

WHAT'S INSIDE: REGISTER AND PLAN YOUR TRIP INDUSTRY SYMPOSIA SCHEDULE GENERAL SESSION SCHEDULE EXHIBITOR LIST

ANNIVERSARY

MEETING

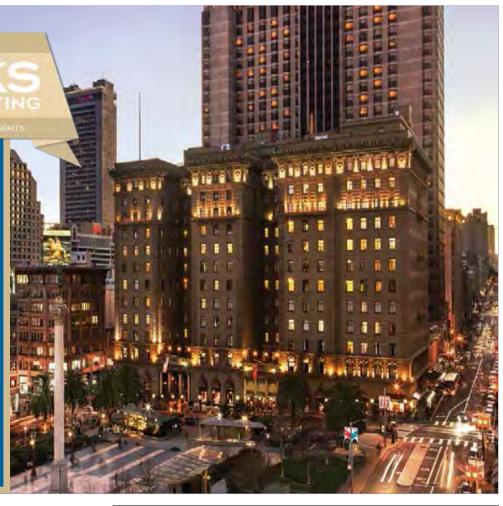
2020 AAHKS ANNUAL MEETING Preliminary program



April 29 - May 1, 2021 Westin St. Francis San Francisco on Union Square

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# YOUR INVITATION TO THE 30TH AAHKS ANNUAL MEETING

#### C. Lowry Barnes, MD AAHKS President

As the year 2020 is playing out, we have seen challenges in our profession that none of us could have imagined. When hip and knee surgeons were sidelined by the coronavirus pandemic and elective cases were postponed, many of us pivoted to finding the best way to continue to help patients and move science forward. We turned to telemedicine, authored articles to help patients and each other and polished up our research to submit to the 30th AAHKS Annual Meeting.

While we are still amid a pandemic, we have transitioned our personal and professional lives. As we get back to practice and back to in-person meetings in this new normal, AAHKS leadership is moving forward with a hybrid of the AAHKS Annual Meeting. We will host the in-person meeting in Dallas as we have done for the last 30 years with modifications for public health and safety as a top priority. We understand that some institutions have placed travel restrictions on personnel through the end of the year and some of us are just not ready to gather yet. To accommodate our colleagues who prefer to join remotely, we are offering a virtual Annual Meeting option. Whether in person or virtual, everyone can expect the premiere cutting-edge research that is the hallmark of the AAHKS Annual Meeting.

Program Chair R. Michael Meneghini, MD is navigating the Program Committee through this unchartered course by not only producing a stellar program from a record number of submissions but also by applying creative and flexible plans should the trajectory of the pandemic change. Contingency planning is a regular part of this committee's agenda.

You will also want to learn more about the many things AAHKS continues to lead on at the advocacy front. I look forward to conversing with our guest speakers during the Keynote session – fellow Arkansans, Mike Huckabee and Sarah Huckabee Sanders.

With that, it is with great honor that I invite you to the 30<sup>th</sup> AAHKS Annual Meeting. Whether you join us in Dallas or on your screen, we look forward to sharing the expertise we've honed over the last 30 years and the unique knowledge we've gained in 2020.



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### THE 30<sup>TH</sup> AAHKS ANNUAL MEETING: Flexibility is key

#### R. Michael Meneghini, MD, Program Chair

When the COVID-19 crisis hit our country, the Program Committee knew there would be an impact on our plans for the 30<sup>th</sup> AAHKS Annual Meeting. We knew that we would have to not only focus on the science of arthroplasty but also the science of a viral pandemic that has rocked our profession. What we didn't expect was a record-breaking number of abstract and symposium submissions and an outpouring of support to continue the Meeting in person. In a year when we prudently lowered our expectations, we have been buoyed by the passion of our hip and knee arthroplasty peers.

With an amazing program taking shape, the Program Committee is committed to producing a meaningful experience both in person in Dallas and virtually with live and recorded content. Symposium topics for the General Session include:

- Arthroplasty During COVID-19
- Revision THA & TKA Video Tips & Tricks
- Anesthesia & Analgesia Clinical Practice Guidelines
- Clinical Application of Hip-Spine Relationship
- Dual Mobility Bearings in Hip Arthroplasty
- Practical Primer for Outpatient Hip and Knee Arthroplasty
- Ever Popular Practice Norms Survey

Industry-sponsored symposia are already in place, and you can register now to attend these free presentations on Thursday and Friday before the start of the general session on Friday afternoon. As part of the hybrid Annual Meeting experience, some industry symposia will be available online starting this summer. Representing a significant improvement for the 2020 Annual Meeting, the Scientific Poster Exhibition will be 100% virtual. This frees up physical space to accommodate social distancing and adds the benefits of author interaction in the virtual poster platform and expanded displays of data. This will enhance the exposure and visualization to ensure posters will continue to get the recognition they deserve. The Poster Awards will remain a highlight of the Annual Meeting.

As the time comes closer, we have built in flexibility to adapt to changing local, state and federal guidelines for large gatherings. See AAHKS Executive Director Mike Zarski's article in this issue on specific changes we have made so far.

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 to get updates on the program and events.

You can also use the new AAHKS Annual Meeting app to keep track of the schedule each day. The new app will also make virtual participation fun and engaging. Please delete the old app from your mobile devices, and search "AAHKS Annual Meeting" in the Apple and Google Play stores to download the new app.

We will keep attendees informed of changes and new features to the Meeting in the coming months. On behalf of the 2020 Program Committee, thank you for your continued commitment to AAHKS and the Annual Meeting. We look forward to celebrating the 30<sup>th</sup> AAHKS Annual Meeting and everything it has meant to us in the past and more than ever in the present.



### **REGISTER AND PLAN YOUR TRIP**

#### **Meeting Registration**

Register for the Annual Meeting, the Orthopaedic Team Course and Business of Total Joint Replacement Course. Sign up for industry-sponsored symposia and the "Ask the Experts" case sessions.

1. Go to 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@aahks.org or call 847-698-1200.

#### **Hotel Reservations**

The location of the 2020 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, 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.

**Meeting Check-in** Registered attendees for both the in-person and virtual Annual Meeting will receive detailed check-in instructions in November.

#### Download the New AAHKS App

A new app for the 30<sup>th</sup> AAHKS Annual Meeting is available now to download in the Apple or <u>Google Play stores.</u>

IUAL MEETING

After registering for the Meeting, use your AAHKS primary email address to sign up for access to the app.

Enjoy advanced features like connecting and chatting with attendees and exhibitors, respond to live polls in scientific sessions and stay up to date with Meeting notifications.





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## 30th AAHKS Annual

Meeting

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### **JOIN US IN DALLAS!**

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

Each year, for the past 30 years, AAHKS has invited its members to the Annual Meeting. This year is no exception. Coming on the tail of a viral pandemic, some of you are affected by institutional restrictions or personal concerns about your health. If this is the case, we invite you to register as a virtual attendee and earn CME from live-streamed and recorded Annual Meeting content.

For everyone else, we offer the AAHKS Annual Meeting experience with the usual focus on cutting-edge research, in a compact format with no distractions. As you know, many other conferences and industry events have been canceled this year, so the AAHKS Annual Meeting may be your best opportunity to learn and improve as an arthroplasty surgeon.

An extraordinary amount of planning this year is dedicated to your safety. Our goal is to make attending the 30<sup>th</sup> AAHKS Annual Meeting no riskier than anything else you might be doing the first weekend in November. You would be impressed at the extent that everyone associated with the Annual Meeting shares this goal.

At this point, these are the safety modifications we have already made to the Meeting:



- Ask the Experts case sessions will be spread out among more rooms.
- AAHKS team, resident and business courses and breakouts will have attendance limits.
- The AAHKS 5K Fun Run & Walk has been canceled.
- Food and beverages are still included with in-person registration with new serving options.

State and local public health directives are just the starting point for the precautions being taken. The Hilton Anatole, the exhibit hall managers and even the Dallas airports are putting detailed policies, practices and protocols in place for your safety. In some cases, they have achieved certification with expert guidance from standard-setting organizations like the Global Biorisk Advisory Council.

So don't sit this one out! The experience will make you a better surgeon and you will be participating in an historic moment as we lead the way to a return to normal with due respect for the public health.

### WOMEN IN ARTHROPLASTY (WIA) CALENDAR OF EVENTS

#### Thursday, November 5

#### 2:30 p.m.

#### WIA Course: Techniques of Total Joint Arthroplasty An educational grant from Stryker

Come learn tips and tricks on how to ergonomically perform primary and revision total hip and knee arthroplasties, and how to address personal injuries that affect our ability to perform hip and knee arthroplasties.

#### Friday, November 6

#### 6:30 - 8:00 p.m.

#### WIA Booth Crawl for Education and Fun

Calling all residents and fellows, physician assistants, nurses, physical therapists and engineers to join WIA to exchange ideas and have fun while looking at the tools of the trade in the exhibitor booths. The goal of the event is to increase the exposure of women to the field of hip and knee arthroplasty.

#### Saturday, November 7 11:50 a.m. – 1:00 p.m. COVID-19: The NYU Experience

Claudette M. Lajam, MD, Associate Professor of Orthopedics, Chief Orthopedic Safety Officer at NYU Langone Health and Executive Committee member of the NYU Langone Health Medical Board, will tell the story of the COVID-19 case surge in New York City, the NYU system's response and ramp up after elective procedures resumed. She will also share her personal experience volunteering in the COVID-19 wards and her experience as a patient after contracting the disease.



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1. Hamilton W, Brenkel I, Barnett S, Allen P, Kantor S, Clatworthy M, Dwyer K, Lesko J. Comparison of Existing and New Total Knee Arthroplasty Implant Systems from the Same Manufacturer: A Prospective, Multicenter Study. Poster Presentation # 06014, AAOS. Las Vegas, NV. 2019.

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**THURSDAY, NOVEMBER 5<sup>тн</sup> 4:00 - 6:00 р.м.** ROSA<sup>®</sup> Knee Bioskills Experience

**FRIDAY, NOVEMBER 6<sup>TH</sup> 7:30 - 9:30 A.M.** Persona<sup>®</sup> Revision Knee Bioskills and VR Experience

**10:00 A.м. - 12:00 noon** Solutions to Expand or Optimize your Ambulatory Surgery Center (didactic symposium)

**12:00 noon - 2:00 р.м.** Avenir Complete<sup>™</sup> Hip Bioskills Experience

### Visit Booth 215



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

#### Thursday, November 5, 2020

#### 10:00 a.m.-12:00 p.m.

#### Making the Anterior Approach More Approachable MicroPort Orthopedics

While the anterior approach for total hip arthroplasty (THA) has excellent clinical outcomes, there are compromises associated with this approach, including the need for short femoral stems and offset instrumentation. In this session, surgeon faculty will review how the use of a portal in the anterior approach can make the femur as easy as the acetabulum, decrease the incidence of wound concerns and thigh numbness, and eliminate the need for these compromises.

#### 12:30-2:00 p.m.

#### Surgeon-placed Continuous Adductor Canal Block After Total Knee Arthroplasty

#### Avanos

Total knee arthroplasty (TKA), one of the most cost-effective and consistently successful surgeries performed in orthopaedics, has a reputation of significant immediate postoperative pain. This session will share a technique guide and retrospective outcome study of a surgeon-placed continuous adductor canal block after TKA that addresses this postoperative pain. Patients who underwent robotic-assisted TKA with surgeon-placed continuous adductor canal block in addition to a multimodal pain management protocol utilized significantly fewer in-hospital PRN morphine equivalents without additional operating room times.

#### 12:30-2:30 p.m.

#### Novel Concept or Industry Trend: A Critical Analysis of the Medial-pivot Design in Today's TKA Surgery *MicroPort Orthopedics*

In recent years, medial-pivot or medial-congruent designs for total knee arthroplasty (TKA) have become increasingly popular. The objective of this symposium is to share a critical analysis of these designs, discuss clinical applications, and review considerations of these designs in kinematic alignment and revision TKA.

#### 12:30-2:30 p.m.

#### Evolving Utility of Negative Pressure Therapy in Arthroplasty Patients: Review of New Clinical Evidence *3M/KCI*

Wound complications are reported in up to 10% of hip and knee arthroplasties. The incidence of postoperative wound complications is influenced by diabetes, obesity, quality of soft tissues, use of steroids, soft tissue handling and duration and complexity of surgery. We will explore the latest clinical evidence evaluating closed incision negative pressure therapy (CiNPT) to reduce postoperative complications and the emerging role of negative pressure in improving functional outcomes.

#### 12:30-2:30 p.m.

#### Potential Role of a Once-Daily Intravenous Non-Opioid Option

#### Baudax Bio, Inc.

Despite advances in surgical techniques over the past several decades, moderate to severe postoperative pain continues to be a widespread and unresolved healthcare problem. Guidelines for the management of postoperative pain recommend the use of multimodal analgesic treatment regimens that include around-the-clock non-opioid analgesics, specifically nonsteroidal anti-inflammatory drugs (NSAIDs). This program will feature a discussion about a once-daily intravenous NSAID. The discussion will include an overview of clinical trial data, and the potential role of this agent in multimodal analgesia for moderate to severe postoperative pain.

#### 3:00-5:00 p.m.

#### Data Driven Decision Making in THA and TKA Corin

Digital technologies are transforming the way we treat TJA patients. This session will showcase emerging, connected

# INDUSTRY SYMPOSIA PRELIMINARY SCHEDULE

technologies with the potential to enhance clinical decision making and simplify TJA procedures, including: - Hip / spine considerations in THA - Robotic soft tissue balancing techniques in TKA - Remote patient profiling, engagement, and management applications. Panelists will utilize interactive case studies to highlight the advanced information that can be acquired using contemporary orthopedic software platforms to optimize component selection and orientation in TJA. Panelists include: Dr. Matthew Austin, Dr. Douglas Dennis, Dr. Jonathan Vigdorchik, Dr. Gwo-Chin Lee, Dr. John Keggi, and Dr. Jeffrey DeClaire.

#### 3:00-5:00 p.m.

#### Kinematic Alignment – Personalized Medicine in 2020 *Medacta*

The ultimate goal in total knee replacement is a procedure that will get patients moving again, pain free, with minimal disruption to their everyday lives. A big part of this solution is how the patient feels after their surgery, and their satisfaction that their operative knee feels more "natural" and similar to what they have known their whole lives. Kinematic alignment strives to do this by restoring native anatomy that is individualized to each patient, restoring their anatomy to their pre-arthritic state. Understanding natural knee kinematics, and how implant design plays its part, as well as the simplified approach to achieving Kinematic Alignment is the goal of this talk.

#### 3:00-5:00 p.m.

#### Outpatient Total Joints: Transitioning to Rapid Rehabilitation

#### Medtronic

Patient selection, care pathways and pain/anesthesia protocols for rapid rehabilitation for outpatient total joints.

#### 3:00-5:00 p.m.

#### Redefining Robotics in Orthopaedics: Real Intelligence and the Connected OR Smith & Nephew

Outpatient total joint arthroplasty is continuing to increase in popularity and application. This session will focus on the use of Real Intelligence from Robotics along with patient data and protocols for outpatient joints. Best-practice strategies will be covered highlighting how the use of a robust portfolio of modern implants with these REAL Intelligence Solutions not only improves the efficiency in the OR but also improves upon patient outcomes and satisfaction.

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#### November 5-8, 2020 | Dallas, Texas | Booth #415

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### **INDUSTRY SYMPOSIA PRELIMINARY**

#### 3:00-5:00 p.m.

#### TKR in ASC and Technology

#### DePuy Synthes

This symposium will feature a panel discussion on the overall successful migration of TKR to an ASC setting with Technology. Attendees will learn about preoperative, perioperative and intraoperative efficiencies with emerging technologies.

#### 4:00-6:00 p.m.

ROSA Bioskills Experience-Lab Course Zimmer Biomet

#### Friday, November 6, 2020

#### 7:30-9:30 a.m.

AA Hip, Technology and ASC DePuy Synthes

This symposium will feature presentations on AA hips in an ASC setting, the impact of technology and surgeon satisfaction. This will include operational, financial, and clinical aspects of a TJR program in an ASC to achieve quadruple aim satisfaction.

#### 7:30-9:30 a.m.

#### Anesthesia Protocols for Opioid-Free Total Joints *Medtronic*

An anesthesiologist/surgeon team approach for opioid-free total Joints.



aaos.org/registries

#### 7:30-9:30 a.m.

Controversies in PJI: What Advances Have We Made Since the Consensus Meeting? *Heraeus* 

We'll explore some of the current debates and emerging research surrounding infection control and management. Topics will be debated by leading researchers and opinion leaders in the world of modern orthopaedics.

#### 7:30-9:30 a.m.

#### Cryoanalgesia and Periarticular Infiltration, a Multimodal Solution to Manage TKA Pain *Pacira BioSciences, Inc.*

This symposium will feature presentations on cryoanalgesia, discussion of optimized multimodal pain management protocols and an overview of recent and published clinical data. Surgeon presentations will include how integrating these multimodal protocols has helped them to enhance clinical outcomes, improve post-surgical recovery and reduce costs. Attendees will participate in an interactive forum with surgeon faculty.

#### 7:30-9:30 a.m.

Persona Revision Knee Bioskills and VR Experience – Lab Course Zimmer Biomet



### **SCHEDULE CONTINUED**

#### 10:00 a.m.-12:00 p.m.

The Need for Longer-Acting Local Anesthetics for Postoperative Pain Management

#### Heron

With longer pain relief, the use of opioids to treat pain could be significantly reduced, even eliminated. Healthcare providers would have a tool to manage postoperative pain, overcome the challenges of inflammation at the surgical site and help patients get back to their lives sooner. By attending this symposium, you will learn how possible innovations in local anesthetics could change the paradigm of postoperative pain management.

#### 10:00 a.m.-12:00 p.m.

Soft Tissue Management: Best Practices and Outcomes in Joint Reconstruction Surgery DePuy Synthes

Expert panel will discuss soft tissue challenges and opportunities in join reconstruction surgery. Presenters will share their research and expertise on topics such as water-tight seals, addressing surgical site infection, increasing closure efficiency, patient satisfaction and techniques and innovative products that can enhance wound closure success.

#### 10:00 a.m.-12:00 p.m.

Solutions to Expand or Optimize your Ambulatory Surgery Center ZimmerBiomet

#### 10:00 a.m.-12:00 p.m.

#### Outpatient Arthroplasty DJO Global

In this symposium, the panel will discuss how surgeons will be affected by declining reimbursements and recent CMS policy proposals in the upcoming years. Advanced products and technologies, optimized for the ASC, will be presented in a novel, interactive symposium format.

#### 12:00 p.m.- 2:00 p.m.

Hip Bioskills Experience - Lab Course Zimmer Biomet



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Patient-specific just-in-time inventory eliminates on-site storage

Over 60% projected processing cost savings<sup>1</sup>

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<sup>1</sup>Mhlaba, et al: Surgical Instrumentation: The True Cost of Instrument Trays and a Potential Strategy for Optimization. *J Am Coll Surg*, 219(4):646-655, 2014











SCAN ME

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#### **TOURNIQUET USE IN TOTAL KNEE ARTHROPLASTY:** WHY ARE SURGEONS ELIMINATING IT?

**TRADITIONAL TOTAL KNEE ARTHROPLASTY** (TKA) is performed with the use of a tourniquet (TQ), which creates a bloodless field for improved visualization. However, in some studies TQ use has been associated with delayed recovery, diminished quadricep strength and range of motion, edema, wound complications, nerve palsy, increased use of opioids, risk of deep vein thrombosis, and decreased patient satisfaction.<sup>\* A,B</sup>

> \* Yang, C MD; Nunley, R MD; DeCook, C MD: Evidence Supports Tourniquet-Free Total Knee Arthrophasty: Clinical Summary and Tips for Adoption in Clinical Practice, Reviewed and edited by Medtronic Medical Affairs, Transformative Solutions, 180 International Dr, Portsmouth, NH 03810, 74-82-2387 Rev A 2-19.

#### ADDITIONAL CLINICAL EVIDENCE\*

Evidence Supports Tourniquet Free Tota Arthroptasty: Clinical Summary and Tips for Adoption in Practice

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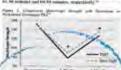
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#### WHAT LED YOU TO ADOPT A TQ-FREE TKA PROCEDURE?

"Oftentimes, patients can't differentiate between pain in the knee area and pain along the thigh. The primary reason I switched was because of recovery after the procedure. It just made sense to me that we are cutting off the blood flow to the only muscles used to recover after a TKA. That ischemia/reperfusion injury is real, and it takes months and months to recover from... The other reason for me was more practical – having to do with DVT risk. There are several studies and metaanalyses that have documented lower risk of blood clots and PE without a tourniquet."

- C. DeCook

"Patients complain about the thigh hurting after surgery. Think about the thigh pain. You put a blood pressure cuff on your arm for three minutes and you can't stand it. Now put something like that on your thigh for 40 minutes to an hour. There's going to be pain! That was the impetus for us to look at doing TKA without a tourniquet. Our center performed a prospective, randomized study comparing TQ to no TQ in patients undergoing bilateral TKA... We found that post-operative quad strength was significantly better with less pain in the TQ-free cohort."



**EASIER. BETTER. FASTER.** Using the **Aquamantys**<sup>™</sup> bipolar sealers to reduce blood loss in TKA can lead to several patient benefits. By reducing blood loss, your patient can maintain higher hemoglobin levels,<sup>1</sup> experience reduced drainage,<sup>2</sup> have less risk of hemarthrosis,<sup>3</sup> and have lower transfusion rates.<sup>2</sup> A tourniquet-free procedure may allow your patient faster recovery time with less post-operative pain.<sup>4-6</sup>



Marulanda GA, Krebs Ve, Bierbaum BE, et al. Hemostasis using a bipolar sealer in primary unilateral total knee arthroplasty. Am J Orthop. 2009;38(12):E179-183.
An Dearborn J. Aquamantys bipolar sealer in primary total knee arthroplasty. experience with 3,172 consecutive knee replacements. Poster presentation at American Academy of Orthopaedic Surgeons. Annual Meeting 2012: San Francisco, CA. 3. Resenberg AG. Reducing blood loss in total joint surgery with a saline-coupled bipolar sealer in primary. Untal knee arthroplasty. experience with 3,172 consecutive knee replacements. Poster presentation at American Academy of Orthopaedic Surgeons. Annual Meeting 2012: San Francisco, CA. 3. Resenberg AG. Reducing blood loss in total joint surgery with a saline-coupled bipolar sealing technology. J Arthroplasty. 2007;22(4):85(4):422-426.
Laursen AC. Kappel A. et al. Faster recovery without the use of a tournique t in total knee arthroplasty: a randomized study of 70 patients. Acta Orthop. 2014;85(4):422-426.
Kumar N. Yaday C. Singh S. et al. Evaluation of pain in bilateral total knee replacement with and without tournique t a prospective randomized control trial. Jml Clin Ortho & Trauma. 2015;6(2):85-88.
Ledin H. Aspenberg P. Good L. Tournique t use in total knee replacement does not improve fixation bit appears to reduce final range of motion. Acta Orthop. 2012;83(5):499-503.
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#### WHAT ARE THE BENEFITS OF USING A TOURNIQUET?

"Tissue necrosis or muscle damage isn't something that the surgeon can see during the procedure or easily quantify during the recovery period. Because of this reason, most surgeons discount the effects that the tourniquet has on the muscle and the tissue ischemia it creates."

#### -R. Nunley

- A. Rosenstein AD, Michelov YA, Thompson S, Kaye AD, Benefits of limited use of a tourniquet combined with intravenous tranexamic acid during tot knee arthroplasty. Ochsner J. 2016;16:443-449.
- B. Dennis DA, Kittelson AJ, Yang CC, et al. Does tourniquet use in TKA affect recovery of lower extremity strength and function? A randomized trial. Clin Orthop Relat Res. 2016;474:69-77.

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### **EXHIBITORS**

For a current listing of Exhibitors, please visit www.AAHKS.org/Meeting

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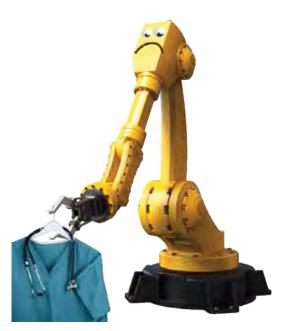
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### **ANNUAL MEETING PRELIMINARY**

#### Wednesday, November 4, 2020

10:00 a.m. - 5:00 p.m. Exhibit Setup

#### Thursday, November 5, 2020

6:30 a.m. – 7:00 p.m.	Registration
7:00 a.m. – 2:30 p.m.	Resident Lab Course
10:00 a.m. – 5:00 p.m.	Exhibit Setup
7:30 a.m. – 5:00 p.m.	Industry Symposia

Industry symposia are separate from the official program planned by AAHKS and do not offer AMA PRA Category 1 Credit™ unless noted by the sponsor.

2:30 p.m.	WIA Course – Techniques of Total Joint Arthroplasty An educational grant from Stryker
4:00 p.m. – 5:30 p.m.	YAG and International member receptions (by invitation)
5:00 p.m. – 7:00 p.m.	AAHKS Board of Directors meeting (by invitation)
7:00 p.m. – 7:15 p.m.	FARE Board of Directors meeting (by invitation)

#### Friday, November 6, 2020

6:00 a.m 7:30 p.m.	Registration
6:00 - 8:00 a.m.	Breakfast for all attendees
6:00 a.m 2:55 p.m.	Exhibit Hall/ Learning Center open
6:00 a.m.	AAHKS Virtual Poster Exhibition open 24/7
7:00 a.m. – 2:30 p.m.	AAHKS Special Courses

Orthopaedic Team Member Course Chairs: Denis Nam, MD, MSc and Jana L. Flener, PA-C Co-Chairs: Paul K. Edwards, MD and Christin A. Van Dine, PA-C

*The Business of Total Joint Replacement* Co-Chairs: Craig J. Della Valle, MD and Michael P. Bolognesi, MD

AAHKS Resident Course Chair: Michael J. Taunton, MD Co-Chair: Scott M. Sporer, MD, MS

7:30 a.m. – 12:00 p.m. Industry Symposia		
11:00 a.m1:00 p.m. Lunch for all attendees		
12:45 a.m2:00 p.m	n. "Ask the Experts" Case Sessions	
2:55 p.m.	President's Welcome to the 30 <sup>th</sup> AAHKS Annual Meeting	
3:00–6:30 p.m.	AAHKS General Session	
6:30-8:00 p.m.	Exhibit Hall/Learning Center opens	
6:30-8:00 p.m.	Reception for all attendees	



**PROGRAM** This is an overview of the 30<sup>th</sup> AAHKS Annual Meeting to help you plan your travel. Information is subject to change. Visit the Preliminary Program on the AAHKS website or Annual Meeting app as new details are added daily.

#### Saturday, November 7, 2020

#### Sunday, November 8, 2020

6:00 a.m 7:30 p.m.	Registration	6:00 - 10:00 a.m.	Registration
6:00 - 7:00 a.m.	Breakfast sponsored by	6:00 - 7:00 a.m.	Breakfast for all attendees
	Operation Walk AAHKS Committees meet	7:00 a.m. – 12:15 p.m.	AAHKS General Session
	informally	7:00 a.m.	AAHKS
6:00 – 7:30 p.m.	Exhibit Hall/Learn- ing Center open		Business Meeting Members nomi- nate and vote on
6:55 a.m.	Program Chair's Welcome to the		Board positions.
	30 <sup>th</sup> AAHKS Annual Meeting	7:15 a.m. – 7:30 a.m.	The Hip Society and The Knee
7:00 a.m. – 6:30 p.m.			Society Awards
	Session	12:15 p.m.	Adjourn
11:50 a.m. – 1:00 p.m.	Lunch for all attendees		
3:05 – 3:10 p.m.	FARE Grant Award		
6:30 – 8:00 p.m.	Reception for all		

attendees

#### Meals

All meals and breaks are included in the Annual Meeting registration.

#### CME

Participants will be able to claim up to 18 CME credits for this Meeting. Visit www.AAHKS.org/Meeting for complete details.



### SPECIAL AAHKS COURSES HELD ON FRIDAY

AAHKS

Due to social distancing protocols, course attendance may be limited.

#### The Orthopaedic Team Course

Chairs: Denis Nam, MD and Jana L. Flener, PA Co-Chairs: Paul K. Edwards, MD and Christin A. Van Dine, PA-C

This course will cover the diagnoses and treatments of disorders seen by the orthopaedic team specializing in hip and knee reconstruction. It is designed for the non-physician providers who care for these patients. Expert faculty will present nonoperative management of hip and knee arthritis, pre-operative issues, hip and knee basics, UKA, knee alignment targets, TKA robotics, THA templating, the hip-spine relationship, anterior vs. posterior approach and perioperative hot topics. The course fee is \$250. Register for this course alone or in combination with the AAHKS Annual Meeting.

#### **CME** Credits

Participants will be able to claim up to 7 CME credits for this Meeting. Visit www.AAHKS.org/Meeting for complete details.



The next FARE Grant deadline for letters of intent is August 1, 2020. Apply at www.AAHKS.org/FARE

#### The Business of Total Joint Replacement

Co-Chairs: Michael P. Bolognesi, MD and Craig J. Della Valle, MD

This course is beneficial for physicians who deal with improving quality, cost reduction, standardization of care and risk. Topics include: COVID-19 impact, financial engineering, outpatient TJA, APMs and billing and coding. Discussion takes place with faculty after each session. The course fee is \$350. Register for this course alone or in combination with the AAHKS Annual Meeting.

#### **CME Credits**

Participants will be able to claim up to 7 CME credits for this Meeting. Visit www.AAHKS.org/Meeting for complete details.

#### The AAHKS Resident Arthroplasty Course and Lab

Chair: Michael J. Taunton, MD

Co-Chair: Scott M. Sporer, MD, MS

This course is especially for PGY3 orthopaedic residents with an interest in adult reconstruction. Topics in total hip and total knee arthroplasty are presented by experts in the field. Visit www.AAHKS.org/Meeting to view the agenda. This year's course and lab have already filled.



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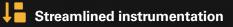
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### **THANK YOU TO VOLUNTEERS**

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

Kevin B. Fricka, MD

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- 1. Bell SW, Anthony I, Jones B, MacLean A, Rowe P, Blyth M. Improved accuracy of component positioning with robotic-assisted unicompartmental knee arthroplasty: data from a prospective, randomized controlled study. J Bone Joint Surg Am. 2016;98(8):627-635. doi:10.2106/JBJS.15.00664
- 2. Illgen RL, Bukowski BR, Abiola R, et al. Robotic-assisted total hip arthroplasty: Outcomes at minimum two year follow up. Surg Technol Int. 2017;30:365-372.
- 3. Mahoney O, Kinsey T, Mont M, Hozack W, Orozco F, Chen A. Can computer generated 3D bone models improve the accuracy of total knee component placement compared to manual instrumentation? A prospective multi-center evaluation. Presented at: 32nd Annual Congress of the International Society for Technology in Arthroplasty (ISTA); October 2-5, 2019; Toronto, Canada.
- 4. Suarez-Ahedo C, Gui C, Martin TJ, Chandrasekaran S, Lodhia P, Domb BG. Robotic-arm assisted total hip arthroplasty results in smaller acetabular cup size in relation to the femoral head size: a matched-pair controlled study. Hip Int. 2017;27(2):147-152. doi:10.5301/hipint.5000418
- 5. Kayani B, Konan S, Pietrzak JRT, Haddad FS. Iatrogenic bone and soft tissue trauma in robotic-arm assisted total knee arthroplasty compared with conventional jig-based total knee arthroplasty: a prospective cohort study and validation of a new classification system. J Arthroplasty. 2018;33(8):2496-2501. doi:10.1016/j.arth.2018.03.042
- 6. Hozack WJ. Multicentre analysis of outcomes after robotic-arm assisted total knee arthroplasty. Bone Joint J:Orthop Proc. 2018;100-B(Supp\_12):38.
- 7. Banks SA. Haptic robotics enable a systems approach to design of a minimally invasive modular knee arthroplasty. Am J Orthop (Belle Mead NJ). 2009;38(2 Suppl):23-27.
- 8. Hampp E, Chang T-C, Pearle A. Robotic partial knee arthroplasty demonstrated greater bone preservation compared to robotic total knee arthroplasty. Presented at: Orthopaedic Research Society Annual Meeting; February 2-5, 2019; Austin, TX.

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## AAHKS is accepting applications for the 2021-2022 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@aahks.org by October 1.

For details about the application requirements, visit the AAHKS website.

#### Available in August: ONN Implant Pricing Guide

The "2020 Hip and Knee Implant Review" published by Orthopedic Network News (ONN) will be available for download for AAHKS members only next month. 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, and click the link in the My Profile section.

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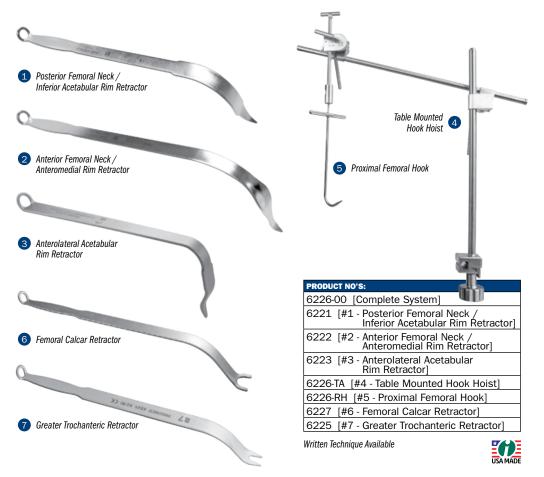


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