

JAI RAWAL FRCS TRAUMA AND ORTHOPAEDICS

PUBLICATIONS LIST

A pilot study of change in fracture risk in patients with acute respiratory distress syndrome

Jaikirty Rawal, Mark JW McPhail, Gamumu Ratnayake, Pearl Chan, John Moxham, Stephen DR Harridge, Nicholas Hart, Hugh E Montgomery, and Zudin A Puthuchearu
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Arthroplasty in the Valgus knee: Comparison and discussion of lateral versus medial parapatellar approaches and implant selection

J. Rawal, A. Devaney, J. Jeffery
The open Orthopaedics Journal, Feb 2015 pp94-97

Qualitative Ultrasound in Acute Critical Illness Muscle Wasting.

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J Rawal

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James R.A. Skipworth, Zudin Puthuchery, Jaikirty Rawal and Hugh Montgomery

Awaiting publication:

Surgical stabilisation of Acetabular injuries; approaches and methods

Orthopaedics and Trauma:

Book Chapter

Jaikirty Rawal, Homa Arshad, Peter Bates

Factors influencing the usability of volume rendered computed tomography of the elbow

S Imam, J Rawal, L Van Rensburg

Cambridge University Hospitals Foundation NHS Trust

Case report: Heterotopic ossification of Adductor Longus mimicking the snapping hip

J. Rawal, M. Garner, V. Khanduja

Cambridge University Hospitals Foundation NHS Trust

Case report: Suture anchor placement as a cause for post Hip arthroscopic pain: a case report

J. Rawal, M. Garner, V. Khanduja

Cambridge University Hospitals Foundation NHS Trust

Anatomical relations of iliopsoas tendon with relevance to hip arthroscopy

J. Rawal, M. Garner, V. Khanduja

Cambridge University Hospitals Foundation NHS Trust

The Relationship Between Lower Limb Bone and Muscle in Military Recruits, and its Response to Physical Training"

Zudin puthucheary, Mehdi Kordi, Jaikityr Rawal, Kyriacos Eleftheriou, John Payne, and Hugh Montgomery.

THE KALLIKREIN-KININ SYSTEM AND BONE HEALTH IN YOUNG MEN

A. Kehoe, K. Eleftheriou and J. Rawal

Audit

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| <p>The delivery of pelvic and acetabular surgery across Greater Manchester We are auditing against BOAST and NICE guidance on the management of P and A fractures with particular attention to time from injury to surgery over the last 7 months. Here, through my appointment, waits have decreased from 10 days to 48 hours.</p> |
| <p>The compliance with BOAST 4 standards with open tibial fractures Here we have demonstrated only 25% compliance with BOAST guidance. We are therefore exploring the network arrangements with plastic services to improve this</p> |
| <p>VTE rates in head injured patients with two long bone and or pelvic ring injury This is to inform us of the need for IVC filtration prior to pelvic surgery. So far in three years of data, purely using mechanical VTE prophylaxis there has been only 3 VTE events.</p> |
| <p>The Surgical burden of Jumpers fractures. Anecdotally, I have noticed high-energy fall injury carry significant morbidity and return to theatre rates. We are investigating this in terms of time and returns to theatre for this cohort of patients following this mechanism of injury</p> |
| <p>National Audit: Medial epicondyle fractures in the paediatric cohort. I am helping to coordinate this national audit in the east of England examining regional variation in the management of medial epicondyle fractures in children. I have been responsible at the Addenbrookes site for the collation of this data but also in delegation of the project across the deanery, and a point of contact with the main Principle investigators Daniel Perry based at Liverpool at the time.</p> |
| <p>The impact of deformity correction in Scoliosis surgery on PROMS, pre and post operatively 3 year follow up. I looked at PROMS data (Scoliosis research society outcome scores) and investigated the impact of surgery has on the various domains. SRS scores appear to be significantly improved form preoperatively at a year post operatively and demonstrate a trend for ongoing improvement beyond this.</p> |

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| <p>Non-statistical improvements were seen in all domains, however the most dramatic improvement was in the Self-Image domain.</p> |
| <p>Is there still a role for the Austin Moore prosthesis Evaluating the revision rates for cemented exeter and Austin moore prosthesis in the hip fracture setting.</p> |
| <p>Early Outcomes for the Journey Unicdylar knee replacement The Journey unicdylar knee replacement is a recent development from Smith and Nephew and currently is being evaluated in our hospital.</p> |
| <p>Oxford knee scores following Total knee replacement I investigated both consultant versus registrar OKS and associations of OKS with gender, pre operative score and BMI</p> |
| <p>Bone patella bone versus hamstring graft for ACL reconstruction I looked into a single surgeons series of the incidence of failure of hamstring and bone patellar bone ACL grafts. There were no failures in the BPB group. The Hamstring failures although rare were associated with a small graft diameter of less than 7mm</p> |
| <p>The role of CT scanning in paediatric polytrauma: We are investigating the role of CT imaging in paediatric polytrauma in keeping with the ALARA principle of minimal radiation for children.</p> |
| <p>Complication rates following surgery for severe open tibia and femoral fractures. The published literature for infection, non-union and revision surgery rates is variable with regards to open fractures. I aim to establish what these are locally so as to guide future management of these significant injuries. This audit is occurring at Addenbrookes hospital (MTC) and similarly an ongoing audit at The Royal London is auditing our practice against BOAST guidelines.</p> |
| <p>An audit of post operative weight bearing status and relationship to delay in physiotherapy and delay in discharge We are auditing whether weight bearing status has been entered in the post operative instructions and whether this lead to a delay in receiving appropriate physiotherapy</p> |