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A retrospective analysis of the efficacy of oral venous thromboembolism prophylaxis for patients undergoing minimally invasive direct anterior approach total hip arthroplasty (Geldenhuys DB, Pietrzak JRT, Goga N, Sikhauli N, Cakic JN)

1. What is one of the primary reasons the direct anterior approach (DAA) to total hip arthroplasty (THA) is gaining popularity among arthroplasty surgeons?

a.	Longer postoperative recovery period	A
b.	Utilisation of internervous and intermuscular planes	B
c.	Higher rate of deep-seated wound infections	C
d.	Increased incidence of postoperative dislocations	D
e.	Higher rate of implant failure	E

2. Which factor is *not* associated with an increased risk of venous thromboembolism (VTE) in patients undergoing total hip arthroplasty (THA)?

a.	Age above 70 years	A
b.	Female sex	B
c.	Surgical duration under one hour	C
d.	Body mass index (BMI) ≥ 30 kg/m²	D
e.	History of previous VTE	E

3. What is the reported incidence of venous thromboembolism (VTE) in patients undergoing total hip arthroplasty (THA) without thromboprophylaxis?

a.	0.6–1.5%	A
b.	9.9%	B
c.	Over 50%	C
d.	13.2%	D
e.	25%	E

4. According to the study, what is the primary benefit of extending rivaroxaban prophylaxis from two weeks to four weeks in patients undergoing minimally invasive direct anterior approach THA?

a.	Reduction in wound complications	A
b.	Reduction in the incidence of VTE	B
c.	Reduction in the need for blood transfusion	C
d.	Increased cost-effectiveness compared to aspirin	D
e.	Lower overall hospital length of stay	E

Outcomes of Lenke V adolescent idiopathic scoliosis treated by anterior correction and fusion (Marie-Hardy L, Arnolds D, van der Merwe A, Dunn R)

5. Comparing anterior and posterior scoliosis surgery, which is *true*?

a.	Anterior allows shorter fusion length	A
b.	Anterior necessitates longer fusions	B
c.	Anterior causes long-term diaphragmatic changes	C
d.	Anterior requires more instrumentation	D
e.	Anterior requires postoperative ventilation	E

6. The apical vertebra deviation ratio (AVDR):

a.	Is reduced by anterior surgery	A
b.	Correlates with pulmonary function	B
c.	Is calculated on CT	C
d.	Does not change with anterior surgery	D
e.	Is normal in preoperative scoliosis patients	E

7. Anterior surgery for Lenke type V thoracolumbar scoliosis allows coronal curve correction of around:

a.	20%	A
b.	30%	B
c.	50%	C
d.	70%	D
e.	100%	E

Comparison of visual estimations of distal radius fracture radiographic parameters between different levels of orthopaedic doctors (Naidoo V, Milner B, du Plessis J)

8. Which of the following set of distal radius fracture radiographic parameters are within acceptable ranges as per the AO Foundation?

a.	Radial height: 9 mm, radial inclination: 19°, volar tilt: 10°	A
b.	Radial height: 10 mm, radial inclination: 25°, volar tilt: 9°	B
c.	Radial height: 9 mm, radial inclination: 15°, volar tilt: 10°	C
d.	Radial height: 10 mm, radial inclination: 25°, volar tilt: 10°	D
e.	Radial height: 5 mm, radial inclination: 15°, volar tilt: 15°	E

9. Which set of measurement methods are equally accurate for measurement of distal radius fracture parameters?

a.	Visual estimations and goniometers	A
b.	Goniometers and digital measurements	B
c.	Digital measurements and visual estimations	C
d.	Visual estimations and artificial intelligence	D
e.	Artificial intelligence and goniometers	E

10. What is the main aspect that is lacking within South African public facilities with regard to management of distal radius fractures?

a.	Lack of consultant orthopaedic surgeon oversight	A
b.	Lack of access to goniometers	B
c.	Lack of digital measurement facilities	C
d.	Lack of plaster material	D
e.	Lack of routine usage of goniometers	E

Does fixator-assisted tibial nailing outperform conventional tibial nailing? A multicentre comparative study (Kaplan S, Burger MC, Hugo D, Brown C, Alexander M, Kotze JD, Muller F, Ferreira N)

11. During which decade did Küntscher describe the inferior approach used for tibial nailing?

a.	1930s	A
b.	1940s	B
c.	1970s	C
d.	1990s	D
e.	2000s	E

12. Who first described the suprapatellar approach used for tibial nailing?	
a. Kaplan, et al.	A
b. Tornetta, et al.	B
c. Cole, et al.	C
d. Mehta, et al.	D
e. Küntscher	E
13. In this study, based on fracture location, where was there a statistically significant increased operative time?	
a. Proximal third	A
b. Distal third	B
c. Middle third	C
d. Segmental fractures	D
e. All of the above	E

Knee arthrodesis using biplanar external fixation and vascularised patella autograft: a novel approach (Leslie KT, Erasmus LJ, van der Merwe JF)

14. According to the referenced literatures, which of the following is *not* an indication for knee arthrodesis?	
a. Persistent periprosthetic joint infection	A
b. Poliomyelitis	B
c. Bone loss	C
d. Osteonecrosis of the femoral condyle	D
e. Tuberculosis arthropathy	E
15. Which of the following scenarios would render the described novel technique *unsuitable* for knee arthrodesis as stated by the authors?	
a. Age ≥ 65 years	A
b. Fixed flexion knee deformity ≥ 10°	B
c. Osteonecrosis of the patella	C
d. Obesity	D
e. Patella rupture from the tibia tuberosity	E
16. The 15-year cumulative incidence of knee arthrodesis following total knee replacement has previously been reported as?	
a. 0.21–0.31%	A
b. 0.1–0.5%	B
c. 1–3%	C
d. 0.18–5%	D
e. None of the above	E
17. Fusion across the patellofemoral and patellotibial bone surfaces was observed to have preceded that across the tibiofemoral bone surface. How long after the arthrodesis was this effect observed?	
a. 14 weeks	A
b. 12 weeks	B
c. 10 weeks	C
d. 6 weeks	D
e. 3 weeks	E

Ultra-low velocity knee dislocation in obese and morbidly obese patients: a current concepts review (Mzamo S, Ryan P, Pillay B)

18. What is a characteristic feature of ultra-low velocity knee dislocation?	
a. It usually occurs during high-impact sports activities	A
b. It happens due to low-energy trauma or minimal force	B
c. It requires significant trauma such as motor vehicle accidents	C
d. It primarily occurs in younger, healthy individuals	D
e. None of the above	E
19. What is a common complication associated with ultra-low velocity knee dislocation in obese patients?	
a. Anterior cruciate ligament (ACL) rupture	A
b. Chronic patellar dislocation	B
c. Vascular or neurological injury	C
d. Medial collateral ligament (MCL) sprain	D
e. None of the above	E
20. What was highlighted as an important factor contributing to the complexity of knee dislocation management in the global consensus study?	
a. Difficulty in reducing the dislocation without surgery	A
b. The high rate of associated limb-threatening injuries	B
c. Limited availability of rehabilitation services	C
d. The requirement for long-term weight-bearing support post-surgery	D
e. None of the above	E