



### **Event Program**

### AOSpine Davos Courses 2018

- Microdecompression and Endoscopy
- Endoscopy and Percutaneous Fixation
- Percutaneous Fixation and Microdecompression

December 8–11, 2018 Davos, Switzerland

Online activities: November 12-December 2, 2018













### Join our global spine care community

AOSpine membership

Gain access to numerous privileges, including the most advanced educational programs, a worldwide network of professionals, and the highest quality of research carried out by experts and key opinion leaders in spine care.





Advancing spine care worldwide

For further information on the latest privileges available, please visit: www.aospine.org/membership

## Design your personal AOSpine Davos Courses 2018!

#### Dear colleagues

Welcome to the 2018 Davos Courses, which are focusing entirely on minimally invasive spine surgery (MISS).

Participants of all levels of practice will have the opportunity to improve their use of the microscope, the endoscope and work on their percutaneous fixation skills.

All courses include case discussions and hands-on sessions on a life-like simulator as well as online course preparations and provide an outstanding occasion to train under the supervision of world-renowned MISS experts.

Also, make sure you don't miss "the good, the bad, the ugly—a case that taught me a lesson" discussions in the afternoon—a great chance to benefit from the experiences of others and to discuss best practices with your peers.

Our renowned international faculty will not only share their extensive knowledge and skills with you but also make sure that you get the best learning experience possible.

As always during the Davos Courses, you will have plenty of time for discussions and networking with spine experts from all over the world.

I hope you will enjoy this outstanding learning experience and wish you a wonderful time in Davos.

Best wishes

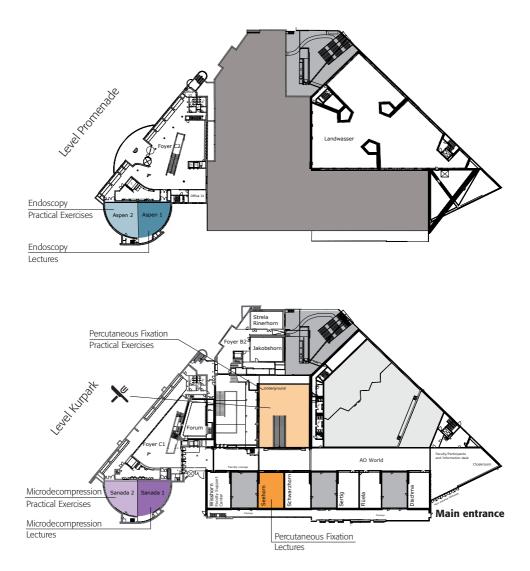


**Bryan Ashman** Chairperson AOSpine Education Commission

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### Floor plan



### Mission

The AO's mission is promoting excellence in patient care and outcomes in trauma and musculoskeletal disorders.

### Purpose statement

The global academic spine community promoting excellence in patient care and outcomes.

### Course format

Over three extraordinary days, participants at the Davos Courses 2018 will have multiple opportunities to interact with renowned worldwide faculty who will be teaching MISS at the expert level. These specialists will share their knowledge and experiences in an appropriate faculty-to-participant ratio course setting and will focus on the most relevant, evidence-based information and current controversies in spine surgery.

This year we offer three separate courses emphasizing hands-on experiences on the latest techniques, and offer participants a way to improve their MISS skills on the microscope, the endoscope, and in percutaneous screw placement.

The following courses are offered:

- Course 1: AOSpine Davos Courses—Microdecompression and Endoscopy
- Course 2: AOSpine Davos Courses—Endoscopy and Percutaneous Fixation
- **Course 3:** AOSpine Davos Courses—Percutaneous Fixation and Microdecompression

The three AOSpine Davos Courses 2018 are targeted at participants of all levels of practice in spine surgery who would like to advance in MISS. Participants will register for one of the above courses focusing on two techniques over three days, including hands-on exercises, case discussions on general related topics and the famous "the good, the bad, and the ugly—a case that taught me a lesson" panel discussion.

### **Course Director**



**Bryan Ashman** Canberra Hospital Canberra, Australia

### Chairpersons

### Endoscopy course module



**Jin Sung Kim** Seoul St Mary's Hospital, The Catholic University of Korea, Seoul, South Korea

### **Microdecompression course module**



**Avelino Parajon** Hospital Universitario Ramón y Cajal, Madrid, Spain

### Percutaneous Fixation course module



**Muhammed Assous** Razi Spine Clinic, Amman, Jordan

**Patrick Tropiano** Hopital de la Timone, Marseille, France



**Muzahem Taha** Sardam Hospital, Erbil, Iraq

## Educational Advisors



Manabu Ito National Hospital Organization Hokkaido Medical Center, Sapporo, Japan

### Faculty members

### **Endoscopy course module:**

Chien-Min Chen	Taiwan, Asia Pacific
Christoph Hofstetter	USA, North America
Jun-Ho Lee	South Korea, Asia Pacific
Abhay Nene	India, Asia Pacific
Si Young Park	South Korea, Asia Pacific
Peter van Daele	Belgium, Europe and Southern Africa

### Microdecompression course module:

Richard Assaker	France, Europe and Southern Africa
Luiz Gustavo Dal Oglio da Rocha	Brazil, Latin America
Kevin Foley	USA, North America
Matti Scholz	Germany, Europe and Southern Africa
Nestor Taboada Taboada	Colombia, Latin America
Jake Timothy	UK, Europe and Southern Africa

### Percutaneous fixation course module:

Amer Aziz
Daniel Gelb
Roger Härtl
Jean-Pierre Mobasser
Ahmed Shawky Abdelgawaad
Paul Taylor

Pakistan, Middle East and Northern Africa USA, North America USA, North America USA, North America Germany, Europe and Southern Africa Australia, Asia Pacific

### Endoscopy course module

### Why you should attend this course and how it could benefit your daily practice

Endoscopic spine surgery has been accepted for many kinds of spinal diseases.

Currently, we are seeing the beginning of a paradigm shift in spine surgery toward more minimally invasive techniques. As the chairperson of the endoscopy course module at the AOSpine Davos Courses 2018, I strongly recommend this course because it will give you the opportunity to change your life and improve your patients' outcomes, which is the goal of every MISS spine surgeon.

### What the "hands-on" format will provide

This 1.5 day course will cover basic endoscopic procedures—transforaminal, interlaminar discectomy, and unilateral laminotomy and bilateral decompression—for lumbar disc herniation and lumbar spinal stenosis.

All participants will have intensive discussions with expert endoscopic spine surgeons and they will gain an understanding of the best indications for each endoscopic procedure available, in addition to its benefits and risks.

By offering endoscopy teaching in AOSpine, I am confident that this format provides an optimal learning setting to overcome the steep learning curve and enables every participant to start endoscopic spine procedures.

#### **Learning objectives**

- Diagnose the patient problem and recognize appropriate indications and contraindications for endoscopic spinal surgery
- Select the appropriate endoscopic spinal procedure and set up the technology, operating room, and team
- Manage complications and apply a backup plan
- Perform the key steps of endoscopic procedures through interlaminar and transforaminal access
- Recognize possible complications in endoscopic procedures and describe how to avoid these
- Integrate current evidence and expert techniques to determine the optimal treatment for lumbar disc herniation



Jin Sung Kim Chairperson Seoul St Mary's Hospital, The Catholic University of Korea, Seoul, South Korea

### Microdecompression course module

### Why you should attend this course and how it could benefit your daily practice

Microsurgical MISS microsurgical techniques for decompression and fusion are now established tools that can contribute to better outcomes and fewer complications for patients with spinal conditions.

Microsurgical MISS decompression techniques also allow us to treat elderly patients or those with serious medical conditions when open surgeries may be contraindicated or have high risk.

### What the "hands-on" format will provide

The format of the course is based on real cases with "real" simulators reflecting the daily practice of a spine surgeon, in small groups and from worldwide experts in the field. This provides the opportunity to discuss the indications, pros and cons and surgical tips and tricks with the experts and other colleagues and to practice the surgical techniques on realistic models of the spinal diseases.

### Learning objectives

- Diagnose the patient problem and recognize appropriate indications and contraindications for MISS
- Select the appropriate MISS procedure and set up the technology, operating room, and team
- Manage complications and apply a backup plan
- Use microsurgical instruments and perform basic techniques for the lumbar spine
- Describe and perform the key steps of lumbar decompression and MISS transforaminal lumbar interbody fusion (TLIF) through tubular retractors
- Identify and address potential complications with the lumbar tubular microsurgical approach



**Avelino Parajon Chairperson** Hospital Universitario Ramón y Cajal, Madrid, Spain

### Percutaneous Fixation course module

### Why you should attend this course and how it could benefit your daily practice

Percutaneous screw placement is an integral part of most MISS procedures requiring instrumentation. Adult spinal deformity correction, trauma reduction and stabilization, degenerative spinal fusions, and many infection/tumor cases require pedicle screw insertion. This can be effectively and safely achieved percutaneously, reducing unnecessary tissue and muscle dissection, and bleeding, and enhances post-operative patient recovery.

### What the "hands-on" format will provide

The hands-on format, the signature of the AOSpine Davos Courses 2018, ensures the maximum increase of knowledge as it deals with actual clinical cases that may present to any spine surgeon's clinic using realistic simulators in a supervised training environment. Backed up with highly interactive discussions moderated by world renowned experts, based on the best available evidence, ideas and concepts are challenged and redefined. This is what usually improves one's practice and patients' care. The hands-on framework is most useful to show and explain the real and proven advantages of MISS.

#### **Learning objectives**

- Diagnose the patient problem and recognize appropriate indications and contraindications for MISS
- Select the appropriate MISS procedure and set up the technology, operating room, and team
- Manage complications and apply a backup plan
- Take specific steps and precautions to minimize radiation exposure during percutaneous fixation
- Identify radiological landmarks required for safe and accurate placement of a trephine needle into the pedicle
- Correctly and safely insert percutaneous pedicle screws in the thoracic and lumbar spine



**Muhammed Assous Chairperson** Razi Spine Clinic, Amman, Jordan

### Schedule at a glance

### Saturday, December 8

TIME	AGENDA ITEM
12:00-16:00	Participant registration
16:00-18:30	AO Foundation 60th Anniversary Celebration and Opening Ceremony
18:30-19:30	Anniversary Reception

### Sunday, December 9

TIME	AGENDA ITEM
08:00-08:30	AOSpine opening session
08:30–10:00	<ul> <li>Microdecompression and Endoscopy</li> <li>Endoscopy and Percutaneous Fixation</li> <li>Percutaneous Fixation and Microdecompression</li> </ul>
10:00-10:30	COFFEE BREAK
10:30-12:00	<ul> <li>Microdecompression and Endoscopy</li> <li>Endoscopy and Percutaneous Fixation</li> <li>Percutaneous Fixation and Microdecompression</li> </ul>
12:00-13:00	LUNCH BREAK
13:00–15:00	<ul> <li>Microdecompression and Endoscopy</li> <li>Endoscopy and Percutaneous Fixation</li> <li>Percutaneous Fixation and Microdecompression</li> </ul>
15:00-15:30	COFFEE BREAK
15:30–17:30	<ul> <li>Microdecompression and Endoscopy</li> <li>Endoscopy and Percutaneous Fixation</li> <li>Percutaneous Fixation and Microdecompression</li> </ul>
17:45–18:45	"The good, the bad, and the ugly— a case that taught me a lesson" session

### Monday, December 10

TIME	AGENDA ITEM
08:00-10:00	<ul> <li>Microdecompression and Endoscopy</li> <li>Endoscopy and Percutaneous Fixation</li> <li>Percutaneous Fixation and Microdecompression</li> </ul>
10:00-10:20	COFFEE BREAK
10:20-12:30	<ul> <li>Microdecompression and Endoscopy</li> <li>Endoscopy and Percutaneous Fixation</li> <li>Percutaneous Fixation and Microdecompression</li> </ul>
12:30-13:30	LUNCH BREAK
13:30-15:00	<ul> <li>Microdecompression and Endoscopy</li> <li>Endoscopy and Percutaneous Fixation</li> <li>Percutaneous Fixation and Microdecompression</li> </ul>
15:00-15:30	COFFEE BREAK
15:30-17:00	<ul> <li>Microdecompression and Endoscopy</li> <li>Endoscopy and Percutaneous Fixation</li> <li>Percutaneous Fixation and Microdecompression</li> </ul>
17:15–18:15	"The good, the bad, and the ugly— a case that taught me a lesson" session
18:15-20:30	AO World Night (social event)

### Tuesday, December 11

TIME	AGENDA ITEM
08:00-10:00	<ul> <li>Microdecompression and Endoscopy</li> <li>Endoscopy and Percutaneous Fixation</li> <li>Percutaneous Fixation and Microdecompression</li> </ul>
10:00-10:30	COFFEE BREAK
10:30-12:30	<ul> <li>Microdecompression and Endoscopy</li> <li>Endoscopy and Percutaneous Fixation</li> <li>Percutaneous Fixation and Microdecompression</li> </ul>
12:30-13:30	LUNCH BREAK
13:30–15:30	<ul> <li>Microdecompression and Endoscopy</li> <li>Endoscopy and Percutaneous Fixation</li> <li>Percutaneous Fixation and Microdecompression</li> </ul>
15:30-15:50	COFFEE BREAK
15:50–18:00	<ul> <li>Microdecompression and Endoscopy</li> <li>Endoscopy and Percutaneous Fixation</li> <li>Percutaneous Fixation and Microdecompression</li> </ul>

#### Sunday, December 9 LOCATION: Microdecompression: Room Sanada 1 and 2, House C TIME AGENDA ITEM WHO 08:00-08:30 AOSpine opening session B Ashman Introduction to the microdecompression course module-part I Moderator: A Parajon 08:30-08:45 Welcome to course module-introduction to MISS A Parajon microsurgical techniques 08:45-09:00 Integration of microscope into surgical flow A Parajon 09:00-09:15 How to use microsurgical tools N Taboada 09:15-09:30 Evidence for tubular techniques LG Dal Oglio da Rocha 09:30-09:45 Navigation and MISS J Timothy 09:45-10:00 Advantages and disadvantages of microsurgical tubular K Foley techniques 10:00-10:30 COFFEE BREAK Introduction to the microdecompression course module-part II Moderator: K Foley Indirect microsurgical decompression-interspinous 10:30-10:45 J Timothy devices 10:45-11:00 Step-by-step microsurgical discectomy M Scholz 11:00-11:15 Step-by-step over the top decompression A Parajon 11:15-11:30 Microsurgical tubular dural repair N Taboada R Assaker 11:30-11:45 Step-by-step MISS tubular TLIF 11:45-12:00 Step-by-step cervical tubular foraminotomy K Foley

12:00-13:00 LUNCH BREAK

### 13:00–14:00 Case 1–Lumbar stenosis (without spondylolisthesis)

- Indication for surgery
- Indication for decompression only vs stabilization—advantages of MISS vs open surgery in terms of less postoperative instability

M Scholz, P Tropiano

- Surgical approaches
- Complications management

Sunday, December 9			
LOCATION: Microdecompression: Room Sanada 1 and 2, House C			
TIME	AGENDA ITEM	WHO	
14:00–15:00	<ul> <li>Case 2-Lumbar spondylolisthesis and stenosis</li> <li>Indication for surgery</li> <li>Indication for decompression only vs stabilization</li> <li>Surgical approaches: TLIF, XLIF, laminectomy</li> <li>Complications management</li> </ul>	M Scholz, P Tropiano	
15:00-15:30	COFFEE BREAK		
15:30–16:30	<ul> <li>Case 3-Cervical foraminal disc</li> <li>Surgical indications</li> <li>Anterior vs posterior approach</li> <li>Fusion vs decompression</li> <li>Tubular approach vs endoscopy</li> <li>Tips and tricks</li> </ul>	M Scholz, P Tropiano	
16:30–17:30	<ul> <li>Case 4-Lumbar synovial cyst</li> <li>Physiopathology</li> <li>Surgical indication</li> <li>Complications cerebrospinal fluid (CSF) leak</li> <li>Tubular contralateral approach</li> <li>The need for instrumentation and fusion vs excision only</li> <li>Other MISS options (punction)</li> </ul>	M Scholz, P Tropiano	
13:00–17:30 incl. coffee break 15:00–15:30	<ul> <li>Practical exercises (parellel session)</li> <li>Over the top laminectomy, ipsilateral decompression</li> <li>Over the top laminectomy, contralateral decompression</li> <li>Microdiscectomy</li> <li>CSF leak repair</li> </ul>	A Parajon, K Foley, LG Dal Oglio da Rocha, R Assaker, N Taboada, J Timothy	
LOCATION: Hotel Ameron, Room Symondpark I			
17:45–18:45	The good, the bad, and the ugly—a case that taught me a lesson in microdecompression	R Assaker, K Foley, J Timothy	

### Monday, December 10

LOCATION: Microdecompression: Room Sanada 1 and 2, House C			
TIME	AGENDA ITEM	WHO	
08:00-09:00	<ul> <li>Case 1-Lumbar stenosis (without spondylolisthesis)</li> <li>Indication for surgery</li> <li>Indication for decompression only vs stabilization—advantages of MISS vs open surgery in terms of less postoperative instability</li> <li>Surgical approaches</li> <li>Complications managemnt</li> </ul>	M Scholz, P Tropiano	
09:00-10:00	<ul> <li>Case 2-Lumbar spondylolisthesis and stenosis</li> <li>Indication for surgery</li> <li>Indication for decompression only vs stabilization</li> <li>Surgical approaches: TLIF, XLIF, laminectomy</li> <li>Complications management</li> </ul>	M Scholz, P Tropiano	
10:00-10:20	COFFEE BREAK		
10:20–11:20	<ul> <li>Case 3-Cervical foraminal disc</li> <li>Surgical indications</li> <li>Anterior vs posterior approach</li> <li>Fusion vs decompression</li> <li>Tubular approach vs endoscopy</li> <li>Tips and tricks</li> </ul>	M Scholz, P Tropiano	
11:20–12:20	<ul> <li>Case 4-Lumbar synovial cyst</li> <li>Physiopathology</li> <li>Surgical indication</li> <li>Complications cerebrospinal fluid (CSF) leak</li> <li>Tubular contralateral approach</li> <li>The need for instrumentation and fusion vs excision only</li> <li>Other MISS options (punction)</li> </ul>	M Scholz, P Tropiano	
08:00-12:20 incl. coffee break 10:00-10:20	<ul> <li>Practical exercises (parellel session)</li> <li>Over the top laminectomy, ipsilateral decompression</li> <li>Over the top laminectomy, contralateral decompression</li> <li>Microdiscectomy</li> <li>CSF leak repair</li> </ul>	A Parajon, K Foley, LG Dal Oglio da Rocha, R Assaker, N Taboada, J Timothy	
12:20-12:30	Closing session of course module	A Parajon, P Tropiano	
12:30-13:30	LUNCH BREAK		

### Monday, December 10

LOCATION: Endoscopy: Room Aspen 1 and 2, House C			
TIME	AGENDA ITEM	WHO	
Introduction to the endoscopy course module—part I Incorporating spinal endoscopy into your routine practice		Moderator: M Ito	
13:30-13:40	Welcome to course module-introduction to endoscopy	JS Kim	
13:40–13:55	Critical reappraisal of spinal endoscopy based on historical evidence	JH Lee	
13:55–14:10	Optimizing case selection and surgical indications for spinal endoscopy	P van Daele	
14:10-14:25	Anatomical considerations prior to spinal endoscopy	CM Chen	
14:25-14:40	Recent advances in spinal endoscopy preceding publication	SY Park	
14:40-15:00	Questions and answers	All faculty	
15:00-15:30	COFFEE BREAK		
	to the endoscopy course module—part II ugh technical details for spinal endoscopy	Moderator: R Härtl	
		Moderator: R Härtl P van Daele	
Navigating thro	ugh technical details for spinal endoscopy Customizing your operating room for spinal endoscopy;		
Navigating thro	ugh technical details for spinal endoscopy Customizing your operating room for spinal endoscopy; set up considerations Transforaminal vs interlaminar approach (based on	P van Daele	
Navigating thro 15:30–15:45 15:45–16:00	ugh technical details for spinal endoscopy Customizing your operating room for spinal endoscopy; set up considerations Transforaminal vs interlaminar approach (based on foraminal morphometry) Commonly expected complications and their	P van Daele CM Chen	
Navigating thro 15:30–15:45 15:45–16:00 16:00–16:15	ugh technical details for spinal endoscopy Customizing your operating room for spinal endoscopy; set up considerations Transforaminal vs interlaminar approach (based on foraminal morphometry) Commonly expected complications and their management tactics	P van Daele CM Chen JH Lee	
Navigating thro 15:30–15:45 15:45–16:00 16:00–16:15 16:15–16:30 16:30–17:00	ugh technical details for spinal endoscopy Customizing your operating room for spinal endoscopy; set up considerations Transforaminal vs interlaminar approach (based on foraminal morphometry) Commonly expected complications and their management tactics Feasibility of endoscopic revision surgery	P van Daele CM Chen JH Lee C Hofstetter	

Tuesday, December 11		
LOCATION: En	doscopy: Room Aspen 1 and 2, House C	
TIME	AGENDA ITEM	WHO
08:00-09:00	Case 1–Huge migrated lumbar disc herniation: which approach?	M Ito, A Nene
09:00-10:00	Case 2–Twice recurring lumbar disc herniation: still going for another endoscopy?	M Ito, A Nene
10:00-10:30	COFFEE BREAK	
10:30–11:30	Case 3–Is an endoscopic solution available for the facet cyst combined with lumbar stenosis?	M Ito, A Nene
11:30–12:30	Case 4—What is the best MISS solution for lateral recess stenosis?	M Ito, A Nene
08:00-12:30 incl. coffee break 10:00-10:30	<ul> <li>Practical exercises (parallel session)</li> <li>The ideal trajectory of transforaminal endoscopy</li> <li>Transforaminal endoscopic discectomy</li> <li>Transforaminal endoscopic foraminotomy</li> <li>Interlaminar endoscopic discectomy at L5S1</li> <li>Interlaminar endoscopic lateral recess decompression</li> <li>Interlaminar endoscopic laminotomy and bilateral decompression</li> </ul>	JS Kim JH Lee CM Chen P van Daele SY Park C Hofstetter
12:30–13:30	LUNCH BREAK	
13:30–14:30	Case 1–Huge migrated lumbar disc herniation: which approach?	M Ito, A Nene
14:30–15:30	Case 2–Twice recurring lumbar disc herniation: still going for another endoscopy?	M Ito, A Nene
15:30-15:50	COFFEE BREAK	

### **Tuesday, December 11**

LOCATION: Endoscopy: Room Aspen 1 and 2, House C			
TIME	AGENDA ITEM	WHO	
15:50–16:50	Case 3–Is an endoscopic solution available for the facet cyst combined with lumbar stenosis?	M Ito, A Nene	
16:50–17:50	Case 4—What is the best MISS solution for lateral recess stenosis?	M Ito, A Nene	
13:30–17:50 incl. coffee break 15:30–15:50	<ul> <li>Practical exercises (parallel session)</li> <li>The ideal trajectory of transforaminal endoscopy</li> <li>Transforaminal endoscopic discectomy</li> <li>Transforaminal endoscopic foraminotomy</li> <li>Interlaminar endoscopic discectomy at L5S1</li> <li>Interlaminar endoscopic lateral recess decompression</li> <li>Interlaminar endoscopic laminotomy and bilateral decompression</li> </ul>	JS Kim JH Lee CM Chen P van Daele SY Park C Hofstetter	
17:50–18:00	Closing session of course module		

End of course

Sunday, De	cember 9	
LOCATION: En	doscopy: Room Aspen 1 and 2, House C	
TIME	AGENDA ITEM	WHO
08:00-08:30	AOSpine opening session	B Ashman
	to the endoscopy course module—part I pinal endoscopy into your routine practice	Moderator: M Ito
08:30-08:40	Welcome to course module-introduction to endoscopy	JS Kim
08:40-08:55	Critical reappraisal of spinal endoscopy based on historical evidence	JH Lee
08:55–09:10	Optimizing case selection and surgical indications for spinal endoscopy	P van Daele
09:10-09:25	Anatomical considerations prior to spinal endoscopy	CM Chen
09:25-09:40	Recent advances in spinal endoscopy preceding publication	SY Park
09:40-10:00	Questions and answers	All faculty
10:00-10:30	COFFEE BREAK	
	to the endoscopy course module—part II ugh technical details for spinal endoscopy	Moderator: A Nene
10:30–10:45	Customizing your operating room to spinal endoscopy; set up considerations	P van Daele
10:45–11:00	Transforaminal vs interlaminar approach (based on foraminal morphometry)	CM Chen
11:00–11:15	Commonly expected complications and their management tactics	JH Lee
11:15-11:30	Feasibility of endoscopic revision surgery	C Hofstetter
11:30-12:00	Questions and answers	All faculty
12:00-13:00	LUNCH BREAK	

Sunday, December 9		
LOCATION: En	doscopy: Room Aspen 1 and 2, House C	
TIME	AGENDA ITEM	WHO
13:00-14:00	Case 1–Huge migrated lumbar disc herniation: which approach?	M Ito, A Nene
14:00-15:00	Case 2–Twice recurring lumbar disc herniation: still going for another endoscopy?	M Ito, A Nene
15:00-15:30	COFFEE BREAK	
15:30–16:30	Case 3—Is an endoscopic solution available for the facet cyst combined with lumbar stenosis?	M Ito, A Nene
16:30–17:30	Case 4—What is the best MISS solution for lateral recess stenosis?	M Ito, A Nene
13:00–17:30 incl. coffee break 15:00–15:30	<ul> <li>Practical exercises (parallel session)</li> <li>The ideal trajectory of transforaminal endoscopy</li> <li>Transforaminal endoscopic discectomy</li> <li>Transforaminal endoscopic foraminotomy</li> <li>Interlaminar endoscopic discectomy at L5S1</li> <li>Interlaminar endoscopic lateral recess decompression</li> <li>Interlaminar endoscopic laminotomy and bilateral decompression</li> </ul>	JS Kim JH Lee CM Chen P van Daele SY Park C Hofstetter
LOCATION: Hotel Ameron, Room Campanello		
17:45–18:45	The good, the bad, and the ugly—a case that taught me a lesson in endoscopy	C Hofstetter, SY Park, P van Daele

Monday, December 10		
LOCATION: En	doscopy: Room Aspen 1 and 2, House C	
TIME	AGENDA ITEM	WHO
08:00-09:00	Case 1–Huge migrated lumbar disc herniation: which approach?	M Ito, A Nene
09:00-10:00	Case 2–Twice recurring lumbar disc herniation: still going for another endoscopy?	M Ito, A Nene
10:00-10:20	COFFEE BREAK	
10:20–11:20	Case 3–Is an endoscopic solution available for the facet cyst combined with lumbar stenosis?	M Ito, A Nene
11:20-12:20	Case 4—What is the best MISS solution for lateral recess stenosis?	M Ito, A Nene
08:00–12:30 incl. coffee break 10:00–10:20	<ul> <li>Practical exercises (parallel session)</li> <li>The ideal trajectory of transforaminal endoscopy</li> <li>Transforaminal endoscopic discectomy</li> <li>Transforaminal endoscopic foraminotomy</li> <li>Interlaminar endoscopic discectomy at L5S1</li> <li>Interlaminar endoscopic lateral recess decompression</li> <li>Interlaminar endoscopic laminotomy and bilateral decompression</li> </ul>	JS Kim JH Lee CM Chen P van Daele SY Park C Hofstetter
12:20-12:30	Closing session of course module	JS Kim, M Ito
12:30-13:30	LUNCH BREAK	

### Monday, December 10

LOCATION: Percutaneous Fixation: Room Seehorn, House A, Bunker rooms		
TIME	AGENDA ITEM	WHO
Introduction	to the percutaneous fixation course module-part I	Moderator: P Taylor
13:30–13:40	Welcome to course module—introduction to percutaneous screw fixation	M Assous
13:40-13:50	Percutaneous screws: literature review	A Aziz
13:50-14:00	Ionizing radiation: safety and tips to minimize exposure	R Härtl
14:00-14:10	Square vertebra concept, entry point and trajectory	D Gelb
14:10-14:20	Lumbar percutaneous screws: technique and tips	A Shawky Abdelgawaad
14:20-14:30	Thoracic percutaneous screws: technique and tips	JP Mobasser
14:30-14:40	Percutaneous screw fixation in the pelvis	D Gelb
14:40-15:00	Discussion	All faculty
15:00-15:30	COFFEE BREAK	
Introduction	to the percutaneous fixation course module-part II	Moderator: D Gelb
15:30-15:40	Rod application, compression and distraction techniques	JP Mobasser
15:40-15:50	Multiaxial vs monoaxial screws: tips in trauma	A Aziz
15:50-16:00	Percutaneous screws: tips in fusion surgery	P Taylor
16:00-16:10	Percutaneous screws: in the osteoporotic spine	P Taylor
16:10-16:20	Percutaneous screws: complications and avoidance	A Shawky Abdelgawaad
16:20-16:30	Navigated screws: added value?	R Härtl
16:30-17:00	Discussion	All faculty
LOCATION: He	otel Ameron, Room Symondpark II	

17:15–18:15The good, the bad, and the ugly–a case that<br/>taught me a lesson in percutaneous fixationR Härtl, JP Mobasser,<br/>D Gelb

### Tuesday, December 11

LOCATION: Pe	rcutaneous Fixation: Room Seehorn, House A, Bunker	rooms
TIME	AGENDA ITEM	WHO
08:00-09:00	Case 1–Degeneration (TLIF)	A Shawky Abdelgawaad
09:00-10:00	Case 2–Adult deformity	D Gelb
10:00-10:30	COFFEE BREAK	
10:30-11:30	Case 3-Trauma	A Shawky Abdelgawaad
11:30-12:30	Case 4–Infection and tumors	D Gelb
08:00–12:30 incl. coffee break	<ul> <li>Practical exercises (parallel session)</li> <li>Percutaneous screw placement in the proximal</li> </ul>	A Aziz
10:00–10:30	<ul> <li>Percutation screw placement in the ploximal thoracic spine</li> <li>Percutaneous screw placement in the middle lower thoracic spine</li> <li>Percutaneous screw placement in the lumbar spine</li> <li>Screw placement into the pelvis</li> <li>Rod insertion, compression and distraction</li> <li>Navigated screws</li> </ul>	M Assous M Taha P Taylor JP Mobasser R Härtl
12:30-13:30	LUNCH BREAK	
13:30-14:30	Case 1–Degeneration (TLIF)	A Shawky Abdelgawaad
14:30-15:30	Case 2-Adult deformity	D Gelb
15:30-15:50	COFFEE BREAK	
15:50-16:50	Case 3–Trauma	A Shawky Abdelgawaad
16:50-17:50	Case 4–Infection and tumors	D Gelb
13:30–17:50 incl. coffee break	Practical exercises (parallel session)	
15:30-15:50	Percutaneous screw placement in the proximal thoracic spine	A Aziz
	Percutaneous screw placement in the middle lower thoracic spine	M Assous
	<ul> <li>Percutaneous screw placement in the lumbar spine</li> <li>Screw placement into the pelvis</li> <li>Rod insertion, compression and distraction</li> <li>Navigated screws</li> </ul>	M Taha P Taylor JP Mobasser R Härtl
17:50–18:00	Closing session of course module End of course	M Assous, M Taha



### Education AO Surgery Reference— Expertise just when you need it

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### Sunday, December 9

LOCATION: Percutaneous Fixation: Room Seehorn, House A, Bunker rooms		
TIME	AGENDA ITEM	WHO
08:00-08:30	AOSpine opening session	B Ashman
Introduction	to the percutaneous fixation course module-part I	Moderator: P Taylor
08:30-08:40	Welcome to course module—introduction to percutaneous fixation	M Assous
08:40-08:50	Percutaneous screws: literature review	M Taha
08:50-09:00	Ionizing radiation: safety and tips to minimize exposure	R Härtl
09:00-09:10	Square vertebra concept, entry point and trajectory	D Gelb
09:10-09:20	Lumbar percutaneous screws: technique and tips	A Shawky Abdelgawaad
09:20-09:30	Thoracic percutaneous screws: technique and tips	JP Mobasser
09:30-09:40	Percutaneous screw fixation in the pelvis	D Gelb
09:40-10:00	Discussion	All faculty
10:00-10:30	COFFEE BREAK	

Introduction	to the percutaneous fixation course module-part II	Moderator: D Gelb
10:30-10:40	Rod application, compression and distraction techniques	JP Mobasser
10:40-10:50	Multiaxial vs monoaxial screws: tips in trauma	M Assous
10:50-11:00	Percutaneous screws: tips in fusion surgery	P Taylor
11:00-11:10	Percutaneous screws: in the osteoporotic spine	P Taylor
11:10-11:20	Percutaneous screws: complications and avoidance	A Shawky Abdelgawaad
11:20-11:30	Navigated screws: added value?	R Härtl
11:30-12:00	Discussion	All faculty
12:00-13:00	LUNCH BREAK	

### Sunday, December 9

LOCATION: Percutaneous Fixation: Room Seehorn, House A, Bunker rooms		
TIME	AGENDA ITEM	WHO
13:00-14:00	Case 1–Degeneration (TLIF)	A Shawky Abdelgawaad
14:00-15:00	Case 2–Adult deformity	D Gelb
15:00-15:30	COFFEE BREAK	
15:30-16:30	Case 3–Trauma	A Shawky Abdelgawaad
16:30–17:30	Case 4–Infection and tumors	D Gelb
13:00–17:30 incl. coffee break 15:00–15:30	<ul> <li>Practical exercises (parallel session)</li> <li>Percutaneous screw placement in the proximal thoracic spine</li> <li>Percutaneous screw placement in the middle lower thoracic spine</li> <li>Percutaneous screw placement in the lumbar spine</li> <li>Screw placement into the pelvis</li> <li>Rod insertion, compression and distraction</li> <li>Navigated screws</li> </ul>	A Aziz M Assous M Taha P Taylor JP Mobasser R Härtl
LOCATION: Ho	otel Ameron, Room Symondpark II The good, the bad, and the ugly—a case that taught me a lesson in percutaneous fixation	A Aziz, A Shawky Abdelgawaad, P Taylor

### Monday, December 10

/·		
LOCATION: <b>Percutaneous Fixation:</b> Room Seehorn, House A, Bunker rooms <b>Microdecompression:</b> Room Sanada 1 and 2, House C		
TIME	AGENDA ITEM	WHO
08:00-09:00	Case 1–Degeneration (TLIF)	A Shawky Abdelgawaad
09:00-10:00	Case 2–Adult deformity	D Gelb
10:00-10:20	COFFEE BREAK	
10:20-11:20	Case 3–Trauma	A Shawky Abdelgawaad
11:20-12:20	Case 4–Infection and tumors	D Gelb
08:00–12:20 incl. coffee break	Practical exercises (parallel session)	
10:00-10:20	Percutaneous screw placement in the proximal thoracic spine	A Aziz
	Percutaneous screw placement in the middle lower thoracic spine	M Assous
	• Percutaneous screw placement in the lumbar spine	M Taha
	<ul><li>Screw placement into the pelvis</li><li>Rod insertion, compression and distraction</li><li>Navigated screws</li></ul>	P Taylor JP Mobasser R Härtl
12:20-12:30	Closing session of course module	M Assous, M Taha
12:30-13:30	LUNCH BREAK	
Introduction	to the microdecompression course module-part I	Moderator: A Parajon
13:30–13:45	Welcome to course module—introduction to MISS microsurgical techniques	A Parajon
13:45-14:00	Integration of microscope into surgical flow	A Parajon
14:00-14:15	How to use microsurgical tools	N Taboada
14:15-14:30	Evidence for tubular techniques	LG Dal Oglio da Rocha
14:30-14:45	Navigation and MISS	J Timothy
14:45–15:00	Advantages and disadvantages of microsurgical tubular techniques	K Foley
15:00–15:30	COFFEE BREAK	

### Monday, December 10

LOCATION: Microdecompression: Room Sanada 1 and 2, House C

TIME	AGENDA ITEM	WHO
Introduction	to the microdecompression course module-part II	Moderator: K Foley
15:30–15:45	Indirect microsurgical decompression—interspinous devices	J Timothy
15:45-16:00	Step-by-step microsurgical discectomy	M Scholz
16:00-16:15	Step-by-step over the top decompression	A Parajon
16:15-16:30	Microsurgical tubular dural repair	N Taboada
16:30-16:45	Step-by-step MISS tubular TLIF	R Assaker
16:45-17:00	Step-by-step cervical tubular foraminotomy	K Foley
LOCATION: Ho	otel Ameron, Room Symondpark I	
17:15–18:15	The good, the bad, and the ugly—a case that taught me a lesson in microdecompression	LG Dal Oglio da Rocha, N Taboada, R Assaker

### Tuesday, December 11

LOCATION: Microdecompression: Room Sanada 1 and 2, House C		
AGENDA ITEM	WHO	
<ul> <li>Case 1-Lumbar stenosis (without spondylolisthesis)</li> <li>Indication for surgery</li> <li>Indication for decompression only vs stabilization—advantages of MISS vs open surgery in terms of less postoperative instability</li> <li>Surgical approaches</li> <li>Complications management</li> </ul>	M Scholz, P Tropiano	
<ul> <li>Case 2-Lumbar spondylolisthesis and stenosis</li> <li>Indication for surgery</li> <li>Indication for decompression only vs stabilization</li> <li>Surgical approaches: TLIF, XLIF, laminectomy</li> <li>Complications management</li> </ul>	M Scholz, P Tropiano	
COFFEE BREAK		
<ul> <li>Case 3-Cervical foraminal disc</li> <li>Surgical indications</li> <li>Anterior vs posterior approach</li> <li>Fusion vs decompression</li> <li>Tubular approach vs endoscopy</li> <li>Tips and tricks</li> </ul>	M Scholz, P Tropiano	
<ul> <li>Case 4-Lumbar synovial cyst</li> <li>Physiopathology</li> <li>Surgical indication</li> <li>Complications cerebrospinal fluid (CSF) leak</li> <li>Tubular contralateral approach</li> <li>The need for instrumentation and fusion vs excision only</li> <li>Other MISS options (punction)</li> </ul>	M Scholz, P Tropiano	
Practical exercises (parellel session)	A Parajon, K Foley,	
<ul> <li>Over the top laminectomy, ipsilateral decompression</li> <li>Over the top laminectomy, contralateral decompression</li> <li>Microdiscectomy</li> <li>CSF leak repair</li> </ul>	LG Dal Oglio da Rocha, R Assaker, N Taboada, J Timothy	
	AGENDA ITEM Case 1-Lumbar stenosis (without spondylolisthesis) Indication for surgery Indication for decompression only vs stabilization—advantages of MISS vs open surgery in terms of less postoperative instability Surgical approaches Complications management Case 2-Lumbar spondylolisthesis and stenosis Indication for surgery Indication for decompression only vs stabilization Surgical approaches: TLIF, XLIF, laminectomy Complications management COFFEE BREAK Case 3-Cervical foraminal disc Surgical indications Anterior vs posterior approach Fusion vs decompression Tubular approach vs endoscopy Tips and tricks Case 4-Lumbar synovial cyst Physiopathology Surgical indication Complications cerebrospinal fluid (CSF) leak Tubular contralateral approach The need for instrumentation and fusion vs excision only Other MISS options (punction) Practical exercises (parellel session) Over the top laminectomy, ipsilateral decompression Over the top laminectomy, contralateral decompression Microdiscectomy	

### **Tuesday, December 11**

TIMEAGENDA ITEMWHO13:30–14:30Case 1-Lumbar stenosis (without spondylolisthesis) Indication for decompression only vs stabilization-advantages of MISS vs open surgery in terms of less postoperative instability Surgical approaches Complications managementM Scholz, P Tropiano14:30–15:30Case 2-Lumbar spondylolisthesis and stenosis (Complications management)M Scholz, P Tropiano15:30–15:50COFFEE BREAKM Scholz, P Tropiano Surgical indications Surgical indications (Anterior vs posterior approach (Fusion vs decompression) Tips and tricksM Scholz, P Tropiano M Scholz, P Tropiano16:50–17:50Case 3-Cervical foraminal disc (Surgical indications (Anterior vs posterior approach (Fusion vs decompression) (Tubular approach vs endoscopy) (Tips and tricksM Scholz, P Tropiano (Surgical indications) (Anterior vs posterior approach (Fusion vs decompression) (Complications (punction))13:30–17:50Case 4-Lumbar synovial cyst (Tubular contralateral approach (Tubular contralateral approach) (Cother MISS options (punction))13:30–17:50Practical exercises (parellel session) (Over the top laminectomy, ipsilateral decompression (CSF leak repair)13:30–17:50Over the top laminectomy, contralateral decompression (CSF leak repair)15:30–15:50Over the top laminectomy, contralateral decompression (CSF leak repair)15:30–15:50Over the top laminectomy, contralateral decompression (CSF leak repair)17:50–18:00Cosing session of course module17:50–18:00Cosing session of course module17:50–18:00Cosing session of course module	LOCATION: Microdecompression: Room Sanada 1 and 2, House C		
<ul> <li>Indication for surgery</li> <li>Indication for decompression only vs stabilization—advantages of MISS vs open surgery in terms of less postoperative instability</li> <li>Surgical approaches</li> <li>Complications management</li> <li>14:30–15:30</li> <li>Case 2–Lumbar spondylolisthesis and stenosis Indication for decompression only vs stabilization</li> <li>Surgical approaches: TLIF, XLIF, laminectomy</li> <li>Complications management</li> <li>15:30–15:50</li> <li>COFFEE BREAK</li> <li>15:50–16:50</li> <li>Case 3–Cervical foraminal disc Surgical indications</li> <li>Anterior vs posterior approach Fusion vs decompression</li> <li>Tubular approach vs endoscopy</li> <li>Tips and tricks</li> <li>M Scholz, P Tropiano</li> <li>Surgical indications</li> <li>Anterior vs posterior approach</li> <li>Fusion vs decompression</li> <li>Tubular approach vs endoscopy</li> <li>Tips and tricks</li> <li>M Scholz, P Tropiano</li> <li>Physiopathology</li> <li>Surgical indications</li> <li>Complications cerebrospinal fluid (CSF) leak</li> <li>Tubular contralateral approach</li> <li>Eusion vs decompression</li> <li>Other MISS options (punction)</li> <li>Other MISS options (punction)</li> <li>Other MISS options (punction)</li> <li>Over the top laminectomy, contralateral decompression</li> <li>Over the top laminectomy, contralateral decompression</li> <li>Microdiscectomy</li> <li>CSF leak repair</li> <li>Closing session of course module</li> <li>A Parajon, K Foley, Microdiscectomy</li> <li>Cossing session of course module</li> </ul>	TIME	AGENDA ITEM	WHO
<ul> <li>Indication for surgery</li> <li>Indication for decompression only vs stabilization</li> <li>Surgical approaches: TLIF, XLIF, laminectomy</li> <li>Complications management</li> <li>15:30–15:50</li> <li>COFFEE BREAK</li> <li>15:50–16:50</li> <li>Case 3-Cervical foraminal disc</li> <li>Surgical indications</li> <li>Anterior vs posterior approach</li> <li>Fusion vs decompression</li> <li>Tubular approach vs endoscopy</li> <li>Tips and tricks</li> <li>16:50–17:50</li> <li>Case 4-Lumbar synovial cyst</li> <li>Physiopathology</li> <li>Surgical indication</li> <li>Complications cerebrospinal fluid (CSF) leak</li> <li>Tubular contralateral approach</li> <li>The need for instrumentation and fusion vs excision only</li> <li>Other MISS options (punction)</li> <li>13:30–17:50</li> <li>Practical exercises (parellel session)</li> <li>Over the top laminectomy, ipsilateral decompression</li> <li>Over the top laminectomy, contralateral decompression</li> <li>Timothy</li> <li>CSF leak repair</li> <li>Cosing session of course module</li> </ul>	13:30–14:30	<ul> <li>Indication for surgery</li> <li>Indication for decompression only vs stabilization—advantages of MISS vs open surgery in terms of less postoperative instability</li> <li>Surgical approaches</li> </ul>	M Scholz, P Tropiano
15:50–16:50Case 3–Cervical foraminal disc • Surgical indications • Anterior vs posterior approach • Fusion vs decompression • Tubular approach vs endoscopy • Tips and tricksM Scholz, P Tropiano16:50–17:50Case 4–Lumbar synovial cyst • Physiopathology • Surgical indication • Complications cerebrospinal fluid (CSF) leak • Tubular contralateral approach • The need for instrumentation and fusion vs excision only • Other MISS options (punction)M Scholz, P Tropiano13:30–17:50Practical exercises (parellel session) • Other MISS options (punction)A Parajon, K Foley, LG Dal Oglio da Rocha, N Assaker, N Taboada, J Timothy17:50–18:00Closing session of course moduleA Parajon, P Tropiano	14:30–15:30	<ul> <li>Indication for surgery</li> <li>Indication for decompression only vs stabilization</li> <li>Surgical approaches: TLIF, XLIF, laminectomy</li> </ul>	M Scholz, P Tropiano
<ul> <li>Surgical indications</li> <li>Anterior vs posterior approach</li> <li>Fusion vs decompression</li> <li>Tubular approach vs endoscopy</li> <li>Tips and tricks</li> <li>M Scholz, P Tropiano</li> <li>Physiopathology</li> <li>Surgical indication</li> <li>Complications cerebrospinal fluid (CSF) leak</li> <li>Tubular contralateral approach</li> <li>Tubular contralateral approach</li> <li>Other MISS options (punction)</li> <li>M Practical exercises (parellel session)</li> <li>Over the top laminectomy, ipsilateral decompression</li> <li>Over the top laminectomy, contralateral decompression</li> <li>Microdiscectomy</li> <li>CSF leak repair</li> <li>Morgin Groups (Sergin Groups Morgin)</li> </ul>	15:30-15:50	COFFEE BREAK	
<ul> <li>Physiopathology</li> <li>Surgical indication</li> <li>Complications cerebrospinal fluid (CSF) leak</li> <li>Tubular contralateral approach</li> <li>The need for instrumentation and fusion vs excision only</li> <li>Other MISS options (punction)</li> <li>13:30–17:50</li> <li>Practical exercises (parellel session)</li> <li>Over the top laminectomy, ipsilateral decompression</li> <li>Microdiscectomy</li> <li>CSF leak repair</li> <li>Closing session of course module</li> <li>A Parajon, P Tropiano</li> </ul>	15:50–16:50	<ul> <li>Surgical indications</li> <li>Anterior vs posterior approach</li> <li>Fusion vs decompression</li> <li>Tubular approach vs endoscopy</li> </ul>	M Scholz, P Tropiano
incl. coffee break 15:30–15:50• Over the top laminectomy, ipsilateral decompression • Over the top laminectomy, contralateral decompression • Microdiscectomy • CSF leak repairLG Dal Oglio da Rocha, R Assaker, N Taboada, J Timothy17:50–18:00Closing session of course moduleA Parajon, P Tropiano	16:50–17:50	<ul> <li>Physiopathology</li> <li>Surgical indication</li> <li>Complications cerebrospinal fluid (CSF) leak</li> <li>Tubular contralateral approach</li> <li>The need for instrumentation and fusion vs excision only</li> </ul>	M Scholz, P Tropiano
15:30–15:50• Over the top laminectomy, contralateral decompression • Microdiscectomy • CSF leak repairR Assaker, N Taboada, J Timothy17:50–18:00Closing session of course moduleA Parajon, P Tropiano	13:30–17:50	Practical exercises (parellel session)	A Parajon, K Foley,
		<ul><li>Over the top laminectomy, contralateral decompression</li><li>Microdiscectomy</li></ul>	R Assaker, N Taboada,
End of course	17:50–18:00	Closing session of course module End of course	A Parajon, P Tropiano

### Event organization

#### **Course organization**

AOSpine International Melanie Schatz Stettbachstr. 6 8600 Dübendorf, Switzerland Phone: +41 44 200 24 15 Email: mschatz@aospine.org

#### **Participant management**

AOSpine International Denise Diggelmann Stettbachstr. 6 8600 Dübendorf, Switzerland Phone: +41 44 200 24 33 Email: ddiggelmann@aospine.org

#### **AO funding sources**

Unrestricted educational grants from different sources are collected and pooled together centrally by the AO Foundation. All events are planned and scheduled by local and regional AO surgeon groups based on local needs assessments. We rely on industrial and/or commercial partners for in-kind support to run simulations and/or skills training if educationally needed.

### Event information and logistics

#### Accommodation

Please refer to the event page www.aodavoscourses.org for more information about accommodation and special hotel rates for Davos courses participants.

#### Travel by car

Davos is located in the heart of Grisons (Graubünden) in the east of Switzerland, about 150 km from Zurich. It takes approximately 2 hours from Zurich. Four-wheel drive and winter tires are strongly recommended at this time of the year. Depending on road conditions, you may need snow chains on the last few kilometers.

#### **Travel by plane**

The nearest airport is Zurich Airport. From there you can travel to Davos either by train or by car.

#### **Travel by train**

A regular train service will conveniently take you from Zurich main station or Zurich Airport to Davos Platz; travel time is approximately 3 hours. Tickets and train schedule available at: www.sbb.ch

### Event venue and opening times

#### **Congress Center Davos**

Talstrasse 49A 7270 Davos, Switzerland Phone +41 81 414 62 00 Fax +41 81 414 62 29

#### **General information**

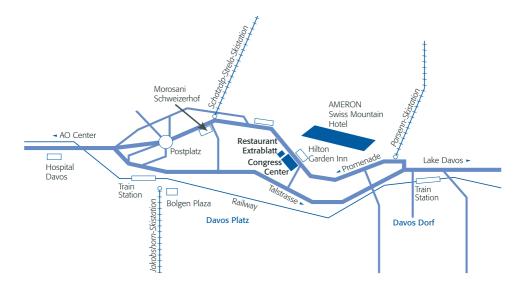
Saturday	12:00-19:00
Sunday to Wednesday	07:30-19:00

### AO World

Saturday	13:00–16:00
Sunday	09:00-18:30
Monday	09:00-20:30
Tuesday	09:00-18:30
Wednesday	09:00-16:30

#### **Industry exhibition**

13:00-16:00
09:00-18:30
09:00-16:30



### **Events**

#### AO Foundation 60th Anniversary Celebration and Opening Ceremony

Saturday, 8 December 16:00–18:30

#### **Anniversary Reception**

18:30-19:30

AO World Night Monday, 10 December 18:15–20:30

### Exhibitions

#### Experience a whole new AO World

This year AO World has been transformed to give you a new insight into our history and activities. You are invited to view the latest publications at the AO library, find out what benefits you are eligible for at the AO community and membership area, explore the AO's teaching and learning resources at the AO digital learning zone's interactive stations, visit AO research and innovations – which this year includes AOTK's popular Meet the Experts sessions, and purchase mementos at the AO merchandise area. Experience the AO spirit, walk the timeline of the AO's history and development, and mingle with other participants. AO staff will be on-hand to ensure you get the most out of this experience.

#### **Industry exhibitors**

Visit the exhibitions of our industry partners DePuy Synthes and Siemens, and the other exhibitors: Ethicon, SYNBONE, Digital Surgery, Invibio, Precision OS, Synoste, Victorinox, AO Alliance, Medical Insights.

#### **Media exhibitors**

Lehmanns Media can be found this year in the industry exhibition area.

### Sponsors

We thank our major industry partners DePuy Synthes and Siemens; as well as our industry partners Karl Storz, Richard Wolf and Carl Zeiss Meditec AG for contributing in-kind support (material and logistics) without which this event would not be possible. A special thanks to DePuy Synthes and Siemens for providing an unrestricted educational grant for this event.



We also extend our thanks to the following co-sponsors (educational grants, in-kind support):







### Business center

There are business center facilities in the Congress Center which are accessible to everybody.

### Services

- Internet and e-mail access
- Printer access
- www.aodavoscourses.org AO Course website offering course-related information

### **Opening hours**

 30 minutes before the first course of the day starts
 30 minutes after the last course ends

### Disclaimer

The use of your own computer in the business center network is inherently not secure. We strongly recommend that you take appropriate actions to protect your computer against unauthorized use or theft (eg. firewalls, VPN-connection, virus scanner). AO cannot be held responsible for any data loss or theft. For further information or support please contact: AO Foundation Phone: +41 81 414 28 70 E-mail: it.helpdesk@aofoundation.org

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Security key:	aowireless	
	Edde characters	

4. Then click on the **OK** button

### General information

#### **Event fee**

Non-member fee CHF 3,000. AOSpine member fee CHF 2,700. Included in course fee are: AO Foundation 60th Anniversary Celebration and opening Ceremony, Anniversary Reception, AOSpine opening session, access to congress center, participation in courses, coffee breaks, lunches, bus transportation in Davos, AO World Night, confirmation of attendance (AO certificate), and CME certificate (only upon proof of course participation)

#### **Cancellation policy**

Until November 8, 2018 a refund of 50% of the registration fee is possible.

After November 8, 2018 the registration fee will not be refundable.

#### **Event registration**

Register online: www.aodavoscourses.org

#### **Payment options**

Bank transfer (plus handling fee of 30 CHF) and credit card (American Express, Visa, Eurocard/Mastercard)

#### **European CME accreditation**

This AOSpine event is accredited for continuing medical education (CME) with 24 points.

### **Conflicts of Interest**

All disclosure information can be viewed at the event webpage.

#### **Evaluation guidelines**

All AOSpine events apply the same evaluation process, either by the audience response system (ARS) or paper and pencil questionnaires. This helps AOSpine to ensure that we continue to meet your training needs.

#### **Intellectual property**

Event materials, presentations, and case studies are the intellectual property of the event faculty. All rights are reserved. Check hazards and legal restrictions on www.aofoundation.org/legal. Recording, photographing, or copying lectures, practical exercises, case discussions, or any event materials is strictly forbidden. Participants violating intellectual property will be dismissed. The AO Foundation reserves the right to film, photograph, and audio record during its events. Participants must understand that in this context they may appear in these recorded materials. The AO Foundation assumes participants agree that these recorded materials may be used for the AO's marketing and other purposes, and that they may be made available to the public.

#### Use of social media

During the Davos Courses you can post about your experience using the #AODavosCourses2018. While we encourage you to share your Davos Courses experience with your online network, it is expressly forbidden to share any images or recordings from inside.

#### Security

Security checks will be conducted at the building entrance. Wearing a badge is compulsory during the entire event.

#### No insurance

The event organization does not take out insurance to cover any individual against accident, theft, or other risks.

#### Use of mobile phones

Use of mobile phones is not allowed in the lecture halls and in other rooms during educational activities. Please be considerate of others by turning off your mobile phone.

#### **Picture gallery**

Check out aodavoscourses.org for a daily selection of pictures from the Davos Courses 2018, the best from last year's courses, and a selection of photographs from the first ever AO Davos Courses.

#### Dress code

Warm clothes and suitable shoes are advisable.

### AO Foundation—Principles of AO Educational Events

#### Academic independence

Development of all curricula, design of scientific event programs, and selection of faculty are the sole responsibilities of volunteer surgeons from the AO network. All education is planned based on needs assessment data, designed and evaluated using concepts and evidence from the most current medical education research, and involving the expertise of the AO Education Institute (www.aofoundation.org).

Industry participation is not allowed during the entire curriculum development and planning process to ensure academic independence and to keep content free from bias.

### Compliance to accreditation and industry codes

All planning, organization, and execution of educational activities follow existing codes for accreditation of high-quality education:

- Accreditation Criteria of the Accreditation Council for Continuing Medical Education, USA (www.accme.org)
- ACCME Standards for Commercial Support: Standards to Ensure Independence in CME Activities (www.accme.org)
- Criteria for Accreditation of Live Educational Events of the European Accreditation Council for Continuing Medical Education (www.uems.eu)

Events that receive direct or indirect unrestricted educational grants or in-kind support from industry also follow the ethical codes of the medical industry, such as:

- Eucomed Guidelines on Interactions with Healthcare Professionals (www.medtecheurope.org)
- AdvaMed Code of Ethics on Interactions with Health Care Professionals (advamed.org)
- Mecomed Guidelines on Interactions with Healthcare Professionals (www.mecomed.org)

### Branding and advertising

No industry logos or advertising (with the exception of the AO Foundation and AO clinical divisions) are permitted in the area where educational activities take place.

Sponsors providing financial or in-kind support are allowed to have a promotional booth or run activities outside the educational area with approval from the event chairperson.

### Use of technologies and products in simulations

If case simulations are chosen as an educational method to educate skills, we only use technology approved by the AOTK System (AOTK)—a large independent group of volunteer surgeons developing and peerreviewing new technology (more information about the AOTK, its development and approval process can be found on the AO Foundation website: www.aofoundation.org).

#### Personnel

Industry staff are not allowed to interfere with the educational content or engage in educational activities during the event.

### AO Research Institute Davos (ARI)

#### Mission

The AO Foundation's mission is promoting excellence in patient care and outcomes in trauma and musculoskeletal disorders.

#### **AO Research Institute Davos (ARI)**

In its work to further the AO Foundation's mission, ARI's purpose is to advance patient care through innovative orthopedic research and development.

Orthopedics concerns musculoskeletal, spine and cranio-maxillo-facial trauma, degenerative musculoskeletal diseases, infections, and congenital disorders.

#### Goals

- Contribute high quality applied preclinical research and development focused towards clinical applications/solutions.
- Investigate and improve the performance of surgical procedures, devices and substances.
- Foster a close relationship with the AO medical community, academic societies, and universities.
- Provide research environment/support/ training for AO clinicians.

Meet with our team including our ARI Medical Research Fellows, establish contacts, freely discuss your clinical problems, ideas, and learn about the latest results from the ARI.

#### **Collaborative research programs**

- Annulus fibrosus rupture
- Acute cartilage injury
- Osteochondral defect

#### Craniomaxillofacial

- Imaging and planning of surgery, computer aided preoperative planning
- Medication-related osteonecrosis of the jaw
- Bone regeneration and 3-D printing

#### Spine

- Degeneration and regeneration of the intervertebral disc
- · Biomarkers and patient outcomes

#### Trauma

- Bone infection, including the development and testing of active anti-infective interventions
- Sensing implants for objective monitoring of fracture healing
- Development of smart surgical tools
- New implant concepts for optimized bone healing
- Prediction of subject-specific risk of proximal humeral fixation failure via computational tools
- Development of generic Asian pelvic bone model
- · Patient outcomes and biomarkers

#### **Veterinary medicine**

 Improving osteosynthesis for small and large animals

#### Multidisciplinary

- 3R refinement of preclinical studies
- Bioreactor culture systems and mechanobiology
- Development, standardization, optimization, and improvement of preclinical models and methods
- Ex vivo testing using advanced biomechanical models
- Gene transfer: non-viral and viral
- Implant design using the finite element methods
- Implant positioning assistance, C-arm guided implant placement
- In-vivo and in-vitro quantification of bone turnover and scaffold degradation
- Medical additive manufacturing and biofabrication
- Medical CT image processing and analysisPolymers to deliver cells and biological
- Polymers to deliver cells and biological factors, create potential space for tissue development, and guide the process of tissue regeneration
- Prototype development and production
- Stem cell therapies for the treatment of bone, intervertebral disc, and cartilage defects

For the 2017 AO Research Institute Davos activity report and recent publications go to: www.aofoundation.org/ari/publications



# Download AOSpine Classification toolkits at aospine.org/classification



### Upcoming AO Davos Courses 2019

#### AO Courses-December 1-6, 2019

AOTrauma Course—Basic Principles of Fracture Management AOTrauma Course—Advances Principles of Fracture Management AOTrauma Course—Advanced Principles of Fracture Management for Swiss Residents AOTrauma Masters Course—Current Concepts AOTrauma Course—Pelvic and Acetabulum Fractures AOTrauma Masters Course AOTrauma Masters Course AOTrauma/AORecon Course—Comprehensive Periprosthetic Fracture Management of the Hip and Knee AORecon Course—Complex Total Hip and Knee Arthroplasty

#### AO Courses-December 8-12, 2019

AOTrauma Course—Basic Principles of Fracture Management for Swiss Surgeons AOSpine Courses AOCMF Courses AOVET Masters Course—Small Animal AOVET Masters Course—Large Animal

This course list is subject to further change.

The final list of AO Davos Courses and worldwide AOSpine events will be available on www.aospine.org in January 2019.

### Expand precision medicine through a complete imaging portfolio for orthopedic trauma, spine and CMF surgery

Engineered to be truly patient-oriented, ARTIS pheno<sup>®</sup> is a unique floor-mounted robotic C-arm system for individualized preprocedural planning, intraoperative guidance, and immediate checkup in 2D and 3D directly in the hybrid operating room – regardless of patient condition or procedure complexity.

To provide 3D capabilities that can be seamlessly integrated into clinical routine, we developed Cios Spin®: a mobile 2D and 3D C-arm for intraoperative quality assurance. Delivering new insights and perspectives, Cios Spin gives you more certainty in surgical routine – and full control over your procedures.

The new Cios Select mobile C-arm now makes flat-panel detector technology available in the medium price segment. This means that routine surgery can now also benefit from better image quality at a higher resolution and very low radiation exposure. For standard surgical procedures in particular, patient care can be improved without high investment costs.



**ARTIS pheno** As individual as your patients



Cios Spin\* New perspectives. Full control.



**Cios Select with FD** Select smart surgical imaging

\*Cios Spin®, with VA30 is pending 510(k) clearance, and is not yet commercially available in the United States or in other countries. Due to regulatory reasons, its future availability cannot be guaranteed.





# The Global Spine Congress heads to North America

### EARLY BIRD REGISTRATION CLOSES DECEMBER 20, 2018

The Global Spine Congress (GSC) is open to all surgeons, spine practitioners, allied health care professionals, and researchers. It provides an outstanding forum to exchange ideas, network with fellow spine professionals, and to learn about the latest research, techniques, and technologies in spine surgery.

# Global Spine Congress Toronto, Canada | May 15–18, 2019

www.gsc2019.org

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