THE 2017
GENERAL GUIDELINES
FOR PARTICIPATING SITES

PROGRAM DATES:
DECEMBER 4 - 9, 2017

[ GUIDELINES RELEASE DATE: MAY 3, 2017 ]
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DISCLAIMER

These General Participation Guidelines are based on organizational experience, history and feedback received from participating physicians, other healthcare providers, and hospital administrators. These Guidelines should be regarded as **general recommendations** on how to establish a participation process; they are not intended to address specific details of patient care, or to direct how participating hospitals and healthcare providers should deliver that care. **All aspects of patient care are in the hands of volunteer healthcare professionals.** Operation Walk USA provides a unified brand identity and an organized national platform for hospitals and volunteers to give back to their local communities. Operation Walk USA participants are expected to provide the same high quality of care to Operation Walk USA patients as they provide to all patients treated in the normal course of their practice.

1. ABOUT OPERATION WALK USA

**Operation Walk USA** is an independent medical humanitarian organization that provides free hip or knee replacement surgeries to patients in the US. **Operation Walk USA** benefits **US citizens and permanent residents** who do not qualify for government assistance programs and cannot afford surgery on their own. **Operation Walk USA** is committed to helping those in need by restoring their mobility, self-dignity and productivity, thus helping them return to work and their social activities. Our efforts are supported by professionals across the wide spectrum of health care—from orthopaedic surgeons who donate their skills and time and hospital administrators who provide beds, operating room facilities, medications, and recovery support, to other professional medical specialists (anesthesiologists, nurses, scrub technicians, physical therapists). Additional supporters include: implant manufacturers, other corporate entities, and local skilled nursing facilities (in some cases).

**Operation Walk USA** takes place once a year, in early December. The 2017 event is scheduled to occur between **December 4-9, 2017**. These dates are chosen deliberately to fall during the winter holiday season that carries with it the spirit of giving, compassion and helping our neighbors in need, and are intended to provide hospitals, physicians, and others flexibility with scheduling OR time and allocating of the necessary resources. Each hospital may choose one or multiple dates within the designated week.
Since 2010, Operation Walk USA has given $18.9M back to our communities in pro bono medical care services and helped 702 patients.

Review our BROCHURE to learn more.

3. LEADERSHIP OF OPERATION WALK USA

Operation Walk USA is a self-governed organization led by its Executive Committee:

Adolph V. Lombardi, Jr., MD – President (New Albany, OH)
Douglas A. Dennis, MD – President-Elect (Denver, CO)
Lawrence D. Dorr, MD – Secretary (Los Angeles, CA)
Chitranjan S. Ranawat, MD – Treasurer (New York, NY)
Giles R. Scuderi, MD – Director (New York, NY)

Operation Walk USA management office:

AAOS and Other Orthopaedic Organizations Headquarters Building
9400 W. Higgins Road, Suite 500
Rosemont, IL  60018

Tel:  (847)698-1640  OUR CORE OFFICE HOURS ARE MON-FRI 9 AM TO 4 PM CENTRAL.
Email:  opwalkusa@aaos.org | Web:  www.opwalkusa.org

[Operation Walk USA is a 501(c)(3) tax-exempt organization.  The IRS determination letter is available upon request.  Please email opwalkusa@aaos.org.]

1 The Coordinators’ Committee of Operation Walk (International) mobilized the initial US program, and the original 9 surgeons who overcame the logistics and malpractice concerns were: Drs. Boiardo, Dennis, Digioia, Dorr, G. Engh, Khanuja, Lombardi, Ritter, and D. Stulberg. The current organization evolved from that original courageous effort.

2 Estimate is based on an average cost of TKA and THA in the United States (excluding the cost of donated implants); procedure costs vary greatly and are influenced by many factors.

3 AAOS provides management services to Operation Walk USA, as an independent entity, on a contractual basis.
4. OUR MISSION

The mission of Operation Walk USA is to encourage and enable joint replacement surgeons to restore mobility and improve quality of life for uninsured and underinsured patients in the United States who suffer from disabling arthritis of the hip or knee.

5. OUR VISION

Operation Walk USA will become the leader in joint replacement care for economically disadvantaged patients in the United States.

6. WHY PARTICIPATE?

Many orthopaedic surgeons routinely give back to the community through their charitable work. These physicians impact the lives of patients in their communities in a powerful and meaningful way.

So, why participate in a national program, like Operation Walk USA?

Until recently, recognizing the countless charitable acts—in particular, the free surgeries—performed by orthopaedic surgeons annually was a hit-or-miss affair. Television or newspaper reporters will occasionally build a story one special case in the community. But all too often, this kind of “good news” is overshadowed by reports of increasing healthcare costs, waste in the healthcare system, or medical errors. Our strength is in numbers. Several hundred physicians conducting pro bono surgeries simultaneously across the United States create a national story that is both inspiring and compelling:

- It underscores the value of orthopaedics in improving the lives of patients.
- It highlights the compassionate, caring nature of the subspecialty—and of the participating orthopaedists.
- It promotes the hospitals’ mission of healing.
- And most importantly, it gives hope for a better, more productive, pain-free life to hundreds of underserved patients.

Participating in Operation Walk USA is an uplifting experience for everyone involved.

Review our BROCHURE to learn more.
By participating in Operation Walk USA activities, all healthcare providers and support personnel agree to the following Oath of Care:

“It is a privilege for us, the providers of care for Operation Walk USA patients, to ensure that our patients’ needs are met with state-of-the-art technology, compassion, and holistic approaches. We will address all areas of need during the perioperative period with the goal of supporting the patient’s return to an optimum level of function. Participation in this program by healthcare professionals carries much responsibility and involves financial commitment in the donated services and supplies. By participating in Operation Walk USA, we commit to the following:

- Disseminating information about the program opportunities to all individuals in our sphere of influence.
- Accepting all patient applications without discrimination in any form, careful screening of the applications based on Operation Walk USA criteria, and accepting or denying care as appropriate based on these criteria.
- Planning the surgical experience based on the physical exam, radiographics, co-morbidities, and resources available to fully meet the patient’s needs from initial exam through recovery at no charge to the patient. We will make patients feel valued in the process; encourage them to actively engage in their care; and provide them with an understanding of the program’s parameters.
- Providing follow-up care by a licensed orthopedic professional going at no charge to the patient. This includes periodic orthopaedic exams on an on-going basis, medication needs for thirty (30) days post-operatively, and physical therapy until the replacement joint has met the expected discharge criteria. The goal is to enable optimal recovery, and empower the patient to return to a maximum level function in their life and community.
- Fully adhering to the processes, criteria, and timelines established by Operation Walk USA.

We freely give of our time and talent, and value the opportunity to help our patients achieve pain-free, productive and active lives.”
8. HOW TO PARTICIPATE?

In accordance with its mission, each Operation Walk USA participating site (hereinafter, “Site”) provides pro bono total hip and knee replacement surgeries to the economically disadvantaged population of the United States – US citizens or permanent residents. To accomplish this goal, everyone involved (including but not limited to surgeons, other physicians, hospital networks, allied healthcare professionals, and vendors) must collaborate and commit to providing an efficient, effective, and high-quality patient experience.

In general, the steps required for each Site considering their participation in Operation Walk USA might include:

1. A physician-champion(s) and a representative from the Site are essential in leading the Site’s effort.

2. The physician-champion(s) and a Site designee secure involvement of the team (hereinafter, “Team”) that might include:
   
   a. Program coordinator to coordinate Operation Walk USA patients and their visits (this is especially important for Sites planning on doing a high volume of cases); this person also will be responsible for fielding phone calls, communicating updates to the Site, establishing meetings, keeping records, etc.; this person also should be prepared for, and committed to, maintaining regular communications with Operation Walk USA management office, and to providing requested information accurately and in a timely manner.
   
   b. Physician practice administrator(s).
   
   c. Nurse coordinator.
   
   d. Hospital staff (including but not limited to Director of OR, Nurse Navigator, RN Manager, recovery room, orthopaedic unit, therapy, EVS, director or mission services and/or community outreach, senior financial administrator, marketing and/or public relations executive, central services, admitting/business office, Hospital Foundation).
   
   e. Anesthesia.
   
   f. Radiology and medical management providers (including pulmonology, cardiology, urology, and in some cases psychiatry).
   
   g. Home health provider.
   
   h. Rehabilitation facility.
   
   i. Outpatient physical therapist.
   
   j. Outpatient pharmacy and/or pharmaceutical company.
   
   k. DME supplier.

3. Physician-champion(s) and the Site’s CEO must confirm the Site’s commitment, including securing signed agreements from all parties to provide their services or products free of charge. Each patient’s average length of hospital stay is expected to be 3-4 days, or less.
IMPORTANT! In accordance with the mission of Operation Walk USA, there is NO BILLING / NO COLLECTION OF PAYMENTS by any parties concerned for any services or products. Neither the patient, nor Operation Walk USA are responsible for any costs associated with the Site’s participation in the program. A qualifying patient’s costs related to his/her acceptance into the program should be $0 (this includes, but is not limited to, pre- and post-op care, medication, supplies, dental if needed, PT, etc.).

4. The Team must develop a process flow according to the 2017 planning timeline.

5. Operation Walk USA management office receives many requests from potential patients who are interested in being considered for the program. These requests will be forwarded to participating Sites within the patient’s geographic service area (see definition below). In addition, each Site may identify its own patients through community health clinics, primary care physicians, local outreach organizations, etc.

IMPORTANT! Sites must treat patients referred by Operation Walk USA in the same manner as those patients identified independently. Sites are asked to advise the management office of the referred patient’s acceptance status as soon as it has been determined.

6. The following criteria have been established to assist in assessing patient qualifications for participation in the program. Many federal, state, and local laws and regulations impact the healthcare environment and may supersede Operation Walk USA criteria.

IMPORTANT! Sites are solely responsible for qualifying their patients in accordance with applicable laws and regulations governing the practice of medicine and charity care in their specific location, and Operation Walk USA guidelines:

   a. **Clinical:** The intent of Operation Walk USA is to provide adult (18 and older) patients with primary TKR or THR surgery only. (However, each Site, at its own discretion, may consider revision total joint procedures.) No other orthopaedic procedures will qualify, or may be branded, as Operation Walk USA surgeries (i.e., arthroscopy, etc.). Co-morbidities should be limited in number in order to minimize post-operative complications, care and length of stay. Identified patients should have support at home to minimize the need for SNF or ECF.

   b. **Insurance Status:** Patients should be uninsured. Patients should not have access to commercial and/or state and/or federal-funded healthcare coverage.
c. **Financial**: Patients should be **at or below 300%** of the **2017 Federal Poverty Guidelines**.

d. **Geographic Service Area**: For patient safety reasons and for Site risk mitigation reasons, **Operation Walk USA** strongly advises against accepting patients who are located farther than a one (1) hour car ride/70 miles radius from the participating Site, unless patients residing farther away can confirm their understanding of the potential hardship of being located outside the recommended geographic area. Additionally, patients must fully understand how greater than specified above distance might affect their ability to get to the Site in the event of an emergency. We recommend having patients confirm, in writing, their access to reliable transportation for any follow-up or emergency visits with the treating **Operation Walk USA** surgeon for at least six (6) weeks following the surgery.

e. **Patient Registration**: **Operation Walk USA** patients must be provided with financial counseling, access into the health care system, pre-registration/registration process, and customer service as any other patient at the Site.

When all components are in place, Site’s participation must be confirmed with **Operation Walk USA** via the online registration system. **Registration opens on May 3, 2017 and concludes on July 1, 2017.**

### 9. SITE REGISTRATION PROCESS

**IMPORTANT!** Your Site’s registration constitutes the Site’s full agreement with the mission of Operation Walk USA, compliance with these General Guidelines, and commitment to participate.

Registration for the 2017 program will open on **May 3, 2017**. The registration process is hospital-centered (rather than physician-centered) and will require a hospital/practice administrator to register the Site. Detailed instructions on how to complete registration will be communicated separately. (All previously participating Sites will need to renew their registration for the 2017 program as we do not assume Sites’ repeat participation until it is confirmed.)

By **November 27, 2017**, the following documents must be submitted via the online platform for each participating Site to confirm participation (faxes or emailed attachments will **not** be accepted):

- Signed **physician waiver** (one for each participating physician)
- Signed **patient waiver** (one for each qualified/accepted patient)

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4 The “below 300 percent of the 2017 Federal Poverty Levels Guidelines” phrase is intended as a **guideline** for participating Sites. Sites may have their own standards of charity care, and the **decision on the poverty percentage inclusion bracket is left to the discretion of each Site.**
• Signed patient release form (one for each qualified/accepted patient)

The Site may be disqualified from participating in Operation Walk USA's branded activities if the required paperwork is not submitted.

Any Site may withdraw from participation in Operation Walk USA prior to December 1, 2017, for any reason and without any penalty or prejudice. A written notification of this decision submitted to Operation Walk USA management office (opwalkusa@aaos.org) is requested.

10. DEVELOPING THE PATIENT CLEARING PROCESS

1. In some cases, primary care physicians in the community – at a community clinic or a Federally Qualified Health Center (FQHC) – identify the patients and refer them to a Site for evaluation.

2. In making the determination, an exam must be performed by the patient's primary care physician or community health physician, followed by an X-ray(s). X-rays must be sent to an Operation Walk USA participating physician to assess whether the patient qualifies for a primary THR or TKR.

3. The participating physician must see and evaluate the patient to assess whether TKA or THA is appropriate.

4. Patients accepted for the program must be treated exactly the same as any other total joint replacement patients under the care of the surgeons and hospitals. They must not be “branded” or “labeled” as being indigent. There is only one standard of care.

5. The participating physician must refer the patient to a pre-operative medical clearance physician.

6. The patient must be sent for pre-op anesthesia visit, as well as physical therapy, DME and home support assessment.

7. The patient is scheduled for surgery.

8. A request to reserve blood (if necessary) must be sent to the local blood bank. Many blood banks will do this at no charge if volunteers agree to donate blood in the future. If a patient is sent to a local blood bank or hospital, the orders should be for “Type and Screen” not “Type and Cross-match.” An order for “Type and Cross-match” requires the bank to sequester two units for that patient. There are higher costs associated with “Type and Cross-match” because these sequestered units are
not available to anyone else until the patient is released or the surgery cancelled. “Type and Screen” orders are less expensive because banks are required to hold units only if an antibody is found.

9. Patient receives pre-op instructions and education, and acknowledges his/her understanding of the need for transportation to and from the hospital, physical therapy and doctor’s follow-up appointments.

10. The patient will require at least one month of prescription medications. Develop a plan for filling those prescriptions at no cost to the patient. Any medications after 30 days post-op should be the patient’s own responsibility. The plan should also provide pre-op medications for those patients who may need them (i.e., cardiac, antibiotics), but should clearly specify how long these medications will be provided.
   
   a. For those patients on Warfarin for DVT prophylaxis, coordinate outpatient blood draws (initially by home health service, SNF, or outpatient). Review the process and cost coverage.
   b. Those patients who are on medication(s) for pain and/or other medical issues must be instructed to follow up with their primary care physician or local community/FQHC clinic for these medication needs.

11. Establish a protocol and assign responsibilities for the management of complications, i.e., joint dislocation, wound infection, etc.

**IMPORTANT!** An Operation Walk USA patient remains the Site’s responsibility for management of any post-op complications/additional necessary post-op care, at no cost to the patient, as needed, per the Site’s standards of post-op care for all its patients.

12. The participating physician must provide follow-up care to Operation Walk USA patient in the same manner as other patients (i.e., follow-up visits).

13. Hospital-based practices should develop an agreement(s) for pro-bono post-op services.

14. Provide patients with a patient information leaflet developed by Operation Walk USA (distributed separately). The leaflet guides patients through their rights and responsibilities and helps manage their expectations.

15. Many patients who apply may be found ineligible under the Operation Walk USA and/or Site’s patient selection criteria. The Site should develop a standard procedure for communicating with these patients. For example, “Although you were not selected for Operation Walk USA this year [state reason], we will keep you informed of our future participation in the program”. Operation Walk USA management office and/or website also can be used as a reference to communicate eligibility criteria.
11. IMPLANT DEVICES

**Operation Walk USA** has established close relationships with the major device manufacturers – **DePuy Synthes**, **Smith & Nephew**, **Stryker**, **Total Joint Orthopedics**, and **Zimmer Biomet** (hereinafter, “Company” or “Companies”) to ensure ongoing in-kind support of our mission. Each Company has a specific mechanism in place to allocate the needed inventory to **Operation Walk USA** activities at no cost.

**Operation Walk USA** management office will act as an intermediary to facilitate these processes. **In order to meet each Site’s needs for implant devices, we ask that you comply with these requirements, processes, and the established deadlines as closely as possible.**

Although many of our participating physicians have close relationships with Companies and their local distributors, we discourage direct solicitation of these implant donations from local distributors in order to avoid confusion that could result in unanticipated costs.

12. PATIENT DATA TRACKING

Collecting and maintaining the history of our activities and tracking basic patient data is of the utmost importance to the success of **Operation Walk USA**. **Ortech Data, Inc.** (hereinafter, “Ortech”) has agreed to provide **Operation Walk USA** participating Sites with a complimentary user-friendly online orthopaedic registry system. Entering patient data into the Ortech system is required for Site participation in **Operation Walk USA**. The Ortech registry will open on **December 1, 2017**. Further instructions will be communicated at that time. Sample of data that will be collected is included in these Guidelines.

Once the patient data is collected, and the Ortech registry is closed, the data will then transition, for secure storage, to the **American Joint Replacement Registry** (hereinafter, “AJRR”). AJRR is partnering with **Operation Walk USA** to enable us to maintain the sensitive patient data in a secure HIPAA-compliant environment.

**This relationship does not constitute the Site’s participation in AJRR’s normal activities. Operation Walk USA patient data is segregated from the data AJRR normally collects from its participating sites.**
## 13. THE 2017 PLANNING CYCLE STEP-BY-STEP

<table>
<thead>
<tr>
<th>WHEN</th>
<th>WHAT</th>
<th>SITE</th>
<th>OPWALKUSA</th>
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<tbody>
<tr>
<td>Spring</td>
<td>If you know you are interested in participating...</td>
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<tr>
<td></td>
<td>1. Email OpWalkUSA at <a href="mailto:opwalkusa@aaos.org">opwalkusa@aaos.org</a> and get on our email distribution list;</td>
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<td>✔️</td>
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<td>2. Start talking to your hospital administration to garner their understanding and support;</td>
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<td>3. Line up your team and secure their commitment;</td>
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<td>4. Appoint a coordinator who will be the point of contact between you/Site and OpWalkUSA;</td>
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<td>5. Start thinking about how/where you will find qualifying patients;</td>
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<td></td>
<td>6. Read email updates from OpWalkUSA.</td>
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<tr>
<td>May 3</td>
<td>The 2017 General Participation Guidelines are released...</td>
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<td>✔️</td>
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<tr>
<td></td>
<td>1. Review the Guidelines;</td>
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<td></td>
<td>2. If you have questions, contact OpWalkUSA at <a href="mailto:opwalkusa@aaos.org">opwalkusa@aaos.org</a>;</td>
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<td></td>
<td>3. Share the Guidelines will all stakeholders to ensure the entire team and everyone who is involved understand the nature and the spirit of the program.</td>
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<tr>
<td>May 3</td>
<td>Online Site registration opens...</td>
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<tr>
<td></td>
<td>1. Do you have your hospital administration support? Then register your Site;</td>
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<td>2. If you do not – let us know how Operation Walk USA can help.</td>
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<tr>
<td>June</td>
<td>A webinar will be offered to participants...</td>
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<td>WHEN</td>
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<tr>
<td>July 1</td>
<td>Deadline to register your Site...</td>
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<td></td>
<td>1. Please estimate your scope of participation (physicians, patients); be realistic;</td>
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<td>2. Indicate your choice of implant device(s);</td>
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<td>3. You can withdraw at any point should your interest or commitment change.</td>
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<td>June – September</td>
<td>Identify your patients...</td>
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<td></td>
<td>1. You may use any source available to you in your community;</td>
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<td></td>
<td>2. You may request patient referrals from OpWalkUSA;</td>
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<td>Whichever path you choose, communicating with prospective patients in the most sensitive and timely way is YOUR responsibility. Make sure everyone on your team is aware of the key principles of the program and can answer the most basic questions.</td>
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<tr>
<td></td>
<td>3. Need help? Unsure what to do? Contact OpWalkUSA at <a href="mailto:opwalkusa@aaos.org">opwalkusa@aaos.org</a></td>
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<tr>
<td>September – October</td>
<td>Request your implants...</td>
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<tr>
<td></td>
<td>1. Use the paperwork and the process specified by each manufacturer; we will send you</td>
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<tr>
<td>WHEN</td>
<td>WHAT</td>
<td>SITE</td>
<td>OPWALKUSA</td>
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<td>the information and provide support; 2. Unless specifically instructed to do so, DO NOT contact your local distributor; 3. Please be sensitive to and adhere to deadlines specified by each manufacturer.</td>
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</tr>
<tr>
<td>October – November</td>
<td>Confirm/clear/schedule your patients... 1. Communicate... 2. Communicate... 3. Communicate!!!</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>October – December</td>
<td>Local and national media activities take place... 1. We will provide a template press release; 2. We will promote a national story to national media; 3. You are in the best position to contact your local outlets; 4. Create awareness and a sense of excitement at your Site, make sure your team knows and feels that they are a part of something very special; 5. Make your OpWalkUSA participation into an event at your Site and in your community.</td>
<td></td>
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<tr>
<td>November 27</td>
<td>Administrative forms are due to OpWalkUSA.</td>
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<td>December 1</td>
<td>Ortech Registry opens.</td>
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<td>✔</td>
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<tr>
<td>December 4-9</td>
<td>Operation Walk USA.</td>
<td>✔</td>
<td>✔</td>
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<tr>
<td>December 31</td>
<td>Ortech Registry closes; end-program survey is due.</td>
<td>✔</td>
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</tbody>
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14. NAME, BRAND, AND LOGO USAGE

1. Participants are **encouraged** to use **Operation Walk USA** name, brand and logo to promote their participation in the official annual event according to the standards stated in this section.

2. **Operation Walk USA** is a national organization comprised of individual registered Sites. Unlike other charitable organizations, it is not organized as a federation of local chapters. Therefore, our brand may **not be changed or altered** to reflect local participation (e.g., *Operation Walk USA Rosemont*, or *Operation Walk USA Illinois*, or *Operation Walk USA General Hospital*). This may create inconsistency, confusion, and potentially dilute the power of our brand, message, impact, and mission.

3. We are aware that our volunteer participants and their hospitals are proud of their participation in this program, and wish to showcase their support of our mission. We suggest the following acceptable ways of **co-branding**:

   General Hospital in cooperation with Operation Walk USA

   Main Street Orthopaedics in partnership with Operation Walk USA

   Townville Joint Replacement Center and Operation Walk USA

4. The name, **Operation Walk USA**, must be **used in its entirety** when communicating with media, public, sponsors, supporters, etc. No abbreviations shall be used as substitutes for the full name.

5. If your Site is participating in a similar outreach initiative – either on its own or as part of another organization – and/or your activities take place outside of **Operation Walk USA** designated dates, you **may not** use the brand name "**Operation Walk USA**", or reference the national effort in your communications, press releases, interviews, etc., unless prior written permission is granted by **Operation Walk USA** upon your request.

6. **Operation Walk USA** name, brand and logo may be used for:

   • General promotional brochures/leaflets,

   • Press releases and announcements,

   • Clothing items (T-shirts, sweatshirts, hats, etc.),

   • Banners/flags, and

   • Outdoor signage.

7. These items are produced at the sole discretion and expense of each participating Site.
8. Authorization for the use of the Operation Walk USA name, brand and logo may be granted or refused at the sole discretion of Operation Walk USA. Operation Walk USA reserves the right to withdraw any authorization at any time if the user is deemed to be non-compliant with these guidelines.

9. There is no fee for the authorized use of the Operation Walk USA name, brand and logo in connection with patient education and participation information, general event promotions, and event signage. Sale of promotional items is addressed below.

10. Operation Walk USA’s authorization for participants’ use of its brand and logo represents a non-exclusive license only. Operation Walk USA retains all intellectual property rights to its name, brand and logo.

**IMPORTANT!** No business, organization, or individual shall use the Operation Walk USA name, brand and logo in any for-profit or fundraising effort without the prior written consent of Operation Walk USA. A royalty, to be determined at the time of authorization, will be payable to Operation Walk USA for the sale of items bearing Operation Walk USA name, brand and logo.

### 15. WHAT SUPPORT WILL OPERATION WALK USA PROVIDE?

1. Operation Walk USA management office will connect all participants through a nationwide network, including email communications and social media platforms. If you have questions, or need additional assistance, Operation Walk USA will provide access to experts who can offer personal guidance through the process, as well as advice and solutions. Please be sure to share with us any roadblocks you may be experiencing.

   a. Like us on Facebook: [http://www.facebook.com/OperationWalkUSA](http://www.facebook.com/OperationWalkUSA)
   b. Follow us on Twitter: [https://twitter.com/OpWalkUSA](https://twitter.com/OpWalkUSA)
   c. Our social media hashtag is [#restoringmobility](https://twitter.com/OpWalkUSA)

**IMPORTANT!** Please do NOT use our social media pages to discuss cases or issues specific to your Site. Remember that Facebook and Twitter are public platforms visible to, and accessible by, anyone. We use them to create awareness and excitement about the good work done by our volunteers. If you need an answer to a question – email or call us. If you are posting/sharing patient identifiable information on our Facebook or Twitter pages, you may do so ONLY if you have a patient’s express permission on file.
2. We will maintain the website at www.opwalkusa.com, and list all confirmed participating Sites as part of the Operation Walk USA national network, to acknowledge your participation in the 2017 program.

3. We will secure Companies’ support of our mission and activities.

4. We will also provide a template press release your Site may use for local media outreach.

5. Finally, we will tell your story to the national media. Orthopaedic surgery provides the best value in American healthcare in both human and economic terms. And, Operation Walk USA clearly illustrates the best of the specialty. We will promote the December event to national media sources – to benefit our patients, our communities, and the orthopaedic profession.

6. Operation Walk USA is an evolving organization. Tell us what else we can do, or do better, to support you and your efforts to make a difference in patients’ lives. By helping us help you, you are contributing to the continuing success of this worthy program.

16. FREQUENTLY ASKED QUESTIONS

Q: What qualifications are required for a physician to participate in Operation Walk USA?
A: Any board-certified orthopaedic surgeon, whose normal scope of practice includes total joint replacement procedures, is eligible to participate.

Q: Is there a minimum (maximum) number of patients I/we must treat in order to qualify for Operation Walk USA?
A: No. On average, a participating surgeon will treat 1-2 patients, although some are able to treat more. We do not impose any limitations either way, and are grateful for the treatment participating Sites provide to every Operation Walk USA patient.

Q: Do we have to schedule surgeries during the Dec 4-9 week, or can we conduct them on a different date?
A: We strongly prefer that your Operation Walk USA-branded activities are conducted during the official national dates. However, in certain cases, a surgery may be delayed for medical or other reasons. If that happens, please let us know: we will still count your Site among our participants, and your cases toward our overall case count for this year.

Q: Who are America’s uninsured?
The federal government estimates that the number of uninsured in the United States has declined by about 15 million since 2013. In the first three months of 2015, 29 million people were uninsured. That was seven million fewer than in 2014. While the uninsured are expected to drop to about 23 million by 2023 as a result of the ACA, according to the Centers for Medicare & Medicaid Services, many American will still not be able to afford their healthcare needs. (Source: American College of Emergency Physicians.)

- 24.3% of the uninsured are Hispanic
- 15.9% are black
- 9.8% are white
- 9.8% of children younger than 19 in poverty
- 7% of children under 19 who are not in poverty

Additional information on uninsured population in the United States is available HERE.

Q: If I identify patients who are foreign nationals, undocumented immigrants, and/or who reside outside of the United States, but are willing and able to travel to the US for surgery, can they be treated as part of Operation Walk USA?

A: No. The mission of Operation Walk USA is to help underserved patients who are US citizens or permanent residents.

Q: Does Operation Walk USA offer financial support to offset the costs incurred by Sites?

A: Currently, no financial support is available to participating Sites. As a result of our annual fundraising efforts, a start-up Patient Care Fund was created. With the limited start-up funding donated to date, Operation Walk USA will solicit additional donations for the Patient Care Fund so that in future years limited financial support may become available to participating Sites and/or our patients.

Q: Does Operation Walk USA provide additional malpractice insurance?

A: No. Your participation in Operation Walk USA must be covered under your existing insurance. If you have any questions or concerns about your coverage with regard to your participation in Operation Walk USA, please check with your provider.

Q: If my hospital does not approve my participation in Operation Walk USA, can I operate at another hospital that is already participating in the program?

A: Yes, if you already have privileges at that institution – or can obtain privileges prior to the event. Determinations on hospital privileges are solely within the discretion...
of the participating hospital. If that hospital is located in a different state, you will need to be licensed to practice in that state.

Q: Can we accept patients who may have purchased ACA insurance, but who have a high deductible they cannot afford and therefore a hip/knee replacement surgery is still out of reach for them?

A: No, these patients are considered insured and therefore do not qualify for the program.

DO YOU HAVE QUESTIONS regarding these General Guidelines or the program?
Submit them here: opwalkusa@aaos.org,
Or call: (847)698-1640 (M-F 9 AM to 4 PM Central)

REFERENCES AND RESOURCES

ADDENDUM 1: 2017 Federal Poverty Guidelines
ADDENDUM 2: Sample Agreement to Waive Claims and Release of Liability (PHYSICIAN)
ADDENDUM 3: Sample Agreement to Waive Claims and Release of Liability (PATIENT)
ADDENDUM 4: Patient Consent and Authorization
ADDENDUM 5: Sample Ortech Data Collection Form
HHS POVERTY GUIDELINES FOR 2017


FAQs about Federal Poverty Guidelines: find your answer HERE. Also info for: AK, HI.

<table>
<thead>
<tr>
<th>PERSONS IN FAMILY/HOUSEHOLD</th>
<th>POVERTY GUIDELINE</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>$12,060</td>
</tr>
<tr>
<td>2</td>
<td>$16,240</td>
</tr>
<tr>
<td>3</td>
<td>$20,420</td>
</tr>
<tr>
<td>4</td>
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<tr>
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<td>6</td>
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</tr>
<tr>
<td>7</td>
<td>$37,140</td>
</tr>
<tr>
<td>8</td>
<td>$41,320</td>
</tr>
</tbody>
</table>

For families/households with more than 8 persons, add $4,180 for each additional person.
ADDITIONAL SAMPLE AGREEMENT TO WAIVE CLAIMS AND RELEASE OF LIABILITY (PHYSICIAN)

DO NOT USE THIS SAMPLE

[For your convenience, this form will be available as a stand-alone document at a later time. It is due on November 27, 2017, and must be submitted according to the instructions.]

Operation Walk USA is a not-for-profit organization which helps to match patients in need of hip and knee replacement surgery with surgeons and facilities willing to provide these services without cost to the patients. The undersigned Participating Physician (hereinafter “Physician”) wishes to participate in Operation Walk USA. In consideration of Physician’s participation in Operation Walk USA, Physician agrees to the following waiver of claims and liability release.

WAIVER OF CLAIMS AND LIABILITY RELEASE

It is the intent of the Physician to release Operation Walk USA, including all of their directors, officers, members, agents, employees, representatives, independent contractors, parent organizations, subsidiaries, and insurers (hereinafter collectively referred to as the “Releasees”) from any claims or liability to the fullest extent under the law, and to advance that intent Physician agrees as follows:

1. Physician understands and acknowledges that the Releasees do not provide participating patients (“Participants”) with any medical advice, treatment or care, but that the Releasees provide information to Physician and Participants that may identify those physicians and facilities willing to provide services to Operation Walk Participants. Accordingly, the Releasees cannot be held liable for any claims related to the provision of medical services by Physician.

2. Physician understands and acknowledges that Releasees do not warrant or guarantee or make any representations regarding a Participant’s need for surgery or whether any Participant is an appropriate candidate for surgery. Physician further understands and acknowledges that Physician is not required to provide treatment to any Participant and it is Physician’s sole responsibility to evaluate and accept a Participant for treatment and to determine what care and treatment is appropriate for the Participant.

3. Physician understands and acknowledges that the Releasees do not own or provide access to any facilities where health care may be provided by Physician, nor are the Releasees in any way affiliated with such facilities. Additionally, Releasees do not distribute,
promote or recommend any equipment or medical devices, including but not limited to, hip or knee joint replacement implants. As such, the Releasees cannot be held liable for any claims or damages that may arise in connection with any participating health care facilities and/or the use of any equipment or medical devices in the Participant’s care.

4. Physician understands and acknowledges that Releasees do not warrant, guarantee or make any representations regarding the safety, quality or efficacy of any health care facilities, equipment or medical devices. Physician further understands and acknowledges that Physician is not required provide treatment at any facility which participates in Operation Walk USA.

5. Physician hereby releases and discharges Releasees from, and waives all rights relating to, any claim, demand, action or cause of action that Physician has or may hereafter acquire, for any expenses, damages, personal injury or damage or loss of property in connection with Physician’s participation in Operation Walk USA.

6. Physician hereby agrees to hold harmless the Releasees from any and all claims arising out of or related to Physician’s participation in Operation Walk USA.

7. If any portion of this Agreement is declared invalid or unenforceable by a final judgment of any court of competent jurisdiction, Physician hereby agrees that such determination shall not affect the balance of this Agreement, but that this Agreement shall remain in full force and effect, as such invalid portion(s) shall be deemed severable.

8. This Agreement shall be construed in accordance with and governed by the laws of the State of Illinois. Physician agrees to the jurisdiction and venue of the Circuit Courts of Cook County, Illinois, or the United States District Court of the Northern District of Illinois, for resolving disputes arising under this Agreement.

__________________________________
Participating Physician’s Name

__________________________________
Signature of Participating Physician

__________________________________
Date
Operation Walk USA is a not-for-profit organization which helps to match patients in need of hip and knee replacement surgery with surgeons and facilities willing to provide these services without cost to the patients. The undersigned patient (hereinafter “Participant”) wishes to participate in Operation Walk USA. In consideration of Participant’s desire to participate in Operation Walk USA, Participant agrees to the following waiver of claims and liability release.

**WAIVER OF CLAIMS AND LIABILITY RELEASE**

It is the intent of the Participant to release Operation Walk USA, including all of their directors, officers, members, agents, employees, representatives, independent contractors, parent organizations, subsidiaries, and insurers (hereinafter collectively referred to as the “Releasees”) from any claims or liability to the fullest extent under the law, and to advance that intent Participant agrees as follows:

1. Participant understands and acknowledges that the Releasees do not provide Participant with any medical advice, treatment or care, but that the Releasees provide educational information to Participant and helps to identify those physicians and facilities willing to provide free care to Operation Walk participants.

2. Participant understands and acknowledges that the Releasees do not warrant or make any guarantee or representation regarding the skills or qualifications of any health care provider who might provide advice or treatment to Participant in Operation Walk USA and that Releasees cannot be held liable for any claims arising out of the provision of medical services from such providers. Participant further agrees and acknowledges that he/she has voluntarily chosen to receive services in connection with the Operation Walk USA event and that he/she is not required or obligated to seek treatment from any health care provider who participates in Operation Walk USA.
3. Participant understands and acknowledges that the Releasees do not own or provide access to any facilities where health care may be provided by Physician. Nor are the Releasees in any way affiliated with such facilities. Additionally, Releasees do not distribute, promote or recommend any equipment or medical devices, including but not limited to, hip or knee joint replacement implants. As such, the Releasees cannot be held liable for any claims or damages that may arise in connection with any health care provider’s use of any facilities, equipment, or medical devices in the Participant’s care.

4. Participant understands and acknowledges that Releasees do not warrant, or make any guarantees or representations regarding the safety, quality or efficacy of any health care provider, facility, equipment or medical devices. Participant further understands and acknowledges that he/she is not required or obligated to participate in Operation Walk USA or seek treatment at any facility which participates in Operation Walk USA.

5. Participant hereby releases and discharges Releasees from, and waives all rights relating to, any claim, demand, action or cause of action that Participant has or may hereafter acquire, for any expenses, damages, personal injury or damage or loss of property in connection with Participant’s participation in Operation Walk USA.

6. Participant hereby agrees to hold harmless the Releasees from any and all claims arising out of or related to Participant’s participation in Operation Walk USA.

7. If any portion of this Agreement is declared invalid or unenforceable by a final judgment of any court of competent jurisdiction, Participant hereby agrees that such determination shall not affect the balance of this Agreement, but that this Agreement shall remain in full force and effect, as such invalid portion(s) shall be deemed severable.

________________________________________
Participant’s Name

________________________________________
Signature of Participant

________________________________________
Date
ADDENDUM 4: PATIENT CONSENT AND AUTHORIZATION

DO NOT USE THIS SAMPLE

[For your convenience, this form will be available as a stand-alone document at a later time. It is due on November 27, 2017, and must be submitted according to the instructions.]

PATIENT CONSENT AND AUTHORIZATION

For valuable consideration received, I consent to and authorize the copyright, reproduction, and/or publication of my photograph, image, likeness and/or voice by Operation Walk USA, the American Academy of Orthopaedic Surgeons (AAOS), and/or their agents with respect to any interviews, photographs, and/or video taken of me, in whole or in part, or composite with other interviews, photographs, and/or video, in any medium, for any lawful purpose, without compensation to me. I waive any right to notice or approval of any use of the printed materials, photographs, and/or video by Operation Walk USA, AAOS, and/or their agents. I release, discharge and agree to save harmless Operation Walk USA and/or AAOS from any claims or liability in connection with the use of the photographs, images and/or video as aforesaid or by virtue of any alterations, processing, or use in composite form, whether intentional or otherwise in print, on television, in a digital format, or online.

Patient: I consent to the above.

______________________________________________
Signature
______________________________________________
Date
______________________________________________
Witness

Please Print the Following

______________________________________________
Patient’s Name

©2017 Operation Walk USA
## ADDENDUM 5: SAMPLE ORTECH DATA COLLECTION FORM

### 1. PROCEDURE PERFORMED

<table>
<thead>
<tr>
<th>Surgeon:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Side:</td>
</tr>
<tr>
<td>Left</td>
</tr>
</tbody>
</table>

### 2. PATIENT INFORMATION

<table>
<thead>
<tr>
<th>Patient First Name:</th>
<th>Patient Last Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth: MM DD YYYY</td>
<td>Gender: Male Female</td>
</tr>
<tr>
<td>Street Address:</td>
<td>City:</td>
</tr>
<tr>
<td>State:</td>
<td>Zip Code:</td>
</tr>
<tr>
<td>Email Address:</td>
<td>Height: inches Weight: Pounds</td>
</tr>
<tr>
<td>Race: Asian Black Caucasian Native American Native Hawaiian-Pacific Islander Hispanic/Latino Other:</td>
<td></td>
</tr>
</tbody>
</table>

### 3. PRIMARY DIAGNOSIS/REASON FOR REVISION (Choose ONLY ONE)

**NOTE:** Choose condition if patient had a previous laminectomy, hip resurfacing, anconeal process, or patellar resurfacing

| Primary Diagnosis: Degenerative arthritis Inflammatory arthritis Osteonecrosis Conversion Childhood hip problem Post Traumatic |
| --- | --- | --- | --- |
| Reason for Revision: Aseptic loosening Bearing wear Osteolysis Instability Infection Pain unknown origin Implant fracture Implant dislocation Peri-prosthetic fracture Acetabular erosion Leg length discrepancy Patella maltracking Other or CPT Code: |

### 4. INTRA-OPERATIVE INFORMATION

| Anesthesia: General Spinal Regional Epidural Other: |
| --- | --- | --- | --- |
| Intra-op Complications: None: |
| Hip: Calcaneal fracture Shaft fracture Shaft perforation Ecceentric reaming Wall fracture Column fracture Acetabular perforation Neck notch |
| Knee: Femoral fracture Tibial fracture Femoral perforation Tibial perforation Patella tension injury LCL avulsion MCL avulsion |
| Other: |

### 5. PLACE ALL DEVICE STICKERS ON BACK OF SHEET

### 6. DISCHARGE DATE: MM DD YYYY