

FRACTURE *lines*

The Newsletter of the Orthopaedic Trauma Association

March 2003

University of Louisville Hospital
Louisville, Kentucky 40202

Live From New Orleans

Specialty Day in New Orleans encompassed a wide array of topics from EMTALA to Disaster Preparedness, highlight papers from the 2003, Presidential guest lecture by Terry R. Trammell, M.D. (“Considerations in the Cause and Prevention of Injury in Motor Sports”), bone and soft tissue graft substitutes in trauma, and “Thinking Outside the Box.” After a terrific year of leadership, outgoing President Toney A. Russell passed the gavel to incoming OTA President Marc Swiontkowski, M.D. The Specialty Day finale was the members dinner at Broussard’s restaurant in the heart of the French Quarter.

Looking ahead, 393 Abstracts were submitted for the Salt Lake City Meeting. Grading is in process by the Program Committee, which will meet in the beginning of April. Mike Baumgaertner, M.D. received over 100 replies to his request for volunteers for the one day course prior to the AAOS and contributors to OKU Trauma 3. There has also been an outpouring of interest in NDMS applications.

Inside this issue, you will find the Minutes from the Board of Directors meeting and Member’s meetings, Coding Tips, Research Committee Update, an update on the resident Slide Project, a report from the Coding and Classification Committee, results from the last questionnaire on implant preferences for intertrochanteric fractures, and a new questionnaire on political action and medical societies.

Please help promote the 3rd Annual AAOS/OTA jointly sponsored Trauma Course: Current Concepts and Practical Solutions in Orlando (April 24-27, 2003).

Thanks for your help with the newsletter. Hope to hear from you.



Craig S. Roberts, M.D.
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The Editor’s Pen



Marc Swiontkowski, M.D. became President of the OTA in February.

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Research Committee Update

By Ted Miclau, M.D.

The OTA is committed to developing successful researchers from its membership. Beginning with last year's grant reviews, written evaluations were returned to the principal investigators for each of the grants reviewed. These comments were designed at improving the research design of the funded proposals as well as providing feedback for possible successful re-submissions to the OTA. The OTA is also trying to sponsor young researchers through enrolling them in existing grant writing seminars and providing them with experienced research mentorship. Any individuals interested in attending a grant seminar or in obtaining a research mentor should contact Dr. Ted Miclau (miclout@orthosurg.ucsf.edu). The committee is also soliciting experienced clinical and basic researchers to participate in this mentorship program and interested individuals are should also contact Dr. Miclau.

The deadline for pre-proposal submission for the 2004 cycle is April 1, 2003. Based on the blinded review of the pre-proposals by the research committee, authors will be invited to submit full grant applications by August 15, 2003.

During the 2003 grant cycle, 29 pre-proposals were received of which 19 applicants were invited to submit full grant applications. Of the applications received, seven research grants were awarded, totaling \$128,312.00. The organization is indebted to the corporate and individual research grant donors. Last year, corporate donations were at a four year high, totaling \$280,000.00.

The grant recipients were:

Principal Investigator: Jeffrey O. Anglen, MD **Amount Funded:** \$19,536

Co-Investigator: Peter Kazmier, MD

Grant Funded by: OTA & EBI/Biomet

Grant Title: The Role of Anabolic Supplementation to Enhance Soft Tissue Envelope in Fracture Healing

Principal Investigator: Ham A. Bughuzzi, MD **Amount Funded:** \$20,000

Co-Investigator: George V. Russell, Jr., MD

Grant Funded by: OTA & AO North America

Grant Title: Biphasic Sustained Release of Antibiotics and OP-1 at the Site of Segmental Femoral Defects in Adult Male Rats

Principal Investigator: Kenneth A. Egol, MD **Amount Funded:** \$19,428

Co-Investigator: Kenneth Koval, MD

Grant Funded by: OTA & Smith + Nephew Orthopaedics

Grant Title: Lower Extremity Driving Performance Following Complex Lower Extremity Trauma

Principal Investigator: John T. Gorczyca, MD **Amount Funded:** \$13,309

Co-Investigator: Jason Snibbe, MD

Grant Funded by: OTA & Zimmer

Grant Title: The Analysis of Distraction Osteogenesis Using the COX-1 and COX-2 Knockout Mouse Model

Principal Investigator: Lawrence X. Webb, MD **Amount Funded:** \$19,910

Co-Investigator: Mitchell B. Harris, MD

Grant Funded by: OTA & DePuy Ace, a Johnson & Johnson Company

Grant Title: Intracellular Staphylococcus Aureus: A Proposed Mechanism for the Indolence of Osteomyelitis

Principal Investigator: Ricardo Pietrobon, MD **Amount Funded:** \$19,890

Co-Investigator: Steven A. Olson, MD

Grant Funded by: OTA & Synthes, USA

Grant Title: Linking Scores of the Sickness Impact Profile and Short Musculoskeletal Function Assessment Scales: A Prospective Study

Principal Investigator: Mark S. Vrahas, MD **Amount Funded:** \$16,239

Co-Investigator: Stephen Haley, Ph.D., P.T.r

Grant Funded by: OTA & Stryker Howmedica Osteonics

Grant Title: Orthopaedic Trauma Assessment Instrument Generated Using Item Response Theory

Total Funded: \$128,312



Ted Miclau, M.D., Research Committee chair speaking during the New Orleans OTA Members Business meeting.

Resident Slide Project: Progress Report

by Craig S. Roberts, M.D.

A curriculum of presentations covering a wide range of topics in orthopaedic traumatology for the purpose of educating orthopaedic residents is being assembled by a group of OTA members. This project will be a huge benefit to the education of orthopaedic residents. At this point, the project is 80% completed. There are still some sections which need to be completed. This project is a terrific way for new members to get involved in the OTA. Anyone interested in participating should contact Paul Tornetta III, MD at ptornetta@pol.net.

E&M Code Distribution Data for Orthopaedic Surgery

by Brad Henley M.D., M.B.A.

Are your coding patterns significantly different from those of your peers? If you are using lower level codes compared to these national norms, your undercoding may be costing your practice money. Undercoding is a revenue leak. Check to see whether your documentation may support higher-level codes that will capture this lost revenue. Alternatively, does your coding pattern show over utilization of high-level codes? If so, is your practice skewed towards complex patients with high levels medical decision making? Does your documentation also justify these higher-level services? If not, your coding pattern may suggest that you are a statistical outlier and may target you for an audit. Most physicians' E&M services have a bell shaped distribution, centered around level 3 codes for office services. It's helpful to use this as a guide when assessing your coding distribution.

New patient office visits

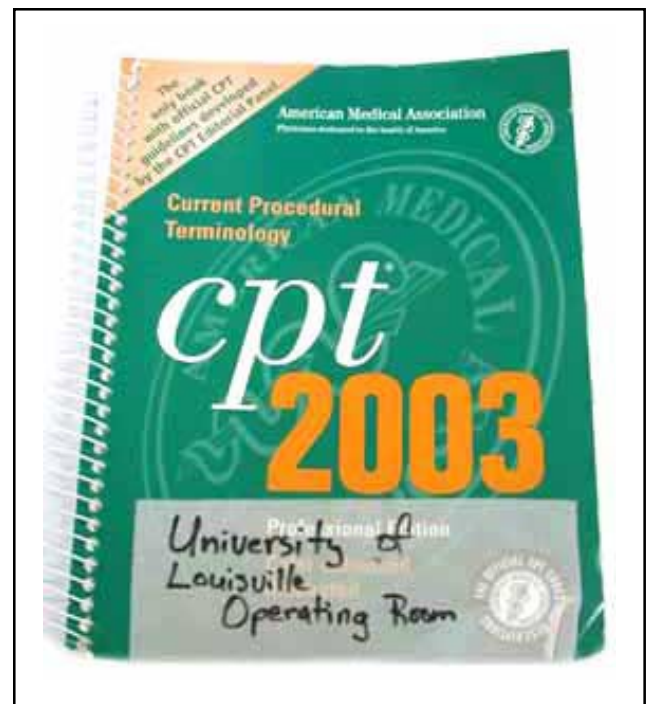
99201	4%
99202	23%
99203	49%
99204	20%
99205	5%

Established patient office visits

99211	2%
99212	33%
99213	48%
99214	14%
99215	2%

Office Consultations, new or established

99241	9%
99242	25%
99243	39%
99244	21%
99245	6%



Orthopaedic Trauma Association Board of Directors Meeting

Abbreviated Minutes Riverside Hilton, New Orleans
8 February 2003

by Jeff Anglen, M.D.

Actions Taken

1. Minutes of the October 2, 2003 Board meeting in Toronto were approved unanimously.
2. The BOD requested Membership committee to send a letter to members who are delinquent in dues payment and request they make their account current. Phone contact will follow for non-responders.
3. The BOD endorsed the idea of a jointly sponsored trauma course targeted at international attendees at the annual AAOS meeting.
4. It was moved, seconded and approved unanimously to change the annual member dinner to a reception directly after the Specialty Day Program next year.
5. The dues level for the new category of resident member was discussed and it was moved, seconded and passed unanimously to set the rate at \$50 per year without the JOT, \$150 per year with the journal.

It was moved, seconded and passed (4-3) to approve the concept of including industry in the jointly sponsored OTA-AAOS update course, if it is done in a financially beneficial or neutral manner.

To Do

1. Officer Assignments
 - A. President
Dr. Russell will draft a letter against the proposed policy changes in CME conflict of interest guidelines to send on behalf of the OTA to ACCME.
 - B. President Elect
Dr. Swiontkowski will collect comments on the EMTALA/orthopaedic trauma service document produced by Dr. Goulet's ad hoc committee, and distribute the revised document to the general OTA membership for comment. The appropriate venue for publication will be selected.

Dr. Swiontkowski will embellish and add details to the strategic planning report presented by Dr. Henley and distribute a specific proposal to the BOD for in depth discussion in May via conference call. It will then go to the Bylaws committee for wording and legal review, with intent to vote at the next meeting.

Dr. Swiontkowski will appoint an editor for the next OKU Trauma 3.

- C. CFO
- D. Secretary
- E. The Board.

Review the EMTALA/OTS document distributed by Dr. Goulet and send comments to Dr. Swiontkowski.

Send suggestions for OKU Trauma 3 editor to Dr. Swiontkowski.

2. Staff Assignments

Ms. Franzon will alert the membership about the proposed policy changes by ACCME to the conflict of interest guidelines, and give them the information to write against the proposal if they so desire.

3. Committee Chair Assignments

Membership (Dr. Obremsky) will contact delinquent members by mail and request payment of their overdue dues. This will be followed by phone contact if no response is received.

Education (Dr. Baumgaertner) will review and evaluate the idea of a live medical internet broadcast regarding trauma. See page 63 of the agenda book.

Education committee will review and update the bibliography of selected readings in orthopaedic trauma which is on the website, and has not been updated since about 1997.

Program (Dr. Templeman) will discuss with Dr. Schemitsch and with the committee the possibility of adding on a basic science/research program to the OTA annual meeting, perhaps co-sponsored by ISFR. They will return to the Board with a specific recommendation and implementation plans.

Orthopaedic Trauma Association Business Meeting Minutes

New Orleans Convention Center

8 February 2003

by Jeff Anglen, M.D.

Action Items/ Reminders:

- Minutes from the previous business meeting in Toronto on October 12, 2003 were approved.
- Dr. Pollak called for volunteers to co-edit and contribute to the new edition of the AAOS "Orange Book" on Emergency Care and Transport of the Sick and Injured.
- The proposed changes to the Bylaws creating a resident membership category and revising associate membership to include two types, candidate and community associate members was approved unanimously.
- Volunteers are needed to help with the Resident's Course (contact Dr. Anglen) and the next OKU Trauma 3 volume (contact Dr. Swiontkowski)
- Research committee notes that this year's deadline for pre-proposals is April 3.
- Every member should promote OTA courses in their local community.

Brochures are available from Headquarters. Please mention the courses, especially the Providence Course, at every opportunity to address other orthopaedic surgeons.

Minutes

1. **Call to Order.** President Russell called the meeting to order at noon in the La Louisienne A room of the New Orleans Convention Center.
2. **Approval of the Minutes.** Secretary Anglen presented minutes of the OTA business meeting of 12 October 2003. *A motion for approval was made, seconded and passed unanimously.*
Report of the CFO. Dr. Pollak presented the financial report of the organization.
 - A. **Operating Fund.** The balance sheet revealed an excess of revenue over expenses of \$49,000. The profit and loss statement revealed a \$99,000 profit on programs – Annual Meeting, specialty Day, Resident's course and Update courses, mostly due to a very profitable Annual meeting, which made a profit of \$130,000. He noted that the numbers were down for this Specialty Day program which will impact the budget somewhat – we have budgeted for a \$2,000 surplus next year. Resident's course made about \$1,000; Nashville lost about \$4,000.
 - B. **Research Endowment Fund.** The fund continues to grow as donations outstrip awards. The fund balance is about \$1.8 million. Dr. Pollak discussed the necessity for having a finance committee, and the possible use of professional money managers, because of this difficult economy. We have done very well with our investments – much better than the stock market and better than OREF – but it has been based on earlier purchases of high yield bonds which are not available now.

Dr. Pollak also called for volunteers to co-edit and contribute to the new edition of the AAOS "Orange Book" on Emergency Care and Transport of the Sick and Injured.

3.

New Business

- A. **Nominating Committee.** The following members were nominated from the floor to be members of the Nominations committee: Tom Einhorn, Bill Ricci, Dave Templeman, Jim Nepola, David Hak, Arthur Malkani, Sean Nork, Doug Dirschl. *A motion was made, seconded and passed to close nominations.* The members will be selected by mail or fax ballot.
- B. **Report of the Bylaws committee.** Dr. Olson presented the report of the Bylaws committee with proposed changes to include the creation of resident member status and the revision of associate membership into two categories, candidate and community. The wording of the changes had been previously circulated to the membership. *Adoption of the proposed changes was moved, seconded and approved unanimously.*

4.

Committee Reports.

- A. **Membership Committee.** Chairman Obremsky noted a total membership of 474. There are 16 new active members approved, 18 members advance from associate to active, and 6 new associate members. He and President Russell presented membership certificates to those new members who were present. He noted that the committee would be working on ways to promote the new membership category of community associate member. It was noted that the cost for resident membership would be \$150 annually with the Journal of Orthopaedic Trauma, \$50 without it.
- B. **Bylaws Committee Report.** Previously given.
- C. **Coding, Classification and Outcomes Committee.** Dr. Webb reported that the web-based version of the database will be produced by Data Harbor and will probably be available for evaluation in March, and possibly for utilization in mid-April. OTA fracture codes will be included in the next version of AAAM's abbreviated injury scale (AIS) codes, adding a powerful source of research data.
- D. **Education committee.** The dates and chairmen of the OTA update courses were announced. Drs. Tornetta and Cramer will lead the combined AAOS/OTA course, while Drs. Probe and Teague will lead the OTA course, which will take place in January 2004 in San Diego. Dr. Anglen reported on the Resident's Course and noted that the winners of the coveted Winquist Cup for best lab at the RBFC were Drs. Baumgaertner, Sirkin, Jones, and Powell. Dr. Russell called for volunteers to help with the next version of OKU Trauma 3.
- E. **Fellowship and Career Choices.** Dr. Watson reported on the career fair held in conjunction with the last annual meeting and Resident's course and on the development of an informational CD-ROM for distribution to residencies, and medical schools. Contact him to assist if interested.
- F. **Research.** Dr. Miclau noted 30 pre-proposals this most recent cycle, about 2/3 invited to be full proposals, and 7

Business Meeting Minutes (cont.)

grants funded for a total of \$128,000. Winners were: Drs. Anglen, Benghuzzi, Egol, Gorczyca, Webb, Pietrobon, and Vrahas. There will be new grant guidelines for fiscal procedures put in place. This year's deadline is April 3 for pre-proposals. The committee is trying to help grant writers by critiquing and recommending improvements.

G. Health Policy and Planning. Dr. Nepola reported his committee's advocacy in several areas and strongly encouraged all members to become involved in the political process in their area.

H. Mass Casualty and Disaster Preparedness. Dr. Born noted two new areas on the OTA website that are for members only and involve credentialing for emergency privileges and volunteering for the National Disaster Medical Service (NDMS). Requirements include a photo ID, medical license information and malpractice coverage information – all are in secure and password protected areas. About 15-20 OTA members are processed for NDMS, and we need about twice that.

5. **Other** Dr. Russell presented a special award – the "Research Donor Member Award" to Dr. Alan Levine for his contributions over many years and in many ways to the OTA's research efforts.

He presented thanks and plaques to Board members and committee chairmen who were rotating off or ending terms: Past President Don Wiss, Secretary Jeff Anglen, BOD members Paul Tornetta and Roy Moed, Membership chair Bob Probe, and Education Chair Jim Kellam. Applause all around.

6. **Transfer of the Gavel.** Dr. Russell then passed the gavel of Presidency to Dr. Marc Swiontkowski, whose first act was to express the gratitude of OTA to Dr. Russell for an excellent job as President. Dr. Swiontkowski then made some brief comments in which he noted the great achievements of OTA in the past few years, thanked the members for their contributions, and outlined some of his plans for the next year. These include:

- complete the implementation of the strategic planning committee lead by Dr. Henley, including re-organization to increase participation
- produce a document on orthopaedic trauma service organization and resources that can be used to help members negotiate with hospitals
- produce a document on the impact of musculoskeletal injury that can be used for public education and lobbying
- formalization of mentoring relationships
- produce a compendium of outcomes instruments
- initiate a project on orthopaedic trauma academic career development

He then took a moment to thank Nancy Franzone and her staff – Michele Garrett, Kathleen Caswell, and Sharon Moore – for their excellent and essential support and facilitation of everything that the OTA has done. A standing ovation from the membership followed.

7. **Adjournment.** There being no further business, a motion was made, seconded and passed to adjourn.

Report from the Coding and Classification Committee

By Larry X. Webb, M.D.

The OTA code is now on the web via the OTA web page at: <http://www.ota.org/compendium/index.htm>. Many thanks to Nancy Franzone and Kathleen Caswell for all of their help. The AAAM (American Association of Automotive Medicine) is in process of deliberating about adopting the modified OTA code for incorporation into the new version of the AIS. This will hopefully allow for the expanded use of the code in other forums. Our committee is considering modifying the code for scapular fractures currently divided into two categories, nonarticular (A) and articular (B). Many thanks to Brad Henley who spearheaded the effort and to all of the members who were able to fill out RVU assessments for orthopaedic procedures at the OTA specialty day session in New Orleans. There is a need to develop a mechanism to make this an ongoing effort. Any member with insights into how to

make this an effective ongoing effort should send his/her ideas to the committee via Nancy Franzone (Franzone@aaos.org). The membership is solicited for recommendations for changing the OTA code by doing so in writing (or via e-mail through Nancy Franzone Franzone@aaos.org); please detail the specific change as well as the reasons for the recommended changes.



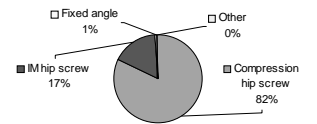
Jeff Anglen, M.D. presenting the Winquist Award to Alan Jones, M.D. and Michael Sirkin, M.D.. Jim Powell, M.D. (not pictured) and Mike Baumgaertner, M.D. (not pictured) also won the award.

N=122 Respondents Results of Last Questionnaire

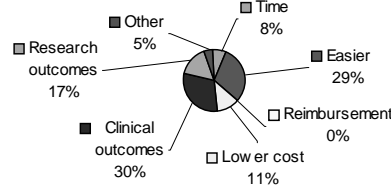
Political Action and Medical Societies

By Jeffrey M. Smith, M.D. and Craig S. Roberts, M.D.

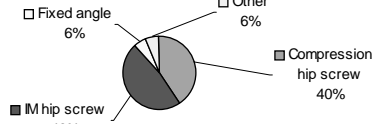
Q1: Routine Intertrochanteric Femur Fracture Implant



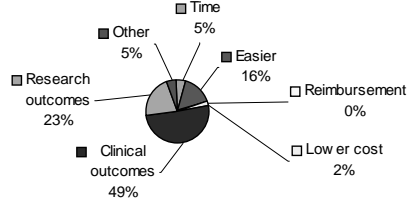
Q2: Primary Factor in Implant Choice for Intertrochanteric Fracture



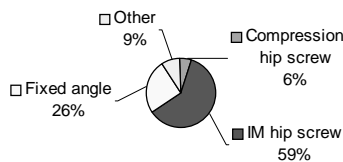
Q3: Comminuted Intertrochanteric Fracture Implant Preference



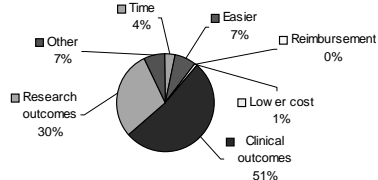
Q4: Primary Factor in Implant Choice for Comminuted Intertrochanteric



Q5: Reverse Obliquity Intertrochanteric Fracture Implant Preference



Q6: Primary Factor in Implant Choice for Reverse Obliquity Fracture



- 1) How many times have you contacted a senator or representative to address a political concern relevant to the practice of orthopaedic surgery?
 - a) Never
 - b) 1-2
 - c) 3-5
 - d) 6-10
 - e) 11 or more

- 2) Please select the choice which most approximates your contributions to Political Action Committees:
 - a) Contribute regularly through financial contributions
 - b) Contribute regularly through time and support
 - c) Contribute occasionally through financial contributions
 - d) Contribute occasionally through time and support
 - e) Never contribute financially
 - f) Never contribute with time and support

- 3) Please circle the organizations for which you are a member and then rate their political effectiveness (1=lowest; 5=highest)

a) AMA	1	2	3	4	5
b) AAOS	1	2	3	4	5
c) OTA	1	2	3	4	5
d) ACS	1	2	3	4	5
e) State Medical Society/Organization	1	2	3	4	5
f) State Orthopaedic Society/Organization	1	2	3	4	5
g) Local Medical Society/Organization	1	2	3	4	5
h) Local Orthopaedic Society/Organization	1	2	3	4	5
i) Regional Medical Society/Organization	1	2	3	4	5
j) Regional Orthopaedic Society/Organization	1	2	3	4	5

- 4) Do you think there are sociopolitical issues that could be more actively addressed by the OTA?

- a) No
- b) Yes. Please list examples: _____

Please respond to:
 Craig S. Roberts, M.D.
 210 E. Gray Street, Suite 1003
 Louisville, KY 40202
 Email: craig.roberts@louisville.edu

“The OTA does not endorse these technical points and formally disclaims any responsibility for their use.”

OKU Trauma 3 Project Update

By Craig S. Roberts, M.D.

There has been a large outpouring of interest from OTA members who are interested in contributing to the OKU Trauma 3 project. Michael Baumgaertner, M.D. and Paul Tornetta, III, M.D., the co-editors, are planning on a section on contemporary issues facing orthopaedic surgeons involved in orthopaedic traumatology, in addition to the anatomically organized chapters. Many new faces are likely to be involved as a result of the AAOS policy that chapters not be rewritten by those who wrote it in the OKU Trauma 2 edition. Please stay posted for more news about this exciting effort.

Announcements

- There is a position available for an Orthopaedic Trauma surgeon at the University of Texas Health Sciences Center (San Antonio). There is also a position for a resident who would be interested in doing a Trauma Fellowship with us beginning in July or August of this year. Please send responses to Charles A. Rockwood, Jr. M.D. (rockwood@uthscsa.edu)
- Andy Pollak, M.D. is coordinating the next edition of *Emergency Care and Transportation for the Sick and Injured*; please contact him if you want to be involved. (apollak@umoa.umaryland.edu)
- Mike Baumgaertner, M.D. had an overwhelming response of members interested in contributing to the OKU trauma 3 as well as International Course prior to AAOS meeting next fall. Further details will be forthcoming.
- Research grant pre-proposal deadline is April 1, 2003.
- The OTA 19th Annual Meeting is October 9-11, 2003 in Salt Lake City, Utah.
- OTA Residents Basic Fracture Course, October 8-11, 2003, Salt Lake City, Utah.
- 3rd Annual AAOS/OTA Jointly Sponsored Trauma Course: Current Concepts and Practical Solutions, April 24-27, 2003, Orlando, Florida.
- Membership Application Deadline is July 1, 2003.
- The new OTA Fracture and Dislocation Compendium is now available on the web site at <http://www.ota.org/compendium/index.htm>.

OTA Executive Committee

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