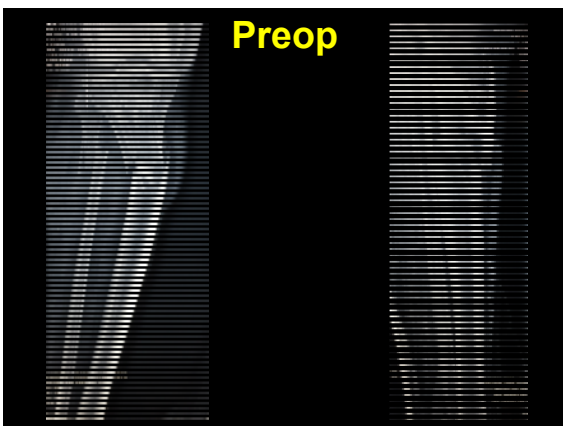
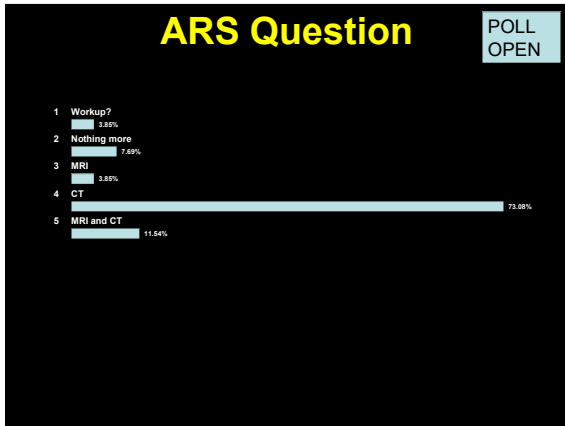
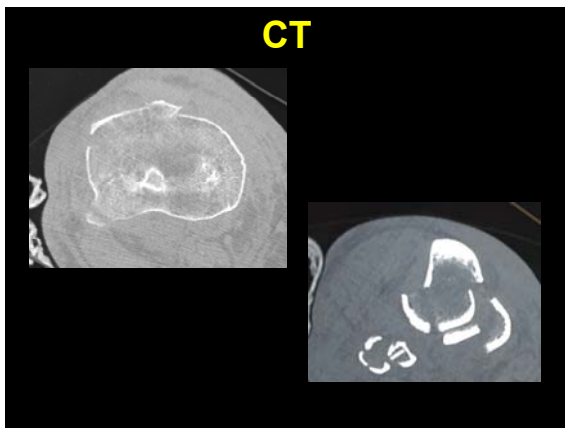


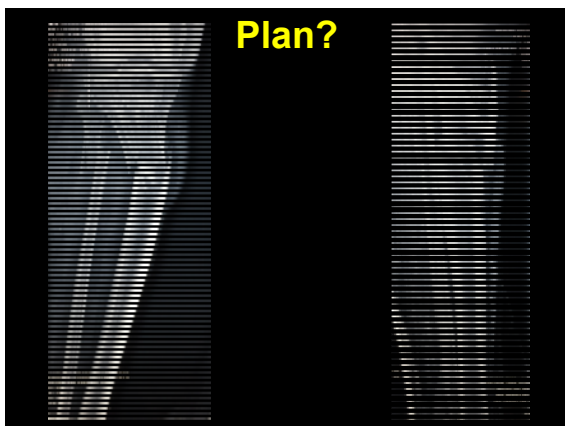
Proximal

- 57 yo man
- Skin swollen around fracture
- Small blisters prox tibia
- Neuro intact
- No signs of CS









POLL OPEN

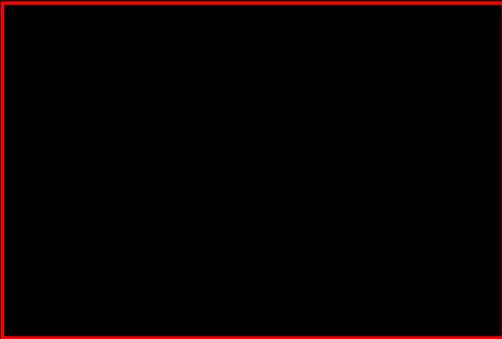
ARS Question-Approach and portal location

- 1 Flexion and superior lateral 19.85%
- 2 Flexion and inferior medial 0%
- 3 Extension and superior lateral 76.19%
- 4 Extension and inferior lateral 4.78%

Ream Through Cannula

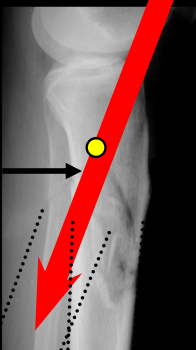


Closure is Standard



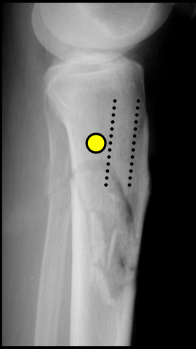
Blocking Screws

- Principle
- Place to prevent nail passage
- Tightens the canal



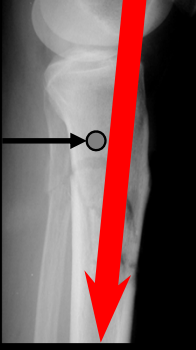
Blocking Screws

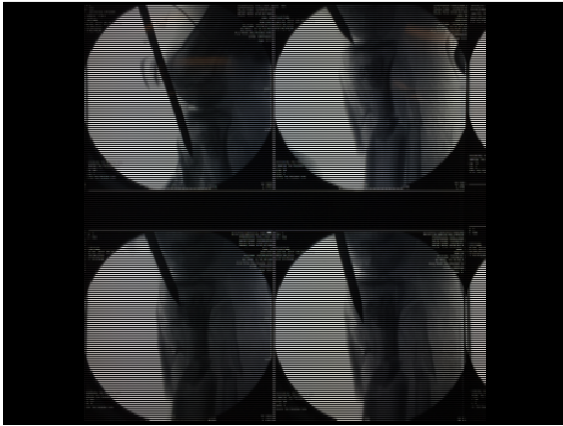
- Principle
- Place to prevent nail passage
- Tightens the canal

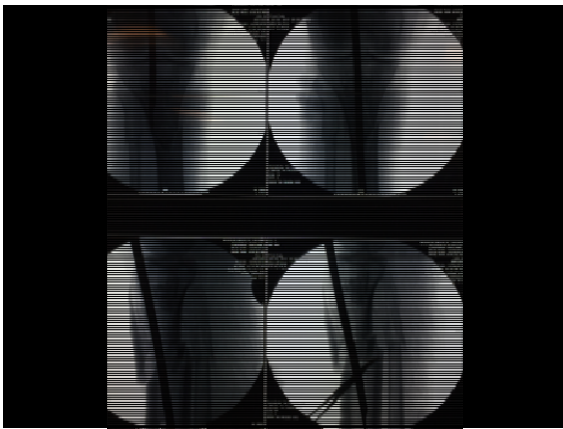


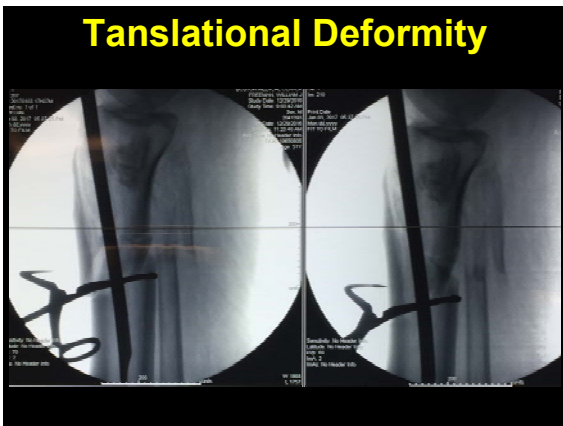
Blocking Screws

- Principle
- Place to prevent nail passage
- Tightens the canal

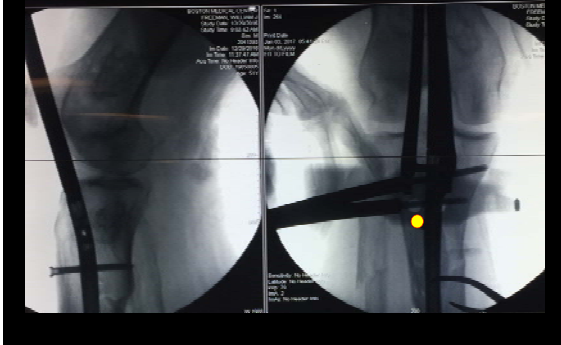








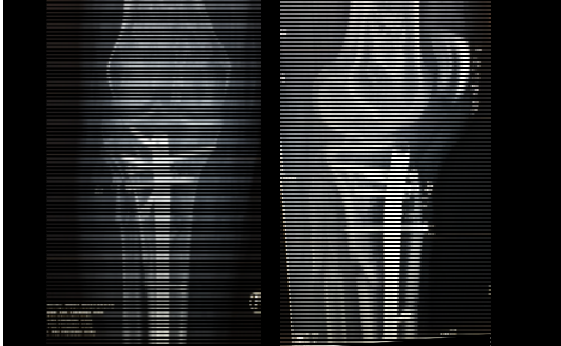
Blocking Screws



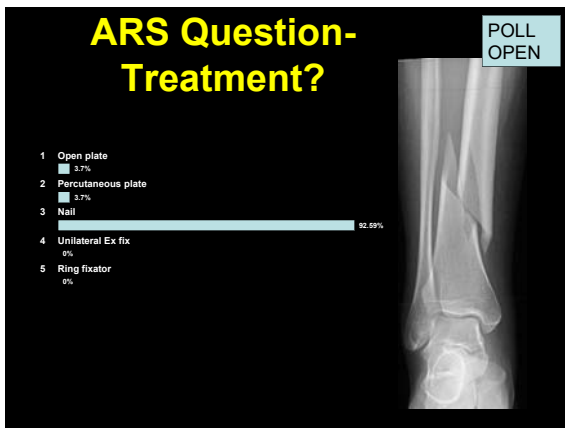
Blocking Screws

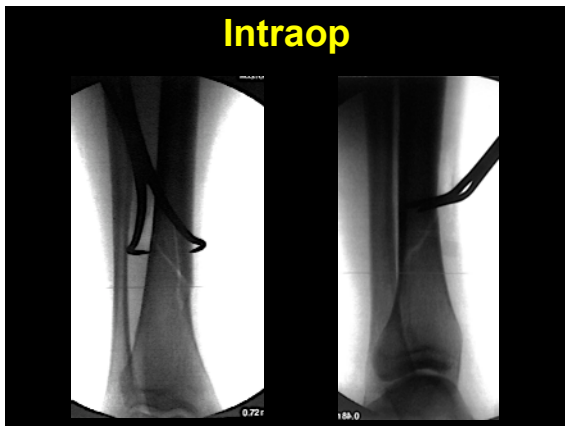


Finals





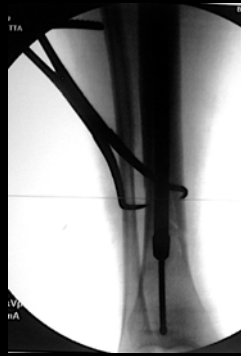




Clamp



Ream or Pass Nail



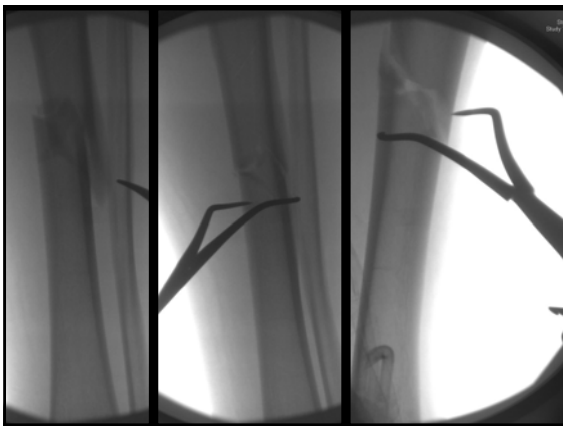
Postops

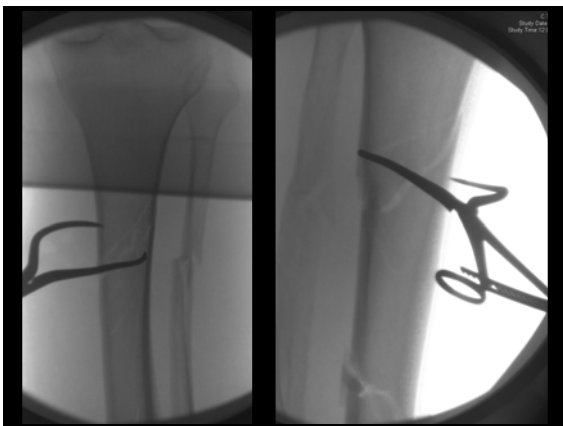


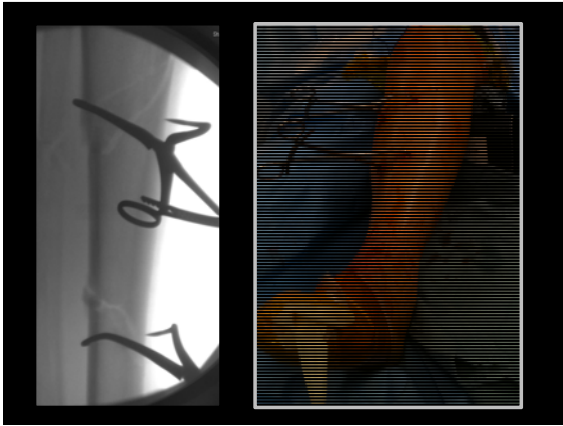
Recent Case



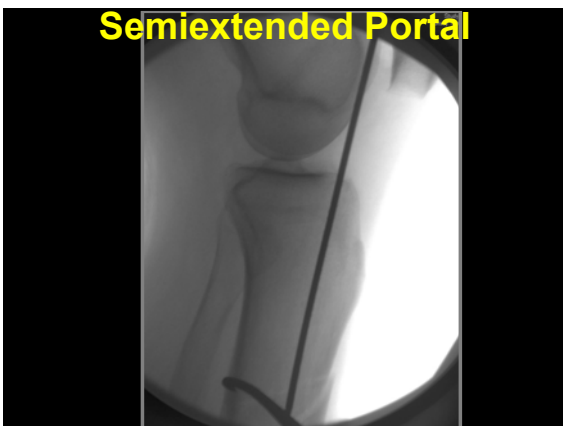
- Semiextended
- Clamps
- Backtapping!

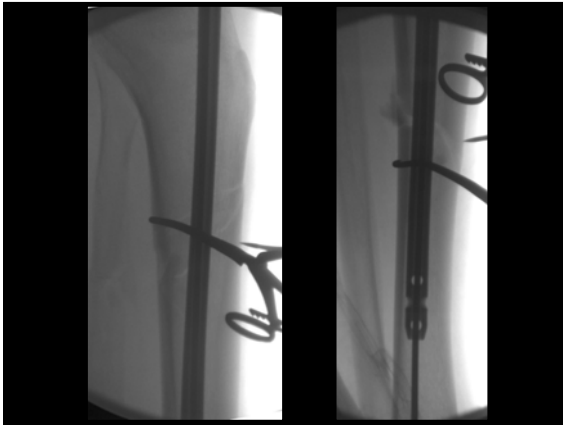


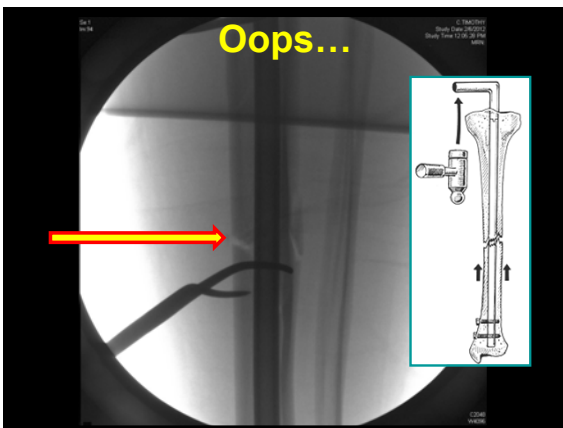












ARS Question-How do you fix the gap?

POLL OPEN

- 1 Back out the nail, reduce and re-nail 0%
- 2 Lock proximally and tap in 0%
- 3 Lock distally and back tap 95%
- 4 Use clamps or external compression 0%

