

A photograph of surgeons in an operating room, wearing blue sterile gowns and hoods. One surgeon in the center is wearing a clear face shield with the 'stryker' logo. They are focused on a surgical site illuminated by bright lights. The background is dimly lit, showing a monitor and a poster on the wall.

2023 Florida Orthopaedic Institute

Leading the way.

FLORIDA
ORTHOPAEDIC
INSTITUTE®



Tampa
General
Hospital.



Contents

FEATURES

- 4 Welcome
- 5 Locally and Nationally Recognized Orthopedic Leaders
- 6 Feature—Full Function: Shoulder Replacement Surgery Pioneer Turns Back Time
- 8 Feature—An Active Life: How Orthopedic Expertise Turned Hope Into Reality
- 10 Feature—Still Riding: How FOI's Orthopedic Trauma Team Saved A Rancher's Career
- 12 About Florida Orthopaedic Institute
- 13 A Year of Transformational Growth
- 14 About Tampa General Hospital
- 16 TGH Orthopaedic Institute: Innovation Fueling Improved Patient Care
- 18 TGH: Excellence In Orthopaedics
- 20 USF Health: Orthopaedic Surgery Residency Program
- 22 FOI Subspecialty Divisions: Fellowship Programs
- 27 Therapy: Hands On Care

SUBSPECIALTY DIVISIONS

- 24 Adult Reconstruction Surgery
- 28 Foot & Ankle Surgery
- 30 Hand & Wrist Surgery
- 32 Shoulder & Elbow
- 34 Spine Division
- 36 Orthopaedic Trauma
- 38 Sports Medicine

RESEARCH

- 40 Foundation for Orthopaedic Research and Education
- 41 Florida InnoVation and Education Labs
- 42 Publications & Presentations

**We strive to
make our
patients' lives
better every
day using
the best
techniques
available.**

Roy W. Sanders, MD

Graphic Design
CGM Chicago

Creative Director
Doug Pajeau

Florida Orthopaedic Institute is home to the nation's leaders in orthopedic care.



A Commitment to World-Class Care

Florida Orthopaedic Institute at Tampa General Hospital was named one of America's Best Hospitals for Orthopedics by *U.S. News & World Report* for 2022-2023 with special recognition as "High Performing" in knee and hip replacement.

The strategic partnership between Florida Orthopaedic Institute and TGH attracts and serves hundreds of thousands of patients every year. In 2023, FOI specialists provided care to nearly 200,000 patients across 26 locations and performed more than 50,000 surgeries.

As Service Line Chief of the Florida Orthopaedic Institute at Tampa General Hospital, my role is to ensure that we maintain our rigorous standards. I can personally attest to the work ethic and commitment our world-class faculty provides to every one of our patients.

TGH specializes in complex orthopedic procedures, ranging from pediatric to geriatric. Our hip and knee joint replacement programs utilize the latest robotic surgery techniques and, in many cases, same day surgery to maximize potential for positive outcomes and minimize complications.



TGH is the region's only high-volume referral center for revision joint replacement surgery, while simultaneously supporting all of Florida as the highest volume center of excellence for reverse shoulder and total ankle replacement surgery.

We are home to the only Level I Trauma Center in the region and function as the only regional referral center that specializes in bone and joint infections. The Level I Hand Center at TGH demonstrates superior results in the replantation and reattachment of severed fingers or hands due to traumatic amputation.

Every orthopedic surgeon on our staff is board certified and fellowship trained in their area of expertise. Our expansive and well-funded clinical research program leads the way in best practices and innovative technologies.

It is a privilege and an honor to lead our practice and the orthopedic surgery program at TGH. Together, we continue to expand access and raise the standard of musculo-skeletal care in Florida.

Roy W. Sanders, MD
President, Florida Orthopaedic Institute
Professor and Chair, USF Department of Orthopaedic Surgery
Chief, Orthopaedic Service Line, Tampa General Hospital

Locally & Nationally Recognized Orthopedic Leaders



Thomas L. Bernasek, MD
Clinical Professor, USF Department of Orthopaedic Surgery
Director, Adult Reconstruction Fellowship, Florida Orthopaedic Institute
Medical Director, Center for Bloodless Surgery, Tampa General Hospital
Trustee, Florida Orthopaedic Society
Trustee, Foundation for Orthopaedic Research and Education
Trustee, Hillsborough County Medical Association



Mark A. Frankle, MD
Past President, American Shoulder and Elbow Surgeons
Chief, Shoulder & Elbow Service, Florida Orthopaedic Institute
Professor, USF Department of Orthopaedic Surgery
Director, Shoulder & Elbow Fellowship FOI/FORE
Associate Editor, Journal of Shoulder & Elbow Surgery
Board of Trustees, Journal of Shoulder & Elbow Surgery
Trustee, Foundation for Orthopaedic Research and Education



Christopher W. Grayson, MD
Medical Director, Orthopedic Service Line, BayCare Hospital System



Mark A. Mighell, MD, FAOA
Chief of Orthopaedics, AdventHealth Hospital of Carrollwood
Co-Director, Shoulder and Elbow Fellowship, Florida Orthopaedic Institute
Associate Professor, USF Department of Orthopaedic Surgery



Steven T. Lyons, MD
Past-President, Florida Orthopaedic Society
Trustee, Florida Orthopaedic Society
Board of Directors, AdventHealth Carrollwood
Assistant Professor, USF Department of Orthopaedic Surgery



Hassan R. Mir, MD, MBA
Professor, USF Department of Orthopaedic Surgery
Director of Orthopaedic Trauma Research, Florida Orthopaedic Institute
Chief Financial Officer, Orthopaedic Trauma Association



Roy W. Sanders, MD
Past President, Orthopaedic Trauma Association
President, Florida Orthopaedic Institute
Professor and Chair, USF Department of Orthopaedic Surgery
Chief, Orthopaedic Service Line, Tampa General Hospital



Anjan R. Shah, MD
Chief of Staff, Brandon Regional Medical Center
Director of Orthopaedic Trauma, Brandon Regional Hospital
Board Member, Florida Orthopaedic Society
Associate Professor, USF Department of Orthopaedic Surgery

“I have full function and feel like I have the shoulder joints of a twenty-year-old...”

Since the age of 13, John King was athletic and took every opportunity to play sports and exercise. From his late teens until he reached 50 years old, King actively participated in weight training and kickboxing. Over 30 years of rigorous exercise took its toll on his right shoulder, making it extremely arthritic.

“It got to the point where I was in constant pain, could not move my shoulder joint more than twenty degrees in any direction, and was getting no more than two to three hours of sleep per night,” King says. “I finally said enough was enough and found Dr. Frankle at Florida Orthopaedic Institute in Tampa.”

One of the first shoulder and elbow specialists in the U.S., Dr. Mark Frankle is recognized as the nation’s leading expert on reverse total shoulder surgery by the American Academy of Orthopedic Surgery.

He and his team have performed over 6,000 reverse total shoulder replacements since the first procedure in 1997, over 1,000 shoulder revisions, and he performs more than 750 surgeries each year.

Dr. Frankle examined King’s right shoulder and determined that he had end stage joint damage, which required a bilateral shoulder replacement.

After King’s surgery, he proceeded with rehabilitation and was back in the gym within four months – his workouts were limited to the treadmill and stair climber to recondition. After six months, he was able to lift extremely light weights while continuing his rehabilitation stretching and rotation exercises. At the year mark, King was 90% recovered and pain-free in his right shoulder.

Unlike many orthopedic surgeons who repair multiple joints, Dr. Frankle focuses solely on shoulder replacements. In fact, he played a pivotal role in the advancement of total shoulder replacement in the U.S. and designed an FDA-approved custom implant that is now used by surgeons across the nation for reverse total shoulder surgery.

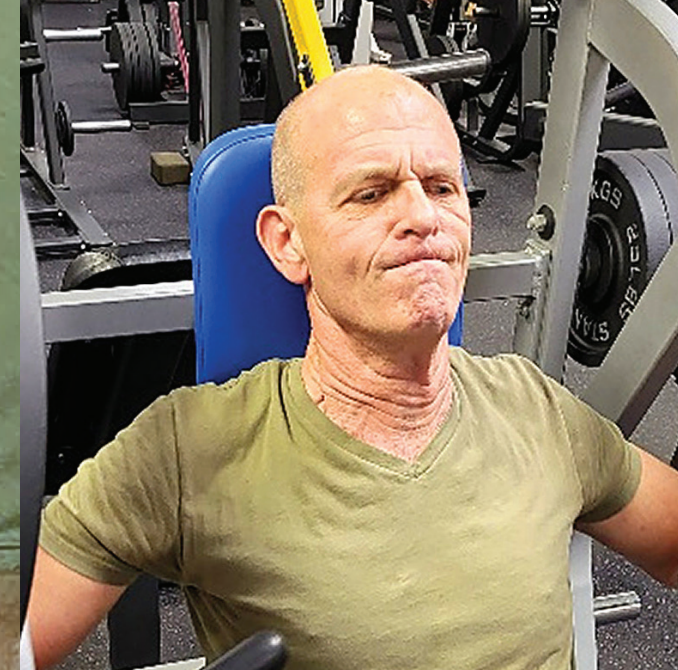
That expertise is essential when patients require revision surgery, which was the case for King 15 years later. He returned to Dr. Frankle for a total joint replacement on his left shoulder and a revision on his right to account for his continued exercising.

Today at 65, King is quite active and completely out of pain.

“I have full function and feel like I have the shoulder joints of a twenty-year-old,” he says. “That is, thanks to one of the world’s most competent and extremely talented surgeons.”

SHOULDER REPLACEMENT SURGERY PIONEER TURNS BACK TIME FOR GRATEFUL PATIENT

Full Function





“You have to have a care team like the one at FOI.”



**FROM INJURY TO IRON MAN:
HOW ORTHOPEDIC
EXPERTISE TURNED
HOPE INTO REALITY**

An Active Life

From his early years, Denislav Tsonev's life was characterized by threads of adventure and a passion for sports. Whether it was rock climbing, snowboarding, swimming, basketball, ping pong, or other activities, Tsonev's hobbies lit him up. That is until 2012, when a devastating knee injury involving a patellar (kneecap) dislocation altered his trajectory and signaled the onset of a different and daunting journey.

Among bouts of adventure, sports, and injuries, Tsonev endured eight surgeries – four on his left knee and four on his right – in an attempt to resolve his knee issues. Six of those surgeries took place in his birth country of Bulgaria, where doctors kept cautioning him to curtail his activities and accept that his active lifestyle had to change.

After coming to the U.S. and undergoing another two surgeries with the same failed result, Tsonev was defeated. Still a young man in his early 20s, he had so much life to live and explore. That's when his mother began searching for an answer. Surely, someone in America could help her son get back to his active, athletic purpose. That someone was Dr. Neil Kumar, a sports medicine orthopaedic surgeon at Florida Orthopaedic Institute.

“Dr. Kumar sat down with me and listened,” says Tsonev. “You can just tell he cares about every single patient and intends to give solutions, not just a temporary fix.” He adds that Dr. Kumar was the first specialist to offer hope while being “practical, truthful, and direct.”

That level of care is standard at Florida Orthopaedic Institute and Tampa General Hospital, a tertiary/quaternary center that welcomes patients other centers can't.

“Denislav's case was a great example of what FOI does,” says Dr. Kumar. “We often see patients referred by other orthopedic surgeons who are out of solutions. We have specialists who've seen almost every issue, performed the necessary surgery, and know exactly how to rehab the patient.”

The Institute is known for taking on complex cases like Tsonev's, which require considerable time and expertise to plan and perform surgeries. FOI is where patients with complex cases and failed solutions find an answer.

In this case, Tsonev presented with an unstable, dislocating left patella and severe pain even while walking and standing. As a college student who had discovered his love for beach volleyball, he needed a solution. X-rays and an MRI revealed a ligament tear, extensive cartilage injury, and abnormal bone and joint structure. Dr. Kumar needed a plan to correct Tsonev's left knee.

That plan involved two surgeries. The first was exploratory to help Dr. Kumar determine the extent of cartilage damage and to biopsy the cartilage tissue to grow new cells. The second surgery was a complete reconstruction involving altering the joint movement with a tibial tubercle osteotomy (TTO), rebuilding the medial patellofemoral ligament (MPFL) to stabilize the kneecap, and repairing the cartilage with a matrix-induced autologous chondrocyte implantation (MACI) procedure.

“We had to solve two major problems,” Dr. Kumar states. “First, we had to change his bone and ligament anatomy to keep his kneecap stable. Second, we had to repair a significant amount of cartilage loss.”

These types of surgeries are not uncommon for Dr. Kumar and his colleagues at FOI. Dr. Kumar performed approximately 25 cartilage repair surgeries and 12 MACI procedures in 2023 – both numbers are considered high volume in a single year.

Post-surgery, the healing process was not easy. Tsonev experienced nights marred by discomfort, muscle aching, and the frustration of immobilization. Physical therapy became vital to his routine, signaling both progress and hurdles.

Amidst everything, Tsonev found warmth and empathy in his care team. Their friendliness and attentiveness created an environment where he felt heard and supported—a contrast to his prior experiences. Six months after surgery, Tsonev was back to the activities he loves.

Five years later, Tsonev was working as an engineer in Detroit and began to experience similar issues with his right knee. He knew exactly where to go and returned to Dr. Kumar's office in Florida for the same set of procedures. Although the right knee presented with slightly less cartilage damage, it still required a full reconstruction. Within three months, Tsonev was in Detroit for rehabilitation. He began swimming, cycling, and weight training in pursuit of his 2024 goal to participate in an Iron Man. This goal serves as a guiding light, inspiring him to exceed the limitations imposed by his injury and reclaim his active life.

Reflecting on his journey, Tsonev emphasizes the importance of support, optimism, and setting physical goals. His advice for those in similar situations is simple: “You have to have a care team like the one at FOI.”

“I’ve just never seen that kind of care in my life...Florida Orthopaedic is the only place I’m going to.”

A cattle rancher and world-ranked bull rider, Alan McEwen knows the risks associated with his profession. The scars from his multiple broken shoulders tell a story themselves. But McEwen suffered a severe injury in the spring of 2022 that nearly took him off the ranch altogether.

McEwen was working cows at a Wauchula ranch and pushing some bulls into a crevice when the bulls hit the horse he was riding. His horse started bucking, throwing McEwen into the air. At first, he thought he had the situation under control – he was ranked 8th in the world as a competitive bull-rider at the age of 18 – but this was decades later. McEwen was thrown 18 inches out of the saddle and landed on the saddle horn, tearing through his pelvis and up into his chest. He was thrown into the air again, higher this time, and landed on his side, severely injured. McEwen was quickly airlifted to Tampa General Hospital’s emergency room where the trauma team called in urological specialists and Florida Orthopaedic Institute orthopedic trauma surgeon, Dr. Hassan Mir.

**BACK IN THE SADDLE:
HOW FOI’S ORTHOPEDIC TRAUMA
TEAM SAVED A RANCHER’S CAREER**

Still Riding

“Allen suffered the type of bilateral open book pelvic injury that we often see in motorcycle accidents,” says Dr. Mir. “He suffered torn ligaments in the front and back of the pelvis, as well as a urologic injury to the urethra and significant blood loss.”

One of the advantages of Tampa General’s Level 1 trauma center is patients are seen by a multidisciplinary team to ensure that the most effective care is administered. Dr. Mir’s team consulted with the urology service at TGH to assess the severity of his urological injury and determine the procedure of bone fixation. Dr. Mir also consulted with Tampa General’s general surgery trauma team to coordinate McEwen’s care plan.

The first step was to use a pelvic binder to temporarily stabilize the pelvis. The urology team then managed his urethral injury. After that, Dr. Mir placed an external fixator on the front of the pelvis to account for the urologic injury. He placed screws to stabilize the back of McEwen’s pelvic ring.

Dr. Mir performs more than 100 procedures to repair pelvic rings each year, and he repairs about 20 open book pelvic injuries annually.

McEwen was in the hospital for a week following the surgery. The external frame and screws kept his pelvis stable for three months during healing, which meant

McEwen couldn’t walk during that time. Once the frame was removed, he started rehabilitation and physical therapy, regaining all urologic function and progressing at a rapid pace.

“Alan is one of the toughest guys I’ve met,” says Dr. Mir. “He worked incredibly hard to reach a high level of function and returned to competitive rodeo. His recovery is nothing short of amazing.”

“My experience with Dr. Mir and Florida Orthopaedic...I don’t think I’d be here today if it wasn’t for them,” McEwen says. “I don’t think I’d be walking if it wasn’t for them. I still have some core exercise to work on but nobody thought I would be doing what I’m doing today and I don’t think I would be doing it if it wasn’t for them.”

McEwen adds that the team at FOI treated him like family from the first moment of care, all the way through surgery, rehab and even after he returned home.

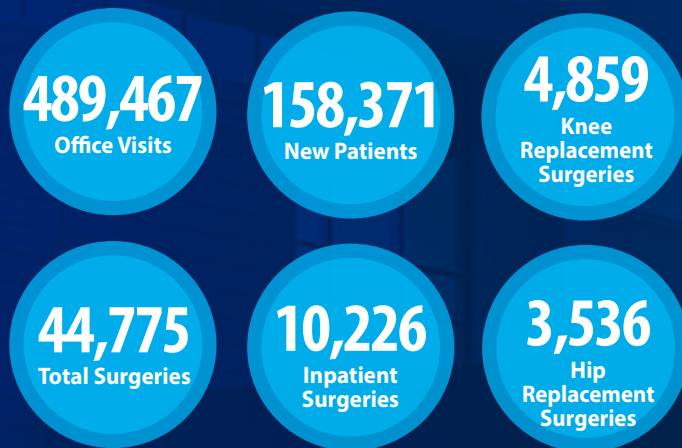
“I’ve just never seen that kind of care in my life,” he says. “Another accident is probably a matter of time because I’m not going to quit riding and I’m not going to quit rodeoing. Florida Orthopaedic is the only place I’m going to.”

And rodeo he will. McEwen recently told Dr. Mir that he is back to world championship rodeo level activity and recently won another world title.



2023

BY THE NUMBERS*



* Includes all FOI divisions.

About Florida Orthopaedic Institute

Founded in 1989, Florida Orthopaedic Institute (FOI) is one of the largest and most respected orthopedic groups in the country. In 2020, FOI and OrthoCare Florida (OrthoCare) merged to form the largest orthopedic practice in Florida and the fifth-largest in the United States. This merger helped ensure that the practice would provide the highest quality of care to patients throughout Tampa Bay and across Florida. Between the 2020 merger and unprecedented growth in 2023, FOI now serves more than 200,000 patients through nearly 120 physicians at 26 locations across Tampa Bay and beyond.

FOI's mission is to provide our patients with world-class orthopedic care, achieving exceptional outcomes through continuing research and specialty expertise. This is accomplished through subspecialization, continuing scientific and clinical research to enhance the art and science of orthopedic surgery, and by providing orthopedic education through courses and lectures, journal publications, fellowship and residency training.

FOI's subspecialties include foot and ankle, hand and wrist, joint arthroplasty, orthopedic trauma, pain management, rehabilitative medicine, shoulder and elbow, spine surgery, and sports medicine. Using data, research, and analytics, FOI continues to provide innovative care to patients, providing them the best chance to return to a normal lifestyle.

In collaboration with USF Health, FOI uses the combined strengths of this affiliation to advance academic orthopedics through the USF Orthopaedic Surgery Residency Program. This partnership ensures patients the finest orthopedic treatment and brings substantial benefits to the community, patients, residents, and medical students.

Florida Orthopaedic Institute physicians are known nationally and internationally for their work in orthopedic surgery and have been named among the best orthopedic surgeons in America.

A Year of Transformational Growth

In 2023, Florida Orthopaedic Institute (FOI) expanded its footprint outside of the Tampa Bay region, adding three new offices and 13 world-class orthopedic specialists to serve the Lakeland, Ocala, & Gainesville communities. FOI has been a household name in Tampa Bay for over 30 years and has a national reputation and recognition as one of the top orthopedic providers in the country.

This expansion is monumental for FOI. Not only is it our first significant step outside of Tampa Bay, but it is also our first step in building a footprint statewide, allowing FOI to provide the high-quality care physicians and patients have come to expect. At a time when operational expenses are at an all-time high across the country, this bold move was possible thanks to the exceptional quality of our physicians in these markets and the diligence and experience of our senior leadership team.

FOI is very pleased with the early success of these new offices and excited for the 2024 growth we have planned in these communities, including the addition of several new providers and service lines such as physical therapy and MRI.

FOI has been a household name in Tampa Bay for over 30 years and has a national reputation and recognition as one of the top orthopedic providers in the country.



About Tampa General Hospital

Tampa General Hospital provides high-quality care over the continuum of orthopedic injuries and conditions ranging from all forms of arthritis to spinal disorders, tumors, and upper and lower extremity problems. TGH performs joint replacement surgeries, complex tumor resections, and a multitude of other treatments, working collaboratively to improve each patient's mobility, function, and quality of life. At TGH, patients have access to a multidisciplinary team of specialists – including physicians, surgeons, advanced practice nurses, registered nurses, physical and occupational therapists, and social workers – all in a single location, providing a simplified and convenient experience.

TGH has been recognized as “**High Performing**” for **Hip Replacement, Knee Replacement and Hip Fracture** by *U.S. News & World Report* for 2023-2024 which is a reflection of low 7- and 30-day re-admission rates, low post-operative complication rates, low rates of patients requesting corrective surgery after their initial procedures, and high patient satisfaction scores. TGH has also earned a spot on *Becker's Hospital Review's 100 Hospitals and Health Systems with Great Orthopedic Programs*. These programs are recognized for providing exceptional orthopedic care for patients with musculoskeletal conditions or injuries. The programs on the list treat a high volume of patients each year, offer access to various clinical trials and utilize the most innovative technologies available.

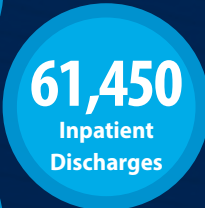
Not only does TGH excel at providing elective surgical procedures such as hip and knee surgery, but also at providing emergency orthopedic care for trauma situations. The orthopedic trauma program provides orthopedic fracture management, limb-sparing surgeries, bone and joint infection management, and corrective surgeries for knee, hip and a variety of other orthopedic conditions. **TGH maintains Gold Seal Certification for orthopaedic trauma from The Joint Commission** and is a regional referral center for complex orthopedic surgery.



2023

BY THE NUMBERS*

*TGH fiscal year
10/1/2022 - 9/30/2023



TGH Orthopaedic Institute

Innovation Fueling Improved Patient Care



Tampa General Hospital's Orthopaedic Institute is a national leader in orthopedic care, performing more than 5,000 procedures annually. Using the most advanced technologies and treatment options, orthopedic specialists at TGH provide world-class care and excellent outcomes for even the most complex orthopedic conditions, including hip and knee arthritis, fractures, spinal deformities, musculoskeletal tumors, joint infections, foot, ankle, shoulder, elbow, and hand disorders.

Centers of Excellence

- The Institute is comprised of three centers of excellence:
1. General Orthopaedic and Sports Medicine
 2. Adult Joint Reconstruction
 3. Orthopaedic Trauma

TGH also offers comprehensive programs for hip and knee replacements, shoulder, ankle, elbow, and spine conditions.

Innovative, Minimally Invasive Technologies

TGH's Orthopaedic Institute offers innovative, minimally invasive options for joint replacement procedures by harnessing robot-assisted technology and 3D printing, enabling greater surgical precision, and reducing post-surgical pain and patient recovery time.

MAKO RIO Robotic Arm Orthopedic System

The Orthopaedic Institute is home to renowned surgeons with expertise in robotic technologies that lead to improved outcomes, including quicker recoveries and less pain.

A prime example is the MAKO RIO™ Robotic Arm Interactive Orthopedic System, used for hip replacements and total and partial knee replacements. Surgeons control the robotic arm using tactile, auditory, and visual feedback; the arm provides greater precision and consistency for bone preparation and customized implant positioning.

"It can cut to less than half a millimeter accuracy—that's pretty accurate," said Dr. Michael Miranda, an orthopedic surgeon at the Institute with a national reputation using the technology during knee and hip replacements. "The results are proven. Patients have less pain and get back to their normal activities more quickly."

Miranda's design team is currently developing pressure sensors that can help with the measurement and balancing of ligaments on both sides of the knee "so the patient doesn't even feel like they have a knee replacement," he said. "Robotic technology is not just a cutting tool. It can give the surgeon a lot more information and feedback, such as component sizing and ligament balancing throughout the procedure."

Surgeons like Dr. Miranda are early pioneers of a newer, more advanced, direct anterior approach to hip replacement, performed through a small incision at the front of the hip rather than the more traditional posterior approach. This approach avoids the need for a considerably larger incision. And, unlike most posterior techniques, the anterior approach reduces the need to cut -and later repair-muscles and tendons to reach the damaged joint.

Corin OMNIBotics Robotic System For Total Knee Replacement

FOI surgeons also utilize robotic assisted technology for total knee replacement. The Corin OMNIBotics Robotic System creates a 3D model of the patient's anatomy. The surgical team leverages the 3D-printed models for preoperative planning, which has been critical in improving patient outcomes. These models allow surgeons to precisely size, rotate, and position implants customized to a patient's joint, consequently reducing surgical times and resulting in greater implant longevity and patient mobility and function.

"The thing I've been amazed about is the accuracy," Miranda said. "The preoperative plan and what you've executed match perfectly. Patients are up and moving and out of the hospital quickly and back to their activity level in four to six weeks. You can't argue with that kind of result."

Corin's OMNIBotics System also ensures that each surgery is customized to the patient's unique anatomy by providing real time data throughout the procedure. The OMNIBotics System is also the first on the market to offer ligament balancing, further customizing the surgery for the patient.

VELYS Robotic-Assisted Solution for Total Knee Replacement

Tampa General Orthopaedic Institute surgeons are also using the VELYS Robotic-Assisted Solution for total knee replacement. In fact, surgeons at the Institute were first in the region to use the VELYS method in July 2022.

The VELYS Robotic-Assisted Solution keeps the knee in a natural position throughout surgery. In particular, the solution utilizes a sterile screen that replaces a CT scan and helps surgeons place the implant on the knee check the stability and the range of motion with the implant in place.

"It can tell you if it's a little tight here, a little loose there, so you can make adjustments to get the ideal range of motion and stability of the knee," said Dr. Thomas Bernasek, Director of the Adult Reconstruction Fellowship at the institute. "We do all the planning beforehand, log it into the robot, and it basically makes the cuts in the appropriate plane. We then put on the implant and assess. It's astonishing how effective the information is."

That precision results in a better, more comfortable fit for the patient — and a fascinating step forward for physicians, moving surgeons closer to achieving perfect placement and balance of the knee. Another benefit of the VELYS Robotic-Assisted Solution is that it can be used to perform surgery on almost anyone who needs a knee replacement – even patients with huge, thick muscles and those with very stiff or extremely scarred knees who may not be ideal candidates.

"By 2026, we expect that over half of total joint replacements of the hip and knee will be done as outpatient procedures," Bernasek said.

These innovative technologies paired with the Institute's board-certified and fellowship-trained surgeons make the Orthopaedic Institute a high-volume referral center for physicians throughout the region.

"At Tampa General Hospital, we know that living with an orthopedic condition or injury can severely impact your life. As such, we are dedicated to developing the most advanced facilities, diagnostic methods, and treatments" said Thomas Cairo, Senior Administrator of the TGH Orthopaedic Institute. "Our surgeons' expertise in utilizing cutting-edge robot assisted technologies as well as 3D printing is really having a positive impact for our patients."

Access to World-Class Specialists

A partnership between Tampa General Hospital and the University of South Florida ensures that all procedures are performed by the best orthopedic surgeons in the nation. This includes the all-fellowship trained surgeons of Florida Orthopaedic Institute, the largest orthopedic group in Florida, who lead research and development of the latest surgical practices and technological advances to help keep TGH at the forefront of world-class care.

"Our position as a nationally recognized orthopedic program and our ability to leverage best-in-class research and resources as a leading academic health system makes a real difference for the patients we serve," said Dr. Roy Sanders, Professor and Chair in the Department of Orthopaedic Surgery at the USF Health Morsani College of Medicine, and President of the Florida Orthopaedic Institute.

In addition to a specialized team of board-certified surgeons, the Institute has nine nurses certified in orthopaedics by the National Association of Orthopaedic Nurses on its staff, ensuring patients receive the highest level of specialized care.



Excellence in Orthopaedics

Unmatched Experience

With more than 5,000 surgical procedures performed annually, TGH performs more orthopedic surgeries than any other facility in the region.

Innovative Offerings

With state-of-the-art technology such as robot-assisted surgery and bloodless surgical treatment options, TGH surgeons are at the forefront of their field, providing the most innovative care to patients.

Specialized Care Team

TGH's team of specialists — including physicians, surgeons, advanced practice nurses, registered nurses, physical and occupational therapists, and social workers — receive specialized training and are dedicated to the care of orthopedic patients.

Magnet Award for Nursing Excellence

As a Magnet-designated facility, TGH demonstrates excellence in nursing philosophy and practice, adherence to national standards for improving patient care, leadership, and sensitivity to cultural and ethnic diversity.

Exceptional Outcomes

With low post-surgical complication and readmission rates, patients can be confident that the care they receive at TGH is world-class.

Tampa General Hospital was ranked among the Top 2% of hospitals in the nation for Orthopedics by *U.S. News & World Report* for 2023-2024. This recognition is reflective of:

- High patient volumes
- Better-than-expected survival rates
- A favorable ratio of nurses to patients
- Full-time availability of intensive care
- Advanced technological offerings, including computer-assisted orthopedic surgery

TGH was also recognized as the following:

- Gold Seal certification for orthopaedic trauma from The Joint Commission
- Ranked “High Performing” for Hip Replacement, Knee Replacement and Hip Fracture by *U.S. News & World Report* for 2023-2024
- *Becker's Hospital Review* — 100 Hospitals and Health Systems with Great Orthopedic Programs
- Regional referral center for complex orthopaedic surgery



20
Residents

USF Health
Morsani College of Medicine

Orthopaedic Surgery Residency Training Program

The USF Health Morsani College of Medicine provides excellence in academic training, research, and education. In partnership with Florida Orthopaedic Institute (FOI), the **Orthopaedic Surgery Residency Training Program** offers exceptional training opportunities to prepare the next generation of orthopedic leaders as clinicians, surgeons, and creative investigators.

The program is led by Dr. Roy W. Sanders as Chair, Dr. Caroline Chebli, M.D. as Program Director, and Evan Loewy, M.D., as Associate Program Director, with many FOI physicians serving as faculty at Tampa General Hospital (TGH), along with multiple faculty at other training sites.

Residents are provided educational opportunities through surgical training, outpatient clinics, didactic and Grand Rounds lectures, small group discussions and exercises, journal clubs, cadaveric dissection labs, surgical skills labs, and mobile learning labs for hands-on experience and to explore the latest orthopedic technologies. All 20 residents spend a significant portion of their training at Tampa General Hospital. The USF/FOI residents consistently perform above 90th percentile on the annual in-training exam, graduate with high case load volumes, obtain competitive research grant funding, publish and present their research nationally, and obtain highly competitive national and international post-graduate fellowship positions.



Florida
Orthopaedic
Institute
Fellowship
Programs
span the
spectrum
of care.

16
Fellows Trained
Annually

Subspecialty Divisions Fellowship Programs

Adult Reconstructive Surgery

The Adult Orthopaedic Reconstruction & Arthritis Surgery Fellowship and resident rotation is a research-focused collaboration between the Florida Orthopaedic Institute (FOI), the Foundation for Orthopaedic Research and Education (FORE), Tampa General Hospital (TGH), and the University of South Florida (USF).

During their year-long fellowship, four fellows rotate every three months with faculty and learn various perspectives for clinical and surgical care and research. All fellows are required to complete at least one research project during this one year of subspecialty training. The research project provides a learning experience for the fellows and expand the medical literature. Each fellow then presents their project at the Orthopaedic Research Day conference, which is CME accredited by FORE.

Foot & Ankle Surgery

In addition to orthopedic resident an fellow education through their appointments with the University of South Florida College of Medicine, the Division of Foot & Ankle Surgery staff regularly participate in local and national meetings and courses. They serve as faculty, educating other orthopedic surgeons and primary care physicians in surgical techniques and perioperative management of orthopedic injuries.

Hand & Wrist

The Hand & Wrist Fellowship, under the supervision of Dr. Alfred Hess, trains three fellows in all aspects of upper extremity pathology. This includes congenital hand disorders, and replantation and limb-salvage surgery of the upper extremity using four dedicated hand surgeons at TGH, our Level I Trauma facility.

Shoulder & Elbow

The Shoulder & Elbow Service continuously seeks new opportunities to enhance the training it provides to three ASES accredited fellows. The fellowship provides a high volume of complex cases with an emphasis on in-depth instruction and mentorship from the faculty. In addition to adhering to the core curriculum set by the ASES, fellows and residents have access to a variety of courses and surgical skills labs as well as monthly journal clubs. Alongside clinic and surgery, fellows take part in weekly educational conferences and research meetings with attending physicians, residents, members of the clinical research team, engineers from the biomechanics department, and a statistician.

Additionally, 2021 saw the implementation of virtual reality surgical training in a partnership with the ASES and Precision OS, an award-winning VR simulation platform. The partnership has expanded high quality and readily accessible hands-on surgical education to the residents and fellows. Notably, the Tampa Shoulder Course, directed by Drs. Mark A. Frankle and

Mark A. Mighell, has been an internationally-recognized course for the past 26 years. It features renowned faculty and global participants in a unique blend of didactics, dissection, and debates. Also, a concerted effort is made to expose fellows and residents to innovation from implant design, artificial intelligence, augmented reality, robotics in surgery, and biologics. The service schedules monthly interdisciplinary educational enrichment lectures which are presented by guest speakers. Each resident is required to give a presentation on a topic of interest from their time on rotation.

Spine Division

The Spine Division is fully committed to resident and fellow education. Dr. John M. Small oversees the orthopedic resident rotation through the service and takes a lead role in managing the service's weekly educational conferences. Dr. Steven J. Tresser heads up the fellowship program, which continues to attract high-quality applicants from around the country.

Dr. Adil A. Samad spearheads the spine lecture series and Grand Rounds for residents and helps prepare them for OITE examinations. As faculty expands, the number of fellowship positions will increase from one to two in the near future.

Orthopaedic Trauma

The Orthopaedic Trauma Service (OTS) consists of nine fellowship-trained orthopedic trauma surgeons and four fellows providing all orthopedic trauma coverage at Tampa General Hospital, the only American College of Surgeons designated Level 1 Trauma Center in West Central Florida, as well as at several other state designated Level 2 Trauma Centers.

The OTS provides expert care for patients with severe musculoskeletal injuries, specializing in the care of fractures and fracture-related problems, including nonunions, malunions, post-traumatic arthritis, deformity correction, infections, pelvis/hip reconstruction, and foot/ankle reconstruction. The OTS has consistently offered one of the nation's premiere fellowships in orthopedic trauma for more than thirty years. Areas of emphasis include clinical management, technical excellence, education, research, leadership, and continuous quality improvement.

Sports Medicine

FOI is proud of the strong partnership with the USF Health Morsani College of Medicine and Tampa General Hospital. Together, they capitalize on their combined strengths and advance academic orthopedics. This collaboration assures that patients receive the finest orthopedic treatment and brings substantial benefit to the community, patients, residents, students, and faculty. The mission is simple: to provide excellence in clinical outcomes and an exceptional patient experience in an environment that fosters growth through teaching, education, and research. FOI's sports medicine team understands the athlete's desire to get back into the game and does everything possible to make that happen safely.



SUBSPECIALTY DIVISIONS

Adult Reconstructive Surgery

Orthopedic surgeons at FOI perform thousands of reconstructive surgeries each year.

With 128 years combined experience, our surgeons provide care for arthritis patients and perform complex adult reconstruction surgery of the hip and knee. We are recognized as a referral center for local, state-wide, and international patients and strive to provide the best, most innovative and safe care possible for our patients. Our focused educational and research programs prepare the next generation of surgeons for patient care and allow us to develop and deploy the latest technologies for our patients.

Leadership

Thomas L. Bernasek, MD is a founding member of the Florida Orthopaedic Institute (FOI). He serves as the director of the FOI Adult Reconstruction Fellowship and has been fellowship faculty since 1987. Dr. Bernasek is a clinical professor at the University of South Florida (USF) Morsani College of Medicine and clinical faculty for the USF Orthopaedic Surgery residency program. He has served as Chief of Staff at Tampa General Hospital (TGH) and as a TGH Board of Directors trustee for 11 years. Dr. Bernasek is the medical director of TGH Bloodless Medicine and Surgery. He is a Board of Directors Trustee for the Florida Orthopaedic Society, the Hillsborough County Medical Society and the Foundation for Orthopaedic Research and Education. He serves on the American Academy of Orthopaedic Surgery and represents the Florida Orthopaedic Society as a member of the Board of Councilors. Dr. Bernasek has lectured nationally and internationally on hip and knee joint replacement. His design contributions to hip and knee implants have benefitted millions of patients.

Kenneth A. Gustke, MD started the first Southeastern Joint Replacement Fellowship in 1986 and was program director for over two decades. As clinical professor at the University of South Florida (USF), he remains actively involved in resident and fellowship teaching. His design input on eight total hip and six total knee replacement systems has benefitted over a million patients. Dr. Gustke's current innovation focus is on robotic systems for joint implantation and smart sensors for total knee replacements. He is a member of the Knee Society and lectures nationally and internationally. Dr. Gustke is a founding member of the Florida Orthopaedic Institute (FOI), now the largest physician-led orthopedic group in Florida.

Steven T. Lyons, MD has served the Adult Reconstruction Fellowship since 1998. He is dedicated to research, implant development and advanced hip and knee implant technology. As Past-President of the Florida Orthopaedic Society, Dr. Lyons led the disaster preparedness initiative in the wake of the Hurricane Michael catastrophe.

Michael A. Miranda, DO has been fellowship faculty since 2011. He is an expert in complex revision total hip and knee arthroplasty, and he performs MAKO robotic hip and uni-compartmental knee replacements. Dr. Miranda is a highly regarded educator and his contributions have significantly elevated FOI's program and research.

Brian T. Palumbo, MD has been faculty since 2013, and he served in the United States Air Force. His contributions to research and the FOI joint registries have been invaluable.

Christopher W. Grayson, MD has been with FOI since 2015. He is an expert in MAKO robotic assisted joint replacements and serves as a clinical instructor for MAKO training. He also specializes in complex revision hip and knee replacement, taking care of failed and infected hip and knee replacement.

David T. Watson, MD specializes in orthopedic trauma, adult reconstruction, and arthritis surgery. Fellowship trained in joint arthroplasty at the Hospital for Special Surgery in NYC, he provides expert care to patients with severe injuries.

Grant G. Garlick, MD is board certified by the American Board of Orthopaedic Surgery and dual fellowship trained in joint replacement and sports medicine. He is primarily a knee expert, focusing his attention in all areas of the knee, including complex cartilage restoration, ligament reconstruction, meniscus repair, and joint resurfacing.

David M. Donohue, MD is fellowship trained in orthopedic trauma surgery, adult reconstruction and arthritis surgery, and he is board certified by the American Board of Orthopaedic Surgery. Much of his training was focused on managing complications related to previous surgeries, first time hip and knee replacements, and computer navigation and robotic assisted surgery.

Craig S. Radnay, MD, MPH is a board certified and fellowship trained orthopedic surgeon specializing in sports and reconstructive foot and ankle surgery as well as sports medicine and arthritic disorders of the knee.

Robot-Assisted Technologies

Our highly experienced surgeons stay at the forefront of surgical developments by incorporating robotic assisted technologies to improve patient outcomes.

Traditional methods are associated with higher risks of thromboembolism, fat emboli, and excessive costs. Advanced technology allows for greater accuracy without the need for traditional manual instruments, resulting in better long-term patient satisfaction and results.

Our surgeons utilize **Stryker's Mako SmartRobotics** for total and partial hip and knee replacements. Studies show that the 3D CT-based planning and AccuStop haptic robotic technology are associated with less need for opiate analgesics, less time to hospital discharge (reduction in length of stay), less need for inpatient physical therapy, and lower patient reported postoperative pain.

We also offer our patients the **ROSA Knee System** for total knee arthroplasties. This instrument provides more accurate and reproducible final limb alignment (hip-knee-ankle angle), as the live 3D imaging feature ensures proper alignment and soft tissue tension in real time. The instrument collects pre-, intra-, and post-operative data on all patients. Long term, this significantly reduces costs while providing actionable metrics to our quality care teams.



Thomas L. Bernasek, MD
Director,
Arthroplasty Division

David M. Donohue, MD
Grant G. Garlick, MD
Christopher W. Grayson, MD
Kenneth A. Gustke, MD
Steven T. Lyons, MD
Michael A. Miranda, DO
Brian T. Palumbo, MD
Craig S. Radnay, MD, MPH
Spencer Smith, DO
David T. Watson, MD

2023

BY THE NUMBERS*

108,146
Patient Visits

9,508
Surgeries

*Includes all FOI divisions.

Continued from previous page...

The **Smith+Nephew CORI Surgical System** for unicompartmental knee (UKA) and total knee arthroplasty (TKA) is currently the most versatile, small, and portable handheld robotic available. This instrument allows for up to 29% faster resection times, improved ergonomics, and exposes patients to no radiation. Adding the CORI to our surgical team has significantly improved our patient reported outcome measures (PROMs) and shortened the average length of hospital stay, ultimately returning our patients to an active lifestyle as soon as possible.

The **DePuy Synthes VELYS** is a robotic-assisted solution for knee replacement surgery. This table mounted operating solution improves surgical workflow, with the advanced design allowing precise bone resection and implant placement relative to the soft tissue. The DePuy integrated design offers our surgeons adaptable execution by offering insights on gap balance, which improves visualization and forecasted stability of the joint.

In the near future, FOI plans to add the **OMNibotic** to our robotic repertoire. The OMNibotic robotic-assisted total knee arthroplasty is the only technology that includes a robotic soft tissue tension device that can plan implant positioning with predictive balance tools. The robotic laminar spreader measures soft tissue tension before making femoral resections, which ensures alignment, ligament balance, and confirms joint stability. By using this method, the soft tissue incurs less trauma, which reduces the local inflammatory response, postoperative pain, and the time needed to reach functional recovery.

Our residents, fellows, and medical students rotate through surgical procedures with each of these state-of-the-art instruments, equipping our future surgeons with the experience and training necessary to confidently enter the surgical world of robotics.



Stryker Mako SmartRobotics



Smith+Nephew CORI Surgical System



DePuy Synthes VELYS



ROSA Knee System

Hands-On Therapy & Care

FOI offers **Physical and Occupational Therapy Services** to 24 rehabilitation locations throughout the Hillsborough, Pinellas, Polk, Pasco, Marion, Alachua, and Leon communities.

More than 200 therapy clinicians use hands on Manual Therapy techniques customized to each patient based on their injury or problem area. **Manual Therapy** is used to treat musculoskeletal disorders including joint stiffness, adhesions, pain, and overall loss of mobility. Manual Therapy utilizes specific highly skilled techniques that target specific joints and soft tissues to help restore normal motion, so the patient can resume their normal activities of daily living.

Our **Physical Therapy** team works on all orthopedic conditions, including all joints/ extremities and all spine conditions and post-operative care. Our **Occupational Therapy** team is highly specialized in the treatment of all upper extremity (finger/ hand/elbow/shoulder) musculoskeletal conditions and surgical rehabilitation.

Therapy is often ordered as a conservative treatment option to help patients overcome disability and dysfunction. Therapy is also used to provide pre-operative patient education, to prepare our patients for their post-operative therapy care, to best manage our patients on their road to recovery.



SUBSPECIALTY DIVISIONS

Foot & Ankle Surgery

The FOI Foot & Ankle Division performed nearly 100 total ankle replacements in 2023.

The comprehensive experience and expertise within the **Division of Foot & Ankle Surgery** makes it a regional referral service, assisting thousands of patients to return to an active lifestyle. Drs. Sanders, Radnay, Epting, and Loewy actively engage in local and national research and education to ensure that the field continues to advance toward safer and more effective lower extremity orthopedic pathology management.

2023

BY THE NUMBERS*

*Includes all FOI divisions.

24,586

Patient Visits

1,733

Surgeries



Leadership

Roy W. Sanders, MD serves as the Chairman of the University of South Florida (USF) Department of Orthopaedic Surgery as well as Chief of the TGH Orthopedics Institute. He is also a national and international leader in orthopedic surgery, especially in lower extremity trauma and post-traumatic reconstruction of the foot and ankle.

Craig S. Radnay, MD, MPH is an Assistant Professor of Orthopaedic Surgery with USF. He participates in resident and fellow education and is a member of the Postgraduate Education Committee of the American Orthopaedic Foot and Ankle Society.

Timothy C. Epting, DO is an Assistant Professor of Orthopaedic Surgery with USF. He participates in resident/fellow education and mentorship with lectures, Grand Rounds, and direct instruction in clinics and in the operating room. Dr. Epting previously served in the United States Navy as an attending Orthopaedic Surgeon on the First NATO Combined US and German Joint Surgical Team.

Evan M. Loewy, MD is an Assistant Professor of Orthopaedic Surgery with USF. He is the Fellowship Director for the Foot & Ankle Surgery Fellowship and serves on the Annual Program Committee for the Florida Orthopaedic Society.

Research

The Division of Foot & Ankle Surgery advances patient care and surgical outcomes with multiple ongoing research projects. The department continues to utilize its total ankle arthroplasty and lower extremity trauma experience to generate impactful research that can be applied across practice settings nationally. Recent publications include the largest and longest-term outcome study for the STAR total ankle arthroplasty and a study comparing this procedure to outcomes after traditional ankle arthrodesis. The development of a total ankle arthroplasty registry has allowed the Division to continue to share its data for maximizing patient outcomes with the greater orthopedic community. The Division also collaborates with the Orthopaedic Trauma Service to study lower extremity trauma with the goal of improving surgical devices and techniques to return patients to their pre-injury lifestyle as quickly as possible.



THE HIGHEST
VOLUME ANKLE
REPLACEMENT
CENTER IN THE
STATE

Patient Care

The FOI Division of Foot & Ankle Surgery offers the full spectrum of foot and ankle surgical and non-operative care. Surgeons collaborate with physical therapists, primary care physicians, orthotists, and prosthetists to provide patients with comprehensive care of their injuries so they can return to their active lifestyles. The Division of Foot & Ankle Surgery serves as a regional referral center for complex primary and revision cases from across the southeastern United States. These referrals include patients with significant post-surgical complications including infections, failed joint replacements, poorly-positioned fusions, and non-healed fractures.

The Division of Foot & Ankle Surgery is the highest volume total ankle replacement center in Florida and continues to grow its management of complex foot and ankle pathology. The department offers cutting-edge procedures such as minimally invasive bunion surgery and ankle joint preservation surgeries, including arthroscopic cartilage grafts. Often these procedures, including total ankle arthroplasty, are offered as same-day, outpatient surgery in both the ambulatory and hospital surgical environments.



Roy W. Sanders, MD
Co-Director,
Foot & Ankle Surgery



Craig S. Radnay, MD, MPH
Co-Director,
Foot & Ankle Surgery



Timothy C. Epting, DO
Faculty,
Foot & Ankle Surgery



Evan M. Loewy, MD
Fellowship Director,
Foot & Ankle Surgery

SUBSPECIALTY DIVISIONS

Hand & Wrist Surgery

Hand and upper extremity surgeons at FOI care for a high volume of peripheral nerve injuries.

2023

BY THE NUMBERS*

* Includes all FOI divisions.

85,686
Patient Visits

9,346
Surgeries

Florida Orthopaedic Institute (FOI) **Hand & Wrist Surgery Division** features highly trained hand and upper extremity surgeons who concentrate their practice on disorders of the upper extremity. These include neurological disorders, peripheral nerve disorders, soft tissue disorders or defects vascular disorders or defects, and trauma of the upper extremity. This broad skill set of FOI upper extremity surgeons allows them to diagnose and treat the entire upper extremity – from hand to shoulder – in a comprehensive fashion. As fellowship-trained orthopedic surgeons, they also serve as active researchers, teachers, and educators, training residents, fellows, and other orthopedic surgeons through their lectures, courses, and ongoing publications.

For over 30 years, FOI has managed the Upper Extremity Fracture and Trauma Service at Tampa General Hospital. Because TGH is a Level 1 trauma center drawing from a large area of Florida, many of the injuries our surgeons treat cannot be managed elsewhere. Division surgeons work in a team approach to provide comprehensive care for critically injured patients, which involves the management of complex fractures and dislocations of the upper extremity, neurologic injuries, tendon and muscular injuries, and possible replantation of amputated fingers hands or arms.

Patient care is a top priority at FOI. A comprehensive team collaborates closely to ensure the best care possible that results in superior outcomes.

Peripheral Nerve Surgery

Due to the high volume of peripheral nerve injuries seen by the hand and upper extremity surgeons at FOI, they have developed an expertise that encompasses the latest surgical techniques and equipment used to care for peripheral nerve injuries. These include microsurgical procedures for peripheral nerve repair, nerve transfers targeted muscle reinnervation, and other techniques used in the reconstruction of the upper extremity peripheral nervous system.

Nerve transfers and tendon transfers help reanimate the hand and upper extremity after neurologic injury. FOI surgeons are experts in the field of peripheral compressive neuropathy in the upper extremity, which includes the treatment of carpal tunnel syndrome and cubital tunnel syndrome.

Arthroplasty

The hand and upper extremity surgeons at FOI care for patients with arthritis by perform joint surgeries and replacements of the hand, wrist, elbow, and shoulder. These procedures range from total shoulder replacement to finger joint arthroplasty. Not only do patients experience less pain, but they are also able to increase function of their hands and upper extremities.

Patients in need of total wrist arthroplasty often have limited options at other medical centers. FOI hand and upper extremity surgeons participate in ongoing research to make this type of procedure a more viable and reliable option for patients in the future.

Research and Education

FOI surgeons educate medical students, paramedical personnel, orthopedic surgery residents at the University of South Florida, and the Hand and Upper Extremity Fellowship at the Florida Orthopaedic Institute through lectures and by demonstrating techniques within their surgical specialty.

Florida Orthopaedic Institute's Fellowship Program has trained over 50 hand surgeons who are currently in practice. Fellows at FOI work as a team to research for new techniques and treatments of upper extremity disorders. Ongoing areas of interest include Dupuytren's disease, nerve injuries, wrist arthroplasty, and other anomalies of the upper limb.



Alfred V. Hess, MD
Director,
Hand and Upper Extremity Service



James J. Creighton III, MD



Michael C. Doarn, MD



Michael J. Garcia, MD



Peter V. Lopez, MD



Jason A. Nydick, DO



Ioannis P. Pappou, MD



Jeffrey D. Stone, MD

SUBSPECIALTY DIVISIONS

Shoulder & Elbow

The FOI Shoulder & Elbow Service Division performs more than 600 shoulder replacements each year.

2023
BY THE NUMBERS*

*Includes all FOI divisions.

24,555
Patient Visits

2,184
Surgeries

1,324
Shoulder Replacement Surgeries

The **Shoulder & Elbow Service Division** is composed of six world-class surgeons dedicated to providing patients with innovative care. The team performs more than 600 shoulder replacements per year and is the most experienced group in performing reverse shoulder replacements in the country. Having performed reverse shoulder replacements longer than any other hospital in the U.S., the service is at the forefront of developing novel techniques and process improvements that better enable our patients to return to an active lifestyle.

Leadership

In addition to serving as Chief of the Shoulder & Elbow Service since creating the program at FOI, **Mark A. Frankle, MD** shares the Co-Directorship of the Shoulder & Elbow Fellowship Program with **Mark A. Mighell, MD**. The fellowship is a joint effort between FOI and the Foundation for Orthopaedic Research and Education (FORE), an entity which Dr. Frankle also helped create and now serves as the Research Chair. In his time since serving as the 37th President of the American Shoulder and Elbow Surgeons (ASES), the preeminent subspecialty society which constitutes all the thought leaders in shoulder and elbow care in the United States, Dr. Frankle has continued to serve on the ASES Political Advocacy Committee. To further that mission, he created the Mark Frankle, MD, Health Care Policy Award to foster knowledge acquisition and leadership development in the realm of health care policy and political advocacy in order to optimize the delivery, safety, and outcomes of the highest quality of shoulder and elbow patient care. Dr. Mighell served as the rank of Commander in the United States Navy Inactive Reserve in the role of Instructor of Surgery at the Uniformed Services University of the Health Sciences F. Edward Hebert School of Medicine. Since joining the service, **Kevin J. Cronin, MD** has dutifully served as faculty for the FOI/FORE Shoulder & Elbow Fellowship program, contributing to the service's research mission and the education of residents and fellows. His unique curriculum contributions offer fellows and residents information on practice management, complex case didactics, and hands-on training.

Patient Care

Understanding patient outcomes as a mechanism for driving research, improving implant designs, and optimizing patient care is the cornerstone of the service. To this end, it continues to collaborate with OBERD to collect patient outcome forms ranging from the preoperative period to 20+ years postoperatively. In doing so, the service has increased the database to include outcomes from not only those patients who come in for follow-up visits, but also those who cannot attend an annual follow-up visit. This data expansion has led to an improved understanding of patient functional outcomes, pain, range of motion, overall mental and physical health, and satisfaction. The information gleaned from this data continues to drive the advancement of surgical techniques, improve implant design, and contribute to the understanding of shoulder and elbow pathology and treatment through peer-reviewed literature. As part of the effort to reduce opioid use in orthopedics as well as improve the patient experience, the service continues to study the effect of hypnosis on perioperative pain and anxiety for shoulder arthroplasty patients through a prospective, randomized controlled trial. This study represents a joint effort between the University of Washington and Florida Orthopaedic Institute. Data analysis is ongoing.

Additionally, the service has placed a new emphasis on the education of residents and medical students, specifically as it pertains to their training in understanding research. This is fostered through a variety of avenues. The team has partnered with FORE to create a comprehensive research curriculum for residents covering all aspects of conducting research studies on human subjects, such as study design, understanding statistical analyses, and critical technical writing skills. The curriculum is designed to augment the resident research rotations on a cumulative basis for their involvement in various research projects throughout the entirety of their training and culminating in their eventual graduation project to be presented at Orthopaedic Research Day in their fifth years. As it has become increasingly important for prospective orthopedic residents to have a strong background in research, the Shoulder team is partnering with FORE and USF Morsani College of Medicine to create a more formalized pathway for medical students interested in orthopedics to receive a hands-on research education and join ongoing projects as well as generate their own original work.

Research

In 2023, "Factors affecting risk of recurrence with periprosthetic infection in shoulder arthroplasty," a study conducted by one of the FOI/FORE Shoulder and Elbow fellows was awarded the Charles S. Neer Award for Clinical Research, the highest honor for any clinical research conducted that contributes to the understanding, care or prevention of injuries to the Shoulder.

The mission of the service's research goals continues to focus on four key areas:

- 1) Understanding the function of shoulder muscle and their adaptation to the pathological changes introduced by disease or trauma
- 2) Understanding the outcomes of patients whose shoulder replacements have failed and now require revision
- 3) Understanding the impact of bone loss and osteoporosis on implant placement for shoulder replacements
- 4) Validating the improvement of outcomes with newer surgical implants and surgical techniques.

The service believes strongly in the value of collaboration across geographical and interdisciplinary boundaries. This is evident in the partnership with Prof. Marcus Pandey of the University of Melbourne regarding the study of in-vivo muscle function and Giovanni Di Giacomo of Concordia Hospital in Rome. This fruitful collaboration led to the creation of a three-dimensional computer model of shoulder musculature that is being currently validated in patients.



Mark A. Frankle, MD
Chief,
Shoulder and Elbow Service
Co-Director,
Shoulder and Elbow Fellowship



Mark A. Mighell, MD
Co-Director,
Shoulder and Elbow Fellowship



Christopher E. Baker, MD



Kevin J. Cronin, MD



Eddy L. Echols, Jr., MD



Ioannis P. Pappou, MD

SUBSPECIALTY DIVISIONS

Spine Division

New FLASH navigation system enhances surgical speed, accuracy, and safety.

The FOI **Spine Division** is composed of five board-eligible/certified orthopedic and neurosurgical specialists dedicated to a range of surgical procedures. From minimally invasive to extensive reconstructive deformity surgeries and revisions, the team performs more than 1,400 surgeries and 4,300 pain abatement procedures per year.

2023

BY THE NUMBERS*

*Includes all FOI divisions.

46,200
Patient Visits

3,266
Surgeries



Leadership

John M. Small, MD became the Director of the Spine Division in 2014. He is actively involved in quality initiatives to bring better, more efficient care to his patients. In 2002, Dr. Small assumed joint control of the nationally recognized, annual Selby Spine Conference in Park City, UT. His peers voted him as Best Spine Specialist in Tampa, Florida.

Spine Education

Spine Division surgeons serve as faculty within the University of South Florida (USF) Department of Orthopaedics. They are involved with orthopedic resident spine rotations, lecture series, grand rounds, journal club, and OITE exam prep. Additionally, the surgeons facilitate two spine fellowship positions through FOI. Spine Division surgeons also participate as faculty, lecturing at national and international conferences.

Patient Care

The Spine Division is highly motivated to provide seamless, best-in-class care for our patients. The division is structured to manage a continuum of non-operative care as well as the full range of up-to-date operative management solutions. Advanced, specialized spine surgery options include outpatient surgery, minimally invasive procedures, and the full gamut of deformity and revision surgeries.

Care Pathways

Increasing the Spine Division's number of non-operative spine providers is a current priority to optimize access, efficiency, and quality of care for our patients. The team's comprehensive service provides the entire spectrum of diagnostic testing and treatment options in one facility.

Enhanced Recovery After Surgery (ERAS)

Incorporating Enhanced Recovery After Surgery (ERAS) protocols have substantially reduced opioid use in the perioperative and postoperative periods. The Spine Division continues to explore ways to improve these protocols and diminish opioid use for patients' benefit.

7D Spine Navigation

The Spine Division recently incorporated the first FLASH camera-based navigation system featuring machine-vision technology. This radiation free surgical camera can register a patient in 30 seconds, which enhances surgical speed and accuracy, while improving patient safety.

Publications

Neaville S, Khairy M, Mierke A, Small J. Cervical Myelopathy with Concomitant Guillain-Barré Syndrome: A Case Report. *JBJS Case Connect.* 2024;14(1):e23.00533. Published 2024 Jan 11. doi:10.2106/JBJS.CC.23.00533

Patel V, Aleem I, Lansford T, Weinstein MA, Vokshoor A, Campbell P, Beaumont A, Hasanzadeh H, Radcliff K, Matheus V, Coric D. Adjunctive Use of Bone Growth Stimulation Increases Cervical Spine Fusion Rates in Patients at Risk for Pseudarthrosis. In Press, *Clinical Spine Surgery*, May 2024. 2nd Place Clinical Research, Cervical Spine Research Society, Las Vegas, NV 2023.

Research

The Spine Division is involved in several research projects, investigational device exemption (IDE) studies, and product development initiatives to provide the most modern, evidence-based care for patients. These include:

A Multi-Center, Prospective, Randomized Controlled Trial Comparing the Safety and Effectiveness of *prodisc® C SK* and *prodisc® C Vivo* to *Mobi-C® Cervical Disc* in the Treatment of Two-Level Symptomatic Cervical Disc Disease (SCDD) (John Small MD-PI; Steven Tresser MD - Investigator)

An Assessment of P-15L Bone Graft in Transforaminal Lumbar Interbody Fusion with Instrumentation (John Small MD- PI)

A Prospective, Randomized, Multi-Center, Open-Label Study of Infuse™ Bone Graft with Mastergraft™ Strip and Posterior Fixation for Posterolateral Fusion (PLF) Treatment of Multi-Level Degenerative Lumbosacral Spinal Conditions (John Small MD- PI)

An Interventional, Multi-Center Investigation of the MOTUS Total Joint Replacement (John Small MD - PI)

Prospective Observational Spine Fusion Registry for OssDesign Bone Graft Substitutes in Real World Clinical Practice (Brooks Osburn MD - PI)

A Multicenter, Retrospective, Observational Clinical Study to Evaluate Clinical Outcome Measures and Safety Profiles for Patients with Symptomatic Degenerative Disease Treated with STALIF C or M, Ti or FLX implants for 1 or 2 levels (John Small MD - PI)

DIAM Spinal Stabilization System Long Term Follow Up (John Small MD - PI)

Prospective, Randomized, Controlled, Blinded Pivotal Study In Subjects Undergoing A Transforaminal Lumbar Interbody Fusion (TLIF) At One Or Two Levels Using Infuse™ Bone Graft with an Intervertebral Body Fusion Device and Posterior Supplemental Fixation For The Treatment Of Symptomatic Degenerative Disease Of The Lumbosacral Spine (John Small MD - PI)

Analgesic Requirement for Post-Operative Pain Control in Elective 1-3 Level Transforaminal Lumbar Interbody Fusion: Comparison of Thoracolumbar Interfascial Plane Block with Exparel to Bupivacaine HCl (John Small MD - PI)



John M. Small, MD
Director, Center for Spinal Disorders
Professor, USF Department
of Orthopaedic Surgery
Orthopedic Spine Surgeon



Brooks R. Osburn, MD
Assistant Professor, USF Department
of Orthopaedic Surgery
Neurosurgeon



Adil A. Samad, MD
Co-Director, Spine Fellowship
Assistant Professor, USF Department
of Orthopaedic Surgery
Orthopedic Spine Surgeon



Steven J. Tresser, MD
Co-Director, Spine Fellowship
Associate Professor, USF Department
of Orthopaedic Surgery
Neurosurgeon



Marc A. Weinstein, MD
Associate Professor, USF Department
of Orthopaedic Surgery
Orthopedic Spine Surgeon

SUBSPECIALTY DIVISIONS

Orthopaedic Trauma

The FOI Orthopaedic Trauma Service (OTS) Division performs over 4,500 surgeries each year.

The Orthopaedic Trauma Service (OTS) Division consists of fellowship-trained orthopedic trauma surgeons. OTS provides all trauma coverage at Tampa General Hospital, the only American College of Surgeons designated Level I Trauma Center in West Central Florida, as well as multiple state-designated Level II Trauma Centers. The OTS has offered one of the nation's premier fellowships for more than 30 years under the direction of Roy W. Sanders, MD. Areas of emphasis include: clinical management, technical excellence, education, research, and continuous quality improvement.

2023

BY THE NUMBERS*

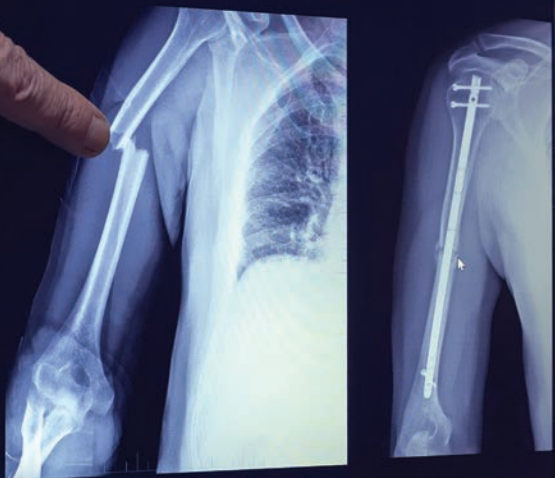
*Includes all FOI divisions.

35,691

Patient Visits

6,376

Surgeries



Leadership

The Orthopaedic Trauma Association (OTA) recently celebrated the launch of the Roy Sanders OTA Traveling Fellowship. The OTA extended sincere gratitude to Dr. Sanders for his ongoing leadership and his generous endowment of the program which will enrich the lives of the selected fellows and help build the next generation of OTA leaders. The first class of fellows was selected and took their first tour in 2022 with their final stop being in Tampa. Dr. Sanders will serve as the mentor for the first group.

Hassan R. Mir, MD, MBA was recently voted in as the Chief Financial Officer (CFO) for the OTA. His term as CFO began in 2021 and will last for three years, during which he will also serve on the Board of Directors for the OTA.

Patient Care

The OTS provides expert care for severe musculoskeletal injuries, specializing in fractures and fracture-related problems, including: nonunions, malunions, post-traumatic arthritis, deformity correction, infections, pelvis/hip reconstruction, and foot/ankle reconstruction. The OTS performs over 4,500 surgical cases per year, in addition to caring for thousands of other patients with non-operative injuries.

Orthopaedic College

As one of the first programs to pioneer dedicated block time in the USA, the division realized that there were still problems with staffing and coverage. In order to maximize efficiencies in the operating room, the service line consolidated all orthopedic cases into one umbrella program known as the Orthopaedic College. With dedicated scrub techs, circulators, central supply coordinators, and anesthesia staff, 8-10 rooms daily were assigned to a master schedule separately controlled by the orthopedic management team. This "OR within an OR" has greatly improved both acute and reconstructive surgery for the entire spectrum of orthopedic cases. To maximize OR utilization, all staff are trained to seamlessly time lunch breaks, cross coverage of cases, expedite room turnover, and accommodate "on the fly" scheduling changes. This system is now in effect for all TGH Orthopaedic Surgery, allowing the division to treat the most acutely injured patients with built-in time for urgent operative "add-ons," while decreasing length of stay and complications.

With excellent first case on-time starts, subsequent case times for "wheels out to wheels in" has also dramatically decreased such that the sheer volume of cases managed monthly have dramatically improved. This would not have been possible without the team approach developed for the College backed by strong TGH administrative leadership.

Research

The OTS employs dedicated and experienced research staff, including PhD's and research coordinators, to support the program in conducting numerous ongoing grant-funded studies. Most University of South Florida (USF) orthopedic residents and many medical students participate in ongoing OTS projects, with Dr. Mir serving as the OTS Director of Research.

The OTS Trauma Registry allows for large retrospective and prospective studies and conducts numerous single center and multicenter studies each year. The OTS has recently implemented the collection of patient reported outcomes (PROMs) for all patients in clinic settings to further expand outcomes research.

The OTS works in collaboration with the Foundation for Orthopaedic Research and Education (FORE) for biomechanical research, surgical training, and continuing medical education (CME). Many of these activities take place at the Florida Innovation and Education (FIVE) Labs facility, which is designed to educate the next generation of healthcare professionals by fostering creativity for the development of technologies. It includes a bioskills lab, a conference center, and an innovation studio.



Roy W. Sanders, MD
Director,
Orthopaedic Trauma Services



David M. Donohue, MD



Christopher D. Flanagan, MD



Anthony F. Infante, DO



Benjamin Maxson, DO



Hassan R. Mir, MD, MBA



Anjan R. Shah, MD



Thomas S. Stang, DO



David T. Watson, MD



SUBSPECIALTY DIVISIONS

Sports Medicine

Sports medicine surgeons at FOI provide state-of-the-art, cutting-edge technologies for cartilage repairs.

Florida Orthopaedic Institute has the largest and most advanced **Sports Medicine Service Division** in the region. Under the direction of Dr. Seth Gasser, it has become widely recognized as a leader in treating athletic injuries for patients of all ages. Our team provides the best orthopedic solutions for every bone, joint, ligament, tendon, and muscle injury in the body. FOI's board-certified surgeons are fellowship trained and hold additional subspecialty certification in Sports Medicine. This expertise allows FOI to provide a level of care unattainable elsewhere in the Tampa Bay area.

2023

BY THE NUMBERS*

*Includes all FOI divisions.

75,894

Patient Visits

4,885

Surgeries

Leadership

Utilizing a multidisciplinary approach, FOI's compassionate health care providers employ innovative state-of-the-art treatments for all patients. Our team consists of orthopedic sports medicine surgeons, primary care sports medicine doctors, physical medicine and rehabilitation physicians, nurse practitioners, physician assistants, chiropractors, physical therapists, and certified athletic trainers. Two orthopedic urgent care centers ensure timely and convenient access for initial evaluation and treatment, while facilitating prompt referral to the appropriate specialist.

Additionally, we offer advanced imaging (x-rays, ultrasound, CT, and MRI scans) and physical therapy. A durable medical equipment department is staffed by trained specialists for the proper fitting of all casts, splints, braces, and crutches. Patients can receive the entirety of their care at one of 12 convenient locations throughout the Tampa Bay area.

Patient Care

Articular Cartilage Injuries of the Knee—Articular cartilage is the smooth cartilage that covers the end of the bone in all our joints, allowing them to move freely and without pain. Damage to this cartilage leads to arthritis over time. Nearly 25 years ago, FOI was one of the first orthopedic groups in the country to offer an advanced surgical technique, known today as MACI, that helps regenerate damaged articular cartilage. Our sports medicine surgeons continue to provide state-of-the-art, cutting-edge technologies for the treatment of these cartilage injuries.

Knee Meniscus Tears—The meniscus is a C shaped piece of rubbery cartilage that acts as a shock-absorber for the knee. It can be torn if you suddenly twist your knee, causing significant pain and swelling. Meniscal tears are one of the most common knee injuries, and often require surgery to correct. At FOI, we offer cutting edge treatment for meniscal tears including minimal resection of the torn tissue, suture repair techniques for meniscal preservation, and meniscal transplantation in appropriately selected patients.

Knee Ligament Injuries—Having extensive experience in treating multi-ligament knee injuries, FOI sports medicine surgeons offer patients state-of-the-art treatment with surgical techniques that anatomically reconstruct all damaged ligaments. This allows most athletes to return to their sport from what was previously a career-ending injury.

Concussion Management—Primary care sports medicine doctors offer the most scientifically-validated computerized evaluation and treatment for concussions

and traumatic brain injuries. This helps ensure an appropriate time period before returning an athlete back to sports, lowering the risk for repeated concussions and long-term problems.

Arthroscopic Shoulder Surgery—The sports medicine surgeons at FOI are actively involved in research and product development to improve the instrumentation, surgical techniques, and outcomes in the arthroscopic treatment of shoulder injuries, including rotator cuff and labral tears. For example, there are now several new surgical techniques (superior capsular reconstruction, subacromial balloon spacer, lower trapezius transfer) for severe rotator cuff tears in younger patients that previously had no satisfactory treatment.

Platelet Rich Plasma (PRP) and Regenerative Cell Therapy (bone marrow aspirate concentrate-BMAC)—Through regenerative cell therapy, a patient can take advantage of the body's ability to heal itself by using healthy BMAC cells found naturally in the body. Laboratory and clinical research have shown that in some cases it is possible to use regenerative cells from the patient to restore an repair damaged or aging cells and effectively regenerate tissue. Platelet-rich plasma (PRP) therapy is an emerging technique that is also used to treat patients with musculoskeletal problems. PRP is easily obtained from the patient through a simple blood draw. After preparation, it is injected into the damaged area to stimulate healing. PRP has been used to treat numerous musculoskeletal disorders, including osteoarthritis, tennis elbow, hamstring strains, rotator cuff tears, Achilles tendon injuries, anterior cruciate ligament tears, and ulnar collateral ligament tears.

Community Outreach

High Schools
Our team of sports medicine specialists has provided volunteer medical coverage to local high school football teams for over 25 years.

College/University
We are proud to serve as the exclusive orthopedic providers and team physicians for the University of Tampa, University of South Florida, and Saint Leo University. We also educate undergraduate and graduate level students interested in pursuing a career in the medical field.

Professional Sports
Having previously served as team physicians for the Tampa Bay Lightning, Tampa Bay Buccaneers, Tampa Bay Storm, Tampa Bay Mutiny, and Tampa Bay Rowdies, assures our patients they are receiving the best care available.

Education
We are actively involved in educating coaches, athletic trainers, undergraduate and graduate level college students, physician assistants, nurse practitioners, and medical school residents and fellows. In addition, we present the "Annual Orthopaedics for the Primary Care Practitioner and Rehabilitation Therapist" conference. This three-day intensive course allows participants a unique opportunity to learn about a wide variety of common orthopedic conditions provided by FOI's expert faculty.



Seth I. Gasser, MD
Director,
Sports Medicine

Sports Medicine

Christopher E. Baker, MD
Eddy L. Echols, Jr., MD
Grant G. Garlick, MD
Neil S. Kumar, MD
Adam C. Morse, DO
Charles C. Nofsinger, MD
Trey Remaley, DO
Seung Jin Yi, MD

Primary Care Sports Medicine

Reza Alavi, MD
Tara K. Bagen, MD
Jeffrey T. Kannen, DO
Byron K. Moran, MD
Jeff E. Sellman, MD



Foundation for Orthopaedic Research & Education (FORE)

FORE is a 501(c)(3) non-profit organization that was founded in 1999 by surgeons at the Florida Orthopaedic Institute (FOI) with the mission to improve orthopedic medicine through investigation, innovation, and education. While FORE operates independently from TGH and FOI, there is constant collaboration with the surgeons on numerous research and educational endeavors.

Clinical Research

The clinical research department conducts orthopedic clinical trials in the following sub-specialties: hand, foot, ankle, knee, hip, spine, elbow, shoulder, and sports medicine.

Orthopedic outcome-based research includes:

- IDE (Investigational Device Exemption) Studies
- IND (Investigational New Drug) Studies
- Industry Sponsored Studies
- Investigator Initiated Studies
- Randomized, Controlled Trials
- Case Studies
- Access to Florida's largest orthopedic group

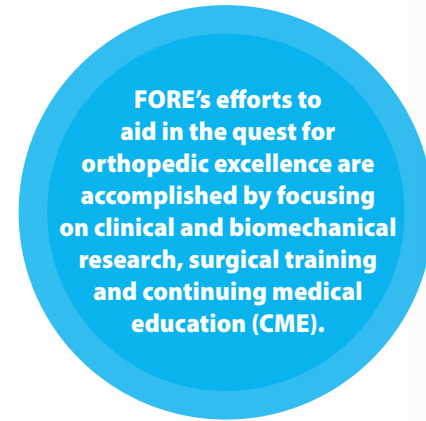
FORE also provides full-service clinical trial management strategies including:

- Experimental Design/ Protocol Development
- IRB Management
- Patient Recruitment
- Data Management
- Statistical Support and Data Analysis
- Medical Writing of Manuscripts and Abstracts
- Presentation Development

Bio Mechanical Research

The mission of the Phillip Spiegel Orthopaedic Research Laboratory at FORE is to conduct high-quality translational and basic science research that contributes significantly to the knowledge base resulting in advancements in clinical applications in orthopedics.

FORE facilitates the collaboration between different subspecialties of biomedical engineers and physicians to perform various biomechanical evaluations, including synthetic bone testing, cadaver testing, computer simulations, and finite element modeling.



FORE partners with industry, research, educational foundations, orthopedic associations and societies to conduct basic science and translational research including:

- Investigating how various orthopedic disease states affect musculoskeletal function.
- Development and biomechanical evaluating of promising new orthopedic devices and technologies.

Completed and published studies demonstrate research expertise in the general area of in vitro biomechanical testing. Projects range from strength testing of various fracture fixation devices in the knee, hip, shoulder, and elbow to kinematic range of motion analysis of human cadaveric lumbar and cervical spine fusion and arthroplasty constructs.

The laboratory is also heavily involved in biomechanical projects that further the understanding of total and reverse shoulder arthroplasty and the resultant effects that these techniques impart on the kinematics and kinetics of the shoulder.

Florida Innovation & Education (FIVE) Labs

Florida Innovation and Education (FIVE) Labs is a state-of-the-art facility for biomechanical and clinical research. This 15,500-sq.-ft. facility is centrally located only two miles from Tampa International Airport (TPA) and less than five miles from Tampa General Hospital.

Bioskills Lab

The Bioskills Lab has over 3,600 sq. ft. of lab space that can be customized for small or large events. The lab is fully equipped for up to 30 surgical stations with monitors and cameras throughout. Live feed video can be displayed throughout the facility or streamed over the web, allowing viewers to watch the event in progress. The experienced team of professionals at FIVE Labs offers concierge level service to ensure seamless and successful events.

Prototype Lab

The Prototype Lab is designed to function as a 1-2 station bioskills lab and innovation hub. It is easy to create an intimate experience with the closure of a garage door. The Prototype Lab has direct access to the board room to increase engineering, design review, and product development lab's efficiency. The Prototype Lab features two surgical stations, HD video/audio recording, and a floor-to-ceiling dry-erase wall to aid and capture the creative process.

Conference Center

The FIVE Labs Conference Center can accommodate large multi-day conferences, demonstration sessions for individual surgeons, sales training events, or team brainstorming meetings. FORE is also an ACGME accredited provider of continuing medical education for physicians.

The in-house team of CME Coordinators/Event Planners provides accreditation, education, and conference management services for over 40 courses annually.

Innovation Studio

Engineers at FIVE Labs work side by side with surgeons and medical device professionals to develop new and innovative medical ideas. They have the experience to take these ideas from concept, to prototype, to final product. The studio offers rapid 3D prototyping (plastic and metal), 3 and 5 Axis CNC machining, development of 3D CAD models and drawings, provisional and full utility patenting, and initial FDA documentation.

FIVE Labs is part of US Bioskills—one of the largest bio-skills networks in the country with locations in Atlanta, Boston, Cincinnati, Las Vegas and Tampa. Each year, thousands of healthcare professionals visit US Bioskills, making a significant impact on medical research, education, and training worldwide.





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John, M. P., 2nd, Streufert, B. D., Downes, K., Chase, C. B., & Mir, H. R. (2022). A Prospective Randomized Controlled Trial Comparing Enoxaparin & Rivaroxaban for Venous Thromboembolism Prophylaxis in Orthopaedic Trauma. *Journal of orthopaedic trauma*, 36(12), 615–622. <https://doi.org/10.1097/BOT.0000000000002454>

Stinner, D. J., & Mir, H. R. (2022). Patient Mental Health and Well-being: Its Impact on Orthopaedic Trauma Outcomes. *Journal of orthopaedic trauma*, 36(Suppl 5), S16–S18. <https://doi.org/10.1097/BOT.0000000000002450>

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Flanagan, C. D., & Cannada, L. K. (2022). Results of a Nationwide Practice Survey of Orthopaedic Traumatologists. *Journal of orthopaedic trauma*, 36(11), e431–e436. <https://doi.org/10.1097/BOT.0000000000002419>

Thomas, J., Shichman, I., Ohanianis, L., Stoops, T. K., Lawrence, K. W., Ashkenazi, I., Watson, D. T., & Schwarzkopf, R. (2023). Monoblock tapered stems in management of UCS B2 and B3 periprosthetic fractures in revision total hip arthroplasty. *Bone & joint open*, 4(8), 551–558. <https://doi.org/10.1302/2633-1462.48.BJO-2022-0160.R1>

Presentations and Posters

Adult Reconstructive Surgery

Salomon, K., Palumbo, B. (2023, March). The impact and durability of opioid restrictive state legislation for total knee arthroplasty. [Poster Presentation]. The Second Medical Student Orthopaedic Symposium.

Teytelbaum, D., Whale, C., Simon, P., Ohanianis, L., Bernasek, T., & Miranda, M. (2023, June). The effect of femoral and pelvic rotation in establishing an impingement-free safe zone for femoral anteversion: a 3-Dimensional computer-based model. [Poster Presentation]. Orthopaedic Research Day.

Nester, M., Huynh, T.H., Kuruvilla, D., Binitie, O., Joyce, D., & Lazarides, A. (2023, June). Significance of tip-apex distance in pathological and impending pathological proximal femur fractures. [Poster Presentation]. Orthopaedic Research Day.

Nester, M., Tabbaa, A., Simon, P., Palumbo, B., Lyons, S., & Bernasek, T. (2023, June). Complications following definitive hip resection arthroplasty in paraplegics vs. non-paraplegics. [Poster Presentation]. Orthopaedic Research Day.

Nester, M., Tabbaa, A., Simon, P., Palumbo, B., Lyons, S., & Bernasek, T. (2023, June). Does hip resection arthroplasty as definitive treatment improve pain and ambulation compared to preoperative baseline? [Poster Presentation]. Orthopaedic Research Day.

Nester, M., Tabbaa, A., Simon, P., Palumbo, B., Lyons, S., & Bernasek, T. (2023, June). Complications following definitive hip resection arthroplasty for infectious vs. non-infectious etiologies. [Poster Presentation]. Orthopaedic Research Day.

Tabbaa, A., Simon, P., Miranda, M., & Bernasek, T. (2023, June) Long-term clinical outcomes of cruciate substituting total knee replacements using a press-fit condylar sigma knee system. [Poster Presentation]. Orthopaedic Research Day.

Salomon, K., Workman, K., Simon, P., Leverett, S., Bernasek, T., & Palumbo, B. (2023, June) The effect of hypnosis therapy prior to total knee arthroplasty: A randomized controlled trial. [Poster Presentation]. Orthopaedic Research Day.

Marino, D. U. P., Popovich, J., Etchinson, J., Wilson, J., & Cochran, J. (2023, June) Can frame size accurately predict component size in total knee arthroplasty? [Poster Presentation]. Orthopaedic Research Day.

O'Connor, C., Tabbaa, A., Simon, P., Bernasek, T. (2023, June) Patient frailty is associated with higher complication and revision rates following primary total hip arthroplasty. [Poster Presentation]. Orthopaedic Research Day.

Ohanianis, L., Grayson, W., Sajid, I., Watson, D. (2023, June) Enhanced capsular repair after total hip arthroplasty using an anterior approach demonstrates no dislocation. [Poster Presentation]. Orthopaedic Research Day.

Ohanianis, L., Tram, M., Miranda, M., O'Connor, CM. (2023, June) The association of osteoporosis with early complications in cementless total knee arthroplasty. [Poster Presentation]. Orthopaedic Research Day.

Shen, V., Salomon, K., Ohanianis, L., Simon, P., Atkins, R., Miranda, M., & Bernasek, T. (2023, June) Bloodless total knee replacement in Jehovah witness patients: contemporary strategies and outcomes. [Poster Presentation]. Orthopaedic Research Day.

Shen, V., Salomon, K., Ohanianis, L., Simon, P., Atkins, R., Miranda, M., & Bernasek, T. (2023, June) Bloodless total hip replacement in Jehovah witness patients: contemporary strategies and outcomes. [Poster Presentation]. Orthopaedic Research Day.

Nester, M., Tabbaa, A., Simon, P., Palumbo, B., Lyons, S.T., & Bernasek, T. (2023, Month) Outcomes following definitive hip resection arthroplasty in paraplegic vs. non-paraplegic patients. [Poster Presentation]. AAHKS, Dallas, TX.

O'Connor, CM., Tabbaa, A., Ayzenshtat, L., Feng, J., Anoushiravanin, A., Lyons, S., & Bernasek T. (2023, Month) Patient frailty in TKA implementation of the HFRS using a common EMR. [Poster Presentation]. AAHKS, Dallas, TX.

Layuno-Matos, J., Simon, P., Stoops, K., & Bernasek, T. (2023, Month) Failed metal on metal total hip replacements: a comprehensive review. [Poster Presentation]. CCJR, Orlando FL.

Shen, V., Salomon, K., Ohanianis, L., Simon, P., Atkins, R., Miranda, M., & Bernasek, T. (2023, Month) Bloodless total hip replacement in Jehovah Witness Patients: Contemporary Strategies and Outcomes. [Poster Presentation]. CCJR, Orlando FL.

Workman, K., Salomon, K., Shen, V., Simon, P., Leverett, S., & Palumbo, B. (2023, Month) The effect of hypnosis therapy prior to TKA: A randomized controlled trial. [Poster Presentation]. CCJR, Orlando FL.

Shoulder & Elbow

Smith, A.F., Schmidt, C.M., Tabbaa, A., Gutierrez, S., Simon, P., Mighell, M.A., & Frankle, M.A. (2023, April). Glenoid-based reference system to differentiate shoulder pathologies on plain radiographs. [Poster Presentation]. Shoulder 360.

Smith, A.F., Schmidt, C.M., Tabbaa, A., Gutierrez, S., Simon, P., Mighell, M.A., & Frankle, M.A. (2023, June). Glenoid-based reference system to differentiate shoulder pathologies on plain radiographs. [Poster Presentation]. ASES Fellows Symposium, San Diego, California.

Davis, C.M., Schmidt, C.M., Kucharik, M., Givens, J., Christmas, K.N., Simon, P., & Frankle, M.A. (2023, June). Do preoperative scapular fractures affect long-term outcomes after reverse shoulder arthroplasty? [Poster Presentation]. ASES Fellows Symposium, San Diego, California.

Givens, J., Schmidt, C.M., Patel, R., Kucharik, M., Grayson, W., Chase, C., Davis, C.M., Christmas, K.N., Simon, P., & Frankle, M.A. (2023, June). Factors affecting risk of recurrence with periprosthetic infection in shoulder arthroplasty. [Poster Presentation]. ASES Fellows Symposium, San Diego, California.

Smith, A.F., Sirignano, M.N., Simon, P., Haidamous, G., Frankle, M.A., & Mighell, M.A. (2023, June). Subscapularis-sparing windowed anterior technique (SWAT) for muscle preserving anatomic total shoulder arthroplasty. [Poster Presentation]. Orthopaedic Research Day.

Yang, K., Pandey, M., Simon, P., & Frankle, M.A. (2023, June). Musculoskeletal computer model of the shoulder. [Poster Presentation]. Orthopaedic Research Day.

Smith, A.F., Munassi, S., Simon, P., Frankle, M.A., & Mighell, M.A. (2023, June). Clinical and radiographic outcomes of cemented versus uncemented reverse shoulder arthroplasty for treatment of proximal humerus fracture with 2-year follow-up. [Poster Presentation]. Orthopaedic Research Day.

Tabbaa, A., Futch, K., Cox, K., Wilder, L., Simon, P., & Frankle, M.A. (2023, June). Perfect circle shoulder variations following reverse shoulder arthroplasty. [Poster Presentation]. Orthopaedic Research Day.

Munassi, S., Ayala, G., Christmas, K.N., Diaz, M., Simon, P., Frankle, M.A., & Bernasek, T.L. (2023, June). Sequential influence on patients requiring upper and lower extremity arthroplasty. [Poster Presentation]. Orthopaedic Research Day.

Munassi, S., Christmas, K.N., Diaz, M., Simon, P., Bernasek, T.L., & Frankle, M.A. (2023, June). Osteoarthritis trends in a multijoint arthroplasty population: An ongoing retrospective review. [Poster Presentation]. Orthopaedic Research Day.

Haidamous, G., Couchara, L., Simon, P., Christmas, K.N., Jensen, M.P., & Frankle, M.A. (2023, June). Effects of hypnosis therapy on pain and opioid use following shoulder replacement surgery: A pilot feasibility trial. [Poster Presentation]. Orthopaedic Research Day.

Smith, A.F., Schmidt, C.M. II, Smith, N.S., & Smith, M.G. (2023, June). Novel technique for arthroscopic repair of Hill-Sachs lesion during glenoid reconstruction with distal tibia allograft. [Poster Presentation]. Orthopaedic Research Day.

Munassi, S., Christmas, K.N., Simon, P., & Frankle, M.A. (2023, June). Increased Effectiveness of Collection of Patient- Reported Outcomes Measures Utilizing Electronic Data Capture: Transitioning from Paper Forms to Web-based Collection. [Poster Presentation]. Orthopaedic Research Day.

Ayala, G., Wilder, L., Simon, P., Roura, R., Salomon, K., Frankle, M.A., & Smith AF. (2023, June). A Comparison of Standard Length, Short Length, and Stemless on Anatomic Humeral Reconstruction. [Poster Presentation]. Orthopaedic Research Day.

Roura, R., Eyberg, B., Simon, P., Frankle, M.A. (2023, June). Clinical and Radiographic Outcomes in Patients Diagnosed with Primary Avascular Necrosis of the Humeral Head. [Poster Presentation]. Orthopaedic Research Day.

Munassi, S., McKnight, R., Smith, A., Melbourne, C., Christmas, K.N., Simon, P., & Mighell, M.A. (2023, March). Radiographic Results and Intraoperative Complications of Press-fit Fracture Specific Stem in Reverse Shoulder Arthroplasty for Fracture. [Poster Presentation]. 2023 Annual Meeting of American Academy of Orthopaedic Surgeons, Las Vegas, NV.

Teytelbaum, D.E., Achors, K., Patel, J., Mesa, L., Salomon, K., Haidamous, G., Cronin, K.J., Simon, P., & Frankle, M.A. (2023, March). Revision Total Elbow Arthroplasty (rTEA) for Humeral Loosening (HL): What Factors Can Reduce the Need of Repeat Revision for HL? [Poster Presentation]. 2023 Annual Meeting of American Academy of Orthopaedic Surgeons, Las Vegas, NV.



Kusin, D.J., Teytelbaum, D.E., Teusink, M.J., Moen, P., Melbourne, C., Simon, P., Christmas, K.N., & Frankle, M.A. (2023, March) Outcomes of Femoral Head Allograft for the Management of Glenoid Bone Defects in Revision Reverse Shoulder Arthroplasty: a Case-Controlled Study. [Poster Presentation]. 2023 Annual Meeting of American Academy of Orthopaedic Surgeons, Las Vegas, NV.

John, M.P. II, Wilson, J., Mesa, L., Christmas, K.N., Cronin, K.J., Simon, P., & Frankle, M.A. (2023, March). Revision RSA for the Management of Baseplate Failure: An Analysis of 676 Revision RSA Procedures. [Poster Presentation]. 2023 Annual Meeting of American Academy of Orthopaedic Surgeons, Las Vegas, NV.

Levine, W. N., Anakwenze, O., Frankle, M. A., Keener, J. D., Sanchez-Sotelo, J., & Tashjian, R. Z. (2023). My Reverse Has Failed: Top Five Complications and How to Manage Them. *Instructional Course Lectures*, 72, 175—200. Retrieved from <http://euro-pepmc.org/abstract/MED/36534856>

Frankle, M.A., John, M.P. II, Simon, P., Christmas, K.N., Mesa, L., & Wilson, J. (2023, September). Revisions RSA for the Management of Baseplate Failure: An Analysis of 676 Revision RSA Procedures. [Presentation]. ICSES Rome Scientific Meeting, Rome, Italy.

Smith, A.F., Schmidt, C.M. II, Tabaa, A.M., Gutierrez, S., Simon, P., & Frankle, M.A. (2023, September). Glenoid Based Reference System to Differentiate Shoulder Pathologies on Plain Radiographs. [Presentation]. ICSES Rome Scientific Meeting, Rome, Italy.

Ayala, G., Wilder, L., Simon, P., Rovira, R., Salomon, K., Frankle, M.A., & Smith, A.F. (2023, September). A comparison of standard length, short length, and stemless on anatomic humeral reconstruction. [Presentation]. ICSES Rome Scientific Meeting, Rome, Italy.



Smith, A.F., Munassi, S., Simon, P., Frankle, M.A., & Mighell, M.A. (2023, September). Clinical and Radiographic Outcomes of Cemented Versus Uncemented Reverse Shoulder Arthroplasty for Treatment of Proximal Humerus Fracture with 2-Year Follow-Up. [Presentation]. ICSES Rome Scientific Meeting, Rome, Italy.

Smith, A.F., Sirignano, M.N., Simon, P., Haidamous, G., Frankle, M.A., & Mighell, M.A. (2023, September). Subscapularis-sparing Windowed Anterior Technique (SWAT) for Muscle Preserving Anatomic Total Shoulder Arthroplasty. [Presentation]. ICSES Rome Scientific Meeting, Rome, Italy.

Givens, J., Schmidt, C., Christmas, K.N., Simon, P., & Frankle, M.A. (2023, September). Does the 2018 Consensus Periprosthetic Infection Classification Correlate with Recurrence Rate in Revision Shoulder Arthroplasty? [Presentation]. ICSES Rome Scientific Meeting, Rome, Italy.

Davis, C., Schmidt, C. II, Moore, A., Christmas, K.N., Simon, P., & Frankle, M.A. (2023, September). Do Preoperative Scapular Fractures Affect Outcomes After Reverse Shoulder Arthroplasty? [Presentation]. ICSES Rome Scientific Meeting, Rome, Italy.

Diaz, M.A., Ricchetti, E.T., Garrigues, G.E., Hsu, J.E., Hutchinson, A., Gutierrez, S., & Frankle, M.A. (2023, September). Effect of torque-compression and RSA baseplate design on implant stability: A micromotion study. [Presentation]. ICSES Rome Scientific Meeting, Rome, Italy.

Mighell, M.A. (2022, 1 October). Proximal Humerus Fracture in a 65-Year-Old: Four-Part – Fix it! [Presentation]. Sociedad Puertorriqueña de Ortopedia y Traumatología (SPOT) Meeting, Rio Grande, Puerto Rico.

Frankle, M.A. (2022, 6 October). Dislocation After RSA. [Presentation] 2022 Annual Meeting of the American Shoulder and Elbow Surgeons, Atlanta, GA.

Mighell, M.A. (2022, 9 October). Utilizing Industry Innovation to Develop Market Leadership. [Presentation] 2022 Annual Meeting of the American Shoulder and Elbow Surgeons, Atlanta, GA.

Frankle, M.A. (2022, 13 October). Reverse for Fracture Technique. [Presentation]. 2022 Annual Meeting of the Orthopaedic Trauma Association, Tampa, FL.

Frankle, M.A. (2022, 21 October). Keynote Speech: 20 Years of RSP – 5 Lessons I’ve Learned in My Career. [Presentation]. 2022 Royal North Shore Shoulder Symposium, Sydney, Australia

Frankle, M.A. (2022, 21 October). Severe Glenoid Bone Loss – Alternate Spine Line. [Presentation]. 2022 Royal North Shore Shoulder Symposium, Sydney, Australia

Frankle, M.A. (2022, 21 October). Instability After RSA. [Presentation]. 2022 Royal North Shore Shoulder Symposium, Sydney, Australia.

Frankle, M.A. (2022, 22 October). RSP for Fracture – My Technique. [Presentation]. 2022 Royal North Shore Shoulder Symposium. Sydney, Australia.

Frankle, M.A. (2022, 22 October). What I’m Doing Now and the Future of Arthroplasty – 2022 and Beyond! [Presentation]. 2022 Royal North Shore Shoulder Symposium. Sydney, Australia.

Mighell, M.A. (2022, 28 October). Irreparable Rotator Cuff. [Presentation]. SCCOT/SCHOC 9th Biennial Shoulder and Elbow Course.

Mighell, M.A. (2022, 28 October). Lateralizing the Reverse Prosthesis in Glenoid. [Presentation]. SCCOT/SCHOC 9th Biennial Shoulder and Elbow Course.

Mighell, M.A. (2022, 29 October). Retention protocol of shoulder arthroplasty: Complication in shoulder arthroplasty. [Presentation]. SCCOT/SCHOC 9th Biennial Shoulder and Elbow Course.

Mighell, M.A. (2022, 29 October). Case Presentation of Glenoid Defect in Revision Shoulder Arthroplasty. [Presentation]. SCCOT/SCHOC 9th Biennial Shoulder and Elbow Course.

Mighell, M.A. (2022, 29 October). Proximal Humerus Fracture – Nonoperative Management. [Presentation]. SCCOT/SCHOC 9th Biennial Shoulder and Elbow Course.

Frankle, M.A. (2022, 6 December). The Importance of Clinical Outcomes. [Presentation]. Weekly Spine Conference.

Frankle, M.A. (2022, 22 December). Biomechanics in Reverse Shoulder Arthroplasty. [Presentation]. Shoulder Channel TV.

Mighell, M.A. (2023, 10 January). Proximal Humerus Fractures: Fix vs. Replace. [Presentation] 2023 Orthopedics Today: Hawaii Meeting, Koloa, HI.

Mighell, M.A. (2023, 10 January). Humeral Shaft Fractures: Brace, Nail, or Plate. [Presentation]. 2023 Orthopedics Today: Hawaii Meeting, Koloa, HI.

Mighell, M.A. (2023, 10 January). Elderly Distal Humerus Fractures: Total Elbow Arthroplasty. [Presentation]. 2023 Orthopedics Today: Hawaii Meeting, Koloa, HI.

Mighell, M.A. (2023, 10 January). When We Have to Operate on Radial Head and Neck Fractures – Fix vs. Replace. [Presentation]. 2023 Orthopedics Today: Hawaii Meeting, Koloa, HI.

Frankle, M.A. (2023, 25 January). RSA Design: At the Beginning, Trials, Now, and the Future. [Presentation]. Annual Meeting of the Israel Orthopaedic Association, Tel Aviv, Israel.

Frankle, M.A. (2023, 25 January). One-Stage vs. Two-Stage Revision for Periprosthetic Joint Infection. [Presentation]. Annual Meeting of the Israel Orthopaedic Association, Tel Aviv, Israel.

Frankle, M.A. (2023, 25 January). Planning vs. Priming. [Presentation]. Annual Meeting of the Israel Orthopaedic Association, Tel Aviv, Israel.

Frankle, M.A. (2023, 21 February). Arthritis and Arthroplasty in the Shoulder. [Presentation]. Core Curriculum Lecture to the USF Orthopaedic Residents, Tampa, FL.

Frankle, M.A. (2023, 23 February). Technical Tips to Use a Proximal Humeral Bone Graft for Bone Loss. [Presentation]. Tampa Shoulder Course. Tampa, FL.

Mighell, M.A. (2023, 23 February). How to Do a Subscapularis-Sparing Total Shoulder Arthroplasty. [Presentation]. Tampa Shoulder Course, Tampa, FL.

Frankle, M.A. (2023, 24 February). Revising a Failed RSA: My Experience and Outcomes. [Presentation]. Tampa Shoulder Course, Tampa, FL.

Frankle, M.A. (2023, 8 March). Early Postoperative Problems in Shoulder Arthroplasty: The reverse is dislocated at the 6-week check-up. Do I attempt a closed reduction or go right into a revision surgery? [Presentation]. 2023 Annual Meeting of the American Academy of Orthopaedic Surgeons, Las Vegas, NV.

Mighell, M.A. (2023, 10 March). Evaluation of unstable RSA and revision strategies. [Presentation]. 2023 Annual Meeting of the American Academy of Orthopaedic Surgeons, Las Vegas, NV.

Frankle, M.A. (2023, 30 March). Keynote Address – Trials and Tribulations of Bringing RSA to the USA. [Presentation]. Rocky Mountain Shoulder and Elbow Society Meeting, Avon, CO.

Frankle, M.A. (2023, 30 March). Top 10 Surgical Tips for Primary TSA. [Presentation]. Rocky Mountain Shoulder and Elbow Society Meeting, Avon, CO.

Frankle, M.A. (2023, 30 March). Technical Tips – Proximal Humeral Bone Graft for Humeral Bone Loss. [Presentation]. Rocky Mountain Shoulder and Elbow Society Meeting, Avon, CO.

Frankle, M.A. (2023, 13 April). Innovation and Product Development – 3 Keys to Success. [Presentation]. Shoulder360 Meeting, Miami Beach, FL.

Frankle, M.A. (2023, 13 April). An argument against the use of Stemless Reverse. [Presentation]. Shoulder360 Meeting, Miami Beach, FL.

Frankle, M.A. (2023, 15 April). Baseplatology: Use the Alternate Center Line: Augments are for Dummies. [Presentation]. Shoulder360 Meeting, Miami Beach, FL.

Mighell, M.A. (2023, 21 April). Subscapularis-sparing Total Shoulder Arthroplasty. [Presentation]. AOA Annual Spring Meeting, Nashville, TN.

Mighell, M.A. (2023, 6 May). 3-D Virtual Planning is the Way! [Presentation]. 2023 AANA Meeting, New Orleans, LA.

Frankle, M.A. (2023, 11 May). Reverse Shoulder Arthroplasty – Loonshot Talk. [Presentation]. Geisinger Orthopaedic Residency Program Graduation, Scranton, PA.

Mighell, M.A. (2023, 16 May). Fractures of the Elbow and Terrible Triad. [Presentation]. Core Curriculum Lecture to the USF Orthopaedic Residents, Tampa, FL.

Frankle, M.A. (2023, 19 May). Argument for a Standard Stem Size. [Presentation]. 2023 New York Shoulder Arthroplasty Course, New York, NY.

Frankle, M.A. (2023, 19 May). Argument for Glenoid-Sided Lateralization. [Presentation]. 2023 New York Shoulder Arthroplasty Course, New York, NY.

Frankle, M.A. (2023, 1 June). Technical Pearls for Reverse. [Presentation]. Educational content for SHED.

Frankle, M.A. (2023, 8 June). How to Complete a Thorough Patient Examination. [Presentation]. Annecy Live Surgery International Advanced Shoulder Course, Annecy, France.

Frankle, M.A. (2023, 9 June). [Live Performance of a Reverse Shoulder Arthroplasty]. Annecy Annecy Live Surgery International Advanced Shoulder Course, Annecy, France.

Mighell, M.A. (2023, 14 June). Surgical Technique: Subscapularis-Sparing. [Presentation]. 2023 San Diego Shoulder Institute Meeting, San Diego, CA.

Mighell, M.A. (2023, 16 June). Proximal Humerus Fracture Management in 2023. [Presentation]. 2023 San Diego Shoulder Institute Meeting, San Diego, CA.

Mighell, M.A. (2023, 17 June). My Most Challenging Proximal Humerus and Clavicle Fracture Cases and What They Taught Me. [Case Presentation]. 2023 San Diego Shoulder Institute Meeting, San Diego, CA.

Mighell, M.A. (2023, 29 August). Fractures of the Clavicle, Scapula, and Glenoid. [Presentation]. Core Curriculum Lecture to the USF Orthopaedic Residents, Tampa, FL.

Mighell, M.A. (2023, 1 September). Subscapularis-Sparing Windowed Anterior Technique. [Presentation]. USF Grand Rounds, Tampa, FL.

Frankle, M.A. (2023, 7 September). Optimal Positioning of Reverse Shoulder Arthroplasty Implants: Different Beliefs, One Truth. [Presentation]. ICSES Rome Meeting, Rome, Italy.

Frankle, M.A. (2023, 14 September). How Biomechanics Influences Clinical Results in RSA. [Presentation]. SIAGASCOT “A tu per tu on il Maestri.”

Mighell, M.A. (2023, 20 September). Pro: Arthroplasty, Anatomic Style: We Have Long-Term Results & It Is Time To Get Young People Back To The Gym & Stop Worrying. [Presentation]. Ortho Summit Boston Meeting, Boston, MA.

Mighell, M.A. (2023, 20 September). Evolving Technique: The True Subscapularis Sparing Technique For A Total Shoulder Arthroplasty – I Have Solved The Problem. [Presentation]. Ortho Summit Boston Meeting, Boston, MA.

Mighell, M.A. (2023, 20 September). Evolving Technique Update: 75-Year-Old Grandma With Grade 4 Osteoarthritis, Not Rheumatoid Arthritis, But A Thin Cuff Read By MRI: Reverse Shoulder Arthroplasty Is The Right Answer in 2023. [Presentation]. Ortho Summit Boston Meeting, Boston, MA.

Mighell, M.A. (2023, 20 September). 28-Year-Old Bodybuilder Now Out Of His Competition Season, Clearly A Steroid User Who Ignored His Dominant Arm Has A Biceps Rupture, Now Needing Repair: Time To Use A Knotless Technique. [Presentation]. Ortho Summit Boston Meeting, Boston, MA.

Frankle, M.A. (2023, 27 September). Reverse Shoulder Arthroplasty – A Loonshot. [Presentation]. UMMC Grand Rounds.

Frankle, M.A. (2023, 27 September). Glenoid Bone Loss. [Presentation]. UMMC Grand Rounds.

Diaz, M.A., Ricchetti, E.T., Garrigues, G.E., Hsu, J.E., Hutchinson, A., Gutierrez, S., & Frankle, M.A. (2023, February). Effect of torque-compression and RSA baseplate design on implant stability: A micromotion study. [Poster No. 1850]. ORS Annual Meeting, Dallas, TX.

Diaz, M.A., Munassi, S., Teytelbaum, D.E., Pipitone, A., Baker, C.E. (2023, February). The Effect of Injunctable Calcium Phosphate Bone Graft Substitute on Pull-Out Strength of Various Suture Anchor Designs in an Osteoporotic Model. [Poster 1876]. ORS Annual Meeting, Dallas, TX.

Levin, J.M., Pugliese, M., Gobbi, F., Pandy, M.G., Di Giacomo, G., & Frankle, M.A. (2023, October). Impact of Reverse Shoulder Arthroplasty Design and Patient Shoulder Size on Moment Arms and Muscle Fiber Lengths in Shoulder Abductors. [Presentation]. ASES Annual Meeting, Scottsdale, AZ.



Adult Spine Disorders

Small, J., Mierke, A.I., Khairy, M., & Neville, S. (2023, June). Management of Cervical Myelopathy with Concomitant Guillain-Barre Syndrome: a Case Report. [Poster Presentation]. Orthopaedic Research Day.

Tabbaa, A., Michalski, J., Simon, P., & Small, J. (2023, June). Hybrid Technique for Multilevel Anterior Decompression with Corpectomy and Discectomy Shows Higher Fusion and Lower Reoperation Rates Than Anterior Cervical Discectomy and Fusion with Minimum 5-Year Follow-Up. [Poster Presentation]. Orthopaedic Research Day.

Diaz, M.A., Simon, P., Wilder, L., Dupre, D., & Weinstein, M. (2023, February). A Biomechanical Analysis of Novel Integrated 3-D Printed Porous Anchors Vs. Integrated Screws in a Stand-Alone Cervical Cadaveric Model. [Poster Presentation No. 1763]. ORS Annual Meeting, Dallas, TX.

Tresser, S.J. (2023, May 10-13). Pelvic Parameters. [Presentation]. Castellvi Spine Symposium, Duck Key, FL.

Weinstein, M.A. (2023, May 10-13). Appropriate Spine Care: The Barrier of Prior Authorization. [Presentation]. Castellvi Spine Symposium, Duck Key, FL.

Tresser, S.J. (2023, May 10-13). The Role and Treatment of Multifidus Muscle Dysfunction in Chronic Low Back Pain. [Presentation]. Castellvi Spine Symposium, Duck Key, FL.

Weinstein, M.A. (2023, May 10-13). Scoliosis – CON: Fix Symptomatic Levels. [Presentation]. Castellvi Spine Symposium, Duck Key, FL.

Weinstein, M.A. (2023, May 10-13). Scoliosis – CON: ALIF. [Presentation]. Castellvi Spine Symposium, Duck Key, FL.

Small, J. (2023, February 2-4). Treatment of Adult Spinal Deformity: Lumbar Degenerative Scoliosis in Patient with Significant Comorbidities; Operative vs. Neuromodulation. [Presentation]. Selby Spine Conference, Park City, UT.

Small, J. (2023, February 2-4). Moving to Greener Pastures: How/When to Transition. [Presentation]. Selby Spine Conference, Park City, UT.

Small, J. (2023, February 2-4). Posterior Fusion Is Adequate - Interbody Fusion Is Not Justified by the Cost. [Presentation]. Selby Spine Conference, Park City, UT.

Weinstein, M.A. (2023, February 2-4). TLIF is the Appropriate Balance of Invasiveness - Cost and Outcomes. [Presentation]. Selby Spine Conference, Park City, UT.

Small, J. (2023, February 2-4). ASCs Are Safe and Effective for Lumbar Spine Fusion Procedures. [Presentation]. Selby Spine Conference, Park City, UT.

Weinstein, A.M. (2023, February 2-4). Endoscopic Spine Surgery for Lumbar Stenosis. [Presentation]. Selby Spine Conference, Park City, UT.

Weinstein, M.A. (2023, February 2-4). Cervical Laminoplasty. [Presentation]. Selby Spine Conference, Park City, UT.

Weinstein, M.A. (2023, February 2-4). The headache and consequences of prior authorization. [Presentation]. Selby Spine Conference, Park City, UT.

Small, J. (2023, November 24-25). Keynote address: Lessons learned in 25 years of deformity correction surgery. [Presentation]. Himalayan spine symposium, Kathmandu, Nepal.

Small, J. (2023, November 24-25). Cervicothoracic deformity correction. [Presentation]. Himalayan spine symposium, Kathmandu, Nepal.

Small, J. (2023, November 24-25). Hip/spine syndrome. [Presentation]. Himalayan spine symposium, Kathmandu, Nepal.

Hand & Wrist

Kelsheimer, A., Gill, M., Coutelle, N., Nydick, J., & Simon, P. (2023, June) Prospective, Observational Clinical Investigation of the Exos® Reformable Brace for Conservatively Managed Distal Radius Fractures: An Evaluation of Time to Union, Satisfaction, and Convenience. [Poster Presentation]. Orthopaedic Research Day.

Dent, C., Coutelle, N., Herekar, R., Nguyen, T., Nydick, J., Doarn, M., Hess, A., Stone, J., Garcia, M., & Simon, P. (2023, June 23). Clinical Effectiveness of Splinting After Collagenase Clostridium Histolyticum Injection for Dupuytren Contracture. [Poster Presentation]. Foundation for Orthopaedic Research and Education Orthopaedic Research Day: Graduating Residents and Fellows, Tampa, FL.

Dent, C., Coutelle, N., Herekar, R., Beaumont, C., Doarn, M., Garcia, M., & Simon, P. (2023, June 23). Prospective Patient Perceptions of Electromyography/Nerve Conduction Studies. [Poster Presentation]. Foundation for Orthopaedic Research and Education Orthopaedic Research Day: Graduating Residents and Fellows, Tampa, FL.

Dent, C., Coutelle, N., Moore, A., Nester, M., Nydick, J., & Simon, P. (2023, June 23). Short Term Outcomes of Collagenase Treatment for Dupuytren Contracture of Proximal Interphalangeal Joint. [Poster Presentation]. Foundation for Orthopaedic Research and Education Orthopaedic Research Day: Graduating Residents and Fellows, Tampa, FL.

Collins, D. (2023, November 10-11). Perilunate Injuries: Setting the Bar High. [Presentation]. 9th Annual Frontiers in upper extremity surgery, Tampa, FL.

Nydick, J. (2023, November 10-11). Total Wrist Arthroplasty. [Presentation]. 9th Annual Frontiers in upper extremity surgery, Tampa, FL.

Garcia, M. (2023, November 10-11). Thumb CMC Arthroplasty. [Presentation]. 9th Annual Frontiers in upper extremity surgery, Tampa, FL.

Hess, A. (2023, November 10-11). Hand Plating. [Presentation]. 9th Annual Frontiers in upper extremity surgery, Tampa, FL.

Hess, A. (2023, November 10-11). Hand Fixation. [Presentation]. 9th Annual Frontiers in upper extremity surgery, Tampa, FL.

Garcia, M. (2023, November 10-11). Nerve Injury. [Presentation]. 9th Annual Frontiers in upper extremity surgery, Tampa, FL.

Hess, A. (2023, November 10-11). Total Wrist. [Presentation]. 9th Annual Frontiers in upper extremity surgery, Tampa, FL.

Collins, D. (2023, November 10-11). DRUJ Arthroplasty. [Presentation]. 9th Annual Frontiers in upper extremity surgery, Tampa, FL.

Hess, A. (2023, November 10-11). Wrist Arthritis. [Presentation]. 9th Annual Frontiers in upper extremity surgery, Tampa, FL.

Collins, D. (2023, November 10-11). Scaphoid Fractures. [Presentation]. 9th Annual Frontiers in upper extremity surgery, Tampa, FL.

Kelsheimer, A. (2023, November 10-11). Pediatric Injuries. [Presentation]. 9th Annual Frontiers in upper extremity surgery, Tampa, FL.

Sports Medicine

Nayfeh, L., Gavulova, V., Kumar, N., Simon, P., Baker, C.E. (2023, June). Efficacy of a High-intensity Home Stretching (HIS) Device in Nonoperative Management of Adhesive Capsulitis (AC) – Preliminary Findings of a Prospective, Randomized Study. [Poster Presentation]. Orthopaedic Research Day.

Martin, S.D., Dean, M.C., Cherian, N.J., Eberlin, C.T., Kucharik, M.P., Abraham, P.F., Nazal, M.R., & Conaway, W.K. Physical Therapy Versus Watchful Waiting for Treatment of Adhesive Casulitis of the Shoulder. [Poster Presentation] Orthopaedic Research Day.

Diaz, M.A., Branch, E.A., Dunn, J., Brothers, A., & Jordan, S. (2023, February). Usability and Performance Evaluation of a Novel Surgical Suture Needle in a Cadaveric Tendon Model. [Poster Presentation No.1808]. ORS Annual Meeting, Dallas, TX.

Diaz, M.A., Branch, E.A., Dunn, J., Brothers, A., & Jordan, S. (2023, February). Biomechanical Properties of Various Surgical Suture Needles in a Cadaveric Quadriceps Tendon Model. [Poster Presentation No 1809]. ORS Annual Meeting, Dallas, TX.



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Tampa General Hospital
1 Tampa General Circle
Tampa, FL 33606 • (800) 822-3627
tgh.org

USF Health
Morsani College of Medicine

USF Health
12901 Bruce B. Downs Blvd.
Tampa, FL 33612 • (813) 974-2201
health.usf.edu