

Accurately positioned radiographs are not necessary for THR implant templating.

Select one:

True

False

Feedback

Accurately positioned radiographs are essential for THR implant templating. Poorly positioned radiographs will provide inaccurate understanding of actual bone size potentially leading to significant operative and postoperative complications.

The correct answer is 'False'.

Question **2**

Correct

Marked out of 1

Flag question

Question text

The standard radiographic views required for THR implant templating are?

Select one:

- a. Standard OFA VD and lateral views of the pelvis including the femurs
- b. Standard frog-leg and lateral views of the pelvis including the femurs
- c. Standard VD and lateral views of pelvis, craniocaudal view of femur and open-leg mediolateral view of femur
- d. Standard DAR view of pelvis, open-leg mediolateral view of femur and caudocranial view of femur

Feedback

The standard radiographic views for THR implant templating are:



A square ventrodorsal view of the pelvis to assess the acetabulum. A lateral view of the pelvis to assess the axis and inclination of the pelvis. An open-leg mediolateral view of the femur and a craniocaudal view of the femur to obtain an accurate representation of the femur.

The correct answer is: Standard VD and lateral views of pelvis, craniocaudal view of femur and open-leg mediolateral view of femur

Question **3**

Correct

Marked out of 1

Flag question

Question text

Where should the [X-ray Magnification Indicator](#) be placed during THR radiographs?

Select one:

- a. Directly on the radiograph table
- b. Parallel and at the same level as the patient's stifle joint
- c. Parallel and at the same height as the patient's ilial wing
- d. Parallel and at the same level as the specific region of interest being radiographed

Feedback

The Magnification Indicator must be positioned at the same level as the region of interest (greater trochanter to represent the level of the acetabulum and at the proximal femur) and must be positioned parallel to the radiograph cassette



The correct answer is: Parallel and at the same level as the specific region of interest being radiographed

Question 4

Correct

Marked out of 1

Flag question

Question text

Careful review of the preoperative radiographs can help to identify operative surgical challenges associated with the degenerative remodeling changes present.

Select one:

True

False

Feedback

In depth assessment of the preoperative radiographs prepares the surgeon for what surgical difficulties may be encountered during the procedure. These include altered anatomical landmarks and bony anatomy, potential difficulty with [broaching](#) or reaming due to bone sclerosis, and difficulty [broaching](#) due to medialization of the greater trochanter. Recognizing these challenges and coming up with a strategy to resolve them prior to the procedure may help lessen the overall complication rate of the procedure.

The correct answer is 'True'.

Question **5**

Correct

Marked out of 1

Flag question

Question text

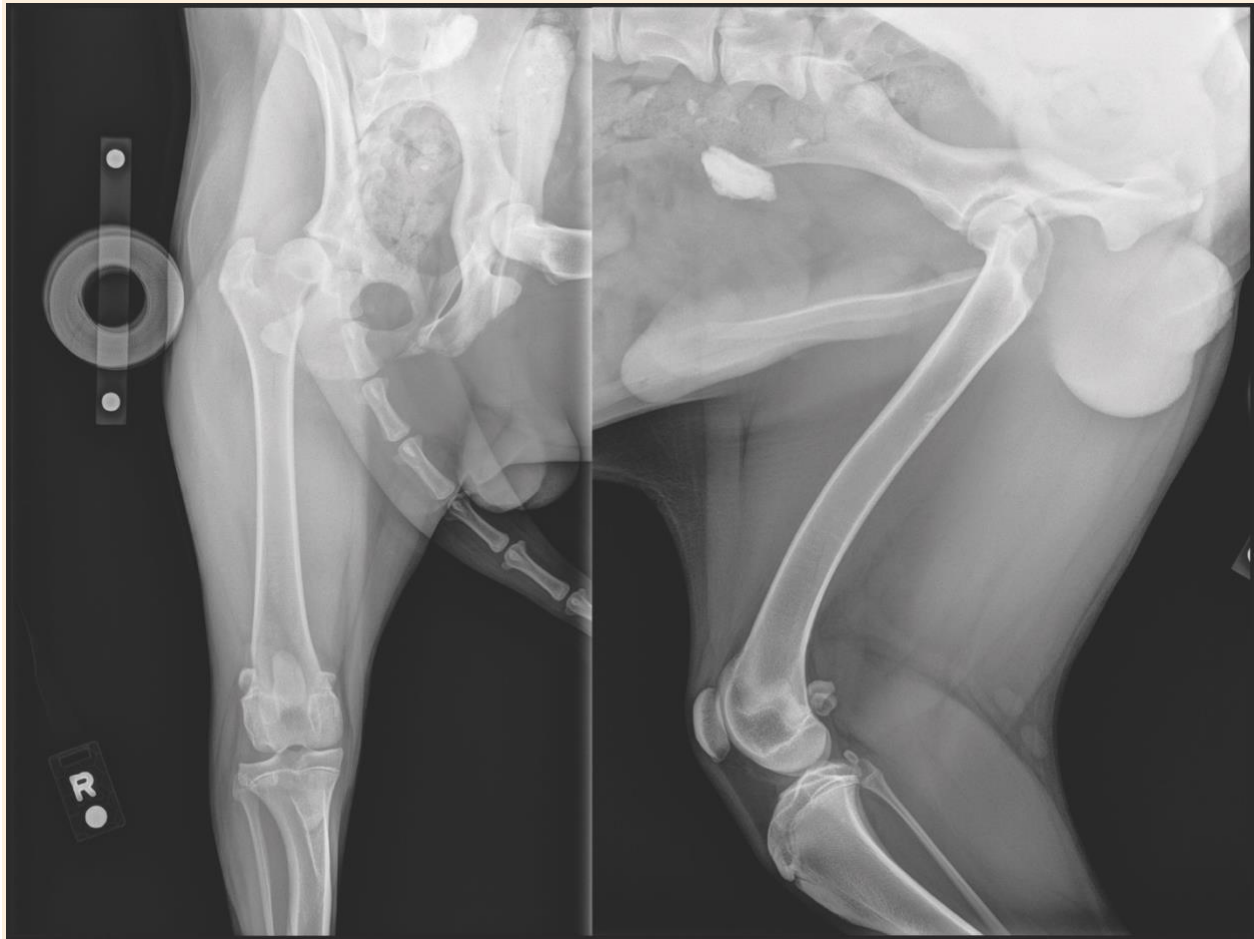
Femoral implant sizing is best performed on what radiographic view(s)?

Select one:

- a. A standard OFA extended VD view of the pelvis
- b. The craniocaudal and open-leg mediolateral views of the femur
- c. A craniocaudal oblique view of the femur
- d. A frog-leg view of the pelvis and femur

Feedback

Templating for implant sizing for the femur is best performed on the craniocaudal and open-leg mediolateral views as they provide the best true length and representation of the proximal femur where the implant will be placed.



The correct answer is: The craniocaudal and open-leg mediolateral views of the femur

Question 6

Correct

Marked out of 1

Flag question

Question text

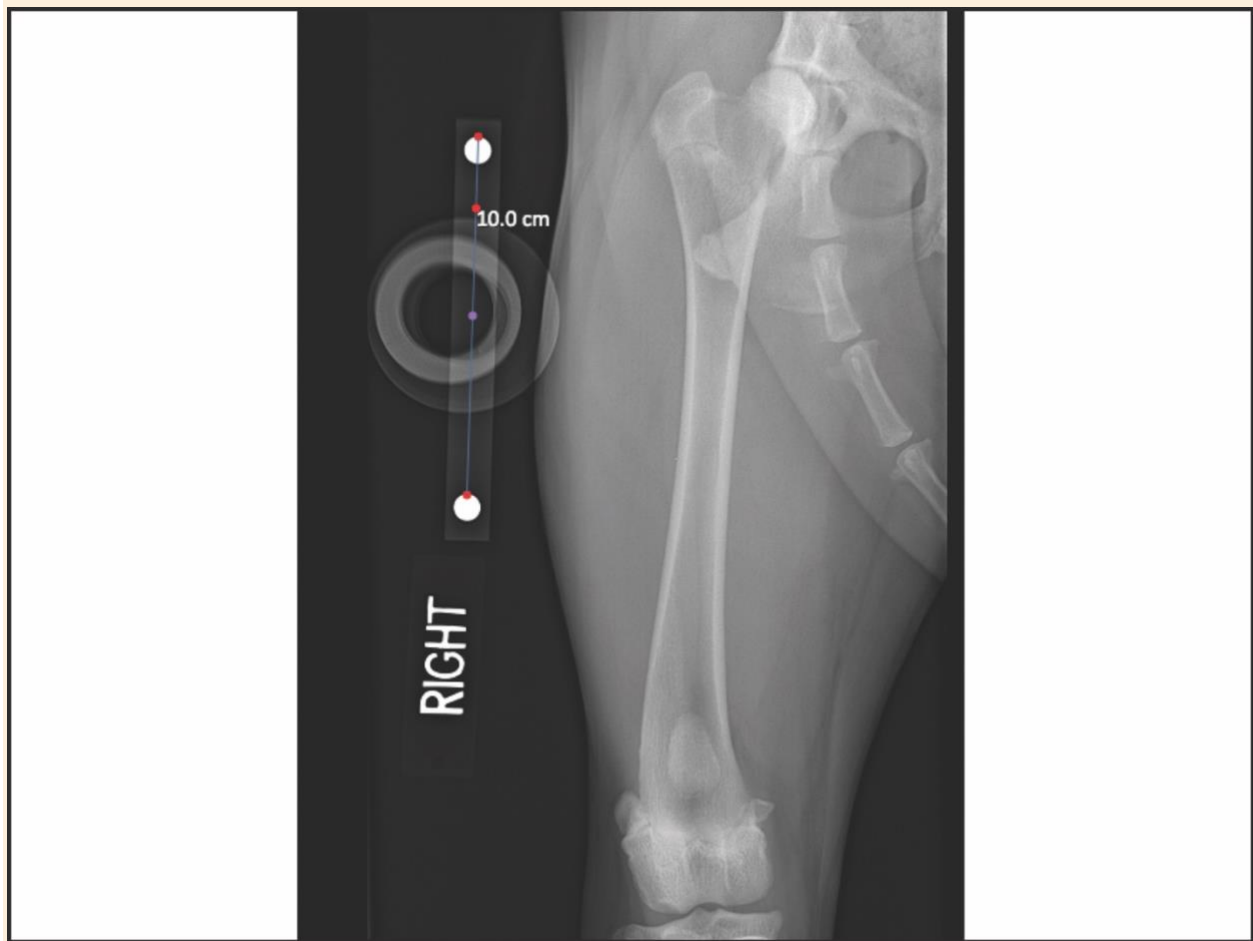
How is the 10 cm distance measured on the [X-Ray magnification Indicator](#)?

Select one:

- a. From one end of the acrylic bar to the opposite end
- b. From the top of one metallic bead to the bottom of the opposite metallic bead
- c. From the top of one metallic bead to the top of the opposite metallic bead
- d. From the bottom of one metallic bead to the top of the opposite metallic bead

Feedback

The 10 cm distance is measured from the center of one metal ball to the center of the opposite metal ball. However, because the center is more difficult to determine, measurements are taken off the radiograph from the top of one metal ball to the top of the opposite metal ball.



The correct answer is: From the top of one metallic bead to the top of the opposite metallic bead

Question 7

Correct

Marked out of 1

Flag question

Question text

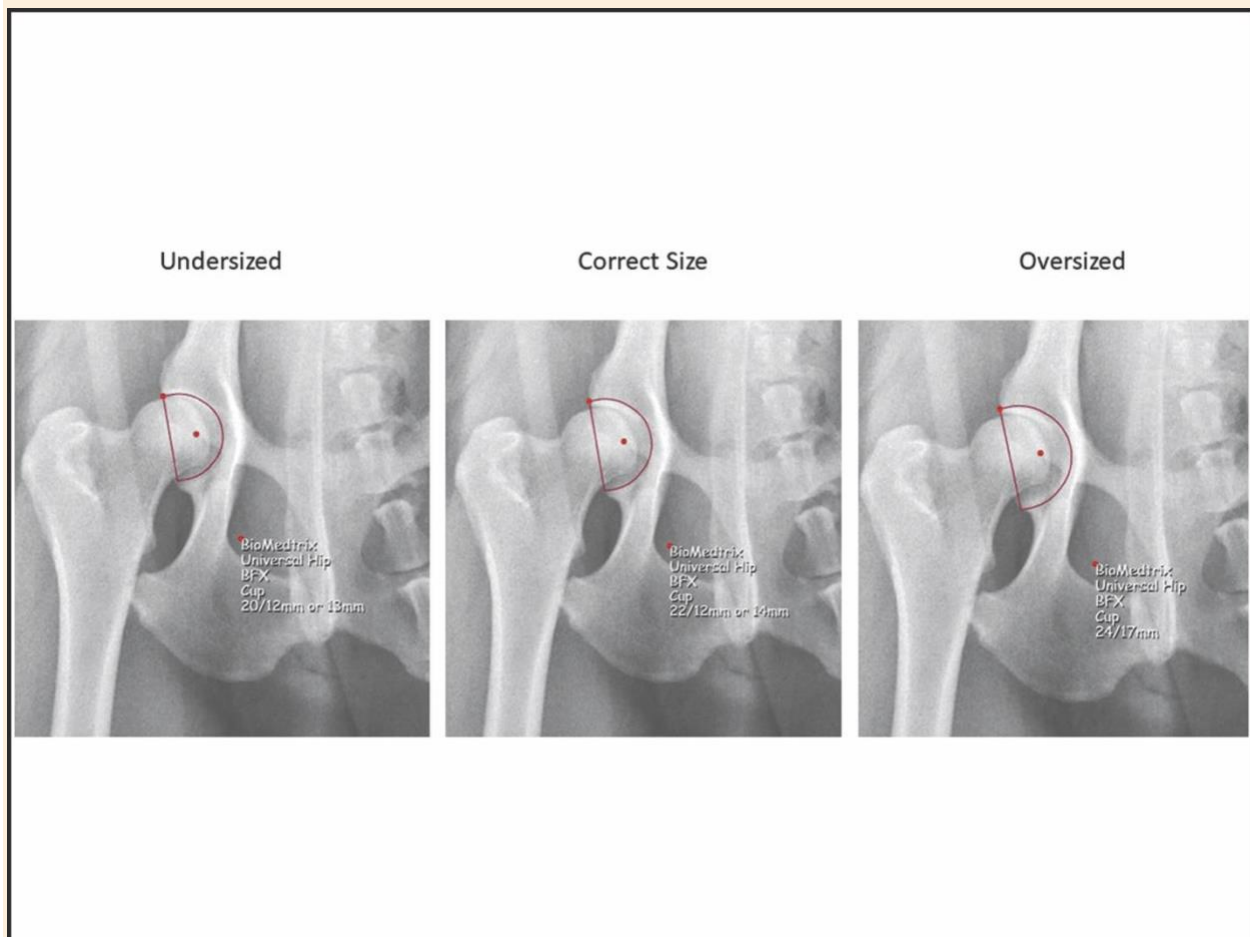
During acetabular templating, the appropriate size BFX cup is determined when?

Select one:

- The template image fits within the cranial to caudal width of the patient's acetabulum with perceived removal of the subchondral bone plate.
- The medial pole of the largest possible implant will contact the medial acetabular wall on full depth insertion.
- The template image is 4-5 mm beyond the cranial and caudal bone pillars of the patient acetabulum and the medial pole of the implant contacts the medial acetabular wall
- The template image shows complete coverage of the implant dorsolaterally by the dorsal acetabular rim

Feedback

With removal of the subchondral bone, an appropriate sized BFX acetabular component will fit within the cranial and caudal bone pillars of the acetabulum



It is important to preserve these bone pillars to allow [press-fit](#) to occur. Placing the largest possible implant often removes excessive bone, especially of the caudal pole, risking the loss of optimal [press-fit](#). The medial pole of an appropriate sized implant will likely come to the medial wall of the acetabular bed, but this is not a requirement provided that the cranial and caudal edges of the cup are at least level with the cranial and caudal acetabular bone pillars on full cup insertion.

The correct answer is: The template image fits within the cranial to caudal width of the patient's acetabulum with perceived removal of the subchondral bone plate.

Question 8

Incorrect

Marked out of 1

Flag question

Question text

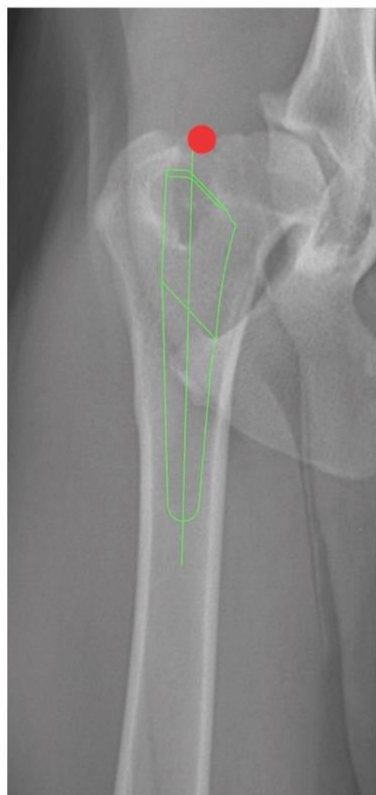
During femoral templating, the appropriate size BFX femoral stem is determined when?

Select one:

- a. The template image completely fills the endosteal width of the femur at the tip of the implant
- b. The template image nearly completely fills the endosteal width of the femur at the tip of the implant
- c. The template image fits within the endosteal width of the femoral canal leaving a few millimeters of space between the outer edges of the template and the inner edges of the cortical bone at the region denoting the junction of the porous and smooth portions of the stem template
- d. The template image completely fills the endosteal width of the femur at the level of the lesser trochanter

Feedback

Using the craniocaudal view of the femur, the appropriately sized BFX femoral component, when positioned at the correct level of insertion will appear to nearly fill the available endosteal width of the femur at the porous-smooth junction, leaving 1-2 mm of space medially and laterally between the outside edges of the template and the inside edges of the cortical bone.



Undersized



Oversized



Good Fit & Fill

Completely filling the available endosteal width is overfilling the femoral canal and increases the risk of creating femoral fissures and fractures.

The correct answer is: The template image fits within the endosteal width of the femoral canal leaving a few millimeters of space between the outer edges of the template and the inner edges of the cortical bone at the region denoting the junction of the porous and smooth portions of the stem template

Question **9**

Correct

Marked out of 1

Flag question

Question text

A correctly sized CFX acetabular component will generally be 1-2 sizes smaller than the appropriately sized BFX cup and must allow for complete dorsal coverage of the acetabular component by the dorsal acetabular rim.

Select one:

True

False

Feedback

If a decision is made to place a CFX cup, the acetabular bed would be prepared first as if the appropriate sized BFX cup was to be placed and then downsizing the CFX cup size by 1-2 sizes to allow for 1-2 mm of cement mantle between the cup and the bone.

The correct answer is 'True'.

Question **10**

Incorrect

Marked out of 1

Flag question

Question text

When templating for a CFX stem, the correctly sized CFX femoral component will generally be 2 sizes smaller than the appropriate sized BFX femoral component, allowing for a maximum cement mantle of 2 mm.

Select one:

True

False

Feedback

A cement mantle of 2-4 mm is recommended around a CFX femoral stem. If a decision is made to switch from a BFX stem to a CFX stem, decreasing the size of the stem by 1-2 sizes will typically create the space around the CFX implant to achieve this.



The correct answer is 'False'.