

KYON THR Skill Assessment

Next steps in the THR Education Pathway

1. **Acquisition of THR Instrument set** (including set of practice implants)
2. **Submission of radiographs and case details**
3. **Completion of wet lab evaluation**
4. **Mentorship of the first 2 clinical cases**

We accept submissions of wet lab cases within 12 months following the workshop. Please contact us if you have been attending the workshop more than 12 months ago.

1. Acquiring a THR Instrument Set:

- For purchasing a **THR instrument set**, please reach out to your local sales representative which can be found here: <https://movora.com/representatives/>

2. Submission of radiographs and case details (applicable to both wet lab and clinical cases)

The complete pre- and post-radiographic assessment and notes must be provided. Each case will be evaluated and designated “Approved” or “Not Approved” with accompanying explanations.

The following information needs to be included in the submission:

- **Case details**
 - Patient weight, gender, and age
 - Size of implants templated and size implanted
 - Brief summary of the procedure (duration, complications, difficulties, etc.)
 - Whether the case was a joint effort of two or more surgeons – but you must be the primary surgeon.
- **Radiographic assessment**
 - A calibration marker **MUST** be included in every image. Size of calibration marker has to be provided
 - Images have to be correctly oriented and centered and cropped as necessary.
 - JPEG or DICOM format
 - Each filename should specify the case number, pre or post-op, and view (i.e. Cranial/Caudal – CC, Ventrodorsal – VD, etc.). For example, “case1_pre_VD.jpg” or “case3_post_lat.jpg”

- **Radiographs to be submitted**
 - Ventrodorsal (VD) view of the pelvis frog legs
 - Ventrodorsal (VD) view of the pelvis extended legs
 - Lateral (LL) view of the pelvis
 - Mediolateral (ML) view of the femur
 - Caudocranial view of the femur (Yoga view)
 - **Pre-operative planning must be drawn on the calibrated radiographs**
 - **Post-operative angle of lateral opening (ALO), cup retroversion and stem anteversion must be drawn and measured**
 - When fluoroscopy is used, as strongly recommended, the images must be included

- Radiographic guide
 - **Ventrodorsal radiographic view with "frog legs" (Pelvis)**
 - Symmetric alignment of the pelvis (obturator foramina – equal size)
 - Calibration marker at the level of the acetabulum for proper acetabular templating

 - **Ventrodorsal radiographic view with extended legs (Pelvis)**
 - Symmetric alignment of the pelvis
 - Calibration marker at the level of the acetabulum for proper acetabular templating

 - **Lateral Radiograph (Pelvis)**
 - Affected limb down and the hip joint remains neutral, with the ilium wings, bodies and ischium superimposed by elevating the sternum as needed. Oblique views are not acceptable.

 - **Open Leg Medio-Lateral Radiograph (Femur)**
 - Dog positioned in lateral recumbency with the affected limb down
 - Upper limb (contralateral limb) pulled cranially to expose the groin area and proximal femur
 - Femoral condyles must be included in the view and must be perfectly superimposed, while ensuring that the stifle is flexed at 90°, with the foot against the table
 - Calibration marker is located caudally and adjacent to the proximal 1/3 of the femur**

 - **Caudocranial Radiograph (Femur) ("Yoga view")**
 - Calibration marker located near the proximal third of the femur for femoral implant templating
 - Dog positioned to achieve a view of the proximal part of the affected femur with the femur parallel to radiograph plate, perpendicular to the pelvis and the hock elevated to achieve 60-70° of external rotation to the femur

Submission process:

- For the submission of your cases please enroll in the [KYON THR Skill Assessment: Wet Lab Case Evaluation](#) on the Movora Education Platform and follow the instructions. Additional fees do apply.
- Please submit only 1 case at a time, to allow implementing received feedback in the following cases.
- Please only submit cases that you consider are of the highest quality caliber. Please thoroughly evaluate your cases prior to submitting. Detected complications/ mistakes (e.g. fissures, diverging ALO etc.) shall be corrected.
- Before submission, use the KYON THR Case Evaluation Form (Appendix I) for an evaluation of your own work.
- Only cases submitted with **all requested** radiographs will be accepted for evaluation. Please double check your submission prior to hitting the submit button.

Evaluation process:

Submitted cases will be evaluated by the expert panel anonymously.

Points are given for the following criteria:

- Evaluation of pre-op radiographs (0-5 points)
- Evaluation of post-op radiographs (0-5 points)
- Evaluation of acetabular cup: ALO, retroversion, depth of reaming/impaction, and proper cup size (0-5 points)
- Evaluation of femoral stem: Anteversion, contact with medial cortex, level of insertion, caudal tilt, proper stem size (0-5 points)

Fatal flaws include:

- Strong deviation from appropriate ALO
- Too superficial reaming or partial cup impaction
- Strong deviation from proper cup retroversion with missed coverage of cranial or caudal pillars
- Strong deviation from appropriate stem anteversion
- Wrong cup or stem size

If a fatal flaw is being identified the submitted case will not be approved, even if the other aspects are fulfilled.

A total maximum of 20 points can be reached per case evaluation. The case will be approved if a minimum of 15 points is achieved. Results are being communicated in a timely manner.

3. Completion of wet lab evaluation

3 wet lab cases must be performed.

At least 2 wet lab cases have to be approved (≥ 15 points per submission).

If the THR Skill Assessment is not passed after submission of 3 cases, further cases have to be submitted. If no improvement is detected, the THR Evaluation Board can recommend to the surgeon to repeat the THR intermediate Workshop.

4. Mentorship of the first 2 clinical cases

Upon completion of the **THR Skill Assessment implants can be purchased for the initial 2 clinical cases. These 2 clinical cases have to be submitted for review.**

For submissions of clinical cases please enroll in the [KYON THR Clinical Case Mentoring](#) on the Movora Education Platform. The same criteria as described in section 2. Submission of radiographs and case details have to be followed.

Additional fees do apply.

Cases have to be indicated "Case Type": Clinical.

Submitted cases will be forwarded to the expert panel and reviewed.

Preoperative assistance with templating and recommendations specific to the case is available upon request.

Version date: 26. January 2023

Zurich Cementless THR Cadaver Evaluation Form - KYON

Surgeon Name: ANONYM-xxx

Cadaver #:

Reviewer:

Date:

Pre-op Radiographic evaluation

VD view (frog and/or extended).
 LL view of the pelvis
 ML view of the femur
 Yoga view

Score (0-5)

Notes

Post-op Radiographic evaluation

VD view (frog and/or extended)
 LL view of the pelvis
 ML view of the femur
 Yoga view

Notes

Acetabular cup

ALO
 Retroversion
 Impaction
 Proper size

Notes

Femoral stem

Anteversion
 Contact with the medial cortex
 Level of insertion
 Proper size

Notes

General
 notes

Total points

A score ≥ 15 is passing

Approved

Not approved