

Regardless of whether one is performing a CFX or a BFX THR, the pelvis of the patient must be properly positioned and securely stabilized prior to the start of the surgical procedure.

Select one:

True

False

Feedback

The pelvis of any THR patient must be accurately and securely stabilized to optimize the placement and positioning of the acetabular component. Knowing and reliably maintaining the position of the pelvis allows the surgeon to reference off specific anatomic landmarks or instruments to ensure the acetabular component is placed in proper inclination, version and closure (AOL) angles.

The correct answer is 'True'.

Question **2**

Correct

Marked out of 1

Flag question

Question text

What does the appropriate patient clip for a THR procedure include?

Select one:

- a. A wide clip removing the hair on the lateral side of the pelvis from ilium to ischium and upper lateral hind limb
- b. A wide clip removing the hair on the lateral side of the pelvis from the ilium to the ischium and around the upper hind limb from the hip joint to the stifle joint
- c. A wide clip removing the hair from cranial to the ilium along the dorsal midline of the spine to the base of the tail and caudal ischium, circumferentially around the limb to below the tarsal joint
- d. A wide clip removing the hair circumferentially around the hind limb from the tarsal joint to above the hip joint

Feedback

A wide clip removing the hair from cranial to the ilium along the dorsal midline of the spine to the base of the tail and caudal ischium, circumferentially around the limb to below the tarsal joint



The correct answer is: A wide clip removing the hair from cranial to the ilium along the dorsal midline of the spine to the base of the tail and caudal ischium, circumferentially around the limb to below the tarsal joint

Question **3**

Correct

Marked out of 1

Flag question

Question text

What is the correct alignment of the pelvis when a patient is properly positioned for a THR procedure?

Select one:

- a. Pelvis is positioned in lateral orientation and is tightly secured using either tape, a positioning board or a vacuum bag
- b. Pelvis is aligned such that the hip joint and hemipelvis are placed in slight ventral lateral rotation to ensure adequate cup closure during implant placement
- c. Pelvis is aligned such that right and left hemipelvis are accurately superimposed upon one another with the iliac crest resting lower than the ischial tuberosity

d. Pelvis is aligned such that right and left ischial tuberosities are superimposed and aligned perpendicular to the floor with the dorsal iliac crest and ischial tuberosity level with each other and parallel to the floor

Feedback

Pelvis is aligned such that right and left ischial tuberosities are superimposed and aligned perpendicular to the floor with the dorsal iliac crest and ischial tuberosity level with each other and parallel to the floor

The correct answer is: Pelvis is aligned such that right and left ischial tuberosities are superimposed and aligned perpendicular to the floor with the dorsal iliac crest and ischial tuberosity level with each other and parallel to the floor

Question 4

Correct

Marked out of 1

Flag question

Question text

The 2 taller dorsal posts of the positioning board are placed at the dorsal aspect of the iliac spine and the ischial tuberosity.

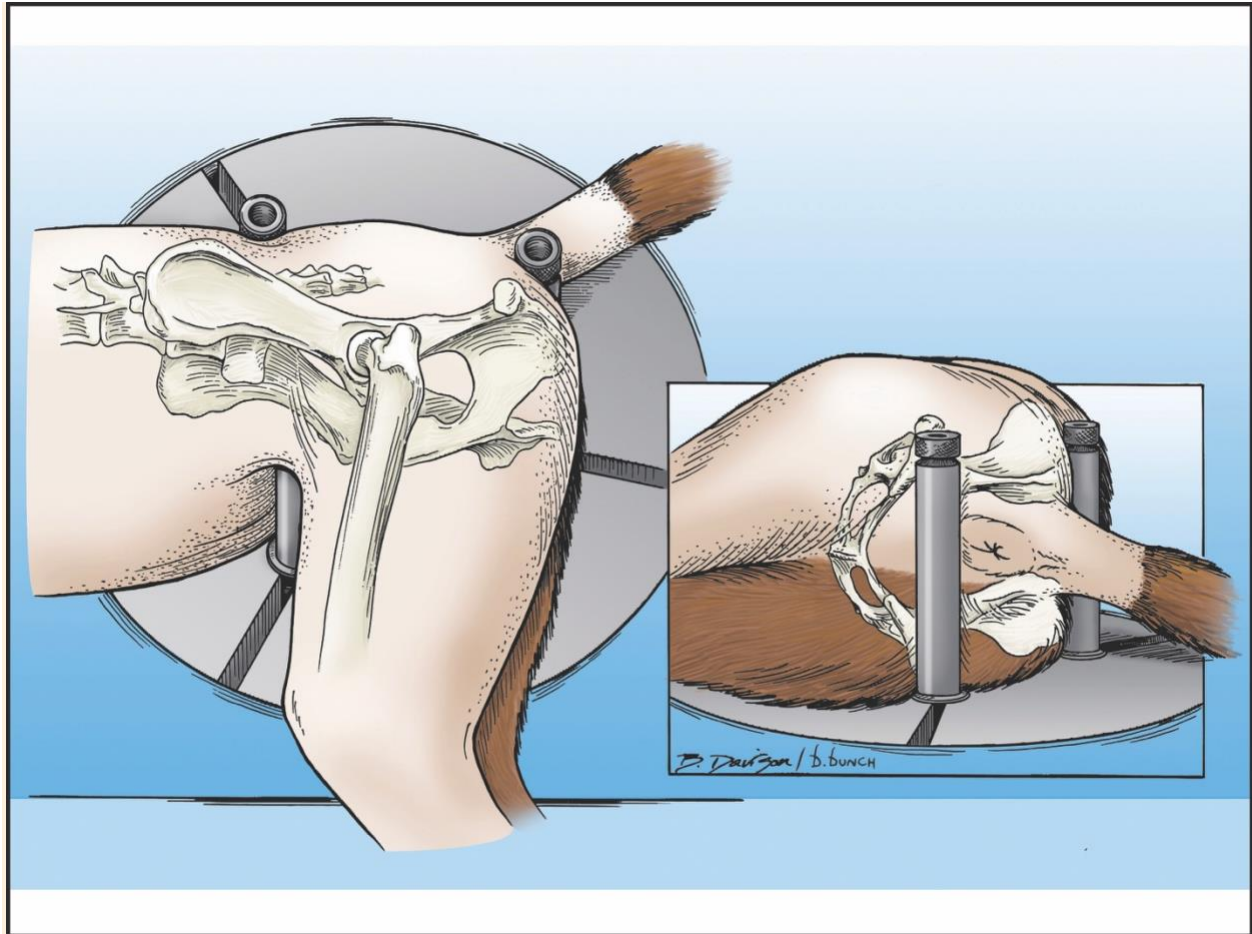
Select one:

True

False

Feedback

The positioning board has 3 posts



The two taller posts are positioned dorsally at the region of the cranial iliac crest and caudally just dorsal to the superimposed ischial tuberosities of the hemipelvis. The shorter ventral post is positioned ventrally along the caudal abdomen adjacent to the pubis.

The correct answer is 'True'.

Question 5

Correct

Marked out of 1

Flag question

Question text

The surgical table needs to be parallel with the operating room floor and fixed in this position prior to patient positioning.

Select one:

True

False

Feedback

Decisions regarding the orientation and alignment of the acetabular component in surgery are based upon the assumption of having a level and stable pelvis. This starts with ensuring the surgical table is also level and stable.

The correct answer is 'True'.

Question **6**

Correct

Marked out of 1

Flag question

Question text

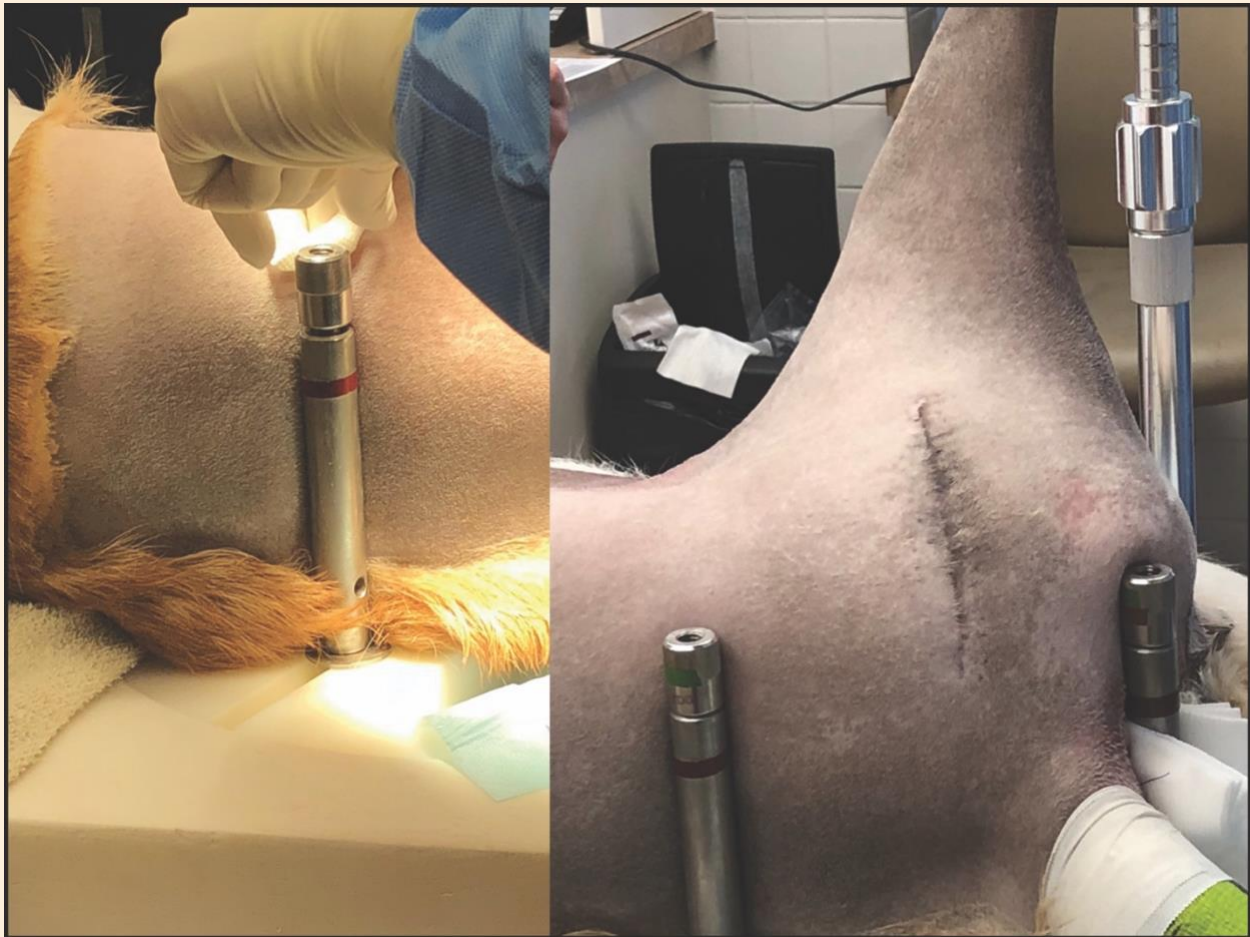
When are the sterilized positioning board extensions placed into the iliac and ischial posts of the positioning board?

Select one:

- a. During patient pelvic alignment and positioning
- b. Following pelvic alignment but prior to surgical scrubbing of the patient
- c. Following patient scrubbing, surgeon gowning and gloving and just prior to patient draping
- d. Following patient scrubbing, surgeon gowning and gloving and after patient draping

Feedback

The sterile extensions that screw into the dorsal positioning board posts are placed just prior to surgical draping by the surgeon who is gowned and gloved ready to start surgery and after the final surgical scrub has been applied to the patient. These extensions are covered by the sterile surgical drapes but are still palpable and used as landmarks during surgery.



The correct answer is: Following patient scrubbing, surgeon gowning and gloving and just prior to patient draping

Question 7

Correct

Marked out of 1

Flag question

Question text

The iliac crest and ischial tuberosity need to be identifiable during the THR procedure.

Select one:

True

False

Feedback

The iliac crest and the ischial tuberosity are key surgical landmarks used for referencing during acetabular reaming and cup placement. The surgeon must be able to reference from these landmarks during the procedure, either through direct palpation of the bone or the positioning board extensions.

The correct answer is 'True'.

Question 8

Incorrect

Marked out of 1

Flag question

Question text

The pelvic limb is elevated in the "hanging limb" position at the time of pelvic alignment and positioning prior to the THR procedure.

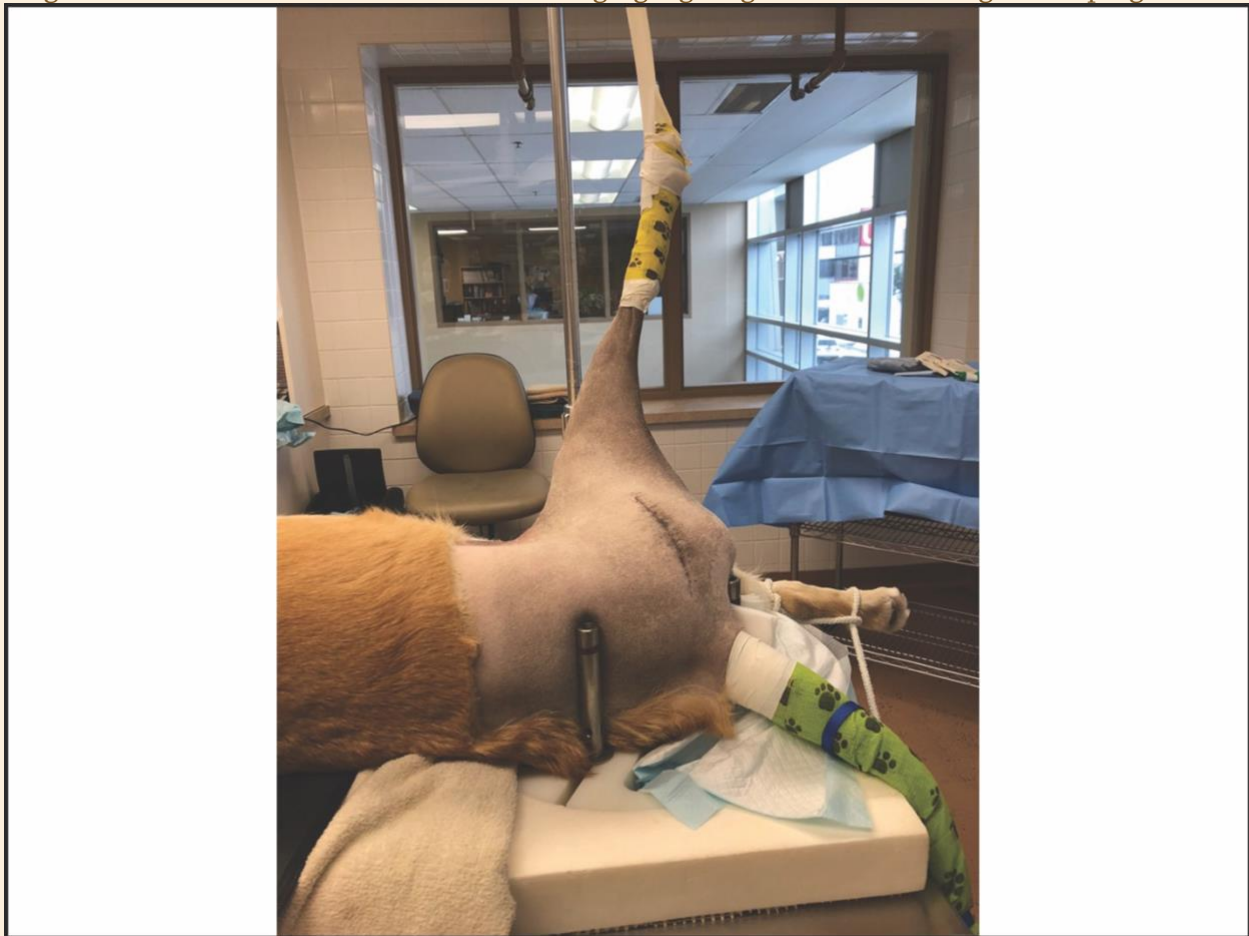
Select one:

True

False

Feedback

Positioning and securing the pelvis using either the positioning board or a surgical beanbag is performed with the surgical leg positioned in a neutral walking position with the patient in lateral recumbency. Only after the pelvis has been properly aligned and securely stabilized is the surgical limb elevated and secured for the hanging leg surgical scrub and surgical draping.



The correct answer is 'False'.

Question 9

Correct

Marked out of 1

Flag question

Question text

The patient should be oriented on the surgical table such that the limb to be operated can hang off the edge of the table when not supported.

Select one:

True

False

Feedback

The patient should be oriented on the surgical table closest to the edge of the table that the surgeon will be standing on and towards the end of the table. This eases the retraction roles of the surgical assistants and allows the stifle region of the surgical limb to hang off the edge of the table, improving exposure of the proximal femur and femoral canal access for [broaching](#).  
The correct answer is 'True'.