surgeon-teacher (ST, 10 years graduated). The number of supervised operations required until independence was determined. The long-term outcomes of procedures for all three surgeons following S1 and S2 independence were determined as excellent, good, acceptable, or poor, and compared via one-way ANOVA. Minor and major complications were detailed.

RESULTS

S1 gained independent competence after 5 operations and S2 after 4. S1 had excellent outcomes in 20/21 (95%) of subsequent operations, S2 in 12/16 (75%) and ST in 19/23 (83%). There was no significant difference in

long-term outcomes between surgeons ($p = 0.31$). Complication rates were comparable across surgeons (S1 minor 33%, major 0%; S2 minor 40%, major 6%; ST minor 34%, major 9%).

STATEMENT (CONCLUSIONS)

The number of supervised operations required to reach independent competence in LFS is small at around 4 or 5 and the operation can be mastered by relatively newly graduated surgeons. Outcomes following independence were generally excellent, and for one surgeon manifested as a greater percentage of excellent outcomes than the surgeon-teacher.

Locking plate fixation for canine acetabular fractures

Francesco Piana¹, Russell Yeadon²

1 Fitzpatrick Referrals Orthopaedics and Neurology, Easing, Godalming, United Kingdom

2 Lumbry Park Veterinary Specialists, Alton, United Kingdom

OBJECTIVES

To document application of locking plates for stabilisation of acetabular fractures along with complications and clinical outcomes. We hypothesised that complications and clinical outcomes would be comparable to historical reports using non-locking plate and screw constructs.

METHODS

Medical records of dogs presented with acetabular fractures at a single referral centre between 2010 and 2018 were reviewed. Cases surgically managed by open reduction and internal fixation, involving placement of at

least one locking plate and screws were included. Signalment, fracture classification, type of implant used, additional methods of stabilisation, along with complications and neurological deficits, were collected. Long-term follow up was based on LOAD questionnaire.

RESULTS

18 acetabula were repaired in 17 dogs. Locking implants were: VetLOX (4/18), SOP (7/18), and LCP (7/18). Locking plates and screws were used as the sole method of fixation in 10/18 acetabula, and as adjunctive fixation with other implants in 8/18 acetabula. Two minor complications and one catastrophic complication were reported. 16/17 dogs returned to function with radiographic documentation of fracture healing. Complication rate was comparable to historic reports using non-locking implants. Long-term outcomes assessed by LOAD questionnaire were positive in most cases.

STATEMENT (CONCLUSIONS)

Locking plates are a viable means of stabilising acetabular fractures in dogs and can provide positive clinical outcomes. Surprisingly, problems including inaccurate fracture reduction and implant loosening were not fully avoided by use of locking implants but incidence was low.

Pancarpal arthrodesis and antebrachial deformity correction using 3D printed osteotomy and reduction guides and a customized titanium plate in a toy breed dog

Alba Rial García, Patrick Ridge

Ridge Referrals, Dawlish, United Kingdom

OBJECTIVES

To report the case of a toy breed dog affected by antebrachial deformity and subluxation of the carpus due to a severe osteoarthritis.

METHODS

A 9 year-old, 5kg, female Pekingese presented with subluxation of left carpus. Helical CT scan (16 slice) revealed advanced osteoarthritis in both carpi and elbows, and bilateral antebrachial deformity. Arthrocentesis of the left carpus was performed, yielding a mononuclear arthropathy.