

ABOS-ALIGNED VR BOOTCAMP CURRICULUM

The following tables outline a roadmap for orthopedic surgery residents. Each activity is designed to last approximately one hour to maximize learning while minimizing fatigue. This schedule is a guideline; residents are encouraged to repeat modules as needed to achieve proficiency and confidence.

Foundational Activities - Anatomy, Imaging, and the Surgical Environment

These first activities are dedicated to the fundamental building blocks upon which all subsequent surgical skills are built. Residents will gain proficiency in navigating the virtual operating room, understanding patient positioning, mastering C-arm fluoroscopy, exploring surgical anatomy, and learning the basic mechanics of arthroscopy.

Activity	Theme	Primary VR Application(s) & Focus	Relevant ABOS Module(s) & Objectives	Estimated Time	Concepts Covered
#1	The Virtual Operating Room and Patient Positioning	VR Applications: BodyWorks Anatomy Studio & FractureLab BodyWorks VR anatomy studio	Module 1: Sterile Technique and Orthopaedic Room Set Up Focus: Familiarize with the virtual environment. Explore the relationship between the virtual patient, and equipment. Practice repositioning the virtual patient. Use the virtual marker to plan and draw mock surgical incisions on the 3D patient model. Explore FractureLab cases where supine, and beach chair patient positions can be studied.	45-60 minutes	 Knowledge of patient positioning (Supine, Beach chair). Ability to select and setup the proper OR table for most common orthopaedic procedures. Ability to position patients in the most common configurations for orthopaedic procedures.



		FractureLab Precisionos			
# 2	C-Arm Proficiency and Fluoroscopic interpretation	VR Applications: Pelvis Imaging (C-arm Tutorial) & FractureLab AO Pelvis Imaging powered by precisionos FractureLab	Module 9: Fluoroscopic Knowledge and Skills Focus: Complete the integrated C-arm tutorial (Case 1 AO Pelvis imaging) to learn controls. Utilize FractureLab cases to explore radiographic projections for the wrist, shoulder and ankle.	60 minutes	 Understand the appropriate uses of fluoroscopy. Acquire the ability to obtain standard fluoroscopic views. Navigate a C-arm for optimal fluoroscopic images.
#3	Surgical Approaches and Soft Tissue Planes	Primary VR Applications: Tornier Approach (Deltopectoral) and BodyWorks Anatomy Studio stryker Tornier Approach precisions	Module 4: Soft Tissue Handling and Dissection Focus: In the Tornier Approach module, practice the initial steps of the deltopectoral approach: marking the incision, incising, identifying the cephalic vein, and placing retractors. BodyWorks Anatomy Studio, use the "Surgical Anatomy" sub-feature to	60 minutes	 Demonstrate how to plan a surgical approach, utilizing bony landmarks, with attention to important structures. Dissect soft tissue using appropriate techniques, which allows identification of surgical planes (simulated).



		Body Works VR anatomy studio	explore the dissected deltopectoral interval and identify neurovascular structures.		Demonstrate sharp and blunt dissection (simulated) and identification of different tissue types.
#4 🗆	Fundamentals of Arthroscopic Camera Control	Primary VR Application: Arthroscopy Scope Skills VRthroscopy Arthroscopy Scope Skills CONMED Precisionos	Module 14 (FAST 1): Basic Principles of Arthroscopy Focus: Use both 30° and 70° virtual arthroscopes. Precisely move the camera to acquire virtual targets, practicing the four fundamental camera movements: telescoping, rotating, pivoting, and periscoping. Aim to improve time and accuracy scores with both dominant and nondominant hands.	45-60 minutes	Become familiar with the angled arthroscope (30- and 70-degree scope). Develop ambidextrous motor skills for basic scope manipulation.
#5	Introduction to Diagnostic Arthroscopy and Triangulation	Primary VR Application: Shoulder Arthroscopy precision os Shoulder Arthroscopy	Module 15 (FAST 2): Basic Triangulation Skills Focus: Perform a diagnostic tour of the glenohumeral joint. Create a virtual posterolateral portal using the spinal needle tool. Insert the arthroscope and systematically visualize all 21 internal landmarks. This introduces the concept of triangulation: coordinating the camera's view with anatomical targets.	60 minutes	Steadiness of the camera and arthroscope. Image orientation (i.e., control of the horizon). Telescoping (i.e., pistoning). Periscoping (i.e., proper use of the 30-degree arthroscope). Basic probe triangulation



Upper Extremity Activities - Fracture Fixation & Advanced Arthroscopy

This group of activities focuses on applying foundational skills to common upper extremity pathologies. Residents will learn the principles of K-wire fixation for distal radius fractures and be introduced to the key steps of arthroscopic soft tissue repair in the shoulder.

Activity	Theme	Primary VR Application(s) & Focus	Relevant ABOS Module(s) & Objectives	Estimated Time	Concepts Covered
					• Learn how to use the wire driver (simulated).
	Principles of K- Wire Fixation	Primary VR Application: FractureLab FractureLab precisionos	Module 10: K-Wire Techniques	60 minutes	• Place the K-wire under direct visualization (in sawbones mode).
#6			Focus: Practice provisional fixation using K-wires under C-arm guidance. Utilize the		Place the K-wire with fluoroscopy.
			"sawbones mode" to first understand the 3D trajectory of the wires without visual obstruction, then apply that understanding within the soft tissue constrained environment.		Manipulate the K- wire and change direction under direct visualization and fluoroscopy.
					• Learn to distinguish cortical and cancellous bone penetration.
			Module 12: Principles and Techniques of Fracture Reduction		Understand the meaning and
# 7	Fracture Reduction and Stability	Primary VR Application: Orthopedic Trauma: Distal Radius CRPP	Focus: Perform a closed reduction and percutaneous pinning of a distal radius fracture. Focus on the application's performance metrics, which score the	45-60 minutes	assessment of an accurate fracture reduction. • Respect for the soft tissue envelope



		Orthopedic Trauma	relative position of K-wires, starting points, and whether wires cross proximal or distal to the fracture line.		(simulated by percutaneous technique). • Effectively utilize skills learned in the Fluoroscopy and K-wire modules to provisionally fix a fracture.
#8	Introduction to Suture Anchor Placement	Primary VR Application: Rotator Cuff Repair Rotator Cuff Repair CCONMED	Focus: This is an introduction to suture anchor placement. Navigate to the anchor placement steps using the numbered step buttons on the instruction panel and place both medial and lateral row anchors into the humeral head. Toggle the skin off to assist in visualizing. Focus on achieving the correct insertion trajectory ("deadman's angle") and depth, using the application's direct scoring on these metrics.	45 minutes	 Ability to identify the appropriate angle of insertion of a suture anchor. Ability to insert a suture anchor to appropriate depth. Ability to pre-test the anchor by a tensile load (simulated).
# 9	Introduction to Arthroplasty: Humeral Preparation	VR Applications: Tornier Performed Humeral System Application & PrecisionOS Connect Stryker Tornier Perform Humeral System precisionos	Focus: Practice the initial steps of humeral preparation for arthroplasty. Use the virtual cut guide to resect the humeral head with the correct version. Take note of the retractor positions to protect soft tissue. Place the guidewire and use the reamer to prepare the proximal humerus for a stem implant.	60 minutes	 Understand the use of bone saws and various blades to perform bone cuts. Demonstrate the ability to properly place jigs and prepare to make bone cuts. Demonstrate the ability to use



		PrecisionOS CONNECT	Load into the Shoulder Arthroplasty case in PrecisionOS Connect and practice freehand cutting of the humeral head.		femoral reamers (humeral analogue). • Understand how to protect surrounding soft tissues.
#1 0	Introduction to Arthroplasty: Glenoid Preparation	VR Applications: Tornier Perform Glenoid System & Zimmer Biomet Augmented Baseplate stryker Tornier Perform Glenoid System precisionos ZIMMER BIOMET Comprehensive Reverse Shoulder System Augmented Baseplate precisionos	Module 15: Basic Arthroplasty Skills Focus: Practice the fundamental steps for an anatomic glenoid case. Focus on correctly sizing the glenoid, reaming the surface, and positioning the trial implant. Pay attention to the scoring based on alignment and avoiding mistakes like over-reaming or incorrect positioning. The Zimmer Biomet Augmented Baseplate application contains 3D models within the case lobby that you should explore. Each glenoid pathology requires a unique preparation for arthroplasty.	60 minutes	Understand the use of reamers to accurately and safely perform bone preparation for arthroplasty. Assess appropriate depth and orientation of reaming. Demonstrate the ability to protect surrounding soft tissues while performing bone cuts.



Lower Extremity & Pelvis Activities - Trauma and Fixation

This series of activities transitions to the lower extremity, focusing on large bone fracture management, hip and knee arthroscopy, and advanced fluoroscopic navigation skills.

Activity	Theme	Primary VR Application(s) & Focus	Relevant ABOS Module(s) & Objectives	Estimated Time	Goals/Objectives
# 11	Anterior Hip Surgical Approach	VR Applications: Anterior Hip Approach & BodyWorks Anatomy Studio ZIMMER BIOMET Anterior Hip Approach precisions Precisions VR anatomy studio	Module 4: Soft Tissue Handling and Dissection; Module 15: Basic Arthroplasty Skills Focus: Learn the key steps of the Smith-Peterson direct anterior approach to the hip. Practice incision planning, retractor placement, and identification of key intervals and structures at risk. Use BodyWorks to reinforce the 3D anatomy of the approach before and after the procedural simulation.	60 minutes	Demonstrate how to plan a surgical approach, utilizing bony landmarks. Dissect soft tissue using appropriate techniques, which allows identification of surgical planes (simulated). Understand bone anatomy of the hip with respect to arthroplasty. Understand how to protect surrounding soft tissues.
#12 □	Traction and Femur Fracture Reduction	Primary VR Application: Proximal Femoral Nail	Module 6: Traction Techniques; Module 12: Principles and Techniques of Fracture Reduction Focus: Focus on the initial step of fracture reduction. Use the virtual traction boot to manipulate the leg	60 minutes	 Understand the indications for skeletal traction (conceptual). Demonstrate the ability to accurately place a traction pin (guidewire) across a



		Proximal Femoral Nail	(traction, rotation, adduction/abduction) to achieve acceptable alignment of proximal femur fracture fragments under live C-arm guidance. Complete this by accurately placing the guidewire through the fracture.		simulated bone/extremity. • Understand the importance of preoperative planning and assessment of fracture position.
#13	Intramedullary Fixation	Primary VR Application: Proximal Femoral Nail precision os Proximal Femoral Nail	Module 11: Techniques Basic to Internal Fixation of Fractures Focus: Proceed with fixation. Perform the complete sequence of intramedullary nailing: placing the guidewire, reaming, inserting the nail, and placing interlocking screws. Focus on the guidewire accuracy score and number of x-rays taken.	60 minutes	 Using a drill to place screws to fix fractures. The ability to use a tap (simulated by reaming). The ability to place screws in a precise location controlled by single plane or biplanar fluoroscopy.
# 14	Percutaneous Hip Fixation (SCFE)	Primary VR Application: Slipped Capital Femoral Epiphysis (SCFE) precisionos Slipped Capital Femoral Epiphysis	Module 10: K-Wire Techniques; Module 12: Principles and Techniques of Fracture Reduction Focus: Select the "moderate" severity case. Manipulate the hip on the virtual traction table. Under bi-planar C-arm guidance, insert a single cannulated screw into the femoral head without violating the joint, reinforcing 3D spatial reasoning.	45-60 minutes	Place the K-wire with fluoroscopy. Understand common surgical approaches (percutaneous). Develop psychomotor skills to accurately navigate a wire to a precise location using bi-plane fluoroscopic control.
# 15	Diagnostic Knee Arthroscopy	Primary VR Application: Infinity Knee System (Anteromedial ACL)	Module 15 (FAST 2/3): Basic Triangulation Skills & Basic Interventional Arthroscopy Focus: Use this module for a comprehensive diagnostic knee tour.	60 minutes	Demonstrate creation of safe portals and articulate associated risks. Touch and probe of a stationary target.



		VRthroscopy Infinity™ Knee System ANTEROMEDIAL CONMED © precisionos	Practice portal entry, mobilize the knee to open compartments, and systematically visualize all internal structures (menisci, ligaments, cartilage). Reinforce triangulation skills.		Develop ambidextrous motor skills. Understand the relationships between surface anatomy and basic arthroscopy portals.
# 16	Introduction to Robotic- Assisted Arthroplasty	Primary VR Application: ROSA Knee System ZIMMER BIOMET ROSA Knee System precisionos	Module 15: Basic Arthroplasty Skills (TKA & THA) Focus: Focus on the initial, critical steps of robotic-assisted TKA: landmark registration. The resident will use the virtual pointer to identify and register key anatomical landmarks on the distal femur and proximal tibia. The goal is to accurately place the registration points within the target zones, reinforcing understanding of knee anatomy and alignment principles.	60 minutes	Understand bone anatomy of the knee with respect to arthroplasty. Demonstrate the ability to properly place jigs (analogous to landmark registration pins) and prepare to make bone cuts. Describe varus and valgus alignment, rotation measurements, and flexion/extension balancing.
# 17	Principles of Revision Knee Arthroplasty	Primary VR Application: Persona Revision Knee System ZIMMER BIOMET Persona Revision Knee System precisionos	Module 15: Basic Arthroplasty Skills (TKA & THA) Focus: Understand the key steps and sequencing of a revision TKA. Practice intramedullary reaming, positioning of guides, and marking for both the proximal tibia and distal femur in a revision scenario. Focus on one of the pathological cases to understand the decision-making process for component selection and placement.	60 minutes	 Understand the use of bone saws and various blades to perform bone cuts. Demonstrate the ability to properly place jigs and prepare to make bone cuts.



	Demonstrate the ability to use femoral reamers. Understand the preparation and curing process of bone cement (cognitive).
--	--



Activities for Spine, Advanced Procedures, and Synthesis

These final activities introduce some basic spine procedures, explore analogous skills for advanced concepts like osteotomy and compartment syndrome, and culminate in a final reflective capstone exercise.

Activity	Theme	Primary VR Application(s) & Focus	Relevant ABOS Module(s) & Objectives	Estimated Time	Goals/Objectives
#18	Spine Navigation and 3D Spatial Awareness	VR Applications: Non Operative Spine & X360 precision os Non Operative Spine	Module 1: Patient Positioning; Module 9: Fluoroscopic Knowledge and Skills Focus: Work with a prone-positioned patient. Place a spinal needle accurately into the L5-S1 disc space by interpreting simultaneous AP and lateral C-arm views to guide the needle tip in 3D space. X360 case 1 will allow you to explore the positioning and setup for a lateral patient.	45 minutes	Be able to safely position patients in the prone, and lateral configurations. Develop psychomotor skills to accurately navigate a wire/needle to a precise location using bi-plane fluoroscopic control. Understand general and site-specific fluoroscopic anatomy.
#19 □	Pedicle Screw Fixation	Primary VR Application: CIOS Spin: Case 4	Module 11: Techniques Basic to Internal Fixation of Fractures Focus: Insert pedicle screws in a patient with hyperlordosis. Control the C-arm to obtain optimal "en face" views of the pedicle. Accurately guide the wire and subsequent screw down	60 minutes	 The ability to place screws in a precise location controlled by fluoroscopic control. Assess position of hardware/surgical instruments fluoroscopically.



		Cios Spin SIEMENS Healthineers precisionos	the pedicle corridor, avoiding a breach.		
#20	Introduction to Bone Resection (Osteotomy Analogue)	Primary VR Application: Hip Arthroscopy: FAI VRthroscopy Hip Arthroscopy FAI CONMED	Module 8: Bone Handling Techniques - Osteotomy Focus: Use a high-speed virtual burr to resect a cam lesion under arthroscopic guidance. Learn to control the burr to remove pathological bone while preserving healthy adjacent articular cartilage. The scoring mechanism penalizes removal of healthy bone.	60 minutes	 Understand the characteristics and techniques related to the instruments used for osteotomy (burr as an analogue). Understand the technique to mitigate soft tissue trauma.
# 21	Anatomic Landmark Identification for Joint Aspiration & Injection	Primary VR Application: BodyWorks Anatomy Studio Precisions BodyWorks VR anatomy studio	Module 16: Joint Aspiration and Injection Focus: Use the virtual marker to identify and draw key anatomic landmarks for common joint injections (e.g., knee, subacromial space). Use the virtual spinal needle to simulate the correct trajectory and entry point for these injections, aiming for the virtual joint space. This reinforces 3D spatial awareness of joint anatomy.	45-60 minutes	• To demonstrate knowledge and drawing of anatomic landmarks for the shoulder, elbow, wrist, knee and ankle.



# 22	Bootcamp Synthesis and Self-Reflection	Primary VR Application: None	Focus: Conclude the bootcamp with a structured self-reflection. Residents should review the catalogue of applications they have used. Using a personal log or a document, they should reflect on each key application, documenting: 1. The most significant skill or concept learned. 2. How the simulation changed their perspective on the procedure or anatomy. 3. An area of personal growth they recognized through the module.	60 minutes	Synthesize knowledge gained across multiple foundational modules. Perform a structured self-assessment of technical skill acquisition and identify areas of strength. Articulate areas for continued practice and future learning. Reflect on the role of simulation in developing surgical competence and patient safety.
-------------	--	---------------------------------	---	------------	---