinical data, and case studies. The surgery will focus on the core features of the Mako Total Knee application: enhanced planning, dynamic joint balancing, and robotic-arm assisted bone preparation.



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# ANNUAL MEETING PRELIMINARY SCHEDULE

This is an overview of the activities for the 2017 AAHKS Annual Meeting to help you plan your travel. Information is subject to change. Visit the Preliminary Program on the AAHKS website as new details are added daily. A hard copy of the Preliminary Program will be mailed separately to members.

## Meals

Meals and breaks are included in the Annual Meeting registration. Breakfast is provided to all attendees Friday through Sunday; lunch and evening receptions on Friday and Saturday.

## CME CREDIT

For information on accreditation and CME credits available for the Annual Meeting program and Orthopaedic Team Course, please visit [www.AAHKS.org/Meeting](http://www.AAHKS.org/Meeting).

## Thursday, November 2, 2017

6:30 a.m.–8:30 p.m.

**Registration**

10:00 a.m.–5:00 p.m.

**Industry Symposia**

*Industry Symposia are separate from the official program planned by the AAHKS Annual Meeting Program Committee and do not offer AMA PRA Category 1 Credit™ unless noted by the sponsor.*

12:00–9:00 p.m.

**Surgical Technique Video Viewing**

5:30–8:30 p.m.

**AAHKS and FARE Board of Directors Meetings**

## Friday, November 3, 2017

6:00 a.m.–8:00 p.m.

**Registration**

6:00 a.m.–12:00 p.m.

**Poster set up**

6:00 a.m.–9:00 p.m.

**Surgical Technique Video Viewing**

6:00–8:00 a.m.

**Breakfast for all attendees**

7:00 a.m.–2:30 p.m.

**AAHKS Resident, Team and Business Courses**

7:30 a.m.–12:00 p.m.

**Industry Symposia**

*Industry Symposia are separate from the official program planned by the AAHKS Annual Meeting Program Committee and do not offer AMA PRA Category 1 Credit™ unless noted by the sponsor.*

9:00 a.m.

**Exhibit Hall/Learning Center Opens through Saturday**

12:00 p.m.

**Poster Exhibition Opens through Saturday**

12:45–2:00 p.m.

**“Ask the Experts” Case Sessions**

2:55 p.m.

**President’s Welcome to the 2017 AAHKS Annual Meeting**

3:00–6:15 p.m.

**AAHKS General Session**

6:30–8:30 p.m.

**Poster Reception for all attendees**

6:30–8:30 p.m.

**Exhibit Hall/Learning Center Open**

## Saturday, November 4, 2017

6:00 a.m.–8:00 p.m.

**Registration**

6:00 a.m.

**Exhibit Hall/Learning Center Opens**

6:00 a.m.–9:00 p.m.

**Surgical Technique Video Viewing**

6:00–7:00 a.m.

**Breakfast for all attendees**

6:55 a.m.

**Program Chair’s Welcome to the 2017 AAHKS Annual Meeting**

7:00 a.m.–6:30 p.m.

**AAHKS General Session**

6:30–7:30 p.m.

**Reception for all attendees**

## Sunday, November 5, 2017

6:00–10:00 a.m.

**Registration**

7:00 a.m.–12:00 p.m.

**AAHKS General Session**

12:00 p.m.

**Adjourn**



# SPECIAL COURSES FROM AAHKS

## The Orthopaedic Team Course

**Friday, November 3, 2017**  
**7:00 a.m. – 2:30 p.m.**

This course is designed for non-physician providers on hip and knee reconstruction teams. The course covers the diagnoses and treatments of disorders including diagnostic and radiographic work ups as well as a review of the physical exam and office-based procedures. Discussion of the topics and cases follows each session.

### Preliminary Overview of Sessions and Faculty (subject to change)

#### Session I: Knee Pain and Non-Arthroplasty Treatments

Moderator: *Jason M. Hurst, MD*

- Non-arthroplasty management of OA – *Jeremy M. Gilliland, MD*

#### Session II: Knee Arthroplasty, a Case-Based Discussion

- Indications for knee arthroplasty  
*Michael J. Morris, MD*
- Preparing for TKA cases  
*Jeremy M. Gilliland, MD*  
*Michael J. Morris, MD*  
*James A. Browne, MD*

#### Session III: Hip Pain and Non-Arthroplasty Treatments

Moderator: *William G. Hamilton, MD*

- Who is and ISN'T a candidate for hip arthroscopy?  
*Rafael J. Sierra, MD*

#### Session IV: Hip Arthroplasty, a Case-Based Discussion

- Indications for hip arthroplasty  
*Christopher E. Pelt, MD*
- Preparing for THA cases  
*Rafael J. Sierra, MD*  
*William G. Hamilton, MD*  
*Christopher E. Pelt, MD*



#### Session V: Physician Assistant Panel

Moderator: *Jason M. Hurst, MD*

Panel: *Kurt M. Kramer, PA-C*  
*Jill A. Erickson, PA-C*  
*Jeffrey S. Williams, PA-C*

#### Session VI: Perioperative Management

Moderator: *Michael J. Morris, MD*

- Medical optimization before arthroplasty – *Wesley G. Lackey, MD*
- DVT Prophylaxis review  
*Zachary D. Post, MD*

#### Session VII: Perioperative Complications

Moderator: *James A. Browne, MD*

- Evaluation of the painful arthroplasty  
*James A. Browne, MD*
- Evaluation of the infected arthroplasty – *Mark J. Spangehl, MD*
- “Things that keep us up at night,”  
Avoiding readmissions, When to manipulate  
*Mark J. Spangehl, MD*  
*Michael J. Morris, MD*  
*Kurt M. Kramer, PAC*  
*Jill A. Erickson, PAC*  
*Jeffrey S. Williams, PAC*

#### Session VIII: Post-Operative Complications

- DVT/PE, Therapy/Activity TKA vs UKA vs THA  
*Wesley G. Lackey, MD*  
*Zachary D. Post, MD*  
*Jason M. Hurst, MD*

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## SPECIAL COURSES FROM AAHKS (CONT.)

### The Business of Joint Replacement: Surviving and Thriving

Friday, November 3, 2017  
7:00 a.m. – 2:30 p.m.

This course is designed for administrators in all settings, payors and surgeons. The course is beneficial for those who deal with improving quality, cost reduction, standardization of care and risk. Discussion takes place with faculty after each session.

### The AAHKS Resident Arthroplasty Course

Friday, November 3, 2017  
7:00 a.m. – 2:30 p.m.

This course provides residents with the opportunity to learn the latest information regarding total joint arthroplasty from nationally renowned experts. The meeting includes both didactic and small group sessions where surgical techniques and cases will be reviewed. This is a unique learning experience and includes significant interaction with the faculty.

AAHKS selects 120 residents from the United States and Canada who are eligible to participate in this learning opportunity. Course attendees receive free tuition for both the Resident Arthroplasty Course and the AAHKS Annual Meeting. In addition, AAHKS provides airfare up to \$500, lodging, and meals. The course has already filled; however, if you would like to be added to the waiting list in case of a cancellation, please apply at [www.AAHKS.org/Meeting](http://www.AAHKS.org/Meeting).

## SURVEY SAYS MEMBERS VALUE ANNUAL MEETING

**Michael J. Zarski, JD, Executive Director**

AAHKS members have many reasons for attending the 2017 Annual Meeting in Dallas. The reason that gives us the greatest satisfaction is the change in practice and resulting improvements in patient care following the meeting.

A recent survey of AAHKS members documents the effect. We asked for examples of changes made in the care of your patients or in your professional practice because of your participation in AAHKS CME activities. The hundreds of examples provided covered every aspect from patient selection and pre-op counseling to physical therapy and post-op protocols.

More specifically, the use of tranexamic acid was most frequently cited, along with the use of aspirin for DVT prophylaxis. Others noted that they improved their protocols for surveillance of patients with metal-on-metal hips. New techniques for reducing surgical site infections and managing pain were also mentioned.

The Annual Meeting posters were acknowledged to be a valuable source of actionable information along with the papers presented from the podium. Annual Meeting ePosters and abstracts remain available on the AAHKS website.

With a record number of abstracts submitted for consideration, the 2017 Annual Meeting is likely to yield a wealth of knowledge for improving your practice and care of total joint arthroplasty patients.

## WELCOME 2017 GUEST SOCIETIES





# AAHKS

## 2017 ANNUAL MEETING

November 2-5 | Dallas, Texas

### THANK YOU TO VOLUNTEERS

AAHKS would like to thank the Program Committee and Reviewers for lending us their time and talent for the hard work involved in reviewing abstracts, symposia and videos to be presented at the Annual Meeting.

#### Program Committee

Robert M. Molloy, MD, Chair  
 Matthew P. Abdel, MD  
 James A. Browne, MD  
 John C. Clohisy, MD  
 William B. Macaulay, MD  
 Jonathan L. Schaffer, MD  
 Bryan D. Springer, MD

#### Submission Reviewers

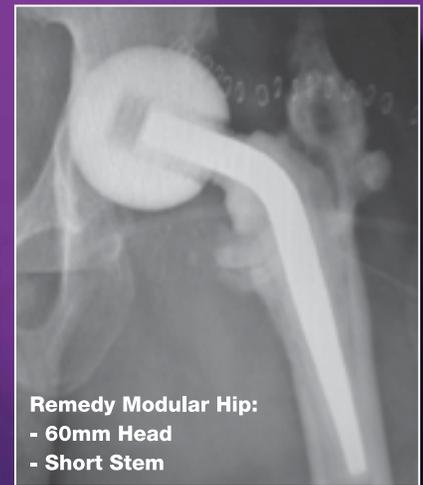
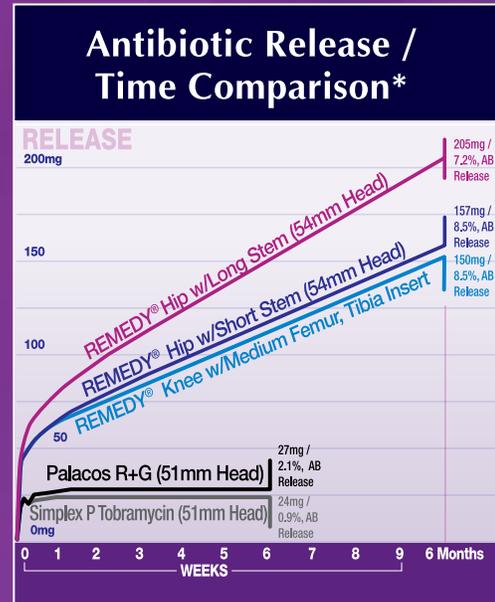
Jeffrey A. Ackerman, MD  
 Muyibat A. Adelani, MD  
 Kshitijkumar M. Agrawal, MD  
 Hari P. Bezwada, MD  
 Michael Blankstein, MD, MSc, FRCSC  
 Thomas E. Brown, MD  
 Timothy S. Brown, MD  
 Antonia F. Chen, MD, MBA  
 Herbert J. Cooper, MD  
 Michael B. Cross, MD  
 Brian M. Curtin, MD  
 David F. Dalury, MD  
 Stephen R. Davenport, MD  
 Charles M. Davis, III, MD, PhD  
 Daniel Del Gaizo, MD  
 Claudio A. Diaz Ledezma, MD  
 Stephen T. Duncan, MD  
 Robert Easton, MD  
 Paul K. Edwards, MD  
 Orry Erez, MD  
 Kenneth A. Estrera, MD  
 David W. Fabi, MD  
 Jared R.H. Foran, MD  
 Devon D. Goetz, MD  
 Gregory J. Golladay, MD  
 Nitin Goyal, MD  
 Erik N. Hansen, MD  
 Carlos A. Higuera, MD  
 Derek L. Hill, DO  
 Jason R. Hull, MD

Niraj V. Kalore, MD  
 James A. Kenney, MD  
 Yair D. Kissin, MD  
 Brian A. Klatt, MD  
 David J. Kolessar, MD  
 Jason E. Lang, MD  
 Cameron K. Ledford, MD  
 Jonathan H. Lee, MD  
 Brett R. Levine, MD  
 Tad M. Mabry, MD  
 Theodore T. Manson, MD  
 J. Bohannon Mason, MD  
 David J. Mayman, MD  
 Morteza Meftah, MD  
 Menachem M. Meller, MD, PhD  
 R. Michael Meneghini, MD  
 S.M. Javad Mortazavi, MD  
 Calin S. Moucha, MD  
 Sumon Nandi, MD  
 Jeffrey M. Nassif, MD  
 Hari K. Parvataneni, MD  
 Javad Parvizi, MD, FRCS  
 Kevin I. Perry, MD  
 Gregory G. Polkowski II, MD, MSc  
 Arjun Saxena, MD  
 Harry W. Schmaltz, MD  
 David T. Schroder, MD  
 Ran Schwarzkopf, MD, MSc  
 Thorsten M. Seyler, MD, PhD  
 Scott M. Sporer, MD  
 Garen D. Steele, MD  
 Juan C. Suarez, MD  
 Michael J. Taunton, MD  
 Krishna R. Tripuraneni, MD  
 Kenneth Urish, MD, PhD  
 Jonathan M. Vigdorichik, MD  
 Brad S. Waddell, MD  
 Samuel S. Wellman, MD  
 Joel E. Wells, MD  
 Brent W. Whited, MD  
 Khalid M. Yousuf, MD

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- Clarify Health Solutions
- Claris Healthcare
- ConforMIS
- Compulink Business Systems
- Consensus Medical Systems, Inc.
- Corentec
- Corin USA
- Cura Surgical
- Cutting Edge Laser Technologies
- CyMedica Orthopedics Inc.
- D-Gate
- DePuy Synthes
- DJO Global
- DNV GL Healthcare
- EOS Imaging
- Exactech, Inc.
- Exscribe, Inc.
- Flexion Therapeutics
- Gauthier Biomedical Inc.
- Halyard Health
- Histogenics
- iGetBetter, Inc.

- ImplantCast – North America
- Innomed, Inc.
- Innovative Medical Products, Inc.
- Intellijoint Surgical
- IOT – Innovative Orthopedic Technologies
- JointPoint
- Kinamed, Inc.
- Life Instrument Corporation
- Lima Corporate
- LinkBio Corp
- Mallinckrodt Pharmaceuticals, Inc.
- Match Grade Medical
- MatOrtho Limited
- MAXX
- Medacta
- Medtronic
- MicroPort Orthopedics, Inc.
- MiMedx Group, Inc.
- Muve Health
- Myoscience, Inc.
- Nimbic Systems
- OMNI
- Ortech Data Center Inc.
- OrthAlign, Inc.
- Ortho Development
- Orthofix
- Orthogrid Systems, Inc.
- Orthopedic Analysis, LLC
- Orthopaedic Media Group
- Orthopedics Today
- OrthoSensor
- Orthosonics Ltd
- OsteoRemedies
- Outpatient Surgery Magazine
- Pacira Pharmaceutical
- PeerWell



- Reflexion Health, Inc.
- Renovis Surgical
- Shukla Medical
- Smith & Nephew, Inc.
- StelKast, Inc.
- Stryker
- Surgical Care Affiliates
- Surgical Planning Associates, Inc.
- The GID Group, Inc.
- THINK Surgical, Inc.
- Thompson Surgical Instruments, Inc.
- Total Joint Orthopedics
- Trainer Rx, Inc.
- Twistle
- United Orthopedic Corporation (UOC)
- United Surgical Partners International
- Wolters Kluwer
- Xenex Disinfection Services
- Zimmer Biomet
- ZipLine Medical, Inc.

# AAHKS 2017 ANNUAL MEETING

November 2-5 | Dallas, Texas

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Thank you to the AAHKS Corporate Partners for their annual support of the AAHKS mission to advance hip and knee patient care through education and advocacy.

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## AAHKS / ACR PUBLISH PERIOPERATIVE MANAGEMENT GUIDELINES

According to a new guideline released by AAHKS and the American College of Rheumatology (ACR), the risk of joint infection resulting from total hip and knee replacements can be reduced with careful management of anti-rheumatic medications during the perioperative process. The guideline represents the first time rheumatologists and orthopedic surgeons have collaborated to develop recommendations.

“Periprosthetic joint infection remains one of the most common reasons for failure of hip and knee replacement,” said Bryan D. Springer, MD, an orthopedic surgeon at the OrthoCarolina Hip and Knee Center in Charlotte, N.C. and AAHKS Education Council Chair, who served as a co-principal investigator for the guideline project. “Because periprosthetic joint infections are associated with such high morbidity and mortality, we felt there was a dire need for perioperative management recommendations that could be subscribed to by both disciplines in order to provide arthritis patients with better outcomes.”

The guideline includes eight recommendations regarding when to continue, withhold and re-start medications commonly used to treat inflammatory rheumatic diseases (e.g., rheumatoid arthritis, spondyloarthritis, and systemic lupus erythematosus), as well as the optimal perioperative dosing of glucocorticoids. Key recommendations for reducing the risk of infection include:

- Discontinuing biologic therapy prior to surgery in patients with inflammatory arthritis.
- Withholding tofacitinib for at least seven days prior to surgery in rheumatoid arthritis, spondyloarthritis and juvenile idiopathic arthritis patients.
- Withholding rituximab and belimumab prior to surgery in all systemic lupus erythematosus patients undergoing arthroplasty.

In addition to rheumatology and orthopedic experts, a patient panel was incorporated to ensure the guidelines adequately represented patients’ concerns and preferences.

“There was a very clear message from the patient panel that they were willing to deal with flares if it meant reducing their likelihood for infections and other complications,” said Susan M. Goodman, MD, a rheumatologist at the Hospital for Special Surgery in New York City, who also served as a co-principal investigator. “The panel also noted that this preference could differ in lupus patients where a flare could mean inflammation of the organs, which poses a greater risk to their health than getting an infection from continuing their medications.”

ACR guidelines are developed using the Grading of Recommendations Assessment, Development and Evaluation (GRADE) methodology, which sets forth rigorous standards for judging the quality of the available literature and assigns strengths to the recommendations. Due to limited data in some areas, many of the recommendations were low to moderate in strength.

Both the guideline and a separate paper detailing patient insights on perioperative management have been published in *Arthritis Care & Research*, a peer-reviewed medical journal by the ACR and Association of Rheumatology Health Professionals (a division of the ACR). The guideline and patient panel paper are also available at [www.rheumatology.org](http://www.rheumatology.org).

# New! ACR/AAHKS Clinical Practice Guideline: Perioperative Management



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## RESEARCH COMMITTEE ACTIVITIES

### AAHKS Research Consortium

The AAHKS Research Committee has convened a consortium of centers that have interest in conducting research related to hip and knee arthroplasty. To date, 12 centers have joined. Centers that participate in the AAHKS Research Consortium (AAHKS-RC) will be part of multi-center studies that may be funded through the Foundation for Arthroplasty Research and Education or other sources. If you would like your center to participate in the AAHKS-RC, please complete the interest form in the Research section of the AAHKS website.

### FARE Grant Award

Thorsten M. Seyler, MD, PhD of Duke University is the recipient of the first Foundation for Arthroplasty Research and Education (FARE) grant. His study, "Perioperative Antibiotic Prophylaxis in Patients Undergoing Elective Total Knee Arthroplasty," was selected for the FARE Funding by the AAHKS Research Committee under the leadership of Javad Parvizi, MD. Dr. Seyler will complete a final report upon completion of the study.



## JOINT INFECTION BURDEN ANALYSIS WINS ISAR BEST POSTER

The American Joint Replacement Registry (AJRR), the official clinical data registry of AAHKS, was awarded the "Best Poster Presentation" by the International Society of Arthroplasty Registries (ISAR) at the 6th International Congress of Arthroplasty Registries meeting in May. The poster, "Infection burden in total hip and knee arthroplasty: an international registry based perspective," was based on an original research article published in the June issue of *Arthroplasty Today*.

Joint infection after primary hip and knee arthroplasty is the leading cause of joint replacement failure. AJRR compared and analyzed data from infection-related revision surgeries from six national arthroplasty registries. The authors hypothesized that infection burden would be similar across multiple national arthroplasty registries. The results showed that for both hip and knee arthroplasty, each registry with six-year data showed an increase in infection burden over the period of the survey.

Read this article and more in the June issue of *Arthroplasty Today* at [www.ArthroplastyToday.org](http://www.ArthroplastyToday.org), and view the poster at [www.AJRR.net](http://www.AJRR.net).

## CALL FOR 2018–2019 HEALTH POLICY FELLOWS



Now more than ever, the AAHKS presence in Washington, DC is needed to help guide our nation's leaders on issues that are important to hip and knee surgeons. We are uniquely positioned to influence policy, and Health Policy Fellows are part of this effort.

AAHKS is accepting applications for the 2018–2019 AAHKS Health Policy Fellowship. Applicants should be currently participating in a joint fellowship or in their first four years of practice. Send inquiries and applications to Joshua Kerr, Director of Advocacy and International Activities, at [jkerr@aaahks.org](mailto:jkerr@aaahks.org).

For details about the application requirements, visit [www.AAHKS.org](http://www.AAHKS.org).

## AAHKS HAS THE EAR OF HHS SECRETARY TOM PRICE, MD

In two meetings in as many months with Health and Human Services (HHS) Secretary Tom Price, MD, AAHKS leadership is staying on top of issues that impact hip and knee surgeons as well as the medical profession as a whole.

A leadership delegation from AAHKS met with Secretary Price and his health policy counselor in Washington, DC in April to discuss reform of quality measure reporting, opioid sparing therapy, physician-led quality reform and access to care for all patients.

AAHKS President Mark I. Froimson, MD, MBA, Immediate Past President William A. Jiranek, MD, FACS, AAHKS First Vice President Craig J. Della Valle, MD, Advocacy Council Chair Richard Iorio, MD and Evidence Based Medicine Committee Chair Adolph J. Yates, MD, Executive Director Michael J. Zarski, JD, Director for Advocacy, Joshua Kerr opened dialogue on these issues.

AAHKS is answering the call from Dr. Price to physicians to recommend more payment alternatives to fee-for-service Medicare. Secretary Price encouraged AAHKS to continue collaboration with CMS and HHS on these issues, and in June, he invited AAHKS to attend an invitation-only roundtable about regulatory burdens imposed on physicians that interfere with the physician-patient relationship. Your responses in the AAHKS HHS Physician Reporting Burdens Survey provided us with excellent feedback to present to the Secretary.





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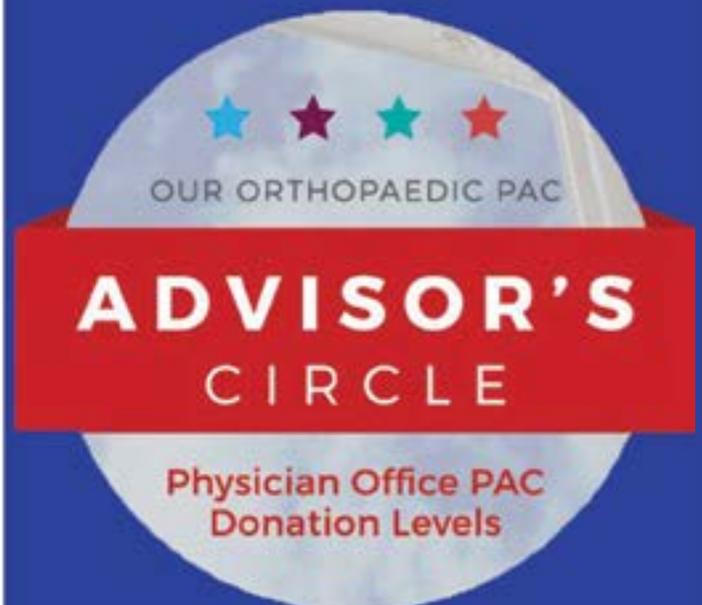
## Our Orthopaedic PAC

It is no secret that the new administration and Congress want big changes to our health care system. As these decisions take place, one thing is clear: we need a strong voice in Washington, DC. Over the last 17 years, the Orthopaedic PAC has provided us with that voice, helping the orthopaedic profession achieve a number of legislative wins.

The Orthopaedic PAC is our PAC, and regardless of your practice type or location, we are committed to you. We are the only national political action committee in Washington, DC representing Orthopaedic Surgeons before Congress. We continuously rank as one of the largest association PACs in the United States.

We are excited to welcome AAHKS to the Orthopaedic PAC Advisor's Circle. We look forward to working with all of you in this new capacity.

To donate to  
our PAC now,  
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**41444**



## UCLA RESIDENTS SPONSORED FOR AAHKS MEMBERSHIP



In the interest of benefiting AAHKS and the orthopaedic training program at the University of California, Los Angeles (UCLA), Benjamin C. Bengs, MD is serving as a reference and sponsor for residents interested in pursuing a career in arthroplasty.

“I believe this will improve their overall orthopaedic surgery education and enhance their arthroplasty experience during training. Most of these members in training will go on to arthroplasty fellowships and ultimately on to becoming full members of AAHKS,” said Dr. Bengs. About a quarter of graduating residents at UCLA go on to pursue arthroplasty fellowships.

The UCLA Orthopaedic Department and Dr. Bengs have worked out a plan with the AAHKS Membership department to pay the residents’ dues and application fees for the duration of their training, including fellowship. “This gesture represents a true commitment to the profession. It gives residents a great opportunity to join early and enjoy career-long enrichment through AAHKS initiatives,” said Eileen Lusk, Director of Membership. Learn more about Arthroplasty Surgeon in Training membership.

## ONN IMPLANT PRICING GUIDE 2017

The “2017 Hip and Knee Implant Review” published by *Orthopedic Network News (ONN)* will be available on August 2 for AAHKS members only. The issue features hip and knee implant price comparisons and other arthroplasty topics.

AAHKS makes this issue available to members as a benefit of membership. Members must not share or distribute copies of this issue per our agreement with ONN. To download the issue, log in to [www.AAHKS.org](http://www.AAHKS.org), and click the link in the My Profile section.

Volume 27, Number 3  
July 2016

### Orthopedic Network News

[www.OrthopedicNetworkNews.com](http://www.OrthopedicNetworkNews.com)  
A quarterly publication and on-line information service on cost & quality issues in orthopedics

#### 2016 Hip and Knee Implant Review

The number of US hip and knee implant procedures performed on inpatients in the United States increased between 2014 and 2015 by 2.9% to 1,337,700 according estimates from Millennium Research Group (MRG) of Toronto, Ontario. The number of hip replacement procedures grew 2.0% to 522,300 in 2015, and knee replacements grew 3.6% to 815,400. The fastest growing segments were revision hip procedures (up 2.9% over 2014), and revision knees (up 5.8% to 84,400). Revision knees again outnumbered revision hips in 2013.

*Orthopedic Network News* reports the “top 10” joint replacement hospitals based on the DRG-paid procedures. For the 2015 cases, data has been obtained from Optum Payer Solutions Consulting that acquired the MedPar data from CMS for the 2015 fiscal year. The joint replacement and revisions were extracted from this data and the number of cases for each hospital was ranked. Medicare managed-care cases are not included in this report.

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We are reporting the 2015 top 10 as well as the number of times the hospital has appeared in the top 10 since 2005. A large number of top ten appearances indicates that the hospital may have a long-standing large volume program. Many of these facilities stay in the top spots each year. For example, Hospital for Special Surgery has had the top spot for every survey performed by this newsletter, often with twice as many Medicare procedures as the hospital in the second spot. Four others have appeared in the top 10 every year for the past 10 years, including New England Baptist in Boston, Florida Hospital in Orlando, Beaumont Hospital in Royal Oak, Michigan, and Mayo Clinic Hospital in Rochester, Minnesota.

# Make sure the voice of hip and knee surgeons is heard at the national level.

At a time when health care is front and center in the national debate, members of the American Association of Hip and Knee Surgeons (AAHKS) should have a powerful say in how health policy is shaped.

The American Medical Association offers you that platform.

Your membership in the AMA strengthens AAHKS's voice in influencing national health care policy that puts patients and physicians first.

**Join the AMA. Call (800) 262-3211 or  
visit [ama-assn.org](http://ama-assn.org) today.**





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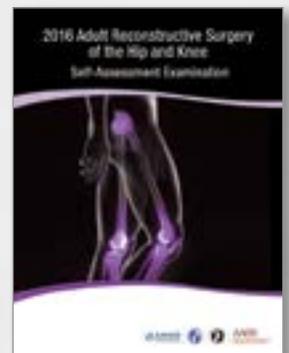
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