

CORTICES Updates

- **Upcoming BOD conference call**
 - TBD in the next 2 weeks
- **Financial update**
 - POSNA infection directed grant funding ends in June
 - POSNA grants – start thinking of projects
 - CORTICES fund open for membership contributions of \$5,000 (501c3, tax deductible donation) - contact Emily* for instructions
- **Current work**
 - Megan Mignemi and Jaime Rice Denning are working on the website with hopes it will be up and running this summer

Save the Date! Next CORTICES Meeting

- **When:** November 3rd and 4th, 2017
- **Where:** San Diego, CA
- **Weather:** 75° and sunny ☀ (probably)

EPOSNA Summary

- Discussed Infection study and next steps (see page 3 of newsletter)
- POSNA vetted DVT/PE study
 - POSNA BOD interested in CORTICES studying DVT/PE on a national level
 - Suggested starting retrospectively similar to infection study design
 - Other suggestions include:
 - POSNA wide survey
 - Position paper/statement
 - Interested members should contact Emily*

*Emily.Rademacher@childrens.harvard.edu

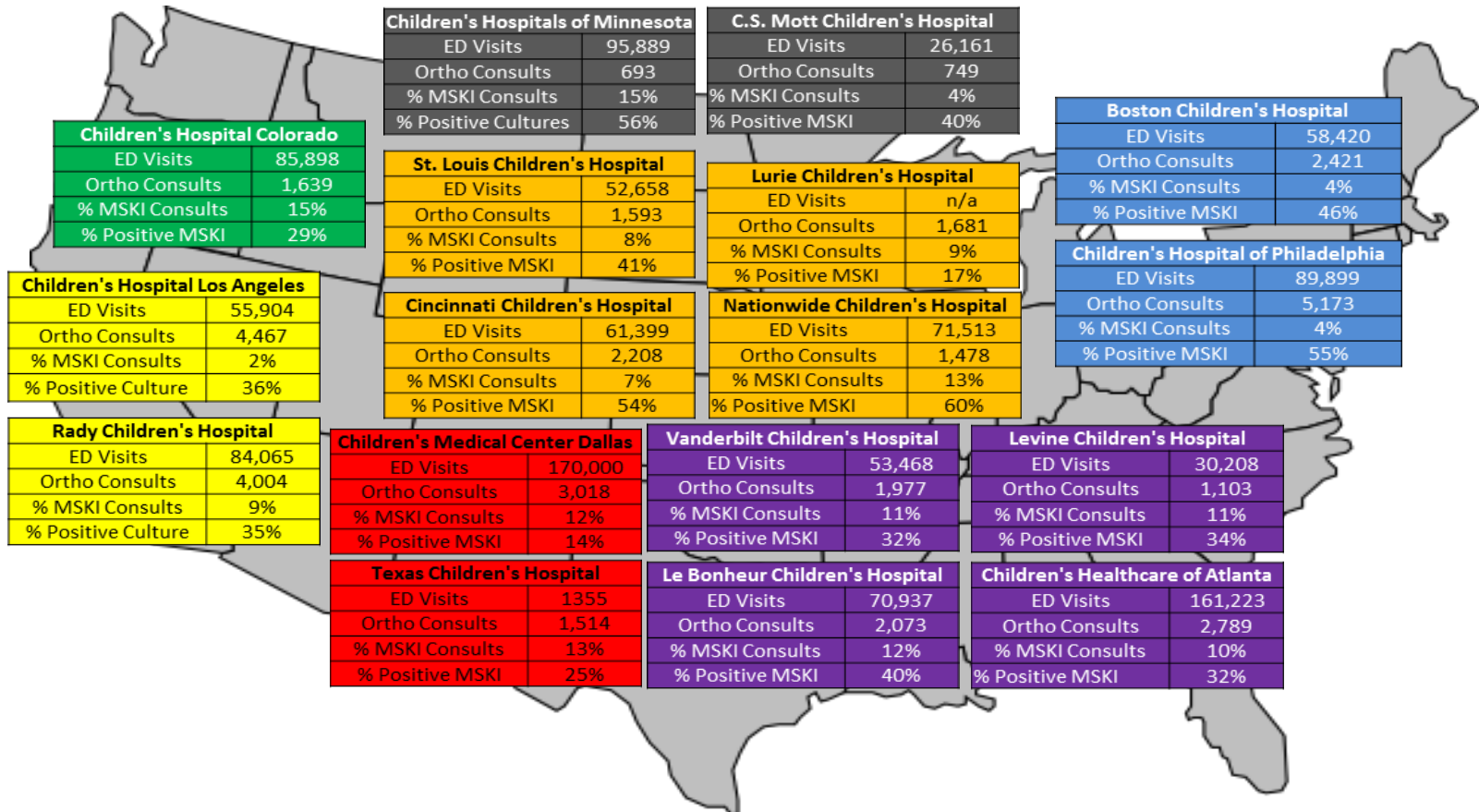
Future Directions

- Case Discussion Corner
 - We are looking to create a discussion corner on Dropbox (or another file hosting service) for CORTICES members to submit PowerPoints and receive feedback on difficult cases. For suggestions on how best to facilitate these discussions email Emily.Rademacher@childrens.harvard.edu
- Retrospective Studies
 - The Research Committee has created a **Study Proposal Form** for submission of retrospective study ideas
 - The SPF asks for specific aims, key methodology, outcome measures (if applicable), and 2-5 relevant literature sources
 - Specific submission dates will be discussed at the November meeting
 - Located in the CORTICES Dropbox folder (also included on page 4 of the newsletter)



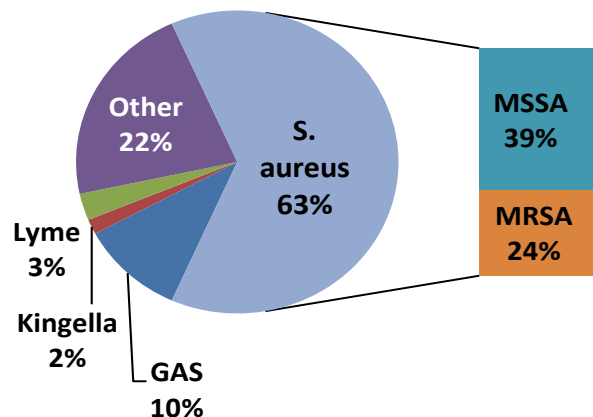
➤ Tier 1 Summary (*Figures and summary data courtesy of Jon Schoenecker)

Seventeen CORTICES centers retrospectively reviewed a minimum of 1 year of patient charts from 2010-2016, reporting the annual number of ED visits, orthopaedic consultations, MSKI related-consultations, patients with positive blood or tissue cultures, and speciation of positive blood and tissue culture results. Considerable regional differences in consult burden and causative organisms were identified.



Predominant Causative Organisms

1. Staphylococcus aureus (63%)
2. Group-A Streptococcus (10%)
3. Borrelia burgdorferi (3%)
4. Kingella kingae (2%)
5. Remaining 22% of positive cultures each accounted for <1% and were reported together as "other"



➤ Go Team!

This is the first report of the burden and regional differences in consultation and causative organisms in MSKI evaluated and treated by pediatric orthopaedic surgeons.

➤ Next Steps

1. We plan to submit several abstracts to AAOS and POSNA regarding Tier 1 data
2. In next month's newsletter, we will circulate a breakdown of missing Tier 2 variables according to institution.

Please try to upload as much data as possible within the next month.

➤ Offshoot Tier 2 Infection Studies

Over the summer we will begin to have frequent planning conference calls to organize offshoot study ideas for the Tier 2 database. If you would like to participate in a particular study, or have a study idea (there are probably over 30 that can be done), please let Jon Schoenecker or Ben Shore know so that there is no duplication of effort.

Study Proposal Form

CORTICES Study Group

Study Proposal Form – Please Complete All Fields

Today's Date:

Project Title:

Principle Investigator, Institution:

Clinical Questions and Specific Aims

1. Primary clinical question

2. Secondary clinical question (if applicable)

3. Specific aim(s) and hypothesis

Key Methodology

1. Prospective, retrospective, QI?

2. Inclusion criteria

3. Exclusion criteria

Outcome Measures

Literature Review

Please provide 2 to 5 resources relevant to your topic.