

2023 Canadian Shoulder and Elbow Society's Resident Course

February 2nd to 4th 2023

University of Montreal



Sim Center Mcgill

Steinberg Centre for Simulation and Interactive Learning 3575 Parc Ave, Suite 5640, Montreal, Qc H2X 3P9 Hôtel Delta 475 Av. du Président-Kennedy, Montréal, QC H3A 1J7





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COURSE EVALUATIONS

We ask that all participants complete the course evaluation forms which are located at the following link: https://www.surveymonkey.com/r/798K32F



ACCREDITATION

The Department of Continuing Professional Development of the Faculty of Medicine of the University of Montreal is fully accredited by the Association of Faculties of Medicine of Canada (AFMC) and by the Collège des médecins du Québec (CMQ). Declaration of continuing education to the Collège des médecins du Québec: Physicians who participate in this activity can declare **22.75** hours of professional development recognized in category A, under the tab "Activity recognized by an approved Quebec organization in continuing education".

Declaration of continuing education at the Collège des médecins du Québec: Physicians who participate in this activity can declare 8 hour(s) of participation in a practice evaluation activity recognized in category B, under the "Recognized activity by an accredited Quebec organization in continuing education". This event is an Accredited Group Learning Activity (section 1) as defined by the Maintenance of Certification Program of the Royal College of Physicians and Surgeons of Canada, and approved by the DPC Department of the Faculty of Medicine of the University of Montreal for a maximum of 22.75 hour(s).

This activity is an Accredited Simulation Activity (Section 3) as defined by the Maintenance of Certification Program of the Royal College of Physicians and Surgeons of Canada and approved by the DPC Department of the Faculty of Medicine of the University of Montreal. Consult MAINPORT to register your activities and learning outcomes. You can declare a maximum of 8 hour(s).

For any other participating professional, this program gives a certificate of participation for a maximum of **30.75** hour(s).

Participants must ask their respective professional order for a number of hours consistent with their participation.





February 2nd 2023

| 07:10-08:10 | Registration & Networking Breakfast At Sim Center |
|-------------|---|
| 08:15-08:20 | Welcome and Introductions- Presented by Dr. E. Sandman & |
| | Dr. D. Rouleau |
| 08:20-09:20 | Elbow Trauma – Moderated by Dr. D. Rouleau |
| 08:20-08:40 | Update on Radial Head Fractures-Presented by Dr. G. King |
| | Describe current concepts involving radial head fractures; Demonstrate a |
| | sound and rational approach to non-surgical and surgical decision making |
| | as it relates to radial head fractures; Discuss surgical techniques and |
| | implant options for ORIF and radial head arthroplasty. |
| 08:40-09:00 | Biceps and Triceps Ruptures-Presented by Dr. J. Pollock |
| | Discuss Clinical evaluation and treatment indications. Surgical decision |
| | making, including surgical approach and surgical fixation techniques. |
| 09:00-09:20 | Elbow Arthroscopy-How to start - Presented by Dr. K.A. Hildebrand |
| | Expose surgical techniques and anatomical landmark to perform a safe an |
| | effective elbow arthroscopy. Discuss common portals localization. |
| 09:20-09:45 | BREAK |
| 09:45-12:45 | WET LAB: Elbow Arthroscopy – Arthroplasty (Group 1,2,3) |
| | Moderated by Dr. J. Pollock |
| | 9:45: Residents will practice elbow arthroscopy with faculty |
| | 11:00: Demonstration: Medial and Lateral approaches to the elbow and |
| | radial head arthroplasty - TEA – Dr. J. Pollock |
| | 11:45: Residents will practice elbow approaches |
| | Faculty: Dr. E. Sandman, Dr. P. Tohme, Dr. K. Faber, Dr. M. Hupin |
| | Dr. P-A. Martineau Dr. D. Blanchette, Dr A. Badre & Dr. K.A. Hildebrand |
| | Identify and mark key bony landmarks including portal sites around the |
| | elbow: Carry out a diagnostic arthroscopy and identity key anatomic |
| | structures; Evaluate and practice basic elbow debridement techniques; |
| | Perform tennis elbow release, anterior and posterior capsular release, |
| | osteochondoplasty, radial head excision. Perform lateral EDC releases, |
| | Kocher approach. Perform medial pronator split and FCU approaches. |
| | Identify the location and the anatomy of the LCL and MCL. Introduction to |
| 00 45 42 45 | TEA |
| 09:45-12:45 | Elbow Case Sessions (Groups 4,5,6) |



| | Elbow Fracture Dislocations - Instructors: Dr. D. Nam & Dr. R. Grewal |
|-------------|--|
| | Describe current concepts of elbow fracture dislocation with a focus on |
| | identifying injury patterns, surgical approach and repair techniques; |
| | Demonstrate a sound and rational approach to surgical decision making as |
| | it relates to specific injury patterns; Describe the clinical evidence to |
| | support different repair strategies and possible implications of each. |
| | How to approach the Unstable Elbow – Instructors: Dr. G. King & |
| | Dr. D. Rouleau |
| | Review clinical assessment and examination of these injuries. Apply |
| | treatment decision making with reference to prognostic factors and |
| | biomechanical evidence; Describe the rationale and techniques of soft |
| | tissue/ligament repair. |
| | Distal humeral Fractures – Instructors: Dr. R. Bicknell & Dr. A. Huang |
| | Describe prognostic factors, including fracture characteristics and fracture |
| | patterns; Review the current evidence for operative or non-operative |
| | management of DHFs, demonstrate an approach to treatment decision |
| | making and understand expected outcomes; Describe possible surgical |
| | complications related to ORIF, Hemi arthroplasty and TEA for fractures, |
| | and an approach to their management. |
| 12:45-13:45 | LUNCH – Surgical steps in Terrible triad and fracture dislocation- |
| | Presented by Dr. A. Badre (20 min.) |
| | Describe treatment algorithm and pitfalls in surgical treatment of terrible |
| | triad and fracture dislocation. |
| 13:45-16:45 | WET LAB: Elbow Arthroscopy - Arthroplasty (Groups 4,5,6) |
| | Moderated by Dr. G. King |
| | 13:45: Residents will practice elbow arthroscopy with faculty |
| | 15:00: Demonstration: Medial and Lateral approaches to the elbow and |
| | radial head arthroplasty – TEA – Dr. G. King |
| | 15:45: Residents practice elbow approaches |
| | Faculty: Dr. R. Bicknell, Dr. R. Grewal, Dr. P. Henry, Dr. M. Hupin |
| | & Dr. A. Huang |
| | Identify and mark key bony landmarks including portal sites around the |
| | elbow: Carry out a diagnostic arthroscopy and identify key anatomic |
| | structures; Evaluate and practice basic elbow debridement techniques; |
| | Perform tennis elbow release, anterior and posterior capsular release, |
| | osteochroplasty, radial head excision. Perform lateral EDC release and |
| | Kocher approach. Perform medial pronator split and FCU approaches. |
| | Identify the location and anatomy of the LCL and MCL. Introduction to TEA |
| 13:45-16:45 | |



Elbow Fracture Dislocations - Instructors: Dr. P.Tohme & Dr. J. Pollock

Describe current concepts of elbow fracture dislocation with a focus on
identifying injury patterns, surgical approaches and repair techniques;

Demonstrate a sound and rational approach to surgical decision making as
it relates to specific injury patterns; Describe the clinical evidence to
support different repair strategies and possible implications of each.

How to approach the Unstable Elbow - Instructors: Dr. K. Faber & Dr. K.A. Hildebrand

Review clinical assessment and examination of these injuries. Apply treatment decision making with reference to prognostic factors and biomechanical evidence; Describe the rationale and techniques of soft tissue/ligament repair.

Distal humeral Fractures – Instructors: Dr. P-A Martineau & Dr. A. Badre Describe prognostic factors, including fracture characteristics and fracture patterns; Review the current evidence for operative or non-operative management of DHFs, demonstrate an approach to treatment decision making and understand expected outcomes; Describe possible surgical complications related to ORIF, Hem-arthroplasty and TEA for fractures, and an approach to their management.

| 17:00 | Adjournment |
|-------|---|
| | CSES Research meeting at Delta Hotel Room Vivaldi – Responsible |
| | Dr. P. Henry |

February 3^d 2023

| 07:30-07:55 | Networking |
|-------------|--|
| 08:00-08:05 | Welcome back - Presented by Dr. E. Sandman & Dr. D. Rouleau |
| 8:05-8:20 | Arthroscopic shoulder surgery made easy – Presented by |
| 08:20-09:20 | Shoulder RTC/ Instability – Moderated by Dr. P-A. Martineau |
| 08:20-08:40 | Irreparable RTC Tears – Presented by Dr. P. Henry |
| | Demonstrate a sound and rational approach to surgical decision making as |
| | it relates to cuff pathology; Describe the clinical evidence to support |
| | different repair strategies and possible implications of each; Explain the |
| | limitations of surgical cuff repair and surgical and non-surgical |
| | alternatives to tendon repair. |
| 08:40-09:20 | Shoulder Instability: Work-up, Treatment Algorithms and bone loss |
| | management – Presented by Dr. F. Balg (10 min.) |
| | 10 min: Soft tissue procedure Dr. P-A. Martineau |
| | 10 min: Open Latarjet Dr. D. Rouleau |
| 9:25-9:35 | Period of question to the panel |
| 09:35-09:50 | BREAK |
| | |



| 09:50-12:50 | Shoulder Case Sessions (Group 1,2,3) |
|-------------|--|
| | Rotator Cuff – Instructors: Dr. D. Drosdowech & Dr. A. Bois |
| | Describe current concepts involving basic science and the pathophysiology |
| | of rotator cuff disease with a focus on prognostic factors and repair |
| | strategies; Demonstrate a sound and rational approach to surgical |
| | decision making as it relates to cuff pathology; Describe the clinical |
| | evidence to support different repair strategies and possible implications of |
| | each ; Explain the limitations of surgical cuff repair and surgical and non- |
| | surgical alternatives to tendon repair. |
| | Shoulder Instability – Instructors: Dr. F. Balg & Dr. P. Henry |
| | Apply surgical decision making with reference to decision tools that take |
| | known prognostic factors into account: Describe the rationale and |
| | limitations of soft tissue repair strategies; Describe the rationale and risk |
| | of Latarjet repair and other bony procedures. |
| | Proximal Humeral Fractures – Instructors: Dr. Rouleau & Dr. M. Bouliane |
| | List the common classification systems used for radiologic assessment of |
| | proximal humeral fractures; Describe prognostic factors, including fracture |
| | characteristics and fracture patterns that may predict humeral head |
| | perfusion and subsequent AVN; Explain the current evidence for operative |
| | or non-operative management of PHFs; demonstrate an approach to |
| | surgical decision making and understand expected surgical outcomes; |
| | Describe possible surgical complications related to ORIF and humeral head |
| | replacement for fractures, and an approach to their management. |
| 9:50-12:50 | WET LAB: Cuff/Bankart (Groups 4,5,6) |
| | Moderated by Dr. P. Lapner |
| | Dr. R. Bicknell, Dr. D. Nam, Dr. J. Pollock, Dr. S. Pelet, Dr. V. Godbout, |
| | Dr. D. Blanchette, Dr. P. Chin, Dr. A. Huang |
| | Identify and mark key bony landmarks, including portal sites, around the |
| | shoulder; Carry out a diagnostic arthroscopy and identify key anatomic |
| | structures; Insert bone anchors at appropriate locations for instability and |
| | rotator cuff repair; Evaluate and practice basic suture management |
| | technique required to carry out a shoulder stabilization / Cuff repair; Select |
| | and employ the proper knot tying tech that is appropriate for specific |
| | pathology; Select and use appropriate suture position and repair construct. |
| 12:50-13:45 | LUNCH |
| 13:45-16:45 | WET LAB : Cuff/Bankart (Groups1,2,3) |
| | Moderated by Dr. J. Pollock |
| | Dr.F. Balg, Dr. A. Bois, Dr. P. Chin, Dr. D. Drosdowech, Dr. P Henry, Dr. A. |
| | Huang & Dr. M. Bouliane |
| | Identify and mark key bony landmarks, including portal sites, around the |
| | shoulder; Carry out a diagnostic arthroscopy and identify key anatomic |



| | structures; Insert bone anchors at appropriate locations for instability and |
|-------------|--|
| | rotator cuff repair; Evaluate and practice basic suture management |
| | technique required to carry out a shoulder stabilization / Cuff repair; Select |
| | and employ the proper knot tying tech that is appropriate for specific |
| | pathology; Select and use appropriate suture position and repair construct. |
| 13:45-16:45 | Shoulder Case Sessions (Group 4,5,6) |
| | Rotator Cuff- Instructors: Dr. R. Bicknell & Dr. S. Pelet |
| | Describe current concepts involving basic science and the pathophysiology |
| | of rotator cuff disease with a focus on prognostic factors and repair |
| | strategies; Demonstrate a sound and rational approach to surgical |
| | decision making as it relates to cuff pathology; Describe the clinical |
| | evidence to support different repair strategies and possible implications of |
| | each ; Explain the limitations of surgical cuff repair and surgical and non- |
| | surgical alternatives to tendon repair. |
| | Instability – Instructors: Dr. V. Godbout & Dr D Blanchette |
| | Apply surgical decision making with reference to decision tools that take |
| | known prognostic factors into account: Describe the rationale and |
| | limitations of soft tissue repair strategies; Describe the rationale and risk |
| | of Latarjet repair and other bony procedures. |
| | Proximal Humeral Fractures – Instructors: Dr. D. Rouleau & Dr. D. Nam |
| | List the common classification systems used for radiologic assessment of |
| | proximal humeral fractures; Describe prognostic factors, including fracture |
| | characteristics and fracture patterns that may predict humeral head |
| | perfusion and subsequent AVN; Explain the current evidence for operative |
| | or non-operative management of PHFs; demonstrate an approach to |
| | surgical decision making and to understand expected surgical outcomes; |
| | Describe possible surgical complications related to ORIF and humeral head |
| | replacement for fractures, and an approach to their management. |
| 17:00 | Adjournment |

February 4th 2023

| 07:30-07:55 | Networking |
|-------------|---|
| 8:00-08:05 | Welcome back – Presented by Dr. E. Sandman & Dr. R. Rouleau |
| 8:05-9:45 | Shoulder Arthroplasty- Moderated Dr. D. Rouleau |
| | |
| 8:05-08:25 | TSA- Approach to the B2 glenoid- Presented by Dr. M. Bouliane |
| | Describe an approach to the arthritic glenoid and explain how technique |
| | and approach may alter survivorship; Describe the expected clinical |
| | outcomes, risks and complications with a rational approach to |
| | management. |



| 08:25-08:45 | Reverse Shoulder Arthroplasty: Basics Biomechanics –Presented by Dr. G. Athwal Describe the design rationale for reverse arthroplasty; Describe the current indications and limitations/risks of the implants; Explain the expected clinical outcomes and a rational approach to management. |
|-------------|---|
| 08:45-09:10 | BREAK |
| 09:10-12:10 | WET LAB: Shoulder Arthroplasty (Groups 1,2,3) |
| | Moderated by Dr. A. Bois |
| | Dr. F. Balg, Dr. D. Nam, Dr. S. Hinse & Dr. D. Massie, Dr. P. Lapner, |
| | & Dr. S. Pelet |
| | Perform a deltopectoral approach, describe options for subscapularis |
| | management, and perform a subscapularis release using a particular |
| | technique, perform humeral preparation and implantation of a prosthesis, |
| | to perform glenoid exposure, bony preparation, and implantation of a |
| | glenoid component. |
| 09:10-12:10 | Case Session (Groups 4,5,6) |
| | Primary OA – Instructors: Dr. D. Rouleau & Dr. G. Athwal |
| | Describe design concepts of 3 rd generation implants and their theoretical |
| | benefits; Describe an approach to the arthritic glenoid and explain how |
| | technique and approach may alter survivorship; Describe the expected |
| | clinical outcomes, risks and complications with a rational approach to the |
| | management. |
| | Cuff Tear Arthropathy - Instructors: Dr. P. Chin & Dr. D. Blanchette |
| | Describe the design rationale for reverse arthroplasty; Describe the current |
| | indications and limitations/risks of the implants; Explain the expected |
| | clinical outcomes and a rational approach to management. |
| | Complications in Shoulder Arthroplasty – Instructors: Dr. D. Drosdowech |
| | & Dr. M. Bouliane |
| | Describe the common complications encountered in shoulder arthroplasty; |
| | Describe a rational approach to the management of complications in |
| | shoulder arthroplasty; Explain the expected clinical outcomes of reverse |
| | shoulder arthroplasty and a rational approach to the management of |
| | rotator cuff tear arthropathy. |
| 12:10-13:00 | LUNCH - Blueprint pre-op planning – |
| | Presented by Dr. G. Athwal (20 min.) |
| | |
| 13:00-16:00 | Case Session (Groups 1,2,3) |
| | Primary OA – Instructors: Dr. D. Nam and Dr. D. Massie |
| | Describe design concepts of 3 rd generation implants and their theoretical a |
| | benefits; Describe an approach to the arthritic glenoid and explain how |
| | technique and approach may alter survivorship; Describe the expected |



| | clinical outcomes, risks and complications with a rational approach to |
|-------------|--|
| | management. |
| | Cuff Tear Arthropathy - Instructors: Dr. R. Bicknell & Dr. P. Lapner |
| | Describe the design rationale for reverse arthroplasty; Describe the current |
| | indications and limitations/risks of the implants; Explain the expected |
| | clinical outcomes and a rational approach to management. |
| | Complications in Shoulder Arthroplasty – Instructors: Dr. F. Balg & |
| | Dr. S. Hinse |
| | Describe the common complications encountered in shoulder arthroplasty; |
| | Describe a rational approach to the management of complications in |
| | shoulder arthroplasty; Explain the expected clinical outcomes of reverse |
| | shoulder arthroplasty and a rational approach to the management of |
| | rotator cuff tear arthropathy. |
| 13:00-16:00 | WET LAB : Shoulder Arthroplasty (Groups 4,5,6) |
| | Moderated by: Dr. G.Athwal |
| | Dr. A. Bois, Dr. P. Chin, Dr. D. Drosdowech |
| | Dr. M. Bouliane & Dr. G. Athwal |
| | Demonstration DP approach |
| | Perform a deltopectoral approach; Describe options for subscapularis |
| | management, and perform a subscapularis release using a particular |
| | technique; Perform both humeral preparation and implantation of a |
| | prosthesis, to perform glenoid exposure, bony preparation, and |
| | implantation of a glenoid component. |
| 16:00-17:00 | Evidence base Prevention strategies of post operative shoulder infection |
| | Moderator: Dr. D. Rouleau epidemiology with POSI study |
| | Home skin preparation (Ryan Bicknell) |
| | Preop skin preparation (Peter Lapner) |
| | Antibio prophylaxis choice-timing-recurrence (Martin Bouliane) |
| | Bone cement/calcium sulfate (Frederick Balg) |
| | Timing of surgery in trauma (Diane Nam) |
| | Medical optimisation (Stéphane Pelet) |
| | Vancomycin and other intra wound product (George Athwal) |
| | Tranexamic acid and other factors (Dominique Rouleau) |
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