

PASSION FOR SIGN

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As an outgrowth from my first passion of quality healthcare, is my growing passion for SIGN whose vision is “To Create Equality of Fracture Care throughout the World”. SIGN, a non-profit organization that I founded in 1999, stands for surgical implant generation network. Now with 15 staff and growing, we design and manufacture orthopaedic implants and donate them to hospitals in developing countries. Additionally, we provide training to the surgeons in the developing countries on the use of the SIGN implant system as well as passing on the conventional wisdom that we learn from US orthopaedic research. The training occurs via 1) onsite visits

by me and a growing number of US surgeons and 2) by electronic exchange using email, our website (www.sign-post.org) and the SIGN surgical database. We work toward the goal of creating equality of fracture care one fracture at a time by giving the local surgeons the ability to care for their patients every day. The host surgeon also teaches us their approach to fracture care so all of us have a stake in SIGN. As the hub of orthopaedic communication for all SIGN programs, we share the different approaches with all SIGN surgeons via email and the technique manual which is posted on the web-site. After certification as a SIGN program SIGN provides replacement instruments, nails and screws for each surgery reported on our database.

I now travel 4-5 times a year for SIGN. Each trip usually involves visits to three countries. During my visits, I operate with the local SIGN surgeons and residents. SIGN workshops are held in each country by existing SIGN surgeons who present papers on the results of SIGN in their hospitals. These workshops provide an opportunity to renew friendships between SIGN surgeons and certify surgeons in SIGN technique for new programs. We also hold a SIGN conference at our Richland Washington factory on an annual basis. Surgeons from around the US, Canada and several from the developing world attend and give talks on the use of IM nailing in the developing world. It is an excellent opportunity for surgeons from the developing worlds to attract US surgeons to their hospital.



The SIGN nail is the only IM nail used to treat victims in the Pakistan earthquake. As a result of our response to this disaster, we started new programs in three hospitals and in two camps who are all treating earthquake victims with fractures of the femur tibia and Humerus. The surgeons in the affected area were made aware of SIGN by surgeons from the three programs established in Pakistan before the earthquake struck. These first three programs were initiated by Dr. Ajmal Yasin who attended a SIGN conference three years ago. (photo of Pakistan earthquake and Yasin)

I am grateful to each of you at Northwest Orthopaedic Associates for making this opportunity to develop and expand SIGN possible. I feel an especially deep gratitude to my partners who have supported my efforts throughout the years.