



AGENDA

Description: Combining case presentations, lightning lectures, hands-on labs, and opportunities to share knowledge, in this course you will gain insight into the depth and breadth of your current foot and ankle knowledge. At the end of this learning experience, you will walk away with a better understanding of contributing factors associated with foot and ankle surgery complications and be able to apply new skills to help you maximize function and restore structure.

Day One: Friday - Complications & Challenging Cases – 3:30 - 7:30 pm

3:30 – 4:00 pm	Check-in/Registration
4:00 – 5:00 pm	Introductions / Faculty Case Presentations – Complications / Revisions
5:00 – 5:30 pm	Network Reception (Hors d'oeuvres / Beer and Wine)
5:30 – 6:30 pm	Challenging Cases Karaoke – Have a challenging case you want to share? In this informal learning experience, you'll have the opportunity, in three minutes or less get up to the microphone and share your most challenging case with your peers.
6:30 – 7:30 pm	Pathology Busters – In this exercise, we'll address controversies and “urban legend” common to our profession. What's fact and what's fiction? Faculty will share their professional opinions and open it up to discussion as we “debunk” these professional myths.
7:30 pm	Adjourn

3.0 Continuing Education Contact Hours

Day Two: Saturday Morning Session – 7:30 am - 12:15 pm

7:30 – 8:00 am	Check-in/Continental Breakfast
8:00 – 8:10 am	Introduction to Course
Lightning Lectures – Forefoot/Lesser MPJ	
8:10 – 8:25 am	Plantar Plate Tear – Advantages of Dorsal vs Plantar Approach
8:25 – 8:40 am	Indication for Osteotomy – Type, Positioning, Fixation Options
8:40 – 8:55 am	The Recurrent / Recalcitrant 2 nd Digit / MPJ Deformity – How to Successfully Revise
8:55 – 9:10 am	How to Manage an Arthritic Lesser MPJ
9:10 – 9:30 am	Windswept Transverse Plane Digital Deformity – What to do?
9:30 – 9:45 am	Panel Discussion
9:45 – 10:00 am	Break
10:00 – 11:15 am	<u>LAB</u> <ul style="list-style-type: none">• Lesser Metatarsal Osteotomies• Forefoot Osteotomies• Digital Arthrodesis• Lesser MPJ Arthrodesis• Implant/Fixation Options
11:15 – 11:30 am	Panel Discussion
11:30 – 12:15 pm	Lunch

Day Two: Saturday Afternoon Session – 12:15 pm - 6:15 pm

Lightning Lectures – Lateral Ankle

12:15 – 12:30 pm Fixing an Unstable Ankle: Anatomic vs Non-Anatomic Repair...Is There Still Indication for Tendon Transfer

12:30 – 12:45 pm The Resistant Peroneals – Chronic Tear with Tendinosis: Is Repair an Option? Is Tenodesis, Augmentation, or Transfer Necessary?

12:45 – 1:00 pm The Flummoxing Peroneal Subluxation: Retinacular Repair Pearls / Groove Deepening

1:00 – 1:15 pm Cavus Impact on Ankle Instability: Lateralizing the Heel, Uncompensated Forefoot Valgus Correction Options

1:15 – 1:30 pm Chronic Sprainers: The Role of the Syndesmosis – Why so Challenging?

1:30 – 1:45 pm Panel Discussion

1:45 – 3:00 pm

LAB

- Calcaneal Osteotomy
 - Ex. Koutsogiannis, Evans, Dwyer
- Cotton Osteotomy
- Metatarsal Base Osteotomy
- Rearfoot Arthrodesis
- Fixation Options and Techniques

3:00 – 3:15 pm Panel Discussion

3:15 – 3:30 pm Break

Lightning Lectures - PTTD

3:30 – 3:45 pm Etiology / Progression – Is There Ever Indication for Primary Repair?

3:45 – 4:00 pm Soft Tissue Role: FDL Transfer / Spring Ligament Repair / Managing the Posterior Muscle Group

4:00 – 4:15 pm Flexible – Osseous Management: Joint Preservation Options

4:15 – 4:30 pm Non-Flexible – Is Arthrodesis Always Necessary?

4:30 – 4:45 pm Stage IV – Managing Angle Valgus: Role of the Deltoid Ligament

4:45 – 5:00 pm Panel Discussion

5:00 – 6:15 pm Interactive Case Presentations:

- In this, “choose your own adventure”-style presentation, faculty will break down controversial cases, allowing you and your peers to decide how you would handle it. During the presentation, you’ll have the opportunity to decide each step in the case – and learn about the potential outcomes of your decisions.

6:15 pm

Adjourn

9.0 Continuing Education Contact Hours

Note: Course content and faculty are subject to change.