

Orthopedics This Week

WEEK IN REVIEW

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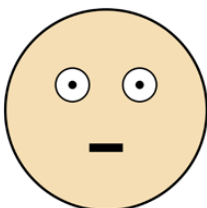
>> On September 1, 2023, Zimmer Biomet said goodbye to its Chief Executive Officer of six years, Brian Hansen and hello, kind of, to 44-year-old Ivan Tornos, the second youngest senior executive at Zimmer Biomet. What was Hansen's tenure and what will Tornos do? We have some answers.

7 Strategies for Closing the Gap Between Expectations and Results

>> Expectations versus reality. When it comes to the practice of spine or orthopedic surgery... this is one of the most fundamental issues surgeons and their staffs confront. No surprise, the bigger the gap between pre-op expectations and post-op reality, the harder it is for modern orthopedic and spine practices to thrive.

10 Using ChatGPT for Patient's Q&A. What Could Go Wrong?

>> In a field where precision is everything, new work from the Hospital for Special Surgery (HSS) in New York dives into the details of using artificial intelligence driven chatbots like ChatGPT to answer patient's questions. Accuracy, it seems, is still a work-in-progress.



Hello, I'm ChatGPT



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For all news that is ortho, read on.

CLICK HERE TO DOWNLOAD A PDF VERSION OF THIS WEEK'S NEWSLETTER

Orthopedic Power Rankings

Robin Young's Entirely Subjective Ordering of Public Orthopedic Companies

THIS WEEK: Do you want the good news or the bad news first? The bad news is, September has been the worst month for stocks since the end of World War II. The good news is that the #1 driver of stock price appreciation is earnings and orthopedic suppliers reported better-than-expected earnings for the first half of 2023. It appears that earnings momentum is even getting stronger as the year progresses. That's good news for investors, but most especially bargain hunters. Happy hunting.

RANK	LAST WEEK	COMPANY	TTM OP MARGIN	30-DAY PRICE CHANGE	COMMENT
1	1	Bioventus	(5.33%)	1.15%	Under Tony Bihl, BVS is executing well and investors are very happy with what he has accomplished in just a few months. Still cheap.
2	2	Pacira Biosciences	23.50	(3.21)	More and more I'm looking at PCRX's pipeline. With a profit margin like this—23+—you know everything is in place to get those products to market. Pay attention to the pipeline.
3	3	Integra LifeSciences	17.32	(3.87)	Management is buying back a whopping \$125 million in stock. That's a clear sign of confidence by management and a positive for investors.
4	5	Xtant	(9.71)	21.10	Again, the #1 equity performer in all of musculoskeletal world. What does this Montana-based company have that has investors so excited? Savvy management.
5	7	ConMed	7.42	(4.17)	Venerable ConMed is not acting like an old-line musculoskeletal supplier—sales jumped 16.6% in Q2—roughly 3x the industry growth rate. It's a new ConMed these days.
6	8	Orthofix	(11.48)	9.35	Big valuation jump relative to its peers this past month. One possible reason is the launch of the 7D FLASH™ Navigation System Percutaneous Module 2.0.
7	9	Johnson & Johnson	24.97	(5.55)	DePuy Synthes is delivering better-than-expected sales numbers on the strength of better procedure volumes this year. But inside massive JNJ those numbers get buried. A spin-off candidate?
8	4	ZimVie	(5.96)	(16.29)	The Brainlab announcement and a new FDA approval for a new Mobi-C implant—good news. Investors sold off, but that just makes ZIMV more attractive.
9	10	Dynatronics	(9.65)	(0.21)	New credit facility and the return of former CEO Brian Baker is all good news. Certainly one of the cheapest companies in MSK.
10	NR	Medtronic	18.65	(3.90)	Back on the Power Rankings just ahead of the North American Spine Society meeting. Last year's NASS was one of the best yet and with procedure volumes up, MDT should shine this year.

Robin Young's Orthopedic Universe

TOP PERFORMERS LAST 30 DAYS

	COMPANY	SYMBOL	PRICE	MKT CAP	30-DAY CHG
1	Aurora Spine	ASG.V	\$0.26	\$16	31.91%
2	Xtant Medical Hldgs	XTNT	\$1.32	\$170	21.10%
3	Orthofix	OFIX	\$21.28	\$782	9.35%
4	Stryker	SYK	\$284.45	\$108,028	3.60%
5	Nevro Corp	NVRO	\$20.39	\$736	1.65%
6	Bioventus	BVS	\$3.51	\$276	1.15%
7	Medacta	MOVE	\$139.99	\$2,800	0.38%
8	Dynatronics Corp	DYNT	\$0.76	\$3	-0.21%
9	Pacira Biosciences	PCRX	\$35.53	\$1,649	-3.21%
10	Integra LifeSciences	IART	\$42.76	\$3,481	-3.87%

WORST PERFORMERS LAST 30 DAYS

	COMPANY	SYMBOL	PRICE	MKT CAP	30-DAY CHG
1	SINTX Technologies	SINT	\$0.96	\$4	-27.27%
2	AxoGen	AXGN	\$6.30	\$271	-25.00%
3	Anika Therapeutics	ANIK	\$18.02	\$264	-19.52%
4	ZimVie	ZIMV	\$11.82	\$314	-16.29%
5	Globus Medical	GMED	\$54.23	\$5,447	-9.15%
6	Smith & Nephew	SNN	\$26.87	\$11,734	-8.29%
7	SI-BONE, Inc	SIBN	\$22.61	\$909	-7.98%
8	MicroPort Scientific	O853	\$1.71	\$3,138	-7.69%
9	Zimmer Biomet	ZBH	\$119.45	\$24,961	-6.96%
10	Johnson & Johnson	JNJ	\$160.48	\$385,390	-5.55%

LOWEST PRICE / EARNINGS RATIO (TTM)

	COMPANY	SYMBOL	PRICE	MKT CAP	P/E
1	Johnson & Johnson	JNJ	\$160.48	\$385,390	18.55
2	Integra LifeSciences	IART	\$42.76	\$3,481	19.28
3	Medtronic	MDT	\$82.13	\$109,277	19.39
4	Globus Medical	GMED	\$54.23	\$5,447	25.60
5	Zimmer Biomet	ZBH	\$119.45	\$24,961	26.21

HIGHEST PRICE / EARNINGS RATIO (TTM)

	COMPANY	SYMBOL	PRICE	MKT CAP	P/E
1	Pacira Biosciences	PCRX	\$35.53	\$1,649	71.47
2	Medacta	MOVE	\$139.99	\$2,800	57.36
3	Smith & Nephew	SNN	\$26.87	\$11,734	52.62
4	ConMed	CNMD	\$110.48	\$3,396	40.86
5	Stryker	SYK	\$284.45	\$108,028	33.53

LOWEST P/E TO GROWTH RATIO (EARNINGS ESTIMATES)

	COMPANY	SYMBOL	PRICE	MKT CAP	PEG
1	Smith & Nephew	SNN	\$26.87	\$11,734	-6.58
2	ConMed	CNMD	\$110.48	\$3,396	1.46
3	Globus Medical	GMED	\$54.23	\$5,447	2.04
4	Medacta	MOVE	\$139.99	\$2,800	2.05
5	Johnson & Johnson	JNJ	\$160.48	\$385,390	3.31

HIGHEST P/E TO GROWTH RATIO (EARNINGS ESTIMATES)

	COMPANY	SYMBOL	PRICE	MKT CAP	PEG
1	Medtronic	MDT	\$82.13	\$109,277	5.59
2	Integra LifeSciences	IART	\$42.76	\$3,481	5.21
3	Pacira Biosciences	PCRX	\$35.53	\$1,649	3.97
4	Zimmer Biomet	ZBH	\$119.45	\$24,961	3.62
5	Stryker	SYK	\$284.45	\$108,028	3.36

LOWEST PRICE TO SALES RATIO (TTM)

	COMPANY	SYMBOL	PRICE	MKT CAP	PSR
1	Dynatronics Corp	DYNT	\$0.76	\$3	0.07
2	ZimVie	ZIMV	\$11.82	\$314	0.34
3	Bioventus	BVS	\$3.51	\$276	0.54
4	Aurora Spine	ASG.V	\$0.26	\$16	0.83
5	Anika Therapeutics	ANIK	\$18.02	\$264	1.69

HIGHEST PRICE TO SALES RATIO (TTM)

	COMPANY	SYMBOL	PRICE	MKT CAP	PSR
1	SI-BONE, Inc	SIBN	\$22.61	\$909	8.54
2	OrthoPediatics Corp	KIDS	\$38.14	\$891	7.28
3	Medacta	MOVE	\$139.99	\$2,800	6.40
4	Stryker	SYK	\$284.45	\$108,028	5.86
5	Alphatec Holdings	ATEC	\$16.25	\$1,955	5.57

PSR: Aggregate current market capitalization divided by aggregate sales and the calculation excluded the companies for which sales figures are not available.

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Robin Young | robin@ryortho.com



Goodbye Brian Hansen, Hello (Kind of) Ivan Tornos

BY ROBIN YOUNG

On September 1, 2023, Zimmer Biomet said goodbye to its Chief Executive Officer of six years, Brian Hansen, 56 years old, who is joining the 3M spin-off, “New Healthcare Company” as its CEO.

Taking Zimmer’s reins will be Ivan Tornos, 44 years old, whose 4-year tenure at Zimmer has included an increasing set of responsibilities—starting in 2019 as Group President – Global Businesses and Americas and, effective September 1, 2023, President and Chief Executive Officer.

Of Zimmer Biomet’s 23 senior executives, Tornos is younger than 21 of them.

Bryan Hansen’s Tenure

When Hansen joined Zimmer Biomet from Medtronic’s \$9 billion Minimally Invasive Therapies Group in 2017, investors were valuing Zimmer at \$23.5 billion, annual sales were \$7.8 billion and annual profits were \$1.8 billion.

Six years later, as he is leaving, Zimmer Biomet’s market value is 6% higher at \$25 billion, annual sales, however, are down 5% to \$7.4 billion, and earnings are down 17% to \$1.5 billion.

Under Hansen’s leadership:

- Zimmer Biomet, in 2018, initiated a two-year (consisting of 2018 and 2019) effort to increase Zimmer Biomet’s sales growth rates to market levels or higher. (*Market levels for musculoskeletal industry revenue*



Courtesy of Ivan Tornos

growth were between 4-6%, which is low and is caused, in part, by pricing pressures and an overall slowdown in clinically, logistically and outcome relevant innovation).

- Zimmer Biomet endured a massive 38% decline in revenue during the COVID ravaged second quarter in 2020. That shock to the entire musculoskeletal system presented Hansen with a once-in-a-century business challenge and he and his team rose magnificently to that challenge.
- Zimmer spun-off its spine and dental businesses, about \$1 billion in product revenues, into an independent company—eventually named ZimVie—whose stock would trade in the public markets.

The announcement was, in effect, an extension of Hansen’s original two-year restructuring program.

- Zimmer significantly increased its investment in digital technologies—through people, partnerships, and acquisitions.

Looking back, Hansen fought the good fight. COVID derailed many of his plans, but in that emergency, Zimmer Biomet, I think, benefited greatly from Hansen’s leadership. While his original goals may not have been achieved, Hansen does give Tornos a slimmed down and more digitally focused Big Blue.

A strong platform, in other words, to potentially realize the goals from 2018—higher rates of sales growth and profitability.

To employees, stakeholders, and institutional investors, incoming CEO Tornos said: "It is an honor to be appointed CEO of Zimmer Biomet at a time when our execution is extremely strong, and our innovation momentum is at an all-time high. I am grateful for Bryan's leadership in transforming the Company and am now looking forward to leading the team and accelerating our ZB strategy to drive continued growth and boldly advance the standard of musculoskeletal care."

Indeed.

Tornos is facing, as all the senior executives at the handful of large integrated suppliers of musculoskeletal products do, a slow growth industry with chronic pricing pressure—and financial pressures which steer innovation into the 510(k) box.

Adding to this complex picture is the aging of artisanal, craft-based surgery and the emergence of process and computational medicine driven surgery.

Given these macro trends, will Tornos and the team he leads be able to find the path to higher revenue and profit growth?

And Now, a Word About Spin-Offs

It's kind of interesting that Hansen engineered the largest spin-off in the history of orthopedics—and then chose to join one himself (3M's intended spin-off of its \$8 billion healthcare business).

Is this a trend?

Harvard managerial pitchman, Michael Porter, famously opined that successful companies tend to "stick to their knitting" and singled 3M out

as just such an excellent company. In many ways, Porter's admonition came at the end of the conglomerate era where companies, like 3M, cobbled together odd varieties of companies with no discernible synergy. The rationale for unraveling those BCG inspired conglomerations was, in Porter's words, a desire to return to "your knitting."

These days a different imperative seems to be fueling the spin-off rage. Indeed, most every major company seems to be in the mood to jettison something.

That imperative, as opposed to "sticking to your knitting" is now, essentially, the "fresh start."

And with that fresh start, hopefully, a more nimble, creative and growth-oriented company—which, in the last remaining major analog



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industry known as healthcare—will require managements who can bring a new frame of reference to the business.

Kellogg, GSK, Johnson & Johnson, General Electric, and IBM all recently announced a spin off.

A recent study looked at more than 350 public spin-offs valued at greater than \$1 billion between 2000 and 2020. Fifty percent of those companies did NOT create any new shareholder value two years down the road. Twenty-five percent lost significant shareholder value.

In every case, of course, management told their shareholders that the spin-off was a way to create value because managers would be more focused, more growth opportunities, targeted capital

allocation, and the ability to excite prospective investors.

Certainly, in the case of Zimmer’s spin-off, ZimVie—a company I happen to like, and think is undervalued—those conclusions seem to have been borne out.

According to a new study by Goldman Sachs, corporate spinoff activity surged by 33% in 2022 to its second-highest level on record. Mergers and initial public offerings, by contrast, are few and far between. Last year, forty-four new spinoffs were announced, twenty were completed, worth a total of \$61 billion.

Eleven of the 20 spin-offs analyzed by Goldman outperformed the S&P 500; only six outperformed the company that spun them off.

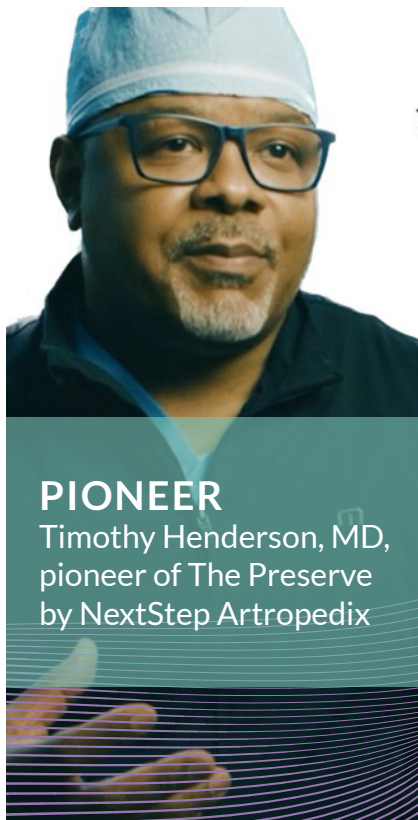
Goldman’s analysts expect that trend to keep going in 2023 and 2024. In their view, economic pressures, rising interest rates, peaking profit margins, and below-trend economic growth, are fueling the spin-off rage.

Enter Tornos

Zimmer Biomet now begins the Tornos era—one that, hopefully, can last a decade or more.

Reading Tornos’s LinkedIn was more interesting than I expected. People rave about him. The most common words used to describe him were “energetic,” “smart,” “inspiring,” “relatable” and “leader.” Most writers said that they felt fortunate to have known and worked with him.

Tornos should be interesting. Do stay tuned, for sure. ♦



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Strategies for Closing the Gap Between Expectations and Results

BY ELIZABETH HOFHEINZ, M.P.H., M.ED.

Expectations versus reality. When it comes to the practice of spine or orthopedic surgery...this is one of the most fundamental issues surgeons and their staffs confront.

No surprise, the bigger the gap between pre-op expectations and post-op reality, the harder it is for modern orthopedic and spine practices to thrive.

Researchers from the Hospital for Special Surgery (HSS) and Weill Cornell Medical College in New York designed an interesting study to, first, measure the size of that gap, and then to tease from the data strategies to narrow it—and what they found—a link between large joint arthroplasty and spine fusion surgery, for example, as well as the role that home care plays—may well surprise you.

The study, "[High preoperative expectations and postoperative fulfillment of expectations two years after decompression alone and decompression plus fusion for lumbar degenerative spondylolisthesis](#)," which appeared in the May 2023 edition of *The Spine Journal*, used a well-validated Expectations Survey to measure pre-op expectations and then matched those scores to the same patient's post-op Expectations Survey scores.

This was the FIRST time that lumbar decompression patient expectations had been measured in this particular and systematic way.

357 Patients, 20 Expectation Questions, Pre-op and Post-op



Source: Shutterstock

In this 357-patient longitudinal cohort study, patients preoperatively completed a 20-item Expectations Survey which measured, among other items:

- “improvement expected” for symptoms,
- physical function,
- psychosocial well-being,
- “improvement received” two years postoperatively,
- Oswestry Disability Index (ODI),
- Short Form Health Survey-12 mental health subscale,

- satisfaction with surgery,
- comorbidities,
- psychosocial status, including social support (i.e., help at home) and
- prior orthopedic surgery (hip/knee arthroplasty).

Demographically, the patients were:

- 67 years of age, on average,
- 61% women,
- 82% diagnosed with single-level lumbar degenerative spondylolisthesis,

- 73% were treated with spine fusion,
- 26.2 months of follow-up, on average.

When researchers compared patients who had been treated with spine fusion to patients who were not, they found that the non-fusion group experienced more pain, spinal instability, used more opioids, scored higher on the disability scale, and had greater preoperative Expectations Survey scores (69 vs 74).

But, perhaps surprisingly, the proportion of expectations fulfilled postoperatively was high and similar for both groups (.82 vs. .79), but with a greater degree of variability in the fusion treatment group (.32 vs. .40).

The Link Between Prior Joint Arthroplasty and Spine Fusion Outcomes

Study co-author, Dr. Federico Girardi (recent recipient of the Hospital for Special Surgery Lifetime Achievement Award), noted one of the most interesting results from the study was the association between prior arthroplasty and unfulfilled expectations of lumbar degenerative spondylolisthesis surgery.

This, Girardi explained, had not been described previously.

“Given interventions for multiple degenerative musculoskeletal conditions commonly coexist, associations between prior arthroplasty and ratings of lumbar degenerative spondylolisthesis outcomes merit further investigation,” said Girardi.

“In the meantime, spine surgeons can address differences in technical aspects of the surgeries, the recovery process, and the long-term outlook between

total joint arthroplasty and lumbar surgery with their patients who have had prior arthroplasty.”

Better Pre-op Mental Well Being and Social Support

Using a multivariable analysis with the proportion of expectations fulfilled as the dependent variable, the HSS team found that fulfilled expectations were associated with better pre-op mental well-being and existing social support.

Conversely, unfulfilled expectations were associated with prior arthroplasty and subsequent lumbar surgery. The investigators found similar associations for change in ODI and satisfaction.

According to Dr. Girardi, “Patients who had fusion had greater symptomatology and disability compared to those who didn’t have fusion. It follows therefore

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that patients who had fusion would have greater expectations because they had more areas needing improvement. Whether these high expectations were realistic, however, most likely varied among patients and probably contributed to the greater variation in fulfillment of expectations that we found in the fusion group.”

Socio-demographics Key to Successful Outcomes

“Our large longitudinal study contributes to knowledge about lumbar degenerative spondylolisthesis surgery by providing details about the breadth of patients’ expectations and fulfillment of these expectations according to the fusion status,” explained Dr. Girardi.

“By providing insights into novel sociodemographic and clinical variables associated with outcomes, specifically help at home, previous arthroplasty, and subsequent lumbar surgery and understanding these variables can enhance shared decision-making between patients and surgeons. Furthermore, these insights can guide the development of interventions to optimize preoperative status and foster realistic expectations of lumbar surgery.”

More Help at Home Really Matters

As for what role surgeons might play in enhancing variables associated with better mental well-being—such as more social support—Dr. Girardi told OTW, “In our study we inquired about help at

home (i.e., a proxy for social support) and it was interesting to find that more help at home was associated with greater fulfillment of expectations.”

“Although strongly linked to better health outcomes for multiple health conditions, the role of social support and its contribution to recuperation from lumbar degenerative spondylolisthesis surgery is not well known.”

“Understanding how social support impacts results of this surgery has clinical implications for preoperative planning. Specifically, ascertaining what type of social support is needed (e.g., tangible, emotional) can direct surgeons to tailor interventions to support patients through the recovery period.” ♦

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Using ChatGPT for Patient's Q&A. What Could Go Wrong?

BY ELIZABETH HOFHEINZ, M.P.H., M.ED.

In a field where precision is everything, new work from the Hospital for Special Surgery (HSS) in New York dives into the details of using artificial intelligence driven chatbots like ChatGPT to answer patient's questions. Accuracy, it seems, is still a work-in-progress.

The study, "[Using Artificial Intelligence to Answer Common Patient-Focused Questions in Minimally Invasive Spine Surgery](#)," appears in the May 29, 2023, edition of *The Journal of Bone and Joint Surgery*.

Co-author Sheeraz Qureshi, M.D., M.B.A., the Patty and Jay Baker Chair in Minimally Invasive Spine Surgery at HSS, told *OTW*, "The recent advancements in artificial intelligence (AI), such as chatbots, have brought about a new way our patients may potentially utilize these technologies by posing questions to gain insight into their own conditions."

"One of our primary concerns is that patients review inaccurate information which can hinder proper medical care. Therefore, it was crucial to us to critically evaluate and test the accuracy and ability of these technologies and to understand their value and limitations. This allows us to counsel patients who may have referenced chatbots appropriately."

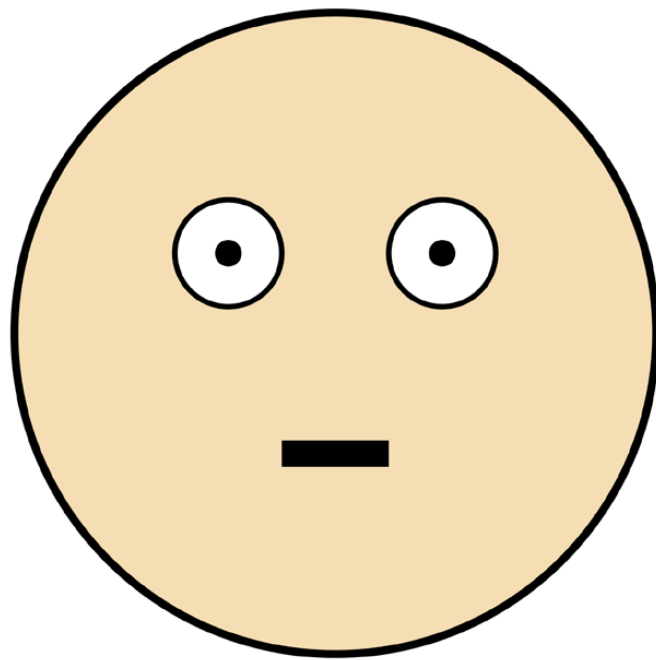
In this study, the authors employed ChatGPT to answer questions often posed by patients. According to Dr. Qureshi, "We drew on the experiences of the attending surgeons regarding

common questions they get asked in clinic from patients. We utilized many of those same questions in this study."

The team secured a variety of prompts and responses, beginning with ChatGPT introducing itself. Patient questions included, "I have back pain radiating down my leg. What should I do and what type of doctor should I see?" and "Do I need spine surgery?" Other topics broached were alternatives to surgery,

specific types of surgery, and postoperative recovery.

OTW asked Dr. Qureshi about his concerns regarding this technology and he said, "The primary concern for artificial intelligence technology, like chatbots, pertains to its ability to present inaccurate information in a highly believable style that is difficult for the average person to evaluate. Of course, we understand the great value for this technology



Hello, I'm ChatGPT

ChatGPT Self Portrait / Source: Wikimedia Commons and ChatGPT

to benefit our patients it is important to understand its limitations and view the technology accordingly.”

“As a chatbot, there is no limit to the number of questions we could have asked. In this initial evaluation, we considered asking questions that our team felt patients would most likely ask if they used this resource. Given that this technology remains freely accessible and available, we will continue

to evaluate its capacity in the field of orthopedics.”

OTW also asked Dr. Qureshi about the speed with which these kinds of AI-based technologies are moving into the “average” orthopedic and spine practice.

In Dr. Qureshi’s view, “Artificial intelligence technologies have exponentially increased in their utilization across all industries. The adoption of AI technologies by orthope-

dic surgeons will significantly vary based on the specific use case. In our paper we explored its usage for patient education. However, usage for radiographic analysis, augmented reality, and robotic solutions have all been reported. The field is so broad and incredibly valuable so we believe that widespread adoption of AI by orthopedic surgeons is already beginning and as we see well-designed systems which are able to integrate their utility, we can expect to see further adoption.” ♦

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COMPANY

MSK Provider, HOPCo, Enters Florida via Provider Network Solutions

Phoenix, Arizona-based Healthcare Outcomes Performance Company (HOPCo) and Miami, Florida-based Provider Network Solutions (PNS) have announced a partnership to establish a joint venture, HOPCo Network Solutions.

Provider Network Solutions provides specialty management services organization and third-party administrative services. According to PNS, the company “connects payors with networks of more than 1,100 orthopedic, pain management, and podiatry providers,

managing over 1.8 million fully insured MSK [musculoskeletal] lives.”

HOPCo is a leading healthcare management company. Under the agreement, HOPCo Network Solutions will acquire all Provider Network Solutions muscu-

loskeletal value-based care networks throughout Florida.

Provider Network Solutions Co-Founder and Chief Executive Officer Jose Pelayo, D.C. explained, “Over the past 25 years, PNS has grown substantially



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thanks to the value we have been able to deliver to payors, providers, and the community.”

Dr. Pelayo continued, “With our growth, we needed a partner with experience and expertise in managing more comprehensive risk-based models. That made HOPCo our natural choice.”

Under the partnership, Dr. Pelayo’s team will remain with the new joint venture to continue to ensure the growth of the musculoskeletal networks. Provider Network Solutions President and Chief Strategy Officer Think Tran, M.D., MBA, will now serve as HOPCo Network Solutions CEO. Additionally, HOPCo EVP of Growth and Network Strategies Jordan McInerney will take on the role HOPCo Network Solutions COO.

HOPCo President and Chief Transformation Officer Wael Barsoum, M.D.

said, “The PNS team has a well-built and innovative model that, like HOPCo, has proven to align payors and providers around value and outcomes.”

Dr. Barsoum continued, “With this important milestone, HOPCo will be enhancing its offerings to payors and providers across the region and accelerating the adoption of additional, comprehensive MSK value-based care programs that improve patient outcomes and drive savings.”

OTW spoke with Rina C. Vertes, FSA, MAAA, President, Value-Based Care (VBC) Solutions at HOPCo, about the partnership’s plans to enhance offerings to payors and accelerate the adoption of programs that improve patient outcomes and drive savings. Vertes explained, “HOPCo Network Solutions will leverage the proprietary medical economics, claims analytics, quality reporting, net-

work management infrastructure and digital physician/patient engagement platforms that HOPCo has deployed to power its successful MSK VBC and population health programs nationally.”

Vertes continued, “Combined with PNS’s successful VBC initiatives, payor relationships and third-party administrator infrastructure, HOPCo Network Solutions will deploy new programs and enhance existing programs with validated models that further align MSK and non-MSK physicians, improve patient experience and outcomes far beyond episode of care bundles, incorporate improvements in MSK health equity while encompassing larger populations of patients and, as has been proven by HOPCo in its other MSK population health and VBC programs across the country, significantly bend the cost curve on the total cost of MSK care.” — KD

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Garrett Gingerich and Garrett Hurley Join TayCo Brace

South Bend, Indiana based TayCo Brace, Inc. has announced that Garrett Gingerich and Garrett Hurley are the two most recent senior executives to join the company—the creator and producer of an innovative ankle brace that has been employed in more than 20,000 patients, at more than 22 NFL teams and over 80 intercollegiate athletic programs.



(L to R): Garrett Gingerich and Garrett Hurley / Courtesy of TayCo Brace, Inc.

Garrett Gingerich is TayCo's new chief marketing officer and brings to the position almost 20 years of experience building brands through strategic marketing. Prior to TayCo Brace, Gingerich served as the group director of strategy at Pathfinders Advertising. While at Pathfinder, Gingerich re-engineered the

in-house digital marketing process for Pathfinder and its clients.

Garrett Hurley is TayCo Brace's new chief technology officer and brings to TayCo a strong background in prosthetic and orthotic development and engi-

neering. Prior to joining TayCo, Hurley was founder and CEO of an independent consulting firm and an orthotist and prosthetist at companies such as San Francisco-based Roam Robotics. An inventor with over 40 patents, issued and pending.



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"We are thrilled to welcome Garrett Gingerich and Garrett Hurley to our executive team," said Gavin Ferlic, company co-founder and CEO. "Their extensive industry experience and leadership skills will play a crucial role in driving our strategic growth initiatives and solidifying our position in the market. We are confident their contributions will greatly benefit our company and customers."

Since its founding in 2016, TayCo Brace has partnered with hospitals, medical practices, military organizations, and athletic programs to improve health outcomes and the ankle recovery experience for more than 20,000 patients and counting.

Its innovative ankle brace helps people in every walk of life—from athletes to weekend warriors and industrial professionals to special forces—function at a normal level with the support they need to accommodate their activities and daily living.

With the addition of Gingerich and Hurley, TayCo Brace is poised to expand its reach in physicians' offices and consumer markets and recently launched its first off-the-shelf product, now available for purchase without a physician's order.

[TayCo Brace](#) is empowering mobility and stability by raising the standard of care for doctors who want to get their patients back to normal faster, with fewer life disruptions, and exceptional outcomes after ankle and hindfoot injuries. TayCo partners with hospitals, medical practices, military organizations, and athletic trainers across the country to help them outperform traditional therapies and increase long-term mobility with an external ankle brace that's changing the way recovery looks and feels. The TayCo Brace has

been used by over 20,000 patients, 80+ NCAA football teams, 22+ NFL teams, and special forces. Founded in 2016 as a product of the University of Notre Dame's IDEA Center, TayCo Brace has been listed as a Top 10 Innovation in Podiatry, a winner of the "For Such A Time As This – OrthoChallenge," and received the 1st Source Bank Commercialization Award. — RRY

SPINE

Novel Bone Graft Delivery System Hits 50 Case Milestone

A novel bone graft delivery system, which addresses the three main shortcomings of the typical bone grafting process in spine fusion surgery:

- Lack of meticulous disc space preparation
- Insufficient quantities bone graft
- Sub-par quality of bone graft.

"Overall, I think surgeons have lost track of the importance of meticulous disc space preparation and abundant, quality bone graft delivery and packing into the disc space well enough to achieve high fusion rates," said surgeon Jeffrey Dick, M.D., of Twin Cities Orthopedics.

Incline Village, Nevada company, Kleiner Device Labs, invented and brought to market a truly novel device to address these three issues efficiently and effectively.

The device, KG™2 Surge@flow-thru interbody system has just reached its 50-case milestone.

"One of the best things about the KG2 is the ease with which one can deliver abundant bone graft through the tube and how tightly you can pack it compared to conventional techniques," said Dr. Dick to *OTW*.

According to Kleiner Labs Founder and CEO Jeff Kleiner, M.D., "The new KG2 Surge was developed with the objectives of maximizing bone graft delivery to the prepared intervertebral disc space, and streamlining implant place-



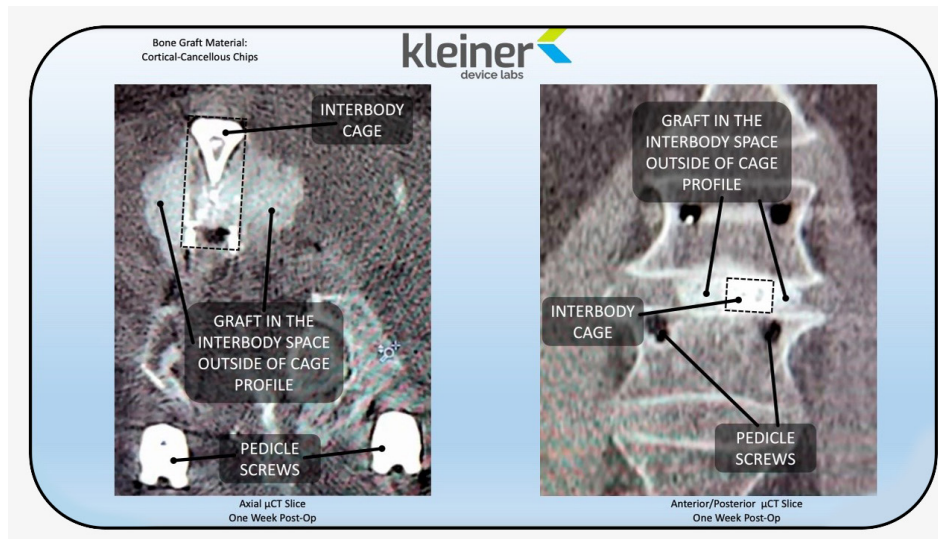
KG™2 Surge / Courtesy of Kleiner Device Labs

ment, positioning, and integration in the graft matrix.”

“The first fifty cases,” added Kleiner, “demonstrated excellent achievement of those objectives. We will next be moving to broader commercial availability, expanding our network of distributors and independent representatives.”

Another KG2 user, neurosurgeon Catherine Gallo, M.D., of Two Rivers Surgical Center in Eugene, Oregon, said, “I can tell that the KG2 is a very well-thought-out cage design. Somebody put some real thought into this. It is very user-friendly.”

Finally, orthopedic spine surgeon Blake Burkert, M.D., of NeuroSpine in Eugene, Oregon was pleased enough with his experience to say, “I will change my approach and do more PLIFs because the KG2 system is so easy to use and



Scan images demonstrate the intervertebral graft fill in a case utilizing the new KG™ 2 Surge™ flow-thru interbody system, which allows implant placement, positioning, and grafting in a single surgical pass in TLIF and PLIF procedures / Courtesy of Kleiner Device Labs

the graft volume is impressive. Love this cage system.”

The KG2 Surge flow-thru interbody system is a single-patient-use bone graft

delivery tool coupled with a 3D-printed titanium I-Beam fusion implant.

The implant has no lateral walls and serves as a conduit for unimpeded



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flow of a broad spectrum of bone graft materials through the pre-attached, rectangular insertion tool. The rectangular cannula maximizes the cross-sectional area available for graft material flow and eliminates the challenge of trying to apply bone graft after cage insertion.

Since the system comes pre-assembled and sterilized in a single use tray, there is minimal scrub tech training and no implant tray re-processing/sterilization—an ideal system for an ASC or hospital. The KG2 system allows for a single insertion process to take the place of the multi-step, multi-instrument pass practice. The surgical procedure with KG2 Surge spares contusion of delicate nerve tissue and reduces the risk of surgical site infection.

For KG2 videos and information, please go to the company's [web site](#). — RRY

PEOPLE

Dr. Quin Throckmorton and Dr. Tyler Brolin Win Neer Award

Campbell Clinic Orthopedic surgeons Quin Throckmorton, M.D. and Tyler Brolin, M.D. have been awarded the Charles S. Neer Award.

The Neer Award is an annual award presented by the American Shoulder and Elbow Surgeons (ASES) Foundation. This is the second time the surgeons have received

this prestigious award. The first time was in 2016.

The Neer Award honors Charles S. Neer, M.D., a founding member of ASES and its first president. The award, per the ASES Foundation website, was created



Dr. Tyler Brolin, Margaret Knack, RN, Dr. Quin Throckmorton, and Dr. Frederick Azar / Courtesy of Campbell Clinic

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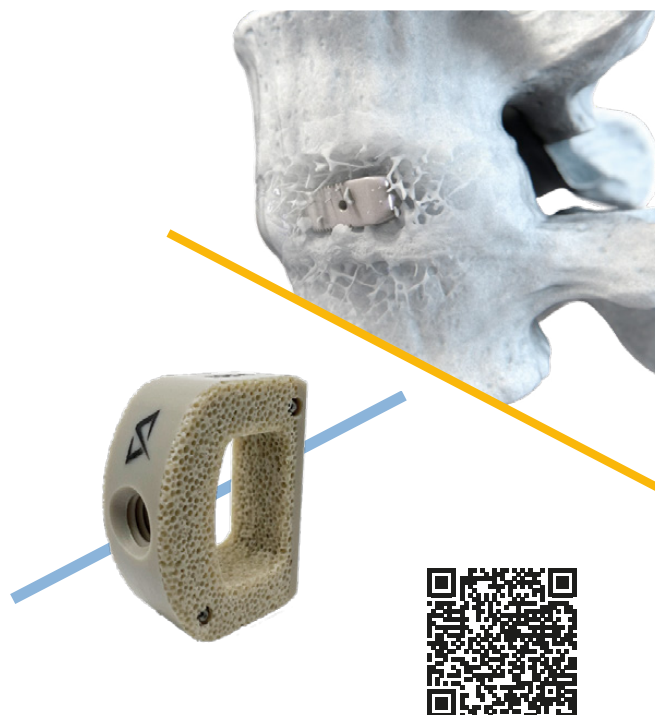
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to “provide recognition for outstanding clinical and basic science investigations contributing to the understanding, care or prevention of injuries to the shoulder.” Each year, the ASES Foundation awards a Clinical Research Award and a Basic Science Research Award in Shoulder.

This year, the team won the Basic Science Research Award in Shoulder for its study entitled “[Muscle Activation Patterns during Active External Rotation after Reverse Total Shoulder Arthroplasty: An Electrophysiological Study of the Teres Minor and Associated Musculature.](#)” A number of other members of the Campbell Clinic team contributed to the study.

Dr. Throckmorton commented, “We are deeply honored to receive this award from the American Shoulder and Elbow Surgeons Foundation

which represents a true team effort by the Campbell Clinic research program.”

Dr. Throckmorton continued, “Our clinical research team worked closely with our biomechanics lab to design and execute this study. We are very fortunate to collaborate with such an outstanding group of researchers.”

Dr. Brolin echoed Dr. Throckmorton’s sentiments stating, “This award signifies way more than the work of any one person.”

Dr. Brolin continued, “This prestigious honor belongs to everyone on our Campbell Clinic team who helped us achieve this milestone. We are grateful to the ASES Foundation for recognizing our work and we are humbled to have our research highlighted via the prestigious Neer Award.” — KD

REMEMBRANCES

Philip Heath Gattey MD, Renowned Great Plains Surgeon Dies Age 67

Philip Heath Gattey, M.D., a well-known orthopedic surgeon in the



Philip Heath Gattey, M.D. / Courtesy of Moose Jaw Today

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Great Plains of north central United States and south central Canada, passed away on July 12, 2023 in Bismark, North Dakota, just 800 miles—which, given the distances that characterize the Great Plains, was a mere days drive—from where he grew up in Calgary, Alberta.

Dr. Gattey was a Great Plains surgeon whose specialty was the complex cases that most orthopedic surgeons pass on.

Philip Heath Gattey, earned his medical degree from the University of Saskatchewan Medical School in Saskatoon, Saskatchewan, Canada. He completed his orthopedic residency and fellowship in Toronto between 1985 and 1986.

After completing his training, he opened an orthopedic practice in Moose Jaw, Saskatchewan, a community of some 30,000 people located along the Trans-Canadian railway in southern Saskatchewan. He served Moose Jaw and surrounding communities from 1986 to 1993.

Dr. Gattey then joined a group practice in Prince George, British Columbia, and stayed there from 1993 to 1995. Before retiring in 2016, Dr. Gattey moved to Bismark, North Dakota, where he treated patients at MedCenter One Orthopedic.

Dr. Gattey was born on November 21, 1956, in Calgary, Alberta, Canada, and earned his undergraduate degree from the University of Saskatchewan.

He and his wife, Marcie Knox had four children. Overall, the family lived in Saskatoon, Ottawa, Vancouver, Toronto, Moose Jaw, Prince George, and finally Bismarck.

Besides his love of medicine, Gattey also enjoyed fixing up the house, tending the garden, reading—especially about history.

He is survived by his children: son, Nathan Gattey; daughter, Lynelle Kolden; son Evan Gattey and son Jared Gattey.

He also leaves behind his 11 grandchildren and his brother Kevin. He was preceded in death by his wife, Marcie, his mother and father, and his brother Scott. — TR

Spine Surgeon Robert Gabriel Squillante Dies Age at 62

Way too soon, Robert Gabriel Squillante, Jr. M.D. (Dr. Bob), an orthopedic surgeon who took a less traditional path to medicine, passed away unexpectedly at the age of 62 on July 2, 2023.

Squillante grew up in Hollywood, Florida. Throughout high school and college, he worked different types of jobs, from bagging groceries to parking cars for wealthy executives. This is where he learned his strong work ethic.

His undergraduate degree, which he earned at Northwestern University, was NOT in biology, which would be the more customary route to a career in orthopedic surgery, but rather, Robert Squillante, was a chemical engineering grad.

Armed with a Northwestern University degree in chemical engineering, the future Dr. Squillante decided to move back to his home state of Florida and... get a job as a futures trader in Miami.

Once Squillante experienced the raucous, roller coaster ride of commodity futures trading, he realized that his true passion was medicine.

Squillante enrolled at the University of Miami Miller School of Medicine and over time decided to specialize in musculoskeletal care. Following medical school, Dr. Squillante was selected to

enter one of the top residency programs in the United States—the program at the University of Pennsylvania which was then followed by a fellowship in spine surgery at the Hospital for Special Surgery and Cornell Weill University.

Following his stints in New York, Dr. Squillante joined the practice of Fredericksburg Orthopedic Associates in Fredericksburg, Virginia.

“There, his remarkable skill and unwavering dedication transformed lives, alleviating pain and restoring mobility for his patients at Mary Washington Hospital,” his family wrote.

Squillante, in his spare time, also enjoyed helping out his community in nonmedical ways. He would host fundraiser events for various charities with his wife, Joni, at the Oaks, their historic home in Richmond.

He is predeceased by his mother Catherine Ann Squillante and his father Robert Gabriel Squillante, Sr. He is survived by his wife Joan Bellefield Davis, his son Nicholas, and his daughters Catherine, Julia, and Lily. He also leaves behind his sisters Alice and Jane, and his lifelong friend Robert Taylor. — TR



Robert Gabriel Squillante, Jr., M.D. / Courtesy of Legacy.com



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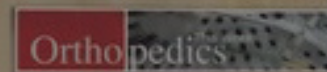
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