

# UPDATE

WINTER 2022

A MEMBER PUBLICATION

# 2021 RECONNECT



**WHAT'S INSIDE: 2022 HEALTH POLICY FORECAST • FARE GRANTS  
2022 SPRING MEETING • 2021 ANNUAL MEETING AWARDS**



# WINTER ISSUE 2022

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## 2022 Spring Meeting

MAY 12-14, 2022

THE WESTIN ST. FRANCIS  
ON UNION SQUARE

SAN FRANCISCO  
CALIFORNIA

Case-based learning

Small-group setting

Peer-to-peer education

Expert faculty



MAY 12-14, 2022

# AAHKS SPRING MEETING

CONNECTING THROUGH CASES.





# 2021 YEAR IN REVIEW

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

## New Employees Join AAHKS

AAHKS welcomed two new employees in 2021—Kenneth Robinson, Jr. and Stella M.G. Whitney. Kenneth, previously at Rush University Medical Center, started with AAHKS in March as the Communications Manager, replacing Denise Smith Rodd, who took a position with the American Academy of Pediatrics (AAP). Stella M.G. Whitney, formerly with the American Shoulder and Elbow Surgeons (ASES), started with AAHKS in October as the Membership Operations Specialist, replacing Patti Rose, who retired.

## 2021 Spring Meeting Goes Virtual

Due to restrictions imposed by the pandemic, the 2021 AAHKS Spring Meeting was conducted online. The Spring Meeting was chaired by Gregory G. Polkowski, II, MD, MSc, Education and Communications Council Chair, and Immediate Past President C. Lowry Barnes, MD. This smaller case-based educational activity took place over three sessions in April and May. The 2022 AAHKS Spring Meeting is proceeding as a live event on May 12-14 in San Francisco. Members can register through the AAHKS website: [www.AAHKS.org](http://www.AAHKS.org)

## Advocacy Efforts Evolve, Get Results

AAHKS leaders, including Health Policy Council Chair James I. “Hutch” Huddleston III, MD and Advocacy Committee Chair Adam J. Rana, MD, continued their work to mitigate negative impacts on Medicare payment for arthroplasty. Read more on advocacy efforts, starting on page 7.

## Annual Meeting Ends Run at Dallas Venue

The 2021 AAHKS Annual Meeting was the sixth and final Annual Meeting conducted at the Hilton Anatole Dallas. Program Chair Antonia F. Chen, MD, MBA delivered an exceptional program for the full-scale live event that attracted 3,000 total attendees in Dallas as well as over 500 virtual attendees. The 2022 AAHKS Annual Meeting will take place November 3-6 at the Gaylord Texan Resort and Convention Center.



## Dr. Schaffer Receives Presidential Award

The AAHKS Presidential Award is given to an AAHKS member in recognition of exceptional service to the Association and the profession. The 2021 Award was given to Jonathan L. Schaffer, MD, MBA, at the AAHKS Annual Meeting in November. Read more on Dr. Schaffer accepting the AAHKS Presidential Award on page 6.

## JOA Editor Steps Down

John J. Callaghan, MD completed a five-year stint as Editor-in-Chief of The *Journal of Arthroplasty*. During Dr. Callaghan's tenure, The *JOA* handled over 11,000 new submissions, cut the time to first decision in half—from 36 days to 18 days—and increased The *JOA*'s Impact Factor to 4.75. AAHKS President Richard Iorio, MD commented, “I think John's legacy is firmly in place and well deserved.” The new Editor-in-Chief of The *JOA*, Michael A. Mont, MD took charge on January 1st.

*continued on next page...*

## WIA Contributes to AAHKS Mission

The Women in Arthroplasty Committee (WIA), under the leadership of Audrey K. Tsao, MD, had a positive impact on the AAHKS education mission, among many other accomplishments. WIA members assisted and mentored women seeking to present at the Annual Meeting, which had a record number of women moderators, speakers, panelists and faculty. WIA members also organized educational activities and participated in panels and sessions on race and gender disparities in arthroplasty and caring for diverse and high-risk patients.

## Fellowship Learning Initiative Continues

Fellows Orthopaedic Continued AAHKS Learning, or "FOCAL," arose as a response to suspension of elective surgeries at many institutions. AAHKS leadership recognized this might significantly impair the fellowship learning experience in 2020. To help augment the fellows' learning experience, AAHKS created a free, online, interactive learning experience for adult reconstruction surgeons in training. AAHKS created the FOCAL Committee following the success of the initiative. Led by William G. Hamilton, MD, the FOCAL Committee is dedicated to enhancing adult reconstruction fellow education and continued their efforts throughout 2021, working to supplement the overall knowledge of arthroplasty trainees. View the free, educational recordings on the AAHKS website:

[www.AAHKS.org/FOCAL](http://www.AAHKS.org/FOCAL)

## Dr. Dorr Remembered

Lawrence D. Dorr, MD, a founder and past president of AAHKS, was the subject of a memorial video at the Annual

Meeting and was honored for his work as founder of Operation Walk by the naming of the AAHKS Humanitarian Award in his memory. Visit the AAHKS YouTube channel to view the memorial video.

## Humanitarian Award Given to Dr. Barrington

The 2021 Lawrence D. Dorr, MD Humanitarian Award was awarded to John W. Barrington, MD. Dr. Barrington was presented with the award at the AAHKS Annual Meeting in November. Read more about Dr. Barrington accepting the 2021 Lawrence D. Dorr, MD Humanitarian Award on page 5.

## Diversity Board Gains Traction

Last year was the launch of AAHKS Diversity Advisory Board (DAB) who saw to it that diversity in our membership was a top priority with the launch of AAHKS' first-ever census campaign. Read more about the Diversity Advisory Board and their efforts to equalize underrepresented minorities at AAHKS on page 14.

## YAG at Heart of Registry Initiative

The Young Arthroplasty Group (YAG) organized and sought volunteers from YAG and WIA to work with the American Joint Replacement Registry (AJRR) to develop and populate their Young Physician Committee. The committee seeks to involve new surgeons in practice with registry reporting, encourage institutional participation and develop a registry science curriculum that can be used for greater registry reporting.





## 2022 MEMBERSHIP RENEWAL

With an increase of 378 new members in 2021, the association continues its upward trajectory in membership growth. AAHKS 2021 memberships expired on December 31. If you haven't done so already, renew your 2022 membership in one of three convenient ways:

- **Online:** Login to the AAHKS website, click on "Renew" and enter payment information. You can select the one-time payment option or sign up for automatic renewal (memberships renew each December and can be changed at any time).
- **Phone:** Call the AAHKS office at 847-698-1200, Monday-Friday, 8:00 a.m. – 4:00 p.m. Central time.
- **Pay by Check:** Please make checks payable to **AAHKS**. Include the member's full name and AAHKS ID # on the check for proper credit.



Membership Category	2021 Totals
Fellow	2,525
Candidate	452
Arthroplasty Surgeon in Training	573
Associate	47
Emeritus	411
International	294
International Resident	8
Clinical Affiliate	240
Non-Clinical Affiliate	33
Honorary	2
<b>Total:</b>	<b>4,590</b>

### Don't Let Your Membership Expire

It only takes a few minutes to renew your AAHKS membership online. Simply log in at [www.AAHKS.org](http://www.AAHKS.org) to pay with a credit card.

Enjoy the convenience of renewing your AAHKS membership annually and sign up for auto-pay.

Don't let any of your membership benefits expire such as access to *The Journal of Arthroplasty* and reduced rates at upcoming educational events.

#### Questions? Please contact:

Eileen Lusk, Senior Director of Membership, at [Eileen@AAHKS.org](mailto:Eileen@AAHKS.org) or call 847-698-1200





## Presenting the **2021 LAWRENCE D. DORR, MD HUMANITARIAN AWARD** to **JOHN W. BARRINGTON, MD**

During its 2021 Annual Meeting, AAHKS presented its prestigious 2021 Lawrence D. Dorr, MD Humanitarian Award to John W. Barrington, MD. Dr. Barrington is a co-director of the Joint Replacement Center at Baylor Scott & White Frisco and a practicing orthopaedic surgeon with Plano Orthopedic & Sports Medicine Center in Plano, Texas.

Dr. Barrington received the 2021 Lawrence D. Dorr, MD Humanitarian Award in recognition of his leadership in bringing orthopaedic medical care to rural areas of Latin America and supporting childhood education in underserved regions of the world. He is the founder of MOVE (Ministry of Orthopaedic Volunteers and Education) Missions, a nonprofit that provides ongoing support to meet the medical and educational needs of underserved populations in the Dominican Republic. Through MOVE, he performed hundreds of total hip arthroplasties and helped to build an elementary school for 500 students. He trains both American and Dominican medical students and residents to ensure enduring access to care once a mission is complete.

**“John is the latest AAHKS member to be recognized for his selfless commitment to providing free hip and knee replacements to the poorest of the poor. AAHKS supports medical missions around the world through our AAHKS Global Outreach foundation.”**

*– Richard Iorio, MD, AAHKS President*

Dr. Barrington graduated from the University of California Davis Medical School in 2000, then completed his residency at the University of North Carolina and joint fellowship at Harvard-Massachusetts General Hospital.

The Lawrence D. Dorr, MD Humanitarian Award recognizes AAHKS members who have distinguished themselves by providing humanitarian medical services and programs with a significant focus on musculoskeletal diseases and trauma including the hip and knee in the United States or abroad.



**Nominations for the 2022 Lawrence D. Dorr, MD Humanitarian Award are now being accepted through April 15, 2022 at [www.AAHKS.org/Humanitarian](http://www.AAHKS.org/Humanitarian)**



## Presenting the **2021 AAHKS PRESIDENTIAL AWARD** to **JONATHAN L. SCHAFFER, MD, MBA**

Jonathan L. Schaffer, MD, MBA embodies all that the AAHKS Presidential Award is meant to recognize: exceptional service to the Association and the profession. Dr. Schaffer has made numerous contributions to the Association, especially to the growth and evolution of the AAHKS Annual Meeting Learning Center/Exhibit Hall, as the Chair of the Industry Relations Committee (IRC). Under Dr. Schaffer's leadership, the Learning Center/Exhibit Hall grew from a small table-top display area to a 22,000 net square-foot, science-based learning center featuring more than 100 exhibiting companies.

Currently, Dr. Schaffer is on staff at the Center for Joint Replacement in the Department of Orthopaedic Surgery where he co-founded the Orthopaedic Informatics Working Group and leads the Advanced Operative Technology Group in the Musculoskeletal Research Center at Cleveland Clinic.



**I have known Jon for 30 years. He exemplifies all that is right about AAHKS with his selfless dedication to the growth of the Annual Meeting and the relationship of AAHKS with our industry partners. We need to thank Jonathan L. Schaffer, MD, MBA profusely, for his contributions to the Association.”**

*– Richard Iorio, MD, AAHKS President*

**Dr. Schaffer is one of those leaders who thinks strategically and keeps the big picture in mind. His work on industry relations was informed by the perspective that education and clinical improvement are the main purposes of the AAHKS Annual Meeting and our partnership with industry must serve that end.”**

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



# 2022 HEALTH POLICY FORECAST

Prepared for AAHKS by National Health Advisors

## Biden Administration's Health Agenda

The end of 2021 was dominated by the Congressional debate over the Build Back Better Act (BBBA), the cornerstone of the Biden Administration's health policy platform, and Democrats' efforts to pass it without courting any Republican votes. While the House passed the BBBA on a party-line vote in November, it stalled in the Senate as Senator Joe Manchin (D-WV) made a surprise December announcement that he could not agree to support the bill. While BBBA will not pass as currently drafted, the most recent version of it would:

- **Expand Medicaid through ACA marketplace plans in states that have not yet expanded Medicaid eligibility**
- **Expand Medicare to cover hearing items and services**
- **Make the enhanced ACA marketplace insurance subsidies permanent**
- **Expand home and community-based Medicaid services**
- **Make funding levels permanent for the Children's Health Insurance Program (CHIP)**
- **Establish price controls for certain prescription drugs**

While Sen. Manchin threw cold water on the hopes of quickly passing a modified version of the House bill, the BBBA agenda isn't entirely dead. The White House and Congressional Leadership continues to engage with Manchin and other key Congressional parties to come to an agreement on a pared-down bill. It will be difficult to satisfy both moderate and liberal members of the Democratic Party, but not impossible.

There is no hard deadline for passing the BBBA, but Congress is heading into an election year. As the mid-term elections grow closer, many vulnerable Members of Congress are less inclined to take hard or controversial votes. Historically, the August Congressional recess is a major inflection point as Congress heads back to their

home districts to campaign, and most legislative work is wrapped up by then (or a quick September vote at the latest). However, Sen. Manchin (or any other Senator) could kill the BBBA by walking away at any time.

## Bipartisan Health Legislation

It is common for partisan priorities to dominate Congress in the first year of a Presidential term when new administrations have the most political capital following their electoral victory, particularly when they hold a majority in both chambers of Congress. As that momentum wanes, Congress typically turns to areas of common interest. Despite major health policy differences between the parties, Congress regularly passed bipartisan health care legislation like MACRA (physician reimbursement reform), the SUPPORT Act (opioid epidemic), the 21<sup>st</sup> Century Cures (FDA Modernization), or the No Surprises Act.

There is no shortage of bipartisan health care priorities in this Congress that could see action in 2022. Telehealth expansion remains a hot topic for legislators, where the CONNECT Act has a supermajority of Senate sponsors. House leaders like Energy & Commerce Health Subcommittee Chairwoman Anna Eshoo (D-CA) have called for making the temporary COVID telehealth flexibilities permanent. Reps. Susan DelBene (D-IL) and Mike Kelly (R-PA) have gained over 250 co-sponsors on their bill to curtail prior authorization in Medicare Advantage plans. A draft version of 21<sup>st</sup> Century Cures 2.0 has been released which covers public health and pandemic preparedness, caregiver integration, Medicare modernization, and some telehealth policies.

The hyper-partisan environment that defined 2021 made bipartisan co-sponsorship of health care bills challenging. Some Members of Congress simply declined to reach across the aisle because of the election certification vote, or the partisan BBBA. As those tensions relax, it will be a better environment for AAHKS to seek bipartisan introduction of legislation to address the preservice time data glitch that has unfairly cut reimbursement for total joint arthroplasty.



## Medicare Cuts

Physicians and other providers faced Medicare cuts from three different sources at the end of 2021. The task of fighting off all three cuts was an extremely heavy lift. Congressional Leadership and senior health committee staff had indicated that they had significant reservations about continuing to defer, delay, or mitigate these previously scheduled Medicare cuts.

AAHKS participated in a multi-stakeholder group to oppose the cuts and signed onto two letters that called on Congressional Leadership to take action. AAHKS also supported grassroots efforts to urge Members of Congress to sign onto two more letters to Congressional Leadership. We were successful in gaining over 245 House signatures on a letter led by Reps. Ami Bera (D-CA) and Larry Bucshon (R-IN) and 22 Senate signatures on a letter led by Sens. Susan Collins (R-ME) and Jeanne Shaheen (D-NH).

The good news is that Congress took up special legislation at the end of 2021 to address all three policies cutting physicians' Medicare reimbursement. The bad news is that none of the relief provided was perfect or permanent:

*continued...*



### Medicare Cut

2% Medicare Sequester  
(All Providers)

4% PAYGO Sequester  
(All Providers)

3.75% Medicare  
Physician Fee Schedule  
Cut (Physicians)

### Source of Cut

Expiring suspension of the 10-year Medicare sequester established in the Budget Control Act of 2011. Currently extended through 2030.

One-year sequester triggered by deficit spending under the PAYGO Act of 2010. Medicare cuts are capped at 4%.

Expiring relief from MPFS conversion factor reductions triggered by Part B budget neutrality mechanism.

### Congressional Relief

Q1 2022 – Suspended  
Q2 2022 – Reduced to 1% cut  
Q3 2022 – Full 2% cut restored

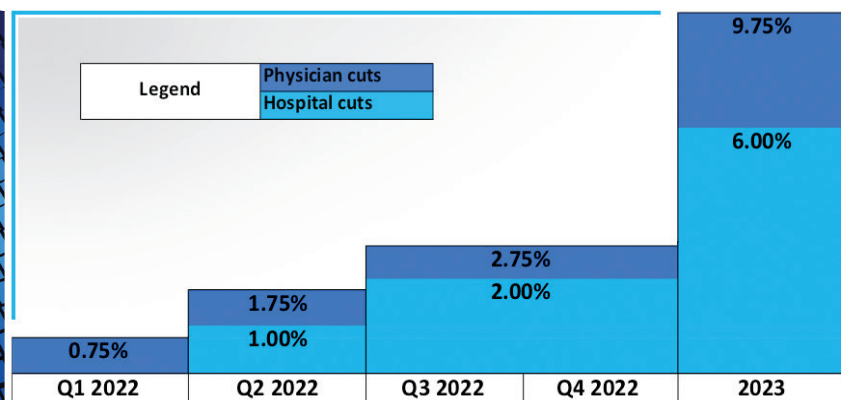
Delayed until 2023

3.00% increase to MPFS conversion factor for 2022



The bottom line is that in 2022 physician Medicare reimbursement will be cut across the board by 0.75% in Q1, 1.75% in Q2 and 2.75% in the second half of the year. In 2023 and beyond, the scheduled cuts only increase (see graph below).

On February 18, 2022, Congress considered another bill to fund the government. This is the first legislative vehicle that could carry additional relief for physicians. AAHKS will continue to advocate for additional relief to wipe out harmful Medicare cuts during a pandemic.



## “Surprise Billing” Regulations

As of January 1, 2022, patients are protected from receiving balance bills for unscheduled care. These patient protections enjoyed near-universal support from stakeholders and Congress. Deciding how remaining insurer-provider disputes were resolved was a much more controversial issue which took Congress two years to find agreement. Ultimately, Congress rejected a benchmarking model in favor of an Independent Dispute Resolution (IDR) process in the No Surprises Act.

At the end of 2021, Biden Administration published an Interim Final Rule (IFR) that largely unwound Congress’s vision by instructing the IDR entity to heavily favor an insurer-calculated “Qualifying Payment Amount” (QPA); creating a de-facto benchmark amount for disputed reimbursements, substantially below the average market rate. House Ways & Means Committee Chairman Richie Neal (D-MA) and Ranking Member Kevin Brady (R-TX) both objected to the IFR QPA methodology. Reps. Brad Wenstrup (R-OH) and Tom Suozzi (D-NY) led a letter with 150 members asking the Biden Administration to align their IFR with the statute and Senator Bill Cassidy (R-LA) followed suit with a letter of 24 Senators. However, House Energy & Commerce Committee Chairman Frank Pallone (D-NJ) and Senate HELP Committee Chairwoman Patty Murray (D-WA) both expressed support for the Administration’s methodology.

With key Congressional leaders at odds with each other, legislative relief from the IFR QPA methodology is off the table.

Any relief for providers will come through the courts. The Texas Medical Association, the Association of Air Medical Services, the American Medical Association and the American Hospital Association have all filed lawsuits against the Biden Administration, challenging the implementation of the IDR process specifically.

While AAHKS members are not directly impacted by the No Surprises Act, the law does establish a price-setting regime that could be easily expanded to cover additional services, such as total joint replacement. As a precedent, it is important that the law’s implementation ultimately strikes a balance that does not penalize physicians and other providers in favor of plans.

## Medicare Fee-for-Service (FFS)

The Biden Administration used the 2022 Medicare payment regulatory cycle to reverse many Trump administration policies: eliminating the inpatient only (IPO) procedure list; granting automatic Medicare coverage for items deemed “breakthrough devices” by FDA; granting automatic Medicare coverage for devices and services if covered by commercial health plans; and reforming the drug and device reimbursement classification system. The 2023 regulatory cycle (beginning in May 2022) is the first opportunity for the Biden team to roll out its own, new Medicare policy proposals. The Biden-Harris campaign did not address Medicare regulatory issues as a part of their campaign platform, so there is significant anticipation over what is in store for providers. Some fear exists that CMS will continue its trend of finding means to reduce the growth of provider reimbursements.

CMS originally established the Merit-Based Incentive Payment System (MIPS) program in 2017 as one of two tracks under the Quality Payment Program to move Medicare clinicians to value-based payments. While MIPS has gone through incremental changes since its inception, the new MIPS Value Pathways (MVPs) will mark a significant shift in how clinicians report under the program. CMS points out that the new reporting framework aims to move away from siloed reporting of measures and activities towards focused sets of measures and activities that are more meaningful to a clinician’s practice, specialty, or public health priority.



CMS plans to gradually introduce MVPs beginning with the 2023 performance year so clinicians have time to prepare for the new reporting requirements. MVPs will be voluntary for the 2023-2027 performance years. CMS previously indicated it is considering making MVPs mandatory in 2028 and sunsetting the traditional MIPS program at that time. 2022 will be spent identifying any outstanding implementation concerns with MVPs.

## CMS Innovation Center

New leadership at the Center for Medicare & Medicaid Innovation (aka CMMI or the Innovation Center) has been completing a long assessment of all 50 existing Medicare innovation models and determining a new 10-year direction for CMMI. They found major challenges in setting benchmarks that determine cost-saving goals for payment

models, just as providers find it difficult to accept financial risk without flexibility for caring for certain populations. CMMI also states that health equity will be the centerpiece in every model going forward.

CMMI's 10-year goal includes using fewer models to capture more providers and broader patient populations. Leaders said that there will be more mandatory models and they will be oriented towards permanent transformation of the entire health care system, not only Medicare. CMMI also continues to emphasize that one of its goals is reducing overall Medicare expenditures. It will be interesting to see whether new CMMI models offer participating providers an opportunity to share meaningful savings. Look for 2022 to see the release of models intended to serve as a transitory bridge towards the 10-year goal.

# 2021 AAHKS ANNUAL MEETING AWARDS

## James A. Rand Young Investigator's Award: Questioning the "Nickel Free" Total Knee Arthroplasty

Presented to: **Charles M. Lawrie, MD, MSc**  
Washington University, St. Louis, MO

### Co-Authors:

Ryan M. Nunley, MD  
Tyler Moon, MD  
Toby N. Barrack, BA  
Kimberly A. Bartosiak, MD  
Rick W. Wright, MD  
Robert L. Barrack, MD



Charles M. Lawrie, MD, MSc  
presented by Rafael J. Sierra, MD

## AAHKS Surgical Techniques and Technologies Award:

**Patient Acceptable Symptom State (PASS) in Medial and Lateral Unicompartmental Knee Arthroplasty: Does the Status of the ACL Impact Outcomes?**

Presented to: **Kevin D. Plancher, MD, MPH**  
Plancher Orthopaedics, New York, NY

### Co-Authors:

Jasmine Brite, BS  
Karen K. Briggs, MPH  
Stephanie C. Petterson, PhD

Kevin D. Plancher, MD, MPH  
presented by C. Lowry Barnes, MD



## AAHKS Clinical Research Award:

**Are Minimum 2-Year PROMS Necessary for Accurate Assessment of Patient Outcomes After Primary TKA?**

Presented to: **Abhijit Seetharam, MD**  
Indiana University, Indianapolis, IN

### Co-Authors:

Evan R. Deckard, BS  
Mary Ziemba-Davis, BA  
R. Michael Meneghini, MD



Abhijit Seetharam, MD  
presented by Ran Schwarzkopf, MD, MSc

## AAHKS Best Podium Award:

**Femoral Perforation During Anterior Approach Primary Total Hip Arthroplasty: Incidence and Outcomes**

Presented to: **William G. Hamilton, MD**  
Anderson Orthopaedic Research Institute, Alexandria, VA

### Co-Authors:

Matthew C. Kinney, MD  
Henry Ho, MS

Dr. Hamilton at the 2021  
AAHKS Annual Meeting







## Missed the 2021 AAHKS Annual Meeting? Watch video replays and earn CME now.

Recordings from the 2021 AAHKS Annual Meeting are available for members and non-members to purchase on LEARN, the AAHKS online education resource, at [LEARN.AAHKS.net](https://LEARN.AAHKS.net)

The cutting-edge research, podium presentations and discussions were recorded and paired with CME assessments, allowing orthopaedic surgeons to earn over 22 hours of CME on demand.

Log onto the AAHKS LEARN platform using your AAHKS username and password, then select "2021 Annual Meeting Recorded Course for CME Credit" to purchase and access the content.



## Patient Education Material

Did you know that the Patient and Public Relations Committee has translated all their patient education articles and exercise guides to Spanish? The committee has also translated their 10 most read articles to Hindi, the second most common language among international AAHKS members.

Please share the website [HipKnee.AAHKS.org](https://HipKnee.AAHKS.org) with your patients, where they can access educational material, exercise guides, watch videos and more.

# 2021 AAHKS POSTER AWARDS

All posters presented virtually at the 2021 AAHKS Annual Meeting can be viewed online at <https://AAHKS.apprisor.org>  
The website includes a search by topic, author, keyword and award.

## 2021 Poster Award Recipients

### Complications Not Including Infection

*Predicting Total Knee Arthroplasty Outpatient Discharge: Surgeons vs. Insurance Companies*

**Authors:** Christine J. Wu, MD, Sean P. Ryan, MD, Zoe W. Hinton, MD, Lefko T. Charalambous, MBA, Samuel S. Wellman, MD, Michael P. Bolognesi, MD, Thorsten M. Seyler, MD, PhD

### Health Policy

*Predicting Total Knee Arthroplasty Outpatient Discharge: Surgeons vs. Insurance Companies*

**Authors:** Samuel Rodriguez, MD, Drake G. Lebrun, MD, Jose G. Rodriguez-Semidey, BS, Alejandro Gonzalez Della Valle, MD, Jose A. Rodriguez, MD, Michael P. Ast, MD

### Infection

*Antibiotic Administration Prior to Knee Aspiration Precludes Utility of Diagnostic Markers for PJI*

**Authors:** Akhil Katakam, MBA, Rishi Dave, MD, Hany S. Bedair, MD, Christopher M. Melnic, MD

### Non-Arthroplasty & Miscellaneous

*Total Hip and Knee Arthroplasty Patient Telemedicine Experience During COVID-19*

**Authors:** Nancy M. Giunta, PA-C, Phani S. Paladugu, MS, David N. Bernstein, MD, MBA, Melvin C. Makhni, MD, MBA, Antonia F. Chen, MD, MBA

### Primary Hip

*Repeat Dose of Intravenous Dexamethasone Can Effectively Reduce Pain and Opioid Use in Primary THA*

**Authors:** Carlos M. Lucero, MD, Agustin Garcia Mansilla, MD, Gerardo Zanotti, MD, Fernando M. Comba, MD, Francisco Piccaluga, MD, Pablo A. Slullitel, MD, Martin A. Buttarro, MD



MAY 12-14, 2022

# AAHKS SPRING MEETING

CONNECTING THROUGH CASES.



This year, the AAHKS Spring Meeting will return to an in-person event and get back to living up to its theme “connecting through cases” – featuring expert faculty, providing practical tips on arthroplasty.

The Spring Meeting boasts a more intimate setting, with attendance capped at 250. This gives attendees the unique opportunity to meet face-to-face with faculty and discuss hip and knee patient care. Registration is limited – reserve your spot now. We hope to see you in San Francisco on May 12-14, 2022.

For more information, visit us online at  
[www.AAHKS.org](http://www.AAHKS.org)

## Primary Knee

*Effect of Total Knee Arthroplasty on Coronal Alignment of the Ankle Joint*

**Authors:** Erel Ben-Ari, MD, Ethan S. Sissman, MD, Ittai Shichman, MD, Matthew S. Hepinstall, MD, Daniel Waren, MPH, Ran Schwarzkopf, MD, MSc

## Revision Hip

*Minimal Clinically Important Difference at One-Year Postoperatively in Aseptic Revision THA*

**Authors:** Ilya Bendich, MD, MBA, T. David Tarity, MD, Kyle Alpaugh, MD, Stephen Lyman, PhD, Peter K. Sculco, MD, Alexander S. McLawhorn, MD, MBA

## Revision Knee

*What Dose of Preoperative Opioids Affects Outcomes After Revision Total Knee Arthroplasty?*

**Authors:** E. Bailey Terhune, MD, Charles P. Hannon, MD, MBA, Robert A. Burnett, MD, Craig J. Della Valle, MD

## Objectives

- Analyze total hip and knee arthroplasty **cases**
- Investigate the patterns contributing to effective total hip and knee primary **arthroplasty** and **revision**
- Determine the strategies contributing to optimal **perioperative** and **post-operative** care, including **complication** management
- Consider effective **practice management** tips and related **health care policy**
- Report the highlights of the **2021 Annual Meeting**

## CME

The American Association of Hip and Knee Surgeons (AAHKS) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The American Association of Hip and Knee Surgeons (AAHKS) designates this live activity for a maximum of 15.5 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.





# FARE ADVANCING RESEARCH

The Foundation for Arthroplasty Research and Education (FARE) has announced the recipient of the FARE Grant, presented at the 2021 AAHKS Annual Meeting.

## **Functional Phenotypes of TKA Patients: A Key Step Towards Personalization**

Joshua D. Roth, PhD

University of Wisconsin-Madison

Despite advances in surgical techniques and technologies to more precisely achieve a desired alignment and soft tissue balance, the prevalence of unsatisfied patients and suboptimal function after total knee arthroplasty (TKA) remain unacceptably high. Traditional targets used with these advanced technologies do not account for the anatomy, biomechanics, demographics, or psychosocial status of a particular patient. Accordingly, the objective of this study is to identify functional patient phenotypes that will likely benefit from personalized targets for alignment and soft tissue balance. The expected outcome is a set of functional

phenotypes that will be the focus of a follow-up randomized controlled trial to evaluate improvements in outcomes using personalized targets for alignment and soft tissue balance, which the study team believe are the next steps towards personalize medicine in TKA.

The long-term goal is to develop a pre-operative planning algorithm to optimize implant type, implant alignment, and soft tissue balance to maximize post-operative function and satisfaction of each TKA patient by considering factors such as patient pre-operative anatomy, biomechanics, and demographics.

The application deadline for Fall 2022 FARE Grants is Monday, August 1, 2022. The application, which serves as the letter-of-intent, will be reviewed by the AAHKS Research Committee. Those invited to move forward will then be asked to submit a full proposal for final review. The winner(s) will be announced during the 2022 Annual Meeting in Dallas, Texas.





# DIVERSITY ADVISORY BOARD

The Diversity Advisory Board (DAB) has gotten off to a strong start, wrapping up its inaugural year (2021), under the leadership of Committee Co-Chairs Muyibat A. Adelani, MD and Adam A. Sassoon, MD, MS. In March of 2021, the committee successfully petitioned the Board of Specialty Societies (BOS) to add demographic data collection to the SF Match Common Fellowship Application for Orthopaedic Surgery. Now, all subspecialty societies, including AAHKS, will be able to track the demographics of fellowship applicants and matriculants in a systematic manner.

In summer 2021, the committee launched the first-ever AAHKS Membership Census that will not only capture demographic information on our membership, but also allows members to express their interest in various AAHKS opportunities. AAHKS is dedicated to promoting a more diverse group of leaders in arthroplasty, including women and underrepresented minorities. Completing the Census is a way for you to help us with that mission. If you have not already done so, please complete the Census by scanning the QR code below.

This year, AAHKS became a partner with Movement is Life, which is a multidisciplinary organization dedicated to addressing racial and gender disparities in musculoskeletal care. Representatives from our organization serve on the Movement is Life Steering Committee and assist with planning educational activities for the organization.

Finally, diversity was highlighted throughout our 2021 Annual Meeting in Dallas. A Symposium called “Caring for Diverse and High-Risk Patients: Surgeon, Health System, and Patient Integration” discussed the challenges that minority patients face when seeking orthopaedic care. There was also a full session of paper presentations on race and gender disparities in total joint arthroplasty. Diversity topics were also included in courses, including the Business of Total Joint Replacement Course.

Stay tuned for more from the Diversity Advisory Board in 2022!

## I was counted by AAHKS

### Have you completed the Census yet?



**AAHKS**  
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