

## RESULTS OF THE 2016 AAOS ANNUAL MEETING BONE DRILLING QUESTIONNAIRE

90% of surgeons polled admit they plunge past the far cortex.

83% are frustrated with the wire gauge as a measuring device.

67% use fluoroscopy to check the wire gauge measurement.

83% are concerned about the adverse effects of using fluoroscopy.

97% have seen smoking bone as a result of dull drill bits.

93% would like to know the expected pullout strength for screws as they place them.

50% say they usually do not know when to lock a screw versus placing a standard screw (most stated this is because objective data is lacking).

33% of the surgeons who say they usually do not know when to lock a screw, did not provide any reasons to lock a screw.

Of the five indications for locking a screw on the Questionnaire:

1. osteoporotic bone was selected as an indication by 60%
2. metaphyseal location was selected by 30%
3. opposite side comminution was selected by 30%
4. pathological bone was selected by 37%
5. segmental comminution was selected by 37%

10% offered other indications, including:

1. pre-operative planning
2. fracture pattern
3. proximity to the fracture.

20% listed all five (5) of the published recommended indications for locking a plate.

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