

## **10<sup>th</sup> Annual Spine Trauma Summit**

## Friday & Saturday, November 22-23, 2024

# **Syllabus**

#### **ESTEEMED FACULTY**

#### Jens R. Chapman, M.D. Course Co-Chair

Complex Spine Surgeon Swedish Neuroscience Institute Seattle, Washington

#### Amir Abdul-Jabbar, M.D.

Spine Surgeon Swedish Neuroscience Institute Seattle, Washington

#### Rod Oskouian, M.D. Course Co-Chair

Chief of Spine Swedish Neuroscience Institute Seattle, Washington

#### Ashraf El Naga, M.D., FAAOS

Assistant Professor, Spine Trauma & Problem Fractures University of California, San Francisco San Francisco, California

### David Gendelberg, M.D., FAAOS

Assistant Professor, Spine Trauma & Problem Fractures University of California, San Francisco San Francisco, California

#### Ali H. Mesiwala, M.D., FAANS

Neurosurgeon Coastal Medical Group Newport Beach, Orange County

#### Christoph Hofstetter, M.D., Ph.D. Course Co-Chairman

Associate Professor of Neurological Surgery University of Washington Seattle, Washington

#### **Robert McGuire, M.D., FAAOS**

Professor of Orthopedic Surgery & President of AO Foundation The University of Mississippi Medical Center Jackson, Mississippi

#### Wyatt Ramey, M.D.

Spine Surgeon Memorial Hermann Hospital, Mischer Neuroscience Associates Cypress, Texas

#### Surgical Demonstrations Supported by Swedish Neuroscience Institute Fellows

## AGENDA

## FRIDAY, NOVEMBER 22, 2024

6 p.m.	Registration and Pizza
6:25 p.m.	Welcome, Introductions & Course Overview
6:30 p.m.	<b>Case Controversies &amp; Discussions</b> <u>Moderator</u> : Jens R. Chapman, M.D. <u>Presenter</u> s: Mark Kraemer, M.D., Colin Gold, M.D. & Clifford Pierre, M.D.
	Objectives:
	<ul> <li>Illustrate the physiologic effects of trauma on the spine</li> <li>Identify surgical considerations in trauma situations</li> <li>Outline merits of various treatment options</li> </ul>
7:30 p.m.	<ul> <li>Gitcha Game On!</li> <li>Robert McGuire, M.D., FAAOS</li> <li>Objectives: <ul> <li>Describe key mechanisms of spine trauma</li> <li>Enhance clinical decision-making in spina trauma cases</li> </ul> </li> </ul>

## 8 p.m. Adjourn

## SATURDAY, NOVEMBER 23, 2024

7 a.m.	Registration, Breakfast & Exhibits
7:25 a.m.	Welcome, Introductions & Course Overview
	Jens R. Chapman, M.D.

## Session 1: Thoracolumbar Spine

7:30 a.m.	<b>Thoracolumbar Burst Fractures - Past, Present and Future - A</b> <b>Lifetime Experience</b> <i>Robert McGuire, M.D., FAAOS</i>
	Objectives:
	<ul> <li>Review the evolution of thoracolumbar burst fracture management</li> </ul>
	• Explore future directions in burst fracture treatment
8:00 a.m.	<b>The McCormick Classification: A Critical Review</b> Ashraf El Naga, M.D., FAAOS <b>Objectives:</b>
	<ul> <li>Discuss the McCormick classification system</li> </ul>
	Apply the McCormick classification in clinical contexts
8:20 a.m.	Q&A
8:30 a.m.	Spinous Process Fractures: Identifying Bad Actors & Flexion Distraction Injuries
	David Gendelberg, M.D., FAAOS
	Objectives:
	<ul> <li>Identify key characteristics of flexion distraction injuries and spinous process fractures</li> </ul>
	Apply diagnostic criteria to enhance treatment decisions
8:50 a.m.	Q&A

## 9 a.m. Debate Panel - Multilevel T Fractures - Go Big or Selective

Moderated by: Jens Chapman, M.D.

## **Objectives:**

- Evaluate approaches to multilevel spine fracture management
- Apply evidence-based criteria for treatment selection

9:30 a.m.	Live Broadcast Demonstration from BioSkills Lab No. 1
	Posterior Cervical Thoracic Junction: Decompression &
	Instrumentation Techniques
	Robert McGuire, M.D., FAAOS
	Objectives:
	Describe atomic peculiarities of the CT region
	Describe instrumentation challenges

• Share tips and tricks on how to perform safe instrumentation from posterior and posterior lateral

10:00 a.m. Break, Exhibits & Roving Reporter

## Session 2: Lumbosacral Spine

10:20am	<ul> <li>Cement Augmentation or not for Osteoporotic Facture Care.</li> <li>Point - Counterpoint</li> <li>Amir Abdul-Jabbar, M.D. &amp; David Gendelberg, M.D., FAAOS</li> <li>Objectives: <ul> <li>Describe the role of cement augmentation in osteoporotic spine fixation</li> <li>Evaluate clinical outcomes and risks of cement augmentation techniques</li> </ul> </li> </ul>
10:40am	Summary

## **10:40 a.m.** When do Pelvic Fractures Require a Spine-Based Solution? Ashraf El Naga, M.D., FAAOS Objectives:

- Illustrate criteria for determining surgical leadership in pelvic shear fracture cases
- Define the role of spine surgeon vs. orthopedic trauma surgeons in pelvic shear fractures

## 10:55 a.m. Q&A

**11:00 a.m.** Using A Robot in Spine Trauma? Amir Abdul-Jabbar, M.D. Objectives:

- Describe the applications of Robotic Assistance in spine trauma surgery
- Evaluate clinical outcomes and limitations of robotics in spine trauma

### 11:15 a.m. Q&A

**11:20 a.m.**Incorporating an MIS Philosophy in Spine TraumaDavid Gendelberg, M.D., FAAOS & Ashraf El Naga, M.D., FAAOSObjectives:

- Compare outcomes of percutaneous vs. open fixation techniques
- Identify criteria for selecting percutaneous or open fixation in trauma cases

#### 11:40 a.m. Summary

N A A	<ul> <li>ive Broadcast Demonstration from BioSkills Lab No. 2</li> <li>Als Long-Segment PSF powered by AR Rod Contouring &amp; Cement Augmentation</li> <li>Ali H. Mesiwala, MD, FAANS</li> <li>Objectives: <ul> <li>Demonstrate the techniques of MIS long segment posterior spinal fixation with AR assisted rod contouring</li> <li>Review the role of cement augmentation in strengthening fixation in osteoporotic spine cases</li> </ul> </li> </ul>
12:10 p.m.	Lunch & Exhibits Product Theatre Sponsored by Neo Medical in the Front Conference Room Topic: Technical Application of Augmented Reality in Spine Trauma Used with NEO Universal PSS Speaker: Ali H. Mesiwala, MD, FAANS **This is a Non-CME activity**
12:55 p.m.	Roving Reporter - Exhibits & Opinions Live Interviews form the conference

## Session 3: Spinal Cord Injury

1:10 p.m. Time is Spine - Rationale for Early Surgery Following Spinal Cord Injury
Christoph Hofstetter, M.D., Ph.D.

Objectives:

Discuss the physiological impact of early surgical intervention on spinal cord injury recovery
Review evidence-based benefits and risk of early surgery in spinal cord injury cases

### 1:25 p.m. Q&A

1:30 p.m.	<ul> <li>New classification for SCI - Why and How Wyatt Ramey, M.D.</li> <li>Objectives: <ul> <li>Discuss the need for a new classification system in spinal cord injury</li> <li>Explore the methodology and application of the new SCI classification</li> </ul> </li> </ul>
1:45 p.m.	Q&A
1:50 p.m.	<ul> <li>Using Ultrasound as a Biomarker for SCI &amp; the Rationale for Early Decompression</li> <li>Christoph Hofstetter, M.D., Ph.D.</li> <li>Objectives: <ul> <li>Review the role of ultrasound as a biomarker in spinal cord injury</li> <li>Explore the rationale and benefits of early decompression in SCI management</li> </ul> </li> </ul>
2:05 p.m.	Q&A
2:10 p.m.	<ul> <li>Swimming Successfully with Sharks 30 mins</li> <li>Robert McGuire, M.D., FAAOS</li> <li>Objectives: <ul> <li>Develop strategies for managing high risk, high stakes situations</li> <li>Review key approaches to handling adverse or challenging interactions</li> </ul> </li> </ul>
2:40 p.m.	Q&A
2:45 p.m.	<ul> <li>Live Broadcast Demonstration from BioSkills Lab No. 3</li> <li>Tips &amp; Tricks for Robot Use in Spine Trauma Care</li> <li>Amir Abdul-Jabbar, M.D.</li> <li>Objectives: <ul> <li>Master key techniques for effectively integrating robotic assistance in spine trauma surgery</li> <li>Troubleshoot common challenges in robotic spine surgery</li> </ul> </li> </ul>

## Session 4: Cervical Spine Trauma

3:15 p.m.	<ul> <li>Upper Cervical Trauma: The Importance of Avoiding the Occiput in your Fusion</li> <li>Wyatt Ramey, M.D.</li> <li>Objectives: <ul> <li>Identify the risks of occipital involvement in upper cervical fusion</li> <li>Apply techniques to safely avoid the occiput in the upper cervical trauma fusions</li> </ul> </li> </ul>
3:30 p.m.	Q&A
3:35 p.m.	<ul> <li>Jumped Facet Injuries: Initial Management and Choosing a Surgical Approach</li> <li>David Gendelberg, M.D., FAAOS</li> <li>Objectives: <ul> <li>Identify the clinical and radiological differences between anterior and posterior jumped facet joints</li> <li>Develop management strategies for anterior and posterior jumped facet joints</li> </ul> </li> </ul>
3:50 p.m.	Q&A
3:55 p.m.	<ul> <li>AOD Are We Over Treating It?</li> <li>Ashraf El Naga, M.D., FAAOS</li> <li>Objectives: <ul> <li>Evaluate the current treatment approaches for AOD</li> <li>Access the impact of over treatment on patient outcomes and healthcare resources</li> </ul> </li> </ul>

4:10 p.m. Q&A

4:15 p.m.	Live Broadcast Demonstration from BioSkills Lab No. 4
	Advanced Fixation Techniques for Complex Traumas
	David Gendelberg, M.D., FAAOS & Ashraf El Naga, M.D., FAAOS
	Objectives:
	Illustrate advanced fixation techniques for complex spinal
	trauma

• Apply indications and strategies for choosing the appropriate fixation method

## 4:45 p.m.Rapid Fire Highlight Panel: (10 minutes each)Moderated by Jens R. Chapman, M.D.

- 1. Central Cord Syndrome Early vs Late
- 2. Geriatric Odontoids Wait or Fix
- 3. Geriatric Burst Fractures Model Care for the Future

### **Objective:**

• Debate and discuss to gain consensus for ongoing knowledge gaps for the above topics

5:15 p.m. Adjourn

#### **Acknowledgments**

The Planning Committee gratefully acknowledges support for this conference from the following:

#### **Educational Grant**

Cerapedics Globus Medical NeoSpine USA Stryker In-Kind Grant Globus Medical NeoSpine USA Stryker Exhibit Grant Cerapedics Globus Medical Johnson & Johnson OsteoCenteric

#### <u>Sponsorship Grant</u>

NeoSpine Medical

### **Course Planning Committee**

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#### **Course Evaluation**

Please take a moment to complete our online evaluation, which will be emailed to you. Your feedback helps to ensure the effectiveness of this CME activity, as well as improve future educational activities. All responses are considered anonymous. <u>https://www.surveymonkey.com/r/QJRRH2Q</u>

If you do not receive the survey via email, please call (206) 732-6500 or email <u>cme@seattlesciencefoundation.org</u>.

#### Accreditation

Seattle Science Foundation is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

#### AMA PRA Category 1 Credits<sup>™</sup>

Seattle Science Foundation designates this live activity for a maximum of 10 AMA PRA Category 1 Credits<sup>™</sup>. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

## **Identifying and Mitigating Conflicts of Interest**

**Purpose:** The information provided addresses several requirements of the Accreditation Council for Continuing Medical Education (ACCME) to help **ensure independence** in CME activities. Everyone in a position to control the content of a CME activity must disclose **ALL** financial relationships with an ineligible company to the CME provider. This information must be disclosed to participants prior to the beginning of the activity. Also, CME providers must mitigate current conflicts of interest prior to the educational activity.

**Definitions: "Financial relationships"** are those whose relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit.

The ACME defines **ineligible companies** as those whose primary business is producing marketing, selling, reselling, or distributing healthcare products used by or on patients. Among the exemptions to this definition are government organizations non healthcare-related companies and nonprofit organizations that do not advocate for an ineligible company(ies). Circumstances create a **"conflict of interest** "when an individual has an opportunity to affect the CME content about products or services of an ineligible company with which they have a financial relationship.

ACCME focuses on financial relationships with ineligible companies in the 24-month period preceding the time that the individual is being asked to assume a role controlling content of the CME activity. ACCME has not set a minimal dollar amount for relationships to be significant. Inherent in any amount is the incentive to maintain or increase the value of the relationship.

The ACCME defines **"relevant financial relationships"** as financial relationships in any amount occurring within the past 24 months that create a conflict of interest.

**CME Activity Planning Committee Members**: If a conflict of interest exists, the Planning Committee member must withdraw from the planning committee unless the conflict can be mitigated. Mitigation may be made by one of the following methods: (1) Peer review of CME content will be conducted at another oversight level to assure balance; (2) Change in focus of course so the activity does not include information related to products or services about which the Planning Committee has a conflict; (3) Severing relationship(s) between the member and any related ineligible company; (4) Others to be determined by the SSF CME committee.

**CME Activity Planners**: When a conflict of interest exists, the planning committee must address the conflict by one of the following methods: (1) Review content to be presented by speaker in advance to ensure content balance; (2) Change topic so the presentation is not related to products or services where a conflict exists; (3) Select a different presenter without any related relationships with an ineligible company; (4) Include presentations by other faculty to provide an overall balance to the content of the course; (5) Limit or specify the sources for recommendations that the presenter can use.

Each speaker is required to give a balanced, evidenced-based presentation based on published research. No conclusions or recommendations without external validation may be made by a speaker with a conflict of interest.

## Disclosure Summary November 22-23, 2024

The following planners and/or presenters, in the past 24 months, have/had financial relationship(s) with ineligible company(ies) whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients: (S = Speaker; P = Planner)

Jens R. Chapman, M.D. (P, S): Advisor: Globus Medical, Inc.; Grant or research support: Globus Medical; Consulting Fee: Xtant Medical

**Ashraf El Naga, M.D., FAAOS (S)**: Grant: Phillips, Ankasa Therapeutics; Consulting Fee: Kuros Biosciences; Advisory Committee: Orthopaedic Trauma Association Health Policy, North America Spine Society International Online Education Task Force, North America Spine Society Online Content Committee

**Christoph Hofstetter, M.D., Ph.D. (S):** Consulting Fee: Globus Medical, Joimax, BK Medical, Kuros Bioscience; Grant: Kuros Bioscience; Royalties: Innovasis (relationship has ended)

**Ali Mesiwala, M.D. (S):** Consulting Fee: Globus Medical, LifeSpan, SI Bone, Neo Medical, Abbot Inc., Centinel Spine, Spinal Elements; Royalties: Globus Medical, LifeSpine, SI Bone

**Rod J. Oskouian Jr., M.D. (S):** Consulting Fee: Alphatec Spine, Globus Medical, SeaSpine, Stryker, Spineart, Medtronic; Consulting Fee: DePuy; Consulting Fee: Blue Ocean Spine; Royalties or Patent Beneficiary: Stryker, Globus Medical; Fellowship Grant Support: Globus Medical, Inc.

Wyatt Ramey, M.D. (S): Consulting Fee: Intrinsic Therapeutics, Globus

All the relevant financial relationships listed for these individuals have been mitigated.

The following planners and/or presenters, in the past 24 months, have/had no financial relationship with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients: (S = Speaker; P = Planner)

Amir Abdul-Jabbar, M.D. (S); David Gendelberg, M.D., FAAOS, (S); Robert McGuire, M.D., FASOS (S); Cory Kepler (P)

All planners and presenters attested that their content suggestions and/or presentation(s) will provide a balanced view of therapeutic options and will be entirely free of promotional bias. All presentations have been reviewed by a planner with no conflicts of interest to ensure that the content is evidence-based and unbiased.