

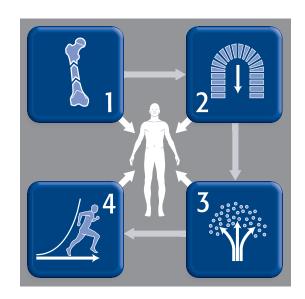
Mission

Our mission is to continuously set standards in postgraduate medical education and to foster the sharing of medically guided expertise in a worldwide network of healthcare professionals to improve patient care in trauma or disorders of the musculoskeletal system.

The AO principles of fracture management

Fracture reduction and fixation to restore anatomical relationships.

Early and safe mobilization and rehabilitation of the injured part and the patient as a whole.



Fracture fixation providing absolute or relative stability, as required by the "personality" of the fracture, the patient, and the injury.

Preservation of the blood supply to soft tissues and bone by gentle reduction techniques and careful handling.

Welcome

On behalf of AOCMF (the craniomaxillofacial clinical division of the AO Foundation), it is my pleasure to personally welcome you to this course. Each year, AOCMF provides over 110 educational opportunities to more than 4,500 passionate surgeons worldwide.

The mission of AOCMF is excellence in facial surgery across the specialties. We encourage the involvement of all interested professions, including oral and maxillofacial surgery, plastic surgery, ENT, oculoplastic surgery, and neurosurgery. To achieve our mission, we are committed to remaining at the forefront of education and new developments, by offering remarkable learning and networking experiences focusing on craniomaxillofacial trauma and reconstruction.

Through our courses, membership program, and our website, our goal is to encourage and inspire surgeons—including residents, fellows, and practitioners—to pursue fulfilling careers in our field. In addition, we endeavor to provide lifelong learning opportunities and career development options for more experienced specialists in the most appropriate and useful ways as their needs evolve.

Your role is vital to improving patient care. We hope that your experience with our faculty, chairs, and your peers over the next few days will bring new knowledge, skills, and understanding that you can directly apply to your own practice. We look forward to your participation and encourage you to share your ideas, unique perspectives, and opinions, to help build and enhance our dynamic community, and contribute to the further development of craniomaxillofacial surgery.

I wish you an outstanding learning experience.

Yours sincerely,

Content

- **2** Mission
- **2** The AO principles
- **3** Welcome
- **4** Goal of the course
- **4** Target participants
- 4 Course objectives
- 4 Course description
- **5** Chairpersons
- **5** Faculty
- **5** Course organization
- **6** Day 1, January 28, 2016
- **7** Day 2, January 29, 2016
- **8** Course information
- **8** Course logistics
- 9 Course venue



Var John

Warren Schubert
Chairman AOCMF International

Goal of the course

The goal of the course is to learn the topographic anatomy of the orbit and its surgical approaches. This should enable the participant to perform a sound "surgical" fracture treatment in that particular area. The participant has learned the pros and cons of the various upper and lower eyelid incisions for optimal access to the different types of orbital fractures. In addition, the participant is able to learn basic soft and hard tissue surgery around the orbit.

Target participants

All surgeons and surgical trainees who deal with musculoskeletal head and neck disorders concerning trauma and reconstruction, as well ascongenital and acquired deformities of the craniofacial skeleton.

Course objectives

After the course, participants should be able to:

- Describe the topographic anatomy for surgical approaches to the orbit
- Describe the soft and hard tissue surgery around the orbit
- Outline the different types of surgical approaches to the orbit
- Apply the principles of 3-D planning and navigation for orbital surgery

Course description

The topics will be taught in lectures and plenary discussions. The surgical procedures for approaching the orbit will be explained step by step. The lectures are followed by dissections on anatomical specimens. The faculty are there to help and assist you. Each participant has one side of a complete head site for the exercises and one side to assist. Participants will work in pairs during the specimen sessions. Instruments, including consumables (gloves and gowns), are supplied.

Course Chairs



Eppo B WolviusHead of Dept. of Oral and Maxillofacial Surgery
Erasmus Medical Center
Rotterdam, Netherlands



Jan de Lange Head of Dept. of Oral and Maxillofacial Surgery Academic Medical Center Amsterdam, Netherlands

Regional Faculty

Frank WildeDept. of Oral and Maxillofacial Surgery Military Hospital Ulm Ulm, Germany

National Faculty

Leander DuboisAcademic Medical Center Amsterdam, Netherlands

Maarten Koudstaal Erasmus Medical Center Rotterdam, Netherlands

Dion ParidaensThe Rotterdam Eye Hospital Rotterdam, Netherlands

Peerooz SaeedAcademic Medical Center Amsterdam, Netherlands

Course organization

AO Foundation AOCMF Kathrin Honegger Clavadelerstrasse 8 7270 Davos, Switzerland Phone +41 81 414 25 31 Mobile +41 79 179 89 47 Email kathrin.honegger@aocmf.org

www.aocmf.org

Day 1, January 28, 2016

TIME	AGENDA ITEM	FACULTY
08:30-09:00	Registration	
09:00-09:10	Welcome address, introduction of the faculty, course objectives	J de Lange, E Wolvius
Session 1	Orbital Trauma	
09:10-09:25	Relevant anatomy of the orbital frame and periorbit from a surgeon's view	E Wolvius
09:25-09:45	Overview of relevant orbital anatomy considering blindness and diplopia	P Saeed
09:45-10:00	Surgical considerations in orbital trauma repair: indication and timing	L Dubois
10:00-10:15	Approaches to the orbit: peri-orbital local incisions, from below infra-orbital/mid-lid transconjuctival approach	M Koudstaal
10:15–10:30	Approaches to the orbit: peri-orbital local incisions, from above (cranial approach, upper eye-lid)	L Dubois
10:30-10:45	COFFEE BREAK	
Session 2	Cadaver Dissection Room	
10:45-12:45	Approaches to the orbit – local peri-orbital incisions	all Faculty
12:45-13:30	LUNCH BREAK	
Session 3	Orbital Trauma	
Session 3 13:30–13:45	Orbital Trauma Medial wall fracture	J de Lange
		J de Lange M Koudstaal
13:30–13:45	Medial wall fracture	G
13:30–13:45 13:45–14:00	Medial wall fracture Reconstruction of complex orbital wall fractures including orbital roof	G
13:30–13:45 13:45–14:00 Session 4	Medial wall fracture Reconstruction of complex orbital wall fractures including orbital roof Cadaver Dissection Room Approaches to the orbit – coronal flap coronal flap step by step, raising the temporal muscle, exposure of the facial skeleton around the orbit	M Koudstaal
13:30–13:45 13:45–14:00 Session 4 14:00–15:30	Medial wall fracture Reconstruction of complex orbital wall fractures including orbital roof Cadaver Dissection Room Approaches to the orbit – coronal flap coronal flap step by step, raising the temporal muscle, exposure of the facial skeleton around the orbit Demonstration of Brainlab	M Koudstaal
13:30–13:45 13:45–14:00 Session 4 14:00–15:30	Medial wall fracture Reconstruction of complex orbital wall fractures including orbital roof Cadaver Dissection Room Approaches to the orbit – coronal flap coronal flap step by step, raising the temporal muscle, exposure of the facial skeleton around the orbit Demonstration of Brainlab COFFEE BREAK	M Koudstaal
13:30–13:45 13:45–14:00 Session 4 14:00–15:30 15:30–15:45 Session 5	Medial wall fracture Reconstruction of complex orbital wall fractures including orbital roof Cadaver Dissection Room Approaches to the orbit – coronal flap coronal flap step by step, raising the temporal muscle, exposure of the facial skeleton around the orbit Demonstration of Brainlab COFFEE BREAK 3D Planning in Orbital Surgery	M Koudstaal all Faculty
13:30–13:45 13:45–14:00 Session 4 14:00–15:30 15:30–15:45 Session 5 15:45–16:00	Medial wall fracture Reconstruction of complex orbital wall fractures including orbital roof Cadaver Dissection Room Approaches to the orbit – coronal flap coronal flap step by step, raising the temporal muscle, exposure of the facial skeleton around the orbit Demonstration of Brainlab COFFEE BREAK 3D Planning in Orbital Surgery 3D planning in orbital surgery	M Koudstaal all Faculty L Dubois
13:30–13:45 13:45–14:00 Session 4 14:00–15:30 15:30–15:45 Session 5 15:45–16:00 16:00–16:15	Medial wall fracture Reconstruction of complex orbital wall fractures including orbital roof Cadaver Dissection Room Approaches to the orbit – coronal flap coronal flap step by step, raising the temporal muscle, exposure of the facial skeleton around the orbit Demonstration of Brainlab COFFEE BREAK 3D Planning in Orbital Surgery Patient specific implants in orbital reconstruction Different materials for orbital fracture repair	M Koudstaal all Faculty L Dubois F Wilde
13:30–13:45 13:45–14:00 Session 4 14:00–15:30 15:30–15:45 Session 5 15:45–16:00 16:00–16:15 16:15–16:30	Medial wall fracture Reconstruction of complex orbital wall fractures including orbital roof Cadaver Dissection Room Approaches to the orbit – coronal flap coronal flap step by step, raising the temporal muscle, exposure of the facial skeleton around the orbit Demonstration of Brainlab COFFEE BREAK 3D Planning in Orbital Surgery Patient specific implants in orbital reconstruction Different materials for orbital fracture repair Overview, case presentation and plenary discussion	M Koudstaal all Faculty L Dubois F Wilde J de Lange

Day 2, January 29, 2016

TIME	AGENDA ITEM	FACULTY
Session 6	Orbital Trauma	
08:30-08:45	Naso-Orbito-Ethmoidal fractures and telecanthus correction	E Wolvius
08:45-09:00	Long-term results of orbital reconstruction	M Koudstaal
09:00-09:15	Secondary orbital reconstruction	F Wilde
Session 7	Soft tissue repair in orbital trauma	
09:15-09:30	Management of eyelid and lacrimal apparatus lacerations	D Paridaens
09:30-09:45	Volume augmentation in secundary enophthalmus	P Saeed
09:45-10:00	Management of post-traumatic eyelid malposition	D Paridaens
10:00-10:15	COFFEE BREAK	
Session 8	Cadaver Dissection Room	
10:15–12:30	Soft tissue repair lower and upper lid correction, correction entropion, ectropion, reattachment canthal ligament medial and lateral, telecanthus repair	all Faculty
12:30-13:30	LUNCH BREAK	
Session 9	Endocrinological and infectious diseases around/in the orbit	
13:30-14:00	Ophthalmological and surgical aspects in Graves disease	D Paridaens
14:00-14:15	Management of orbital apical lesions	P Saeed
14:15-14:30	Evisceration, enucleation, and exenteration	D Paridaens
14:30-14:45	Eye epithetic and extra-oral implants	J de Lange
14:45–15:10	General discussion	E Wolvius and all Faculty
15:10-15:15	AO History, structure and membership	E Wolvius
15:15-15:30	COFFEE BREAK	
Session 10	Cadaver Dissection Room	
15:30–16:15	Exenteration orbitae and reconstruction of destructed orbital wall with temporal flap	all Faculty
Session 11	Congenital anomalies around the orbit	
16:15–16:30	Fibrous dysplasia around the orbit	P Saeed
16:30-16:45	Hypertelorism and orbital dystopia: timing, surgical correction	E Wolvius
16:45-17:00	Closing remarks, evaluation, certificates	E Wolvius
17:00	End of Course	

Course logistics

Stichting AO-Nederland

Merijn Werkhoven
P.O. Box 28042
3828 ZG Hoogland, The Netherlands
Phone +31 33 4560304
Fax +31 33 4500592
Email merijn.werkhoven@ao-nederland.nl
www.ao-nederland.nl

Course information

Accreditation

An application has been made to the UEMS-EACCME® for CME accreditation of this event.

Evaluation guidelines

All AOCMF courses apply the same evaluation process, either ARS (audience response system) or paper and pencil questionnaires. This will help AOCMF to ensure that we continue to meet your training needs. In some regions, CME accreditation is dependent on the participant's evaluation results.

Intellectual property

Course materials, presentations, and case studies are the intellectual property of the course faculty. All rights are reserved.

Recording, photographing, or copying of lectures, practical exercises, case discussions, or any course materials is absolutely forbidden.

Security

Security check at the entrance of the building. Wearing of a name tag is compulsory during lectures,

workshops, and group discussions.

No insurance

The course organization does not take out insurance to cover any individual against accidents, thefts or other risks.

Mobile phone use

Mobile phone use is not allowed in the lecture halls and in other rooms during educational activities. Please be considerate of others by turning off your mobile phone.

Transportation

Not provided for participants

Dress code

Casual

Eduational Event language

English









Course venue

Venue

Skillslab, Erasmus MC Kamernr Ee-120 Dr. Molewaterplein 50 3015 GE Rotterdam Tel.: +31 (0)10 70 40 704

http://www.erasmusmc.nl/SkillsLab/

Course fee

EUR 945.00 Includes coffee breaks, lunch, course material, certificate

Course registration

Please register online at:

http://ROTTERDAM0116.aocmf.org

Notes

Notes



Excellence in facial surgery across the specialties

AOCMF membership

Participation in the AOCMF community guarantees life-long learning opportunities and continuous professional development





AOCMF Videos

Make use of our multimedia teaching and learning materials

Online access to scientific journals

Stay up to date on the latest practices and advancements in the field of craniomaxillofacial surgery

Online case discussions

Participate in the interactive exchange of professional opinions



AOCMF Journal

Craniomaxillofacial Trauma and Reconstruction publishes primary and review articles covering all aspects of surgery of the head, face, and jaw

Available free of charge to all AOCMF members

AO Publications

Take advantage of special discounts and free offers for AOCMF members

AO Surgery Reference

See surgical procedures explained step by step



AOCMF portal

Your window to the AO world

Witness the global reach of our CMF community

www.aocmf.org



AO Foundation

Precondition

The prerequisite for becoming a part of the AOCMF membership community is attendance at one certified AOCMF education event



Membership types

AOCMF Affiliate (CHF 40) no prerequisite

AOCMF e-Member (CHF 40)

AOCMF Member (CHF 75)



AODIALOGUE

Providing a common ground for excellence in craniomaxillofacial surgery