AO North America

AO North America news

Issue Number 26 / June 2011

Feature Story
AO Foundation
Past President Spotlight

Dedicated to the advancement of patient care in orthopaedic trauma, hand, craniomaxillofacial, spine and veterinary surgery.
I am happy to report that 2011 looks to be another exciting year for AO North America. AONA® completed 17 courses in the first quarter, thanks to the hard work of our dedicated faculty and staff.

In the spotlight section of this newsletter, you will find out about the wonderful progression of hand education as a small endeavor to its present program of regional and comprehensive courses. You will also find a unique perspective in our special feature from James Kellam, MD, as AO Foundation Past President. You will discover the latest news from the specialty education committees as they continually work to improve education, community development, research and fellowship.

Planning has already begun for The Magic of Synergy: 2012 Challenges in Fracture Care Across Disciplines meeting taking place February 23 – 25, 2012 in Florida. Building on the success of the 2010 meeting in Phoenix, the 2012 meeting will include a carefully crafted scientific program, along with networking opportunities across disciplines. Check out the AONA website for more information.

AONA is pleased to announce the 2011 fellowship award recipients and first quarter resident research grant recipients. These educational programs support the life-long mentoring and education for surgeons throughout their careers.

I am pleased and proud to share these highlights with you, and I am eager to work with you as AONA continues to meet its mission to improve the care of patients with musculoskeletal injuries and their sequelae in North America, through education and research in the principles, practice and results of treatment. Because of the vision and hard work of our faculty, AONA is strong, strategic, and forward-looking.

Since my tenure as President concludes in July, I want to take this opportunity to express my sincerest gratitude to the AONA faculty, members, staff and course participants for their commitment and dedication. It has been a great honor for me to lead such a unique organization as AONA. It is an exciting time ahead for AONA as it transitions to a new governance structure and a new President. I am confident that AONA is poised to meet new challenges and remain productive and successful in the future. I encourage you to visit the website and read upcoming communications to find out how you can use your talents to get involved.

Sincerely,

John H. Wilber, MD
President, AO North America
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Send AONA any updates, life changes, etc. If there is anything that you would like to share with your fellow faculty, email us at editor@aona.org

Profile Updates
You may Log in to www.aona.org to update your profile. Email AONA Customer Service (customerservice@aona.org) to have your password reset.

AONA News is published twice annually, with occasional special issues. The goal is to strengthen and perpetuate the spirit of AONA fellowship and camaraderie. To share news, further information and feedback or if you would like a printed copy, please contact us at editor@aona.org

We have attempted to identify all contributors to this issue and apologize if anyone has been omitted from the Credits.

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SHORT BURSTS OF INFORMATION!
Look for these AONA BURSTS throughout the Newsletter.
Dear Colleagues,

The Magic of Synergy: Challenges in Fracture Care Across Disciplines takes place February 23 – 25, 2012 in Lake Buena Vista, Florida. Building on the success of the inaugural meeting held in Phoenix, this meeting is uniquely designed to bring together orthopaedic trauma, cranio-maxillofacial, spine, hand, foot and ankle and veterinary surgeons to discuss challenges in musculoskeletal fracture management. Open to surgeons across disciplines as well as fellows and residents, this is the perfect opportunity to learn about the latest ideas and innovations in a multidisciplinary setting.

The comprehensive scientific program will cover topics of mutual interest to all specialties, as well as specific sessions will address issues that are unique to each specialty. Combined with exciting, special events, 2012 Challenges in Fracture Care Across Disciplines is the must-attend scientific event for surgeons across all disciplines.

AONA will seek exhibitors and sponsors to support the meeting. Corporate supporters will have a unique opportunity to strengthen current relationships and cultivate new partnerships with surgeons across disciplines. The exhibitor and sponsorship prospectus is available at www.aona.org.

Take advantage of this exciting opportunity. We encourage your support and participation to make this meeting a success. We will continue to keep you informed with meeting updates and reminders. Hope to see you in Florida!

Respectfully,

Clifford H. Turen, MD
Director
2012 Challenges in Fracture Care Across Disciplines

2012 Meeting Planning Committees

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AO North America President
John H. Wilber, MD

AO North America President-Elect
Michael Baumgaertner, MD

Join us on Facebook for up-to-date information about the meeting!
Strong Debut for Across Disciplines Meeting in 2010!

The new multispecialty meeting, The Power of Synergy — Working Together for a Stronger Tomorrow, had a strong debut in Phoenix, Arizona on November 11 – 14, 2010. Over 200 surgeons, fellows, residents and exhibitors came from all over the world to make important contacts and explore the latest approaches from renowned thought leaders and AONA faculty. Cliff Turen, MD, Chair, 2010 AONA meeting, said, “Our goal to bring the specialties into one cohesive group reinforced the unity of purpose within AONA. The interactive discussions and featured networking opportunities capitalized on the strength of each specialty and encouraged ample discussion and thought-provoking ideas and solutions for attendees to apply to their practice.” The exhibit floor hosted participants eager to see the newest products and solutions from top vendors in the industry.

View the Founding Founders’ videos and photo slideshow from the 2010 meeting at www.aona.org

AO Teamwork

OTA 2010

The Inner Habor, Baltimore, Maryland was host to the 2010 OTA (Orthopaedic Trauma Association) annual meeting. AO North America and AO Foundation again worked together in the exhibit hall to spread the AO message. AO North America hosted more than 300 faculty, alumni and friends at the Centre Club, Downtown Baltimore in what can only be described as a wonderful evening for everyone.
To best describe what it means to be an AO Foundation President, an understanding of one’s career in AO is necessary. The interrelationships between the Foundation, its many parts, its diverse cultures and people are imperative to understand for anyone who wishes to take on a leadership role. My first introduction to the AO and its philosophy was as an orthopaedic resident and fellow in Toronto at the AO courses run by Joseph Schatzker, Marvin Tile and their usual guests, Professors Maurice Müller and Martin Allgöwer. These individuals demonstrated the AO’s mission to improve patient care through education and research such that it left an impressionable mark on my desire to participate in this organization. Over the years, I became AO North America faculty and progressed to the Chairman of the North American Musculoskeletal Education Committee culminating in developing the original Continuing Medical Education Review Committee to assure that AONA was in compliance with the new CME rules and regulations.

I learned the importance of the appropriate interaction between the Foundation and industry when I was part of a group led by Ted Hansen to develop the concept, techniques and implants for unreamed intramedullary nailing for open tibial fractures. Further development experience came by my appointment to AO Long Bone Technical Commission under the leadership of Norbert Haas and subsequently Pietro Regazzoni. Involvement with the Technical Commission and expert groups gives one a tremendous insight into the power and value of the AO.

It is not common for any implant industry or producer to commit to producing only implants approved by an independent development system driven by a group of knowledgeable surgeons who apply a high standard of excellence to implant and technique development. The interaction between the members of the Technical Committee was an excellent method of learning how to deal with people and to achieve compromise in very difficult and personal areas. As a result of these commitments with the AO, I was appointed to the Academic Council, the Foundation’s academic and scientific supervisory body and subsequently in the early 1990’s to the Board of Directors otherwise known as the AOVA. Being a member of these two organizations teaches one the functions and importance of the Foundation, its interactions and the interpersonal relations necessary to run the organization.

My ascent to the presidency was at a difficult time for the Foundation. It was during this time that the academic and scientific independence of the Foundation was in question. I was fortunate enough to be elected President-Elect with René Marti as the President. René was an excellent role model, as he was required to guide the Foundation back to a cohesive group. During this time I learned the necessary personal characteristics and attributes that one needed as president. In June 2004, I became President of the Foundation for a two-year term. When one takes over as President, no matter what your preparation prior to the event, it is a shock. It is at this time that you realize that you are the individual who is looked to for decisions, direction, leadership, strategy and problem-solving of an organization that has 250 employees worldwide, a committed surgeon leadership group and a budget in the vicinity of 80 to 85 million Swiss francs. It must be remembered that the President is supported by an extremely competent administrative and business group under the Chairman of the Board, Markus Rauh. As a team, the President and the Chairman of the Board interact to run the Foundation.

During my time as President, the Foundation began to seriously look at biomaterials and how they would fit into the future of the organization and evolved from complete implant technology to understanding the changing role of biotechnology in musculoskeletal injury care. The newly established Biotechnology Advisory Board under Margarethe Hofmann led the Foundation to becoming a recognized entity in the biotechnology research world as well as improving the Foundation’s peer review process and a reorganization of research. The Clinical Priority Programs were established to link clinicians with researchers to better focus their research and development output. With the support of the Academic Council, the Foundation established two major priority programs, one in osteoporosis and one in the management of large defect healing in bone, and laid the ground work for two more programs.
Both of these programs continue today and have been extremely successful in focusing the Foundation’s resource on clinically relevant topics. The legacy of this program has been the development by the AOCMF specialty of their clinical priority program in computer imaging, AOTrauma in the development of a priority program on the serious problems of infection and its management and AOSpine establishing a program in disc degeneration and regeneration.

The important interrelationships between regional and specialty development and membership required serious review. To strengthen both the educational aspects of the Foundation as well as allow the regions and specialties to grow, it became necessary to split AO International into an education division (AO Education) and a regional membership division. This significantly streamlined and helped the Foundation in its ability to present itself to the world as regional based international organization attempting to meet local need.

The relationship to Synthes and other commercial entities is an important one for the Foundation. It also has been defined by appropriate legal guidelines and contracts to assure a minimum of inappropriate conflicts. This legally defined relationship has responded to changes in the economic world and conflict of interest laws. As a consequence the AO Foundation and its surgeons are in what I feel is the best possible relationship with industry. As part of the negotiation team for a new relationship, I feel that we as the Foundation will be able to better educate, promote research and development while at the same time offering unbiased and non-conflicted interactions with our commercial partners.

One of the areas that became extremely personal is the relationship between the Foundation and AO North America, my home base in the Foundation. AO North America has become a successful, independent region addressing the needs of its membership. This relationship between the Foundation and AO North America has at times been somewhat rocky and unsure. During my Presidency, I made it a goal to try to understand the issues and if possible to assure that this relationship would flourish. Fortunately during my presidency, AO North America and the Foundation were able to work cooperatively in many different areas. Most particular was the area of education. With the ongoing demands in continuing medical education for accountability and conflict of interest in North America, it was mandatory that the Foundation understand and respond to this North American initiative. Fortunately being President and from North America, this allowed explanation and understanding of these issues and the Foundation was able to grasp what AO North America was doing and could start to integrate it into the worldwide education which only strengthened AO’s educational platform.

Another area is the misunderstandings caused by cultural differences. The AO Foundation is a Swiss-based organization and will always be such. Subsequently its philosophy and reaction to issues differs from that of a North American. Balancing these conflicts or misunderstandings is an important part of the President’s role, as many of these require personal interaction and compromise to solve. This is just not a “North American thing” but is a part of the Foundation due to its international membership and large size. These personality differences of individuals and the organization are the most difficult areas to understand and to solve with regards to the different regions. I believe the solution to this is ongoing discussion. The more one could put individuals who made decisions face-to-face to solve their issues the more it appeared that these problems would be resolved very rapidly. The most difficult to deal with was a lack of communication between both organizations. Once individuals could be apprised of what the situation was and what the goals were, it appeared that most times these conflicts could be resolved.

As to the future relationships between AO North America and the Foundation, they are extremely bright. As the Foundation has recognized that it is important to have both specialties and regions delivering its message, the organization itself has now identified its role. The Foundation is the source of information, strategy and support for both the regions and specialties. The Foundation must provide to the regions the resource that can be modified to carry out the message of AO. AO North America is different from AO Asia Pacific, AO Middle East and is different from AO Latin America. Each of these regions has to be able to take what the Foundation gives it with regards to its financial worth, its strategic importance, its guidelines and use these to support its specialties within its own regions. The matrix system that the Foundation has now developed functions well. The most important aspect within the system is people and people learning to work together.

With this said, the most important and prime concern with the relationship between AO North America and AO Foundation is the ability of individuals to be transparent and honest and work together. The Foundation as well as AO North America will see an increasing competition in scientific and educational realms. The Foundation and its regions and in particular AO North America will only be a success if we can include in our group the thought leaders in our specific specialties. To do this, the organization must remain open, transparent and provide these people the opportunity to discuss their needs appropriately. Another concern is the financial support for the Foundation activities. The Foundation must respond to the same economic issues that all of us have faced over the past few years. This demands a greater degree of fiscal responsibility and compromise so that the Foundation’s success in the world can be maintained. Consequently a greater need and understanding of how best to use the resource is going to be required in the next five years. This will mean that the surgeon leaders of the Foundation will need to interact in an honest, upfront manner and appreciate the needs of the organization and prioritize what will need to be done.

What have I benefited from my relationships personally and professionally as the President of the AO Foundation is an
“The most important aspect within the system is people and people learning to work together.”

excellent question. Personally, I learned a tremendous amount about organizational management, fiscal responsibility and in particular, personal relationships. I can say that I probably learned far more than I ever gave back during my Presidency. Professionally, the Presidency of the Foundation establishes you as a leader within your field. It is a select group of individuals who have been the past presidents and this brings one to a level of recognition that not many others can achieve. Most importantly I believe that professionally, this provides you with credibility as leader. The presidency also allowed me to travel the world and open up relationships with very committed and dedicated people, surgeons and others. This has enhanced my life significantly and I thank all those who I had the opportunity to interact with. I must also thank all the employees, especially those with whom the president works with daily, on their tremendous loyalty and enthusiasm to the mission and vision of the Foundation. Without these individuals, the Foundation would not be possible.

Finally why is participating in AO important? I believe the career I just outlined demonstrates why I think it is important. From the time I was a resident to now as a Past-President; the AO Foundation has been an integral part in my training, my education, my personal development and my pleasure in life. I have met many individuals who made major impacts on my life and have taught me many important lessons. It has helped significantly in my role as a surgeon and as a leader in my own institution. Another important aspect that is not well-recognized within AO is the relationship to my family. It may sound a little clichéd when talking about the so-called “AO family.” However, my career through the Foundation has benefited my family. The opportunity for your family to meet people around the world and establish friendships with them, to go to different countries and to learn what the AO is and to see people interact in an international and cooperative fashion have all been tremendous experiences for my family. Without AO, none of this would have been possible in my career or my family development. Consequently the participation in AO is extremely important for anyone to consider.
AONA Executive Committee Meeting Held in Paoli, Pennsylvania

The AONA Executive Committee Meeting was successfully held at the AONA office in Paoli, Pennsylvania on April 20, 2011. Committee members, Greg Evans, Eric Johnson, Richard Lange, Paul Manson, and AONA President, Jack Wilber attended the meeting. In addition, AONA President-Elect, Michael Baumgaertner, as well as Alan Ruggles, James Swift, Craig Vander Kolk were in attendance.

Dr. Wilber says, “I am pleased we were able to organize the meeting at the AONA office so the surgeons serving on the Executive Committee could interact and collaborate face-to-face with the AONA staff with whom they work on a daily basis.” He adds, “It is especially important to me that we are meeting here with AONA staff since this is the last Executive Committee meeting where I will serve as AONA President.” Dr. Wilber’s tenure as AONA President ends July 2011. He assured the group that he will still have an active role in the organization serving as Past-President.

Dr. Greg Evans, Dr. Eric Johnson and Dr. Paul Manson will also complete their terms of service on the AONA Executive Committee in July 2011. Meeting attendees acknowledged the exceptional support and important contributions these surgeons have provided in the leadership of the organization.

The productive meeting provided the opportunity to review the status of finance, accounting, MICME (web-based information system), education, faculty initiatives, governance and specialty updates; establish priorities for 2011; and resolve issues related to organizational objectives and strategic direction.

Welcome Aboard!

AO North America would like to welcome Melissa D’Archangelo, Chi Lam, Brenda Lowry and Elizabeth Williams as the newest members of the AO North America staff.

Melissa D’Archangelo Please help us welcome Melissa D’Archangelo to AONA as Director of Marketing, Communications and Extramural Programs. In her new role, Melissa will be responsible for the development and implementation of integrated market awareness, tactics and collateral, and execute the relationship building and funding of all AONA extramural health care professional programs. She has published in more than twelve peer-reviewed and health care professional journals. Melissa holds a BS in Marketing from Pennsylvania State University.

Chi Lam has accepted the position of Project Manager for AOSpine North America. Chi has ten years of experience in business development, medical education, clinical research, and marketing. She has worked for AOSpine International on a contract basis over the past 8 years working in different capacities including Managing Editor of InSpine and myAOSpine as well as serving as the industry liaison for the World Forum for Spine Research and Global Spine Congress.

Chi hold a Bachelor’s Degree in Neuroscience from the University of Colorado and a Master’s Degree in Anatomy and Neurobiology from Colorado State University. Her past experience as Research Director for the Spine Education and Research Institute in Thornton, CO will serve her well in her new role with AOSNA.

Brenda Lowry AONA is pleased to announce the addition of Brenda Lowry to the AONA team as the MSC assigned to the veterinary specialty. Brenda comes to us with over 20 years experience in the OR. Brenda is a registered nurse, has a Bachelors of Science degree in Nursing as well as a Masters in Nursing Administration. Brenda lives in Wayne with her husband and two children and enjoys spending time at the shore.

Elizabeth Williams Please join AONA in welcoming Liz Williams to AONA as the CME Administrative Assistant. Liz has strong technical skills and over ten years experience as an Executive Administrative Assistant most recently with AstraZeneca. Liz lives in Pomeroy, PA with her two daughters and enjoys sewing in her free time.
In 2010, AO North America migrated its information systems for participant registration, CME processing and Faculty support to the web. The heavy lifting has been completed. In 2011, we’ve begun to enhance the functionality and more importantly the useability of the systems. “Wizards” are being implemented to step Faculty through each phase of the process: from accepting to teach, to the review of information related to a specific course (formerly the Faculty Information Letter), and finally to the claiming of CME.

Faculty invited to courses after February 28, 2011 have received an invitation e-mail with a link to the Faculty Invitation Wizard. This wizard:

- Provides basic course information (course description, location and dates) and asks you to accept or decline
- Those accepting will agree to the terms and conditions for teaching at the event
- Allows for the update of contact information
- Provides brochure/program listings and the ability to revise
- Asks for current disclosure information
- Provides an opportunity to complete a lecture disposition for the course

Faculty Information Letters, including assignments, are normally sent 60 – 90 days before the start of the course. Letters sent after April 21, 2011 will utilize the new Faculty Information Wizard. The steps of the wizard include:

- Confirmation of participation
- The ability to update contact, brochure, and professional information provided when accepting to teach
- Update disclosure information
- Update lecture disposition decision
- Provide stipend and expense payment information
- Update W-9 information
- Review flight, hotel and ground transportation information
- Review faculty dinner information and confirm attendance
- Review of course assignments and confirmation of assignment acceptance
- Access to links for teaching information (lecture examples, lab information and videos, small group discussion cases, etc.)
- The ability to print the Faculty Information Letter
- Access to the Faculty view of the course page

We hope these new wizards will speed you through the processes leading up to a course, thus giving you more time to attend to the truly important aspects of education. If you have any feedback or suggestions, please feel free to contact us at webb.don@aona.org.
Join us for this unique meeting and experience the Magic of Synergy!

**February 23 – 25, 2012**  
**Disney’s Contemporary Resort**  
**Lake Buena Vista, Florida**

The meeting theme, “The Magic of Synergy — Working Together For A Stronger Tomorrow,” is uniquely designed to bring together orthopaedic trauma, craniomaxillofacial, veterinary and spine surgeons to discuss challenges in musculoskeletal fracture management. Open to surgeons across disciplines as well as fellows and residents, this meeting is the perfect opportunity to learn about the latest ideas and innovations in a multidisciplinary setting.

[www.aona.org](http://www.aona.org)

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**Show your AONA Support...**  
....get your gear at [www.aona.org](http://www.aona.org) today!

Visit the official AONA online store where you will find a collection of apparel, travel, office, recreational items and gifts.
This article highlights the wonderful progression of hand education as a small endeavor to its present program of regional courses and comprehensive courses. Similar to the evolution of other AO programs, it was the dedication and foresight of a few individuals that led to the development of the hand program. These early pioneers maintained this focus for three decades until the formation of NAHEC.

One of such founders is Alan Freeland, MD. He has been a guiding influence for the hand community for 30 years. Al completed his medical school at George Washington in 1965. Similar to most training experiences, he began in general surgery in Baltimore and then completed his orthopaedic training in San Francisco in 1975. After service in the army, he finished his training with a hand surgery fellowship in 1979. As compared to the present training programs, what a ten year residency!

He began his educational and professional career at the University of Mississippi, Jackson Medical Center. Unbeknownst to him, he would continue there for thirty years until his retirement. During the early years, he recognized the limited educational offerings in dedicated hand trauma.

In conjunction with Hill Hastings, Jesse Jupiter, and Diego Fernandez, the initial programs were discussion groups. It became apparent that management of hand injuries could be improved by implanting the techniques of early bone stabilization. The soft-tissue conditions could then be repaired and rehabilitated in a reliable fashion. These concepts were fostered by these early case discussions.

The management of hand fractures and the soft-tissue conditions really gained momentum as the techniques improved. The meetings became more regular and eventually organized into a comprehensive hand course. The goal was to reach a greater audience and expand the faculty. The AO principles were then organized as it related to hand anatomy. Young staff members, fellows and residents were included in the educational process. Al Freeland was a driving force with these endeavors by coordinating the programs, organizing the faculty, and developing teaching modules.

The hand program maintained a course every two years throughout the 1990’s and into the first decade of the 21st century. While these courses were successful, there became an apparent need for more courses. Once again, the mentors in hand surgery were influential in expanding the curriculum into a modular concept and hand workshops. Doug Campbell developed case discussion modules that corresponded with the lecture and lab modules. Tom Fischer was the guiding force in regional course development.

These single or one-and-a-half-day course workshops use the same modules as the comprehensive course. They are staffed by local AO hand faculty and enabled the AO to reach a much wider target audience within the plastic and orthopaedic surgery residencies. Dr. Freeland has developed an evaluation process for these courses. After his retirement from surgical practice, he has been instrumental in our meetings. We would not have been able to achieve such success without his guiding influence.
AO North America Hand Education Committee (NAHEC)

Hand education in AO North America has progressed to a level of distinction among the specialties in such that hand education is now noted as a specialty with its own listing of courses and category on the AO North America website as well as course listings.

The AO North America Hand Education Committee has been proactive in initiating many regional hand and wrist education workshops in addition to the advanced upper extremity cadaver course. Hand education within AO North America has grown considerably, from holding one comprehensive course every other year to five regional workshops and one advanced cadaver course just this year alone in 2011.

AO North America Hand Faculty chairs with the support of NAHEC members have demonstrated an outstanding job in planning these workshops and the advanced cadaver course. The Chairs have ensured the completion of the necessary documentation to support these activities to ensure compliance with criteria established by the ACCME.

Course Chairs are selected by the NAHEC. They develop workshop/course documentation which includes material that provides the justification of the need to offer such educational activities. Planning of an accredited activity involves taking steps of a detailed pathway. By first identifying the learning gaps and desired results in regard to hand education, a proposal can be initiated. The first step of the pathway identifies the educational needs (gaps) and the desired results; who are the learners and what is the scope of practice?

The Chairs have identified measurable learning objectives and have related them to physician attributes. The methodology and design of the program agenda which in most cases involves didactics, hands on activities and small group case based discussions is all a part of this. Linking the objectives to evaluation methods and outcome measures is the final step.

NAHEC looks forward to a busy 2012 with more opportunities to reach out and address the educational needs of more hand, plastic and general surgeons.

2011
Hand Course Schedule

Hand, Wrist and Elbow Fracture Management Workshop
October 22, 2011
Florham Park, NJ

2012
Hand Course Schedule

Hand and Wrist Fracture Management Course
March 15–18, 2012
Dallas, Texas

Hand and Wrist Fracture Management Workshop
April 21, 2012
Philadelphia, Pennsylvania
September 29, 2012
Ann Arbor, Michigan
May 5, 2012
Toronto, Canada
November 17, 2012
Los Angeles, California
May 19, 2012
St. Louis, Missouri
December 15, 2012
Indianapolis, Indiana

All activities are certified for Continuing Medical Education credit.
All courses subject to modification.

To register, please visit the AO North America website at www.aona.org
AONA CMF Specialty Council (AONA CMF SC)

As the current chair of the AONA CMF Council, I’d like to share with you recent organizational changes made since the last newsletter. You may notice a new moniker for what was the Education Committee. In the past months the AONA organization has adopted a different Governance Structure; bringing new and exciting opportunities to diversify the old committee and create additional possibilities for faculty to be more involved in the overall activities that make AONA CMF the leader in continuing medical education.

The CMF Specialty has continued to move forward with eLearning and some of the goals we set as a Committee. The first goal, implemented for the Minneapolis Principles Course conducted in September 2010 and continued through the Oak Brook Principles Course in April 2011, offered three modules on CD to a group of participants (selected at random) prior to attending the course. We requested they review the modules and be prepared to answer a series of AIRS questions at the course. Questions were designed to evaluate what was learned through the module review and also to rate if the group felt they were more prepared at the course.

Based on the feedback, the next goal is to offer several core lectures online as a prerequisite to attending the live course. Individuals will be asked to take a post test to gauge how much they understand. On site, participants will receive brief lectures aimed at clarifying any information not gleaned from the online lectures as well as, major points that need to be reiterated. By presenting the information online, the object is to allow additional time on site for practical exercises and small group discussions. As well, it would permit for more topics to be presented and/or the expansion of those already being offered.

A long term goal would be to have an application with modules developed to provide point of care (POC) instruction for surgeons at the patients’ bedside. While we feel we can achieve the first of these goals in a relatively short period of time the long term goal most likely will take additional time and resources. Currently, there is no time frame established for this goal.

At this time the Council is also actively planning for the 2012 Course schedule. The schedule includes thirteen courses that include eight Principles of Operative Treatment of Craniomaxillofacial Trauma & Reconstruction Courses, four Challenges and Advances Courses and the Advanced Symposium entitled: Advances in the Management of Craniofacial Surgery Focus: Perfecting Facial Reconstruction – The Mastery of Technique.

In conclusion, I would like to thank everyone for their continued contributions to AONA CMF Education. On behalf of the Council we look forward to sustained collaboration.
2011
Craniomaxillofacial Course Schedule

August 27 – 28
Principles of Operative Treatment of
Craniomaxillofacial Trauma and Reconstruction
Montreal, Quebec

December 3 – 4
Principles of Operative Treatment of
Craniomaxillofacial Trauma and Reconstruction
San Diego, California

2012
Craniomaxillofacial Course Schedule†

January 13 – 15
Maxillofacial Reconstruction:
A Focus on Ballistic Injury Management
New Orleans, Louisiana

February 10 – 11
Advanced Symposium:
Perfecting Facial Reconstruction –
The Mastery of Technique
Big Sky, Montana

March 10 – 11
Principles of Operative
Treatment of Craniomaxillofacial
Trauma and Reconstruction
Portland, Oregon

March 17
Challenges and Advances:
Focus — Orthognathics
Washington, DC

March 24 – 25
Principles of Operative
Treatment of Craniomaxillofacial
Trauma and Reconstruction
Boston, Massachusetts

March 31 – April 1
Principles of Operative
Treatment of Craniomaxillofacial
Trauma and Reconstruction
Quebec City, Quebec

All activities are certified for continuing medical education credit. All courses subject to modification.

†Partial Course listing for 2012, please visit our website for a complete listing.

To register, please visit the AO North America website at www.aona.org
2011 marks some significant changes for the North American Musculoskeletal Trauma Education Committee (NAMTEC). I succeeded Michael Baumgaertner as Chair of the Committee as Mike begins his term as president-elect of AO North America. The Committee also welcomed two new members. They were selected from a list of over 15 experienced and dedicated North American educators that met the selection criteria set by the Committee and responded to a call for applications and letters of interest. All the prospective candidates were supremely qualified to serve on the Committee and selecting only two new members was a difficult task. After multiple rounds of discussion and voting, the two new members were elected.

- Roger Wilber, MD, Orthopaedic Trauma Surgeon, MetroHealth Medical Center and Associate Professor, Case Western Reserve University School of Medicine Department of Orthopaedics
- Pierre Guy, MD, Associate Professor and Clinician-Scientist, Department of Orthopaedics, University of British Columbia

Two additional members of the Committee will be concluding their terms at the end of 2011. Interested North American faculty members will be invited to submit applications to the Committee this fall and the Committee will once again face the daunting task of electing two new members.

Also new this year are some essential changes to the structure of the Basic and Advanced courses and the role of the faculty who teach them. We are expanding the role of the session moderators and empowering them to take ownership of their course lecture module.

Session moderators will no longer limit themselves to speaker introduction and entertaining questions from the floor. Instead they will be tasked with controlling the content of their session; reviewing each speaker’s talk and providing direct face-to-face feedback, reviewing and emphasizing the objectives of their section for the audience, utilizing the speakers in case-based panel discussions and ensuring the audience’s comprehension of key concepts. To aid the moderators in their role, NAMTEC will be developing moderator’s tool-boxes that include the necessary teaching materials for each lecture module.

The role of the first-time faculty member will also change. Previously, our new AONA faculty were invited as “table instructors” and often shown to their pod and left to figure out their role alone. Going forward, all first-time faculty members will be assigned a senior mentor at their first course. Hopefully the two will be able to establish a relationship that allows the new faculty member an easy avenue to obtain feedback and benefit from some of the experience of the more senior faculty. It also helps highlight the importance of the student-teacher interaction at the lab tables and showcases what truly makes our organization different from others – our commitment to improving the quality of our educators and the camaraderie that exists amongst the faculty.

NAMTEC is also committed to expanding the collection of archived case examples available to North American faculty for their teaching purposes. Far beyond expanding on the discussion group cases available for the Principles and Advances courses, we are developing the criteria for a complete case presentation, working on appropriate means to tag cases so that they may be indexed, searched for and easily accessible. Imagine quickly needing a good example of a distal femoral nonunion with shortening and varus treated with reduction and blade plate fixation and being able to quickly search for and find such a case on the AONA archives with the same ease that we have come to expect in our everyday internet searches. With the help of the talented surgeons within the AONA faculty, we will work toward developing the process by which an ongoing collection of cases can be established.

We are determined to find a way to involve more of the talented and dedicated educators within the AONA faculty in our subcommittees and with some of these challenging endeavors.

We are excited for the prospects in the coming years and along with Michael Baumgaertner, we on NAMTEC, will work with the Committees on community development, research and fellowship to make this a development priority over the next few years.
### 2011 Orthopaedic Course Schedule

<table>
<thead>
<tr>
<th>Date</th>
<th>Course</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>July 30 – August 2</td>
<td>Basic Principles and Techniques of Operative Fracture Management Course for Residents</td>
<td>Chicago, Illinois</td>
</tr>
<tr>
<td>August 4 – 7</td>
<td>Basic Principles and Techniques of Operative Fracture Management Course for Residents</td>
<td>Chicago, Illinois</td>
</tr>
<tr>
<td>September 15 – 18</td>
<td>Basic Principles and Techniques of Operative Fracture Management Course for Residents</td>
<td>Atlanta, Georgia</td>
</tr>
<tr>
<td>September 29 –</td>
<td>Foot and Ankle Course (with cadavers)</td>
<td>Miami, Florida</td>
</tr>
<tr>
<td>October 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>November 3 – 6</td>
<td>Principles of Operative Fracture Management Courses</td>
<td>Las Vegas, Nevada</td>
</tr>
</tbody>
</table>

### 2012 Orthopaedic Course Schedule†

<table>
<thead>
<tr>
<th>Date</th>
<th>Course</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>January 13 – 16</td>
<td>New England Regional Fracture Summit</td>
<td>Stowe, VT</td>
</tr>
<tr>
<td>January 13 – 15</td>
<td>Fellows Cadaver Course</td>
<td>Las Vegas, NV</td>
</tr>
<tr>
<td>January 19 – 22</td>
<td>Basic Principles and Techniques of Operative Fracture Management Course for Residents</td>
<td>New Orleans, Louisiana</td>
</tr>
<tr>
<td>March 8 – 11</td>
<td>Basic &amp; Advanced Principles of Operative Fracture Management Courses</td>
<td>Dallas, TX</td>
</tr>
<tr>
<td>March 23 – 24</td>
<td>Advances and Changing Concepts in Pediatric Fracture Management</td>
<td>Miami, FL</td>
</tr>
<tr>
<td>April 11 – 14</td>
<td>Solutions Course for Fracture Fixation Problems</td>
<td>San Francisco, CA</td>
</tr>
</tbody>
</table>

All activities are certified for continuing medical education credit. All courses subject to modification.

†Partial Course listing for 2012, please visit our website for a complete listing.

To register, please visit the AO North America website at [www.aona.org](http://www.aona.org)

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AO North America is pleased to announce that Stephen Sims, MD will serve as AOTrauma Chair beginning July 2011. Dr. Sims will replace the current AOTrauma Interim Chair, Michael Baumgaertner, MD, who chaired a nominating committee that identified suitable candidates and elected Dr. Sims. Dr. Sims works at the Department of Orthopaedic Surgery, Carolinas Medical Center. He has a particular interest in pelvic and acetabular fractures and outcomes research. He has been an active faculty member of AO North America (AONA®) presenting at more than 65 courses over the last seventeen years. He has served on NAMTEC for the last six years and is an active AO Foundation Trustee. The trauma chair is a critical role within the new AONA governance. Dr. Sims has a three year term and is charged with prioritizing and coordinating AONA’S efforts in trauma & orthopaedic education, research, fellowships and community development. Together with Dr. Baumgaertner, incoming AONA President, he will represent AONA at the AOTrauma International Board.
AO North America Veterinary Education Committee (NAVEC)

The Hilton at Torrey Pines in La Jolla, California was the venue for the La Jolla Small Animal Courses that were held from September 23 – 26, 2010. This year the La Jolla course offerings included Principles of Small Animal Fracture Management and AO Masters Course on Advanced Osteotomy — Small Animal. Dr. Jim Tomlinson and Dr. Noel Moens were the Chairmen for the Courses. There were 72 participants in attendance at the Small Animal Principles Course and 49 at the Small Animal Masters Course.

In October, the AO North America Veterinary Technician’s Workshop was held in conjunction with the ACVS Symposium in Seattle, Washington. This was the first year that AO collaborated with ACVS for a course offering. The course took place on Wednesday, October 19, 2011, prior to the start of the Symposium. Forty-two veterinary technicians attended the course which included lectures and hands on laboratory time that allowed the participants the chance to repair fractures on sawbone models. The participant evaluations for the course were extremely positive and the ACVS has asked AO North America to offer this course once again at their next conference. We are in the process of planning the course again at the ACVS Symposium in Chicago, Illinois November 2, 2011.

As NAVEC looks towards the end of 2011, final planning is underway for the La Jolla Veterinary Courses in September and the Las Vegas Minimally Invasive Cadaver Courses, scheduled for December 15 – 18, 2011 at the Western Veterinary Conference / Oquendo Center.

NAVEC is also planning for the 2012 Course schedule. The schedule includes potentially nine courses at four venues, The Columbus Small Animal Principles, Small Animal Advanced and the Equine Principles Courses in April; the La Jolla Small Animal Principles, Small Animal Masters Courses and Equine Masters Course on Pediatric / Foal Fracture Care in September; and potentially two new course offerings Operative Treatment of Veterinary CMF Trauma and Reconstruction and Advanced Techniques in Management of Veterinary Spinal Disorders. These two new and exciting courses are in the final approval stages and are potentially scheduled sometime early 2013. The Education Committee is also hoping to continue to provide and expand the Veterinary Technician’s Workshop in conjunction with the ACVS Symposium in future years.

The Committee is continually working to improve the courses offered to meet the needs of the participants. Several new faculty members have joined our ranks this past year and we are excited to include them in our future courses, starting this April in Columbus Ohio.

NAVEC recently met on April 7, 2011 at the Columbus Veterinary Courses.
### 2011 Veterinary Course Schedule

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 2</td>
<td>Veterinary Technician's Workshop</td>
<td>Chicago, Illinois</td>
</tr>
<tr>
<td>December 15–16</td>
<td>Minimally Invasive Osteosynthesis in Veterinary Traumatology — Small Animal (with animal anatomic specimens)</td>
<td>Las Vegas, Nevada</td>
</tr>
<tr>
<td>December 17–18</td>
<td>Minimally Invasive Osteosynthesis in Veterinary Traumatology — Small Animal (with animal anatomic specimens)</td>
<td>Las Vegas, Nevada</td>
</tr>
<tr>
<td>September 29–</td>
<td>Principles of Small Animal Fracture Management</td>
<td>La Jolla, California</td>
</tr>
<tr>
<td>October 2</td>
<td>AO Masters Course on Advanced Osteotomy — Small Animal</td>
<td>La Jolla, California</td>
</tr>
</tbody>
</table>

### 2012 Veterinary Course Schedule

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>April 26–29</td>
<td>Principles of Small Animal Fracture Management</td>
<td>Columbus, Ohio</td>
</tr>
<tr>
<td>April 26–29</td>
<td>Advanced Techniques in Small Animal Fracture Repair</td>
<td>Columbus, Ohio</td>
</tr>
<tr>
<td>April 26–29</td>
<td>Equine Basic Principles of Fracture Management</td>
<td>Columbus, Ohio</td>
</tr>
</tbody>
</table>

The Podiatric Education Courses are co-sponsored by The Podiatry Institute of Decatur, Georgia and AO North America. The Podiatry Institute of Decatur, Georgia, is approved by the Council on Podiatric Medical Education as a sponsor of continuing education in Podiatric medicine.

All activities are certified for continuing medical education credit. All courses subject to modification.

† Partial Course listing for 2012, please visit our website for a complete listing.

To register, please visit the AO North America website at [www.aona.org](http://www.aona.org)

### 2011 Podiatric Course Schedule

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>July 21–23</td>
<td>AO Podiatric Masters Course: Minimally Invasive Osteosynthesis Surgery (with human anatomic specimens)</td>
<td>Las Vegas, Nevada</td>
</tr>
<tr>
<td>September 7–10</td>
<td>Podiatric Basic</td>
<td>La Jolla, California</td>
</tr>
<tr>
<td>September 7–10</td>
<td>Podiatric Advanced</td>
<td>La Jolla, California</td>
</tr>
</tbody>
</table>

### 2012 Podiatric Course Schedule

<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 15–18</td>
<td>Podiatric Basic</td>
<td>Dallas, Texas</td>
</tr>
<tr>
<td>March 15–18</td>
<td>Podiatric Advanced</td>
<td>Dallas, Texas</td>
</tr>
</tbody>
</table>

The Podiatric Education Courses are co-sponsored by The Podiatry Institute of Decatur, Georgia and AO North America. The Podiatry Institute of Decatur, Georgia, is approved by the Council on Podiatric Medical Education as a sponsor of continuing education in Podiatric medicine.

All activities are certified for continuing medical education credit. All courses subject to modification.

† Partial Course listing for 2012, please visit our website for a complete listing.
AOSpine ended the year strong with the Advanced Techniques in the Management of Spinal Disorders course. Vista Labs in Baltimore, Maryland was the venue for this intensive two day course. The fundamentals of spine surgery, biomechanical considerations, and the surgery decision-making process were emphasized. Through concentrated, hands-on sessions utilizing cadavers, participants engaged in surgical techniques and strategies for a range of procedures, including cervical, thoracic, and lumbar surgical techniques. The course was chaired by Daniel Gelb and Ziya Gokaslan.

This winter was an exciting time for AOSpine North America, specifically due to the new Modular Format of the Principles and Treatment of Spinal Disorders for Residents course. The course focused on the spine patient in a conceptual, case study and practical exercise format. Participants rotated through four different modules covering such topics as; suboccipital, subaxial and thoracolumbar trauma, lumbar and cervical degenerative disease, and deformities, tumors and infection.

The course was held at the Flamingo in Las Vegas, Nevada and received rave reviews. The Course Chairs, Andrew Dailey and Daniel Gelb should be congratulated. The course will be offered again August 19–20, 2011 in Las Vegas, Nevada and October 28–29, 2011 in Toronto, Ontario.

AOSpine North America and AO North America were pleased to announce a new offering at the Advanced Concepts in the Management of Spinal Disorders course at the Paradise Point Resort in San Diego, California. The course included optional concurrent Orthopedic and Neurosurgery discussion sessions centered around AAOS and CNS self-assessment examination questions in preparation for Maintenance of Certification Part II. Optional MOC sessions were held each day of the course. AO North America provided additional CME credit to these optional sessions.
**2011 Spine Course Schedule**

August 19 – 20  
**Principles and Treatment of Spinal Disorders for Residents**  
Las Vegas, Nevada

August 25 – 28  
**Advanced Concepts in the Management of Spinal Disorders Course**  
Chicago, Illinois

October 28 – 29  
**Principles and Treatment of Spinal Disorders for Residents**  
Toronto, Ontario

November 18 – 19  
**Advanced Techniques of Spinal Resection and Reconstruction (with cadavers)**  
Las Vegas, Nevada

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**2012 Spine Course Schedule†**

January 20 – 21  
**Principles and Treatment of Spinal Disorders for Residents**  
New Orleans, LA

February 16 – 19  
**Advanced Concepts in the Management of Spinal Disorders Course**  
Snowbird, UT

March 23 – 24  
**Advanced Techniques in Complex Pediatric Spine Surgery (Cadavers)**  
Miami, FL

April 27 – 28  
**Principles and Treatment of Spinal Disorders for Residents**  
Las Vegas, NV

All activities are certified for continuing medical education credit. All courses subject to modification.

†Partial Course listing for 2012, please visit our website for a complete listing.

To register, please visit the AO North America website at [www.aona.org](http://www.aona.org)

For information on AOSpine Membership, please go to [www.aospine.org](http://www.aospine.org)
AO North America is pleased to announce 2011 Fellowship Award and 1st Quarter Resident Research Grant Recipients:

**Henry Hanff Fellowship Award Recipient – 2011**
Christopher H. Perkins, MD

Dr. Perkins is currently a chief orthopaedic resident at Baylor College of Medicine in Houston, Texas. At Baylor College of Medicine, he received the Bronze Hammer Award, an award that goes to a fourth year resident who exhibits consistent compassion and excellence in patient care. He has been taking care of orthopaedic trauma patients at Ben Taub General Hospital for the last four years. In addition, he was accepted for an orthopaedic trauma fellowship at the University of Miami, Jackson Memorial Hospital System to begin in August 2011.

Receiving the 2011 Henry Hanff Trauma Fellowship will give Dr. Perkins the opportunity to further broaden his knowledge and skills that he can take back to his own program.

Dr. Perkins fellowship rotation took place in April 2011, when he worked at Radcliffe Hospital in Oxford, England under Professor Bob Handley and he traveled to Nottingham, England to work with Professor Chris Moran.

Please visit our website for additional information: www.aona.org

**Jack McDaniel Fellowship Award Recipient – 2011**
William Min, MD

Dr. Min is currently a clinical fellow in orthopaedic trauma at University of California, Davis Medical Center. He completed medical school at the UMDNJ – New Jersey Medical School. Subsequently, he completed his residency at New York University Hospital for Joint Diseases. He has been involved in numerous research projects that have resulted in publications throughout his residency. Dr. Min is actively pursuing a career in academics that will enable him to treat complex cases, engage in education, and perform clinical and basic science.

**Martin Allgöwer Fellowship Award Recipient – 2011**
Brian Cross, DO

Dr. Cross is a practicing orthopaedic trauma surgeon at Broward General Medical Center in Fort Lauderdale, Florida. He is also Assistant Professor in the Department of Orthopaedics at NOVA Southeastern University. He specializes in orthopedic traumatology, percutaneous treatment of complex fractures, limb preservation/limb salvage surgery, and bone graft substitution. In his fellowship, he would like to gain advanced knowledge in pediatric orthopaedic trauma.

**First Quarter Resident Trauma Research Grants – 2011**

<table>
<thead>
<tr>
<th>Name</th>
<th>Institution</th>
<th>Project Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Julio Echegoyen, MD, PhD</td>
<td>University of California, Irvine</td>
<td>Effects of orbital wall implants on orbital and ocular pressure</td>
</tr>
<tr>
<td>Caitlin McLean, MD</td>
<td>University of Rochester</td>
<td>Exploring the therapeutic potential of recombinant PTH in a new model of irradiated mouse femoral bone</td>
</tr>
<tr>
<td>Mark Reed, MD</td>
<td>University of Massachusetts</td>
<td>Biomechanical comparison of two ankle arthrodesis techniques: a posteriorly applied plate vs. crossed screws</td>
</tr>
</tbody>
</table>
Creating Cross Continent Camaraderie

2010 Martin Allgöwer Fellowship Award Recipient Report

I would like to express my gratitude to AO Trauma and AO North America for giving me the opportunity to participate as the Martin Allgöwer Trauma Fellow in 2010. From the time that I began my orthopaedic traumatology career, it has been my goal to advance my skills through international fellowship exposure. The Arbeitsgemeinschaft für Osteosynthesefragen Foundation has been granting international trauma fellowships since 1971. The Martin Allgöwer Trauma Fellowship is a rare training opportunity for a 3 – 6 month period in a European trauma center. One of my personal goals for the fellowship was to create a cross continent camaraderie between our trauma center in San Francisco, California with Europe and the Middle East. In view of the fact that I have traveled through Europe and was born in Israel, lived in Germany and Israel as an integral part of the trauma team and not as a medical tourist, was attractive to me. Moreover, because of the different trauma systems and environments in these two locations, I surmised that a contrasting educational opportunity would be extremely beneficial. Fortunately, this Fellowship was flexible enough to accommodate my unique needs.

After several discussions with the Foundation, we were able to establish connections with Professor Christian Krettek, of MHH, Hannover, Germany, and Professors Rami Mosheiff and Iri (Meir) Liebergall of Hadassah Hospital, Jerusalem, Israel. My fellowship plan was to learn, perform research, and teach orthopaedic trauma surgery. My other interests were in exposure to computer assisted navigation in orthopaedic trauma, managerial styles, cost-saving environments, and system resource utilization efficiency. Fortuitously, my fellowship mentors were incredibly thoughtful individuals who understood these goals and facilitated their attainment.

For anyone who would like to consider the Martin Allgöwer Trauma Fellowship, I recommend it highly and encourage you to align your goals with the hospital type and location in order to maximize your experience. For example, MHH and Hadassah offer different opportunities for learning and were chosen with my goals in mind. MHH is located in Hanover, Germany, a well-established, efficient, high tech European trauma center where the majority of traumas are associated with motor vehicle collisions. Patients from these high velocity accidents are transferred to the hospital via a traumatologist-assisted ambulance or helicopter. The trauma system in Germany is also unique in its efficiency and ability to triage patients over vast distances. In Germany, the orthopaedic traumatologist is the captain of the trauma team and determines patient treatment from the Trauma Bay to the Operating Theater and Intensive Care Unit. By contrast, in the United States of America trauma system, the orthopaedic traumatologist is an orthopaedic surgeon who treats fractures, considers multitrauma patient issues and collaborates with the general trauma surgeon, who is the overall team leader.

In distinction to MHH, Hadassah Hospital is in the midst of Jerusalem. This city is the center of 3 major religions. Amazingly, the mix of personnel who work at the hospital and patients taken care of by the medical teams transcend geopolitical and religious boundaries. Moreover, due to many prior unfortunate multiple casualty events, they are uniquely qualified as multi-casualty experts. In addition, they are able to teach their decision-making process learned from these events to other orthopaedic surgeons. One of the unique groups that has developed over the last few years was AOMID. Fortunately for me, I was invited to lecture at one of their nailing meetings in Tel Aviv, Israel in September of 2010. This led to my visiting surgeons in Slovenia and Croatia as part of the AOMID meeting in October of 2010. The orthopaedic trauma surgeons at that meeting were from the Middle East and Eastern Europe. We were able to exchange ideas and create friendships that could not have occurred without the team from Hadassah.

MHH and Hadassah have many commonalities. Due to their sizeable catchment area and referral base, there is a considerable volume of orthopaedic traumas. Moreover, both trauma centers are technologically advanced and have surgeons with the high skill level and expertise needed to manage their complex trauma patients. Obviously, due to social and societal differences, each center has its distinctive organization, treatment style, and protocols. In addition, they both exhibit the drive to achieve and maintain excellence in trauma care that is based on evidentiary medicine. Professors Krettek and Mosheiff were instrumental in facilitating my research goals. At MHH, we worked on three research projects that included testing the pullout strength of multiply inserted screws and two clinical studies regarding hip and femur fractures. At Hadassah, an instability hip fracture mathematical modeling project and systems femur fracture project were designed and set in motion.

In summing up, my experiences at MHH and Hadassah are ones that I will continue to benefit from throughout my career. There are no words that can adequately express my thanks to the surgeons who participated in my education, were excellent hosts, and allowed me to be part of their working team. The camaraderie with those surgeons was second to none.
AO North America Sponsored Programs

In accordance with AO’s mission of improving trauma patient care across specialties by focusing on the philosophical foundations of education, research, development and documentation, AO North America sponsors and oversees six programs that span a surgeon’s career.

<table>
<thead>
<tr>
<th>Program</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Basic Fracture Management Preceptorship</strong></td>
<td>Provides a senior level resident with an in-depth period of training in the basic management of fractures at a recognized AO North America Center or with an AONA member. As this is a 1:1 relationship with a practicing traumatologist, the individual gains a deeper insight into the management of fractures. This is not meant to replace an AO Trauma Fellowship, but to allow greater in-depth study.</td>
</tr>
<tr>
<td><strong>Trauma and Fracture Care Preceptorship</strong></td>
<td>Provides a practicing North American certified orthopaedic, craniomaxillofacial, hand or veterinary surgeon with the opportunity to improve or refine his/her skills in fracture care at an approved AO Center or with an AONA member.</td>
</tr>
<tr>
<td><strong>Visiting Professor Program</strong></td>
<td>Provides financial support for North American hospitals to invite an AO Faculty member (from North America or Europe) as a Visiting Professor in the teaching of orthopaedic, craniomaxillofacial, hand or veterinary trauma treatment.</td>
</tr>
<tr>
<td><strong>AONA Advanced Clinical Education Program</strong></td>
<td>Based on an application and selection process, this program offers financial support to institutions that host orthopaedic trauma fellows. The objective is to ensure high-quality patient care by providing additional experience for surgeons in fracture management principles and techniques in the institutions where they visit.</td>
</tr>
<tr>
<td><strong>Kathryn Cramer Memorial Award</strong></td>
<td>Honoring Dr. Kathryn Cramer, the award enables medical students, young orthopaedic residents, orthopaedic trauma fellows and junior orthopaedic trauma faculty to pursue educational and research endeavors in orthopaedics (preferably orthopaedic trauma).</td>
</tr>
<tr>
<td><strong>Henry Hanff Fellowship Award</strong></td>
<td>Provides a practicing North American or Western European trauma surgeon with funding, including living expenses for four to six weeks. The fellow may choose to work with a specific AO faculty professor related to fracture care in North America or Western Europe.</td>
</tr>
</tbody>
</table>

AONA has been a pioneer in expanding the horizons of orthopaedic trauma patient care and research. We encourage you to visit [www.aona.org](http://www.aona.org) to fully explore how you can become part of this life-long professional experience.

Join the tradition!
AO North America Administered Fellowships

AO Foundation’s Fellowship program began in 1971 and now stands at a total of over 5,000 sponsored fellowships. Akin to AO North America sponsored programs, AO Foundation’s programs span a surgeon’s career. The four programs currently sponsored by the AO Foundation and administered by AONA locally are:

AO International Standard Fellowship
Offered to surgeons who are in their last year of residency or have just completed their residency training.

John Border Fellowship
A unique, annual fellowship offered to one graduating North American trauma fellow who plans a career in academic trauma surgery.

Jack McDaniel Fellowship
A prestigious fellowship given to one North American Resident each year. Recipient is selected annually by an AONA Fellowship Committee.

Martin Allgöwer Trauma Fellowship
Offered annually to one practicing North American trauma surgeon; the fellowship covers study at an European AO Center.

AO North America Research

In the spirit of focusing on the philosophical foundations of education, research, development and documentation, AONA is proud to support research for both residents and practicing surgeons in breaking new therapeutic horizons through the following programs.

AO North America Resident Trauma Research Support
Offered to residents for clinically oriented projects, this complementary support is used to supplement existing endeavors that further the bounds of clinical care. Additional detailed information on eligibility, guidelines, timing, applications and contacts are available at www.aona.org

AO Foundation Research Grants
The AO Foundation offers significant support through both “start-up” grants which are given for exploring novel approaches/topics in areas of general interest for AO and “Focus” grants which are given for specific topics. Further detailed information on eligibility, guidelines, timing, applications and contacts can be found at www.aofoundation.org
Vision
Our vision is excellence in the surgical management of trauma and disorders of the musculoskeletal system.

Mission
Our mission is to foster and expand our network of health care professionals in education, research, development and clinical investigation to achieve more effective patient care worldwide.