

Less Common Approaches to the Proximal Tibia

Paul Toogood, MD
UCSF Department of Orthopaedic Surgery
Orthopaedic Trauma Institute
San Francisco General Hospital

Outline

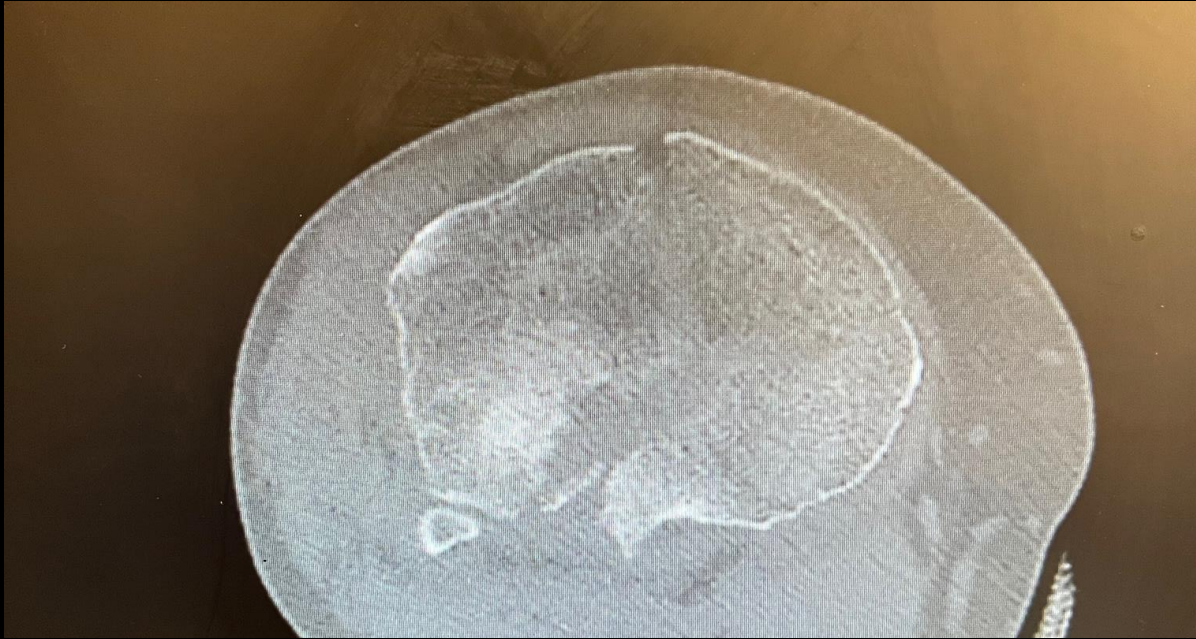
- Lobenhoffer approach
 - Cases
 - Video
- Anterior Medial approach
 - Cases
 - Pictures

Lobenhoffer

Cases/Video

CASE 1







CASE 2





FLUOROSCOPY UP

70

od, Paul

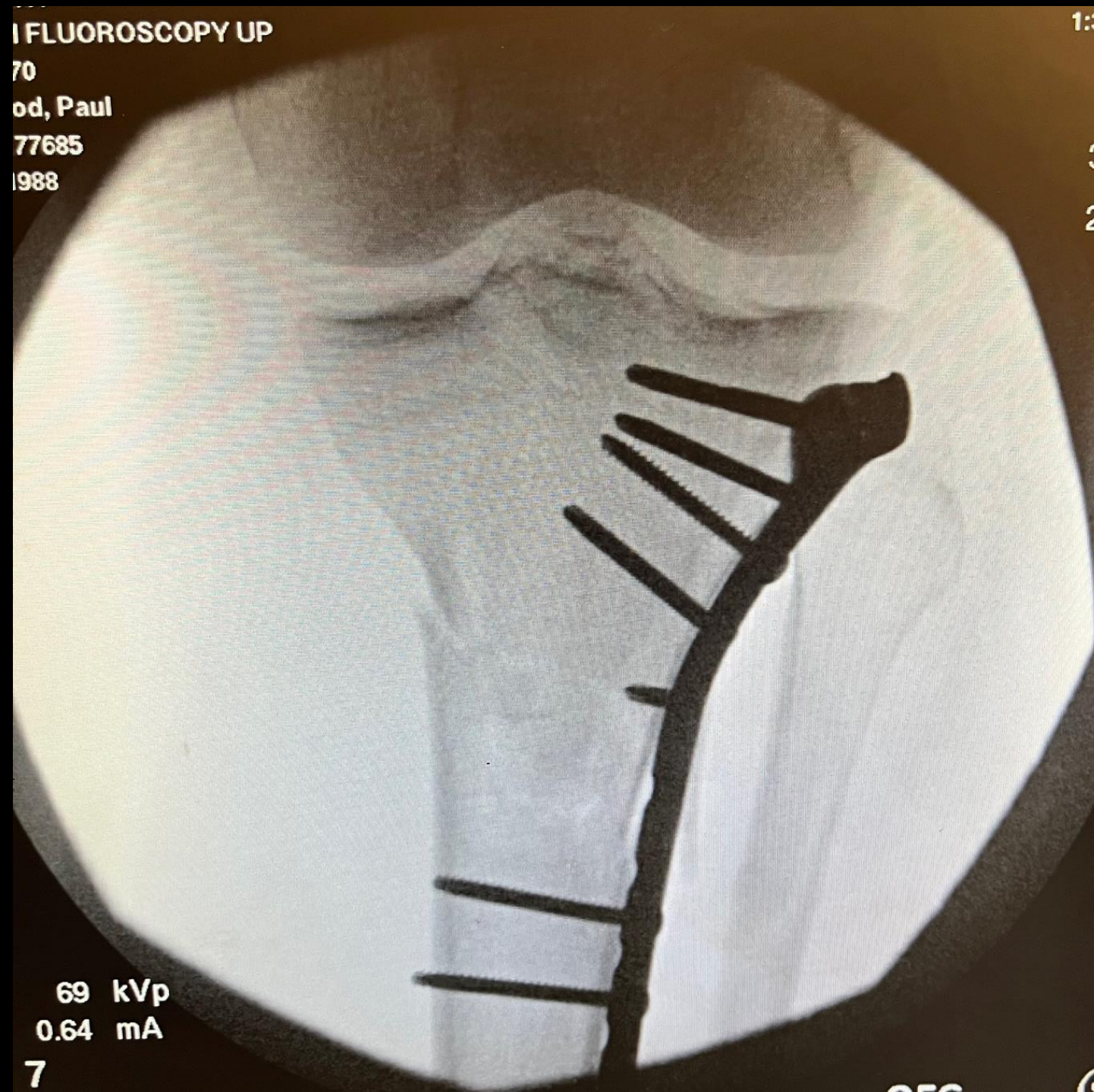
77685

1988

1:3

3

2



69 kVp
0.64 mA

7

056

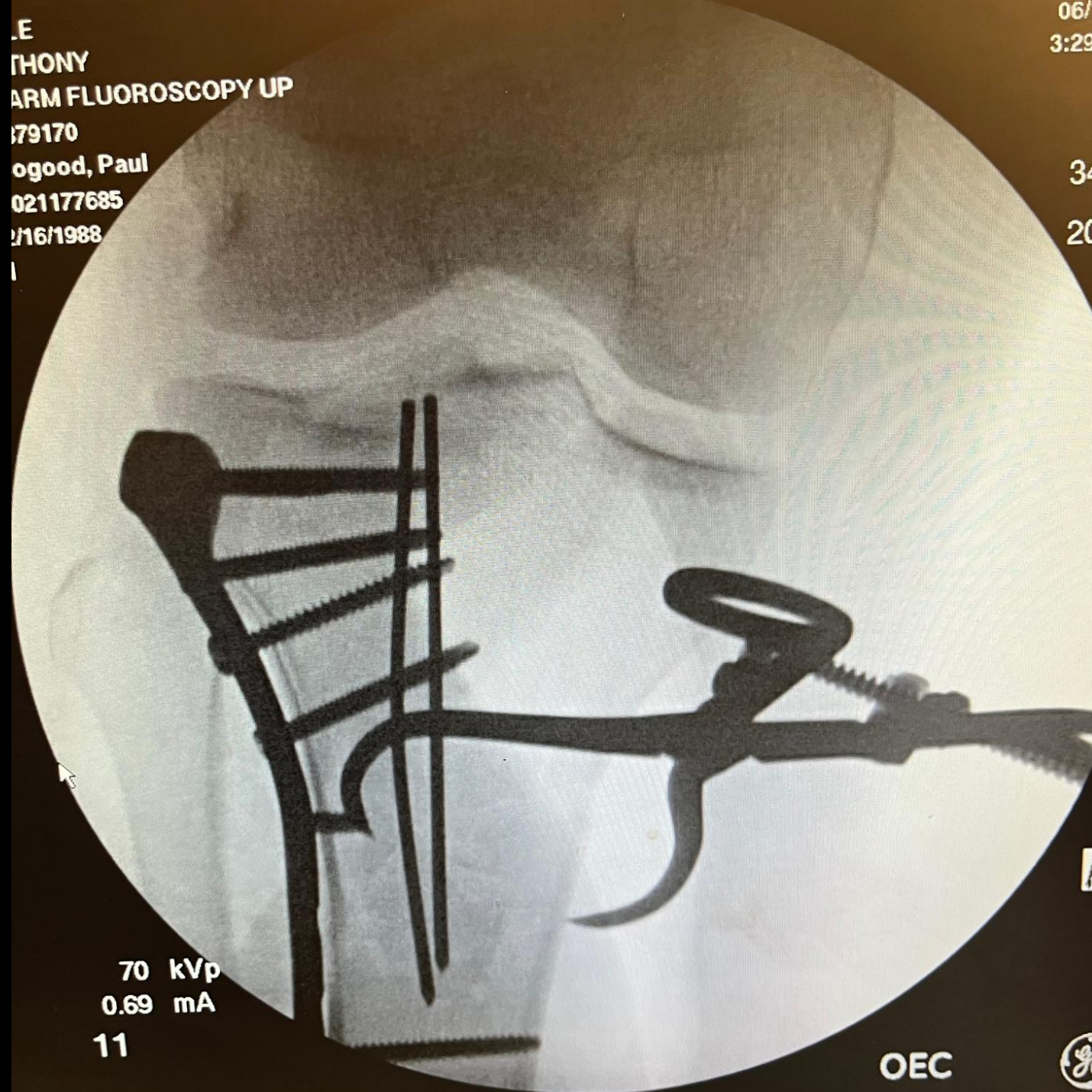


LE
THONY
ARM FLUOROSCOPY UP
79170
ogood, Paul
021177685
2/16/1988

06/1
3:29

34

20



70 kVp
0.69 mA
11

OEC



OLE
NTHONY
-ARM FLUOROSCOPY UP
2879170
Toogood, Paul
10021177685
12/16/1988
M

UCSF MEDICAL CE
06/1
4:04

33
22



69 kVp
0.66 mA
20

OEC



OLE
ANTHONY
ARM FLUOROSCOPY UP
879170
ogood, Paul
0021177685
2/16/1988
A

UCSF MEDICAL CENTER
06/11
4:14:1

34-
21

LE
THONY
ARM FLUOROSCOPY UP
879170
ogood, Paul
0021177685
2/16/1988
A

UCSF MEDICAL CENTER
06/11/2
4:49:12

34-
20

71 kVp
0.74 mA

23

OEC



71 kVp
0.72 mA
27

OEC





Case 3



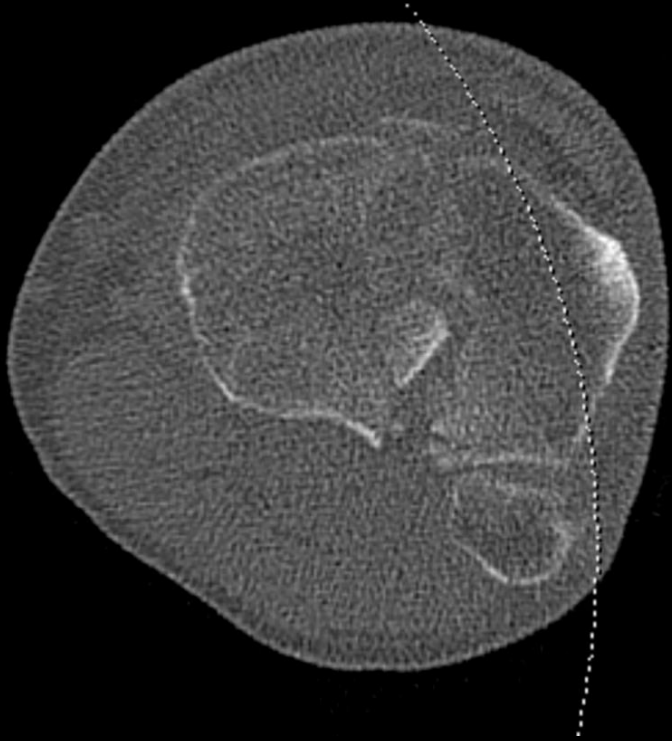
Apr 18, 2023
5:46 AM



SE: 1 KNEE LAT

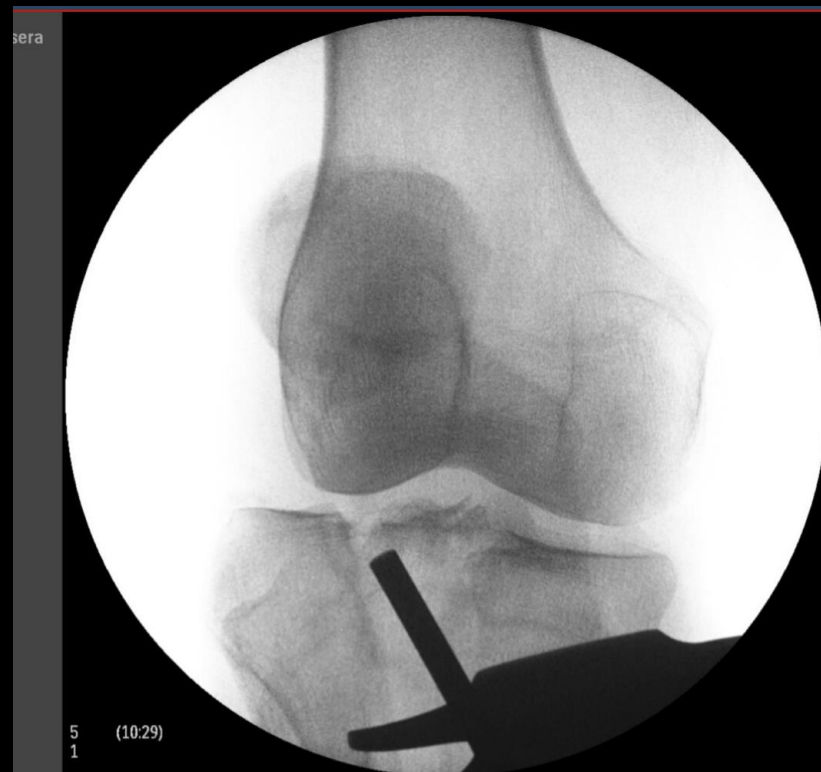


X-TABLE LAT



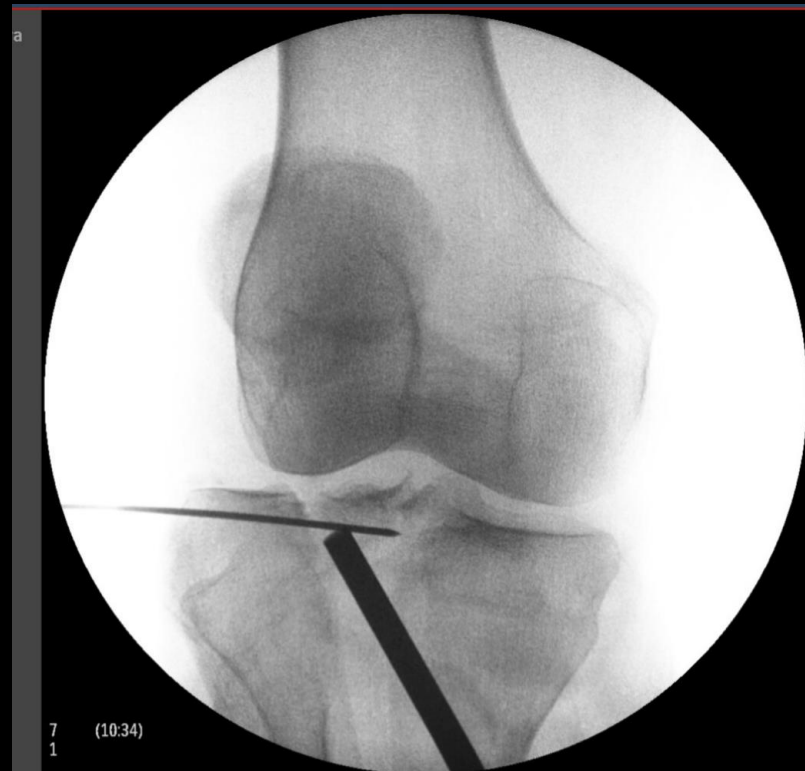


1
1 (10:23)



5
1 (10:29)

Indication For Exam: s/n splinting



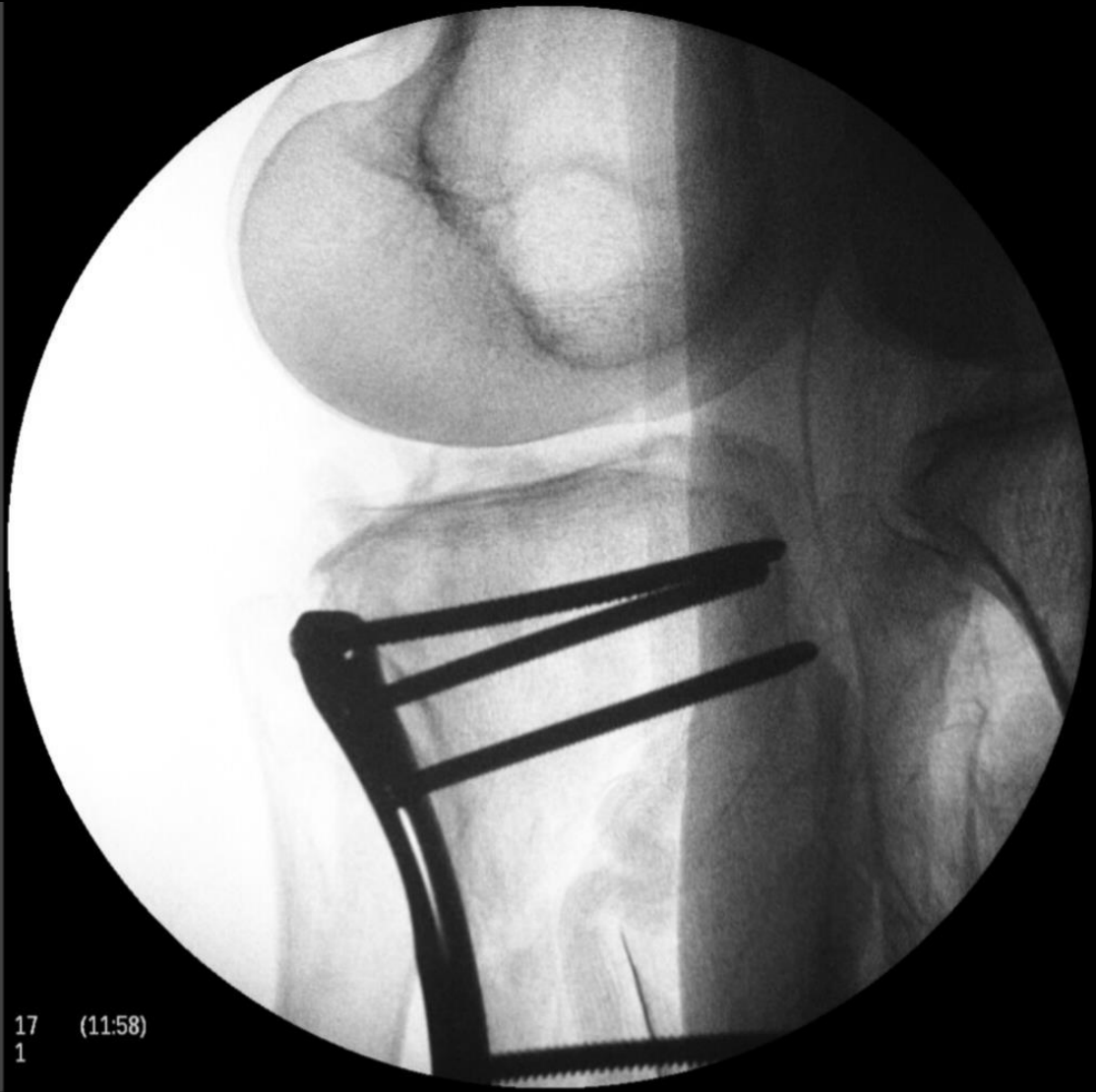
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Indication For Exam: s/n splinting



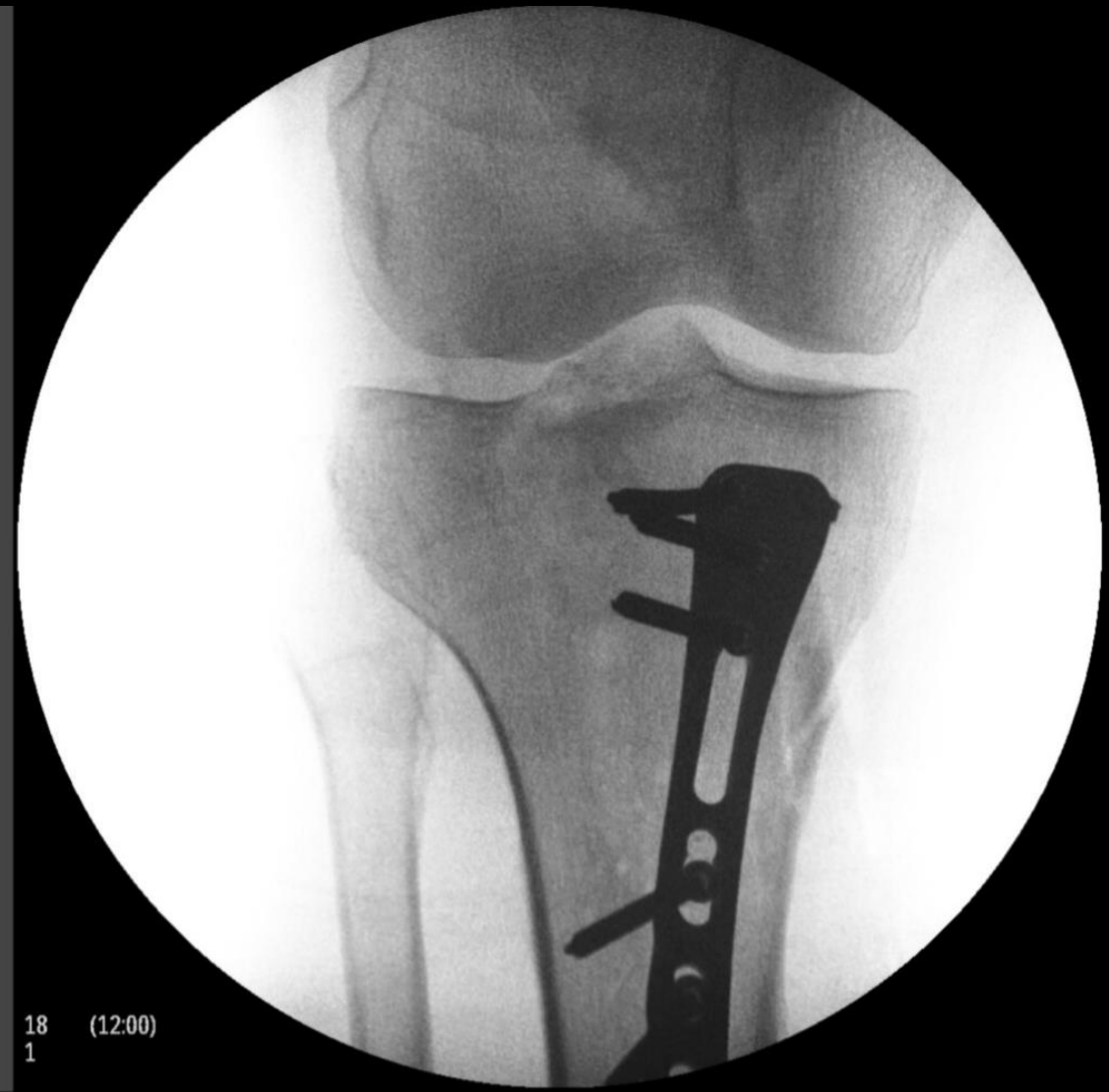
10 (10:58)
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a

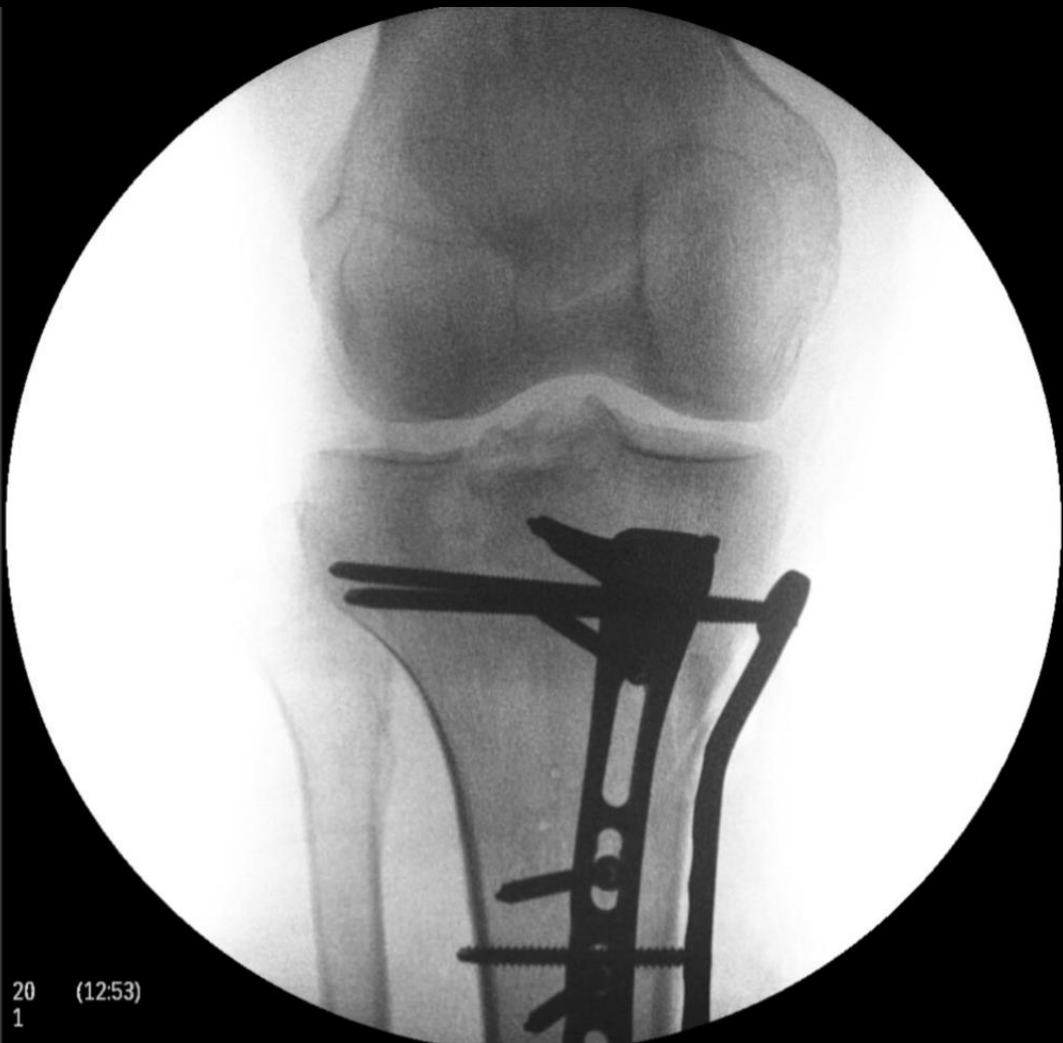


17 (11:58)
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a



18 (12:00)
1



20
1 (12:53)

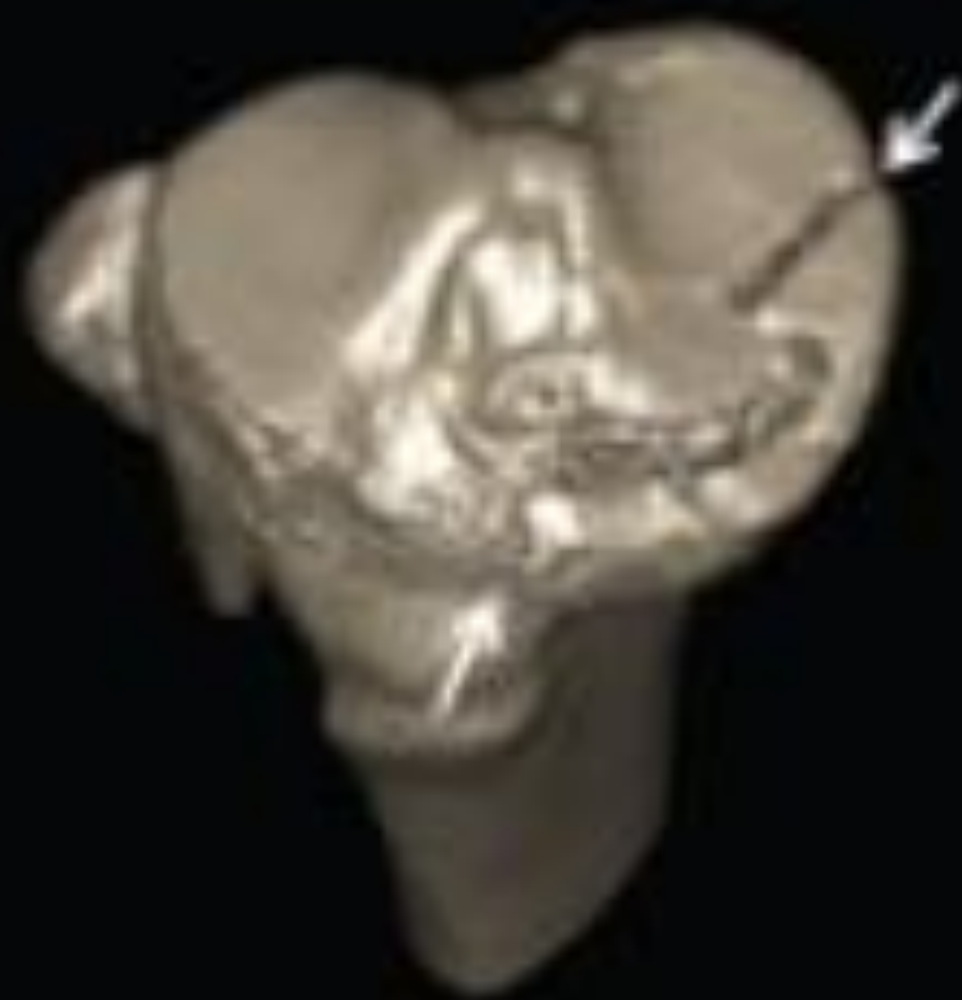
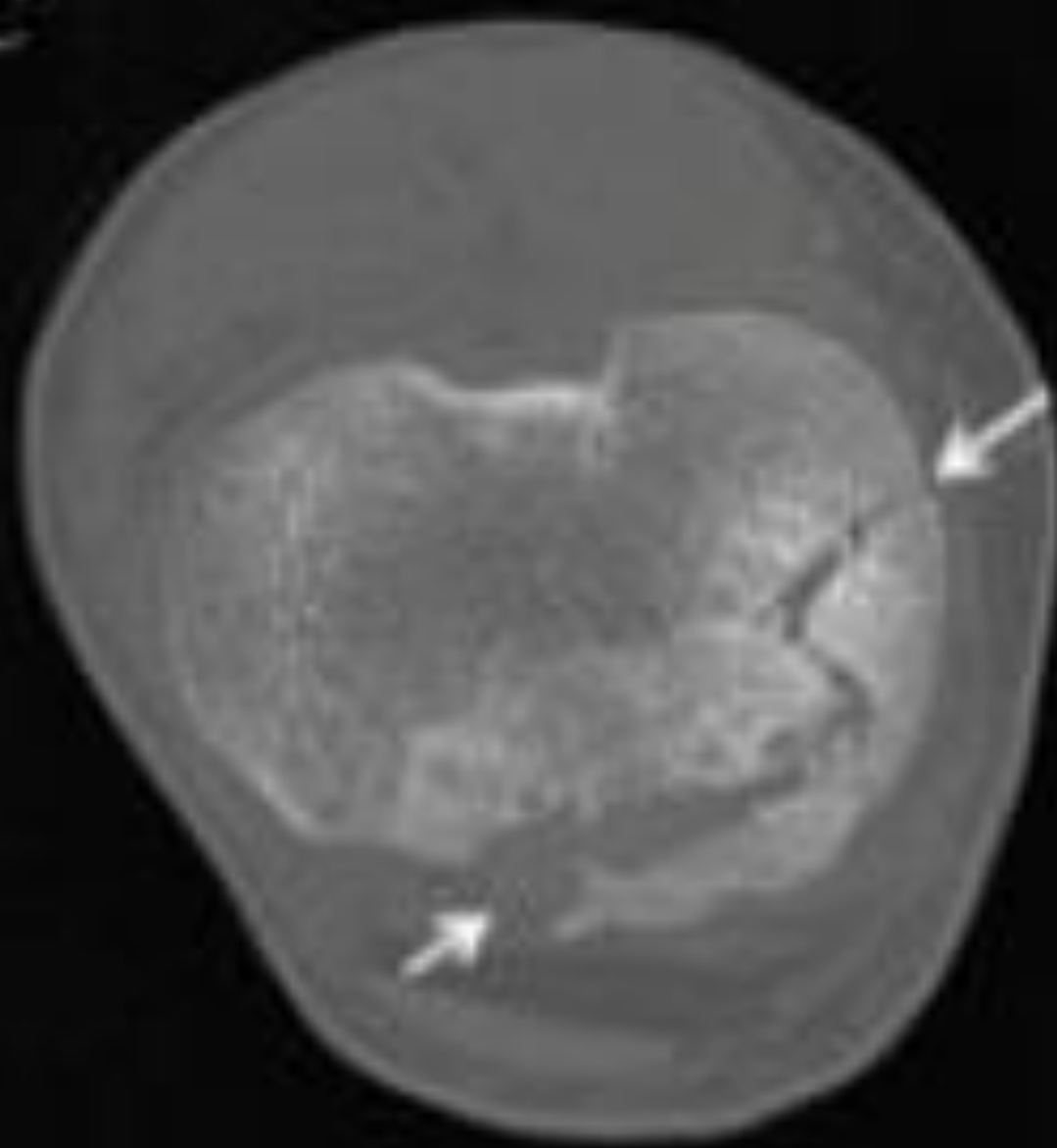


25
1 (12:55)



Anterior Medial

Cases/Pictures

B**C**



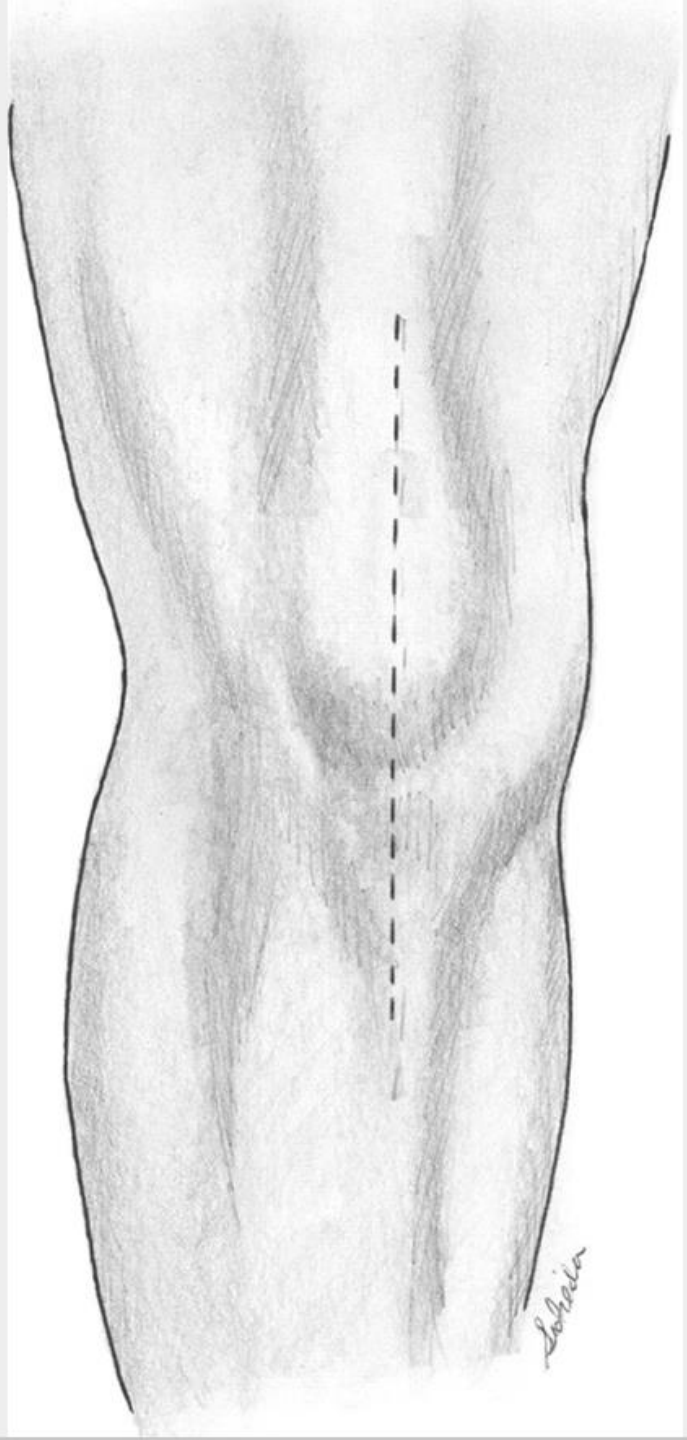
B

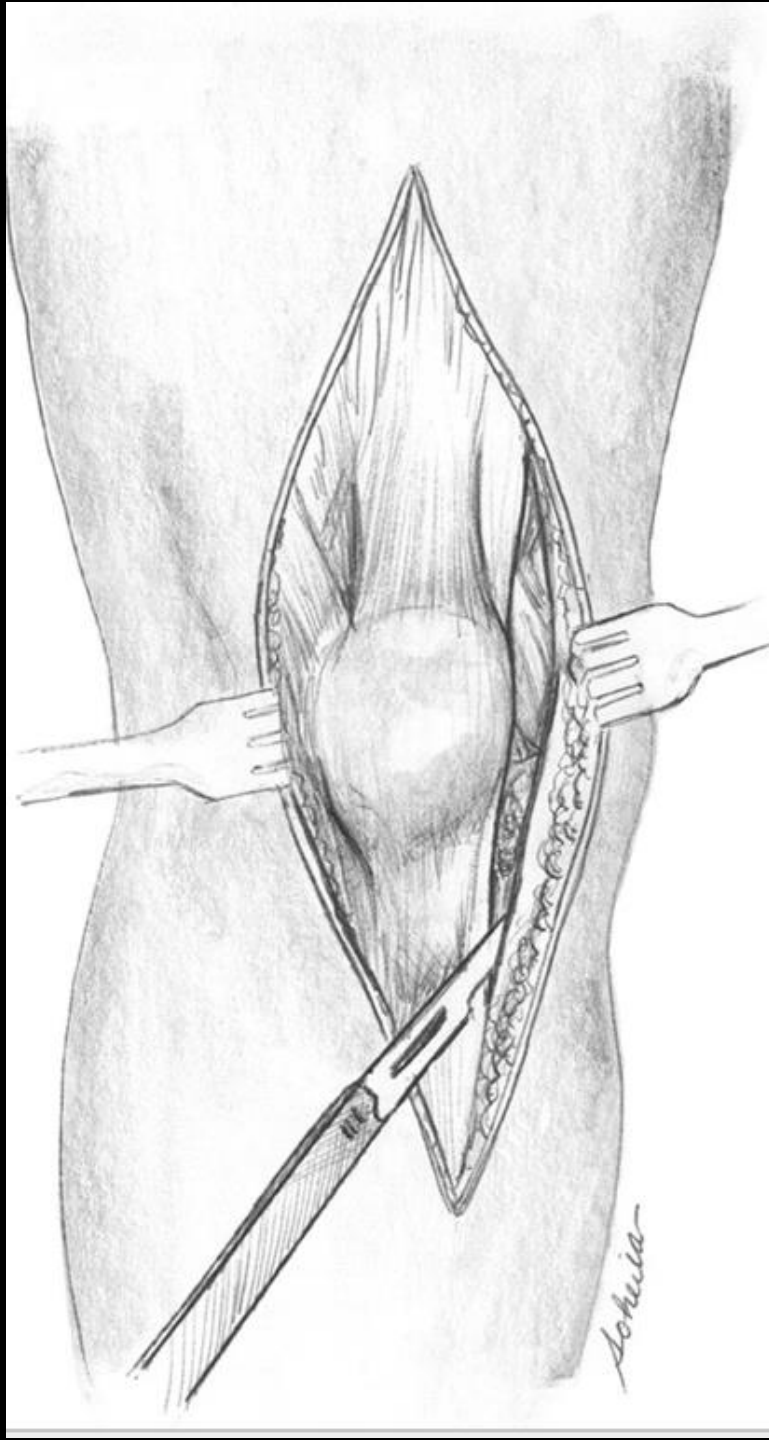


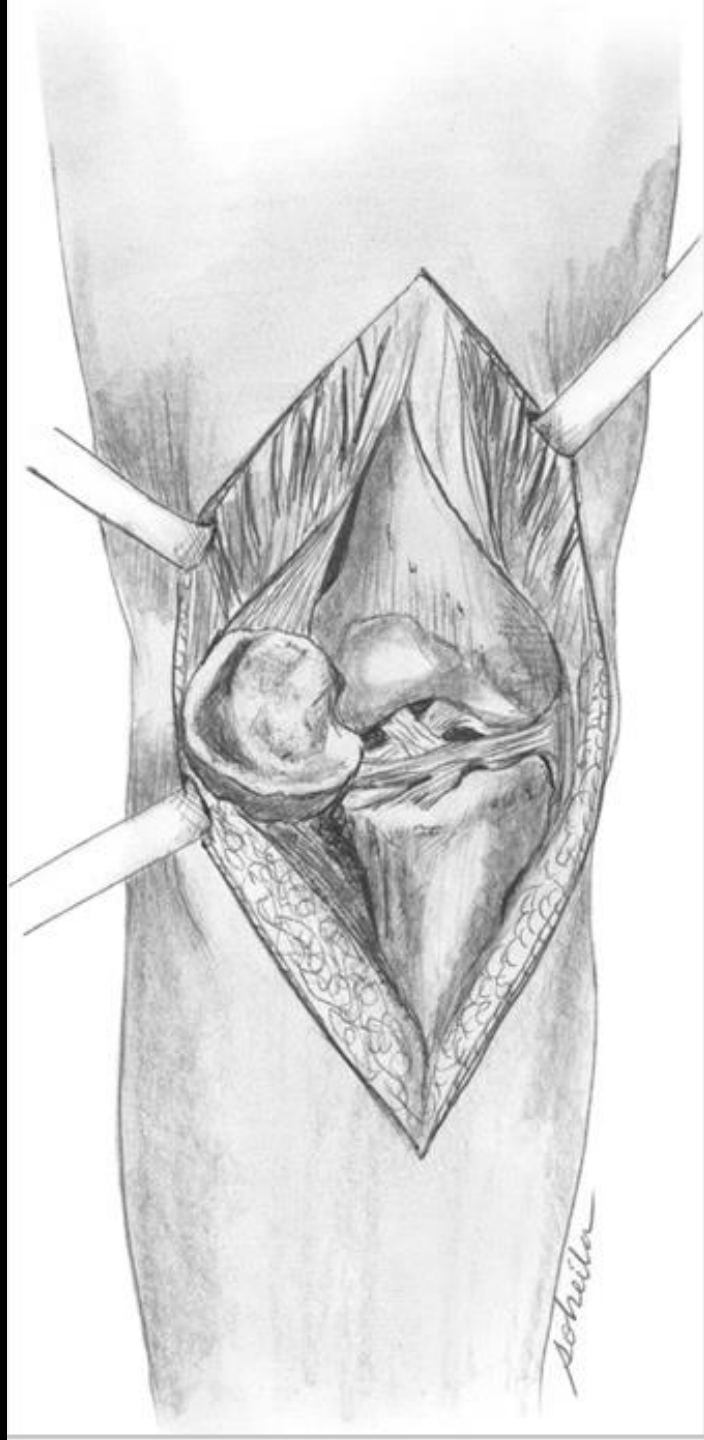


A









Anterior Midline Incision is a Safe and Effective Approach for High-energy Medial Shear Fractures of the Tibial Plateau

Andres Rodriguez-Buitrago, MD, Cesar Cereijo, DO,† Kurt Yusi, MD,‡
and William T. Obremskey, MD, MPH, MMHC§*

Results: Review of 335 patients with tibial plateau fractures during the study period identified a series of 17 high-energy, medial partial articular fractures that met the inclusion criteria. Injury pattern included articular depression in all patients, meniscal injury in 59%, ligamentous injury in 65% and none had compartment syndrome. Immediate radiographic analysis showed restoration of the articular surface, condylar width, and mechanical alignment for all patients. No patient experienced wound healing complications, soft tissue infection or skin necrosis. Median time to radiographic fracture consolidation was 12.9 weeks and ambulation without achieved at 18.9 weeks.