

APSS Medtronic Fellowship Report

Fellowship duration: November 10-29, 2025

Fellow:

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Fellowship Centre:

Queen Mary Hospital/Duchess of Kent Hospital (Hong Kong University), Hong Kong SAR

Fellowship Hosts:

Dr Jason Cheung, Dr Kenny Kwan, Dr Paul A. Koljonen

Introduction

I had the opportunity to work with the Division of Spine Surgery at the Department of Orthopaedics and Traumatology at the Hong Kong University at Hong Kong in November 2025 for a total duration of three weeks. I arrived in Hong Kong on November 9th and finished my fellowship on November 28th.

The Division of Spine Surgery at the Department of Orthopaedics and Traumatology at the Hong Kong University has been at the forefront of academics and research in the Asia-Pacific region since a number of decades and enjoys a remarkable legacy which includes introducing the world to the anterior approaches for the treatment of spinal tuberculosis with the 'Hong Kong Operation'. The Division of Spine Surgery is staffed by Prof Jason Cheung – who is also heads the Department of Orthopaedics and Traumatology at HKU, Prof Kenny Kwan who is the Chief of the Division of Spine Surgery, Dr Paul Koljonen, Dr C Tang, Dr G Shea and Dr WY Cheung.

As a visiting fellow, I spent my time at two hospitals where the spine team provides their services – the Queen Mary Hospital (QMH) and the Duchess of Kent Children's Hospital (DKCH).



Fellowship Schedule

Prior to the fellowship, I received a carefully thought-out day-wise program from the secretariat:

	Monday	Tuesday	Wednesday	Thursday	Friday
AM	Observation in Scoliosis Clinic at Outpatient Department, DKCH	Observation in Surgical Session at 1/F, Main Building, DKCH	8:30 am Ward Round at Ward 1/2, DKCH 10:30 am Attend Clinical Conference at Lecture, 5/F, Professorial Block, QMH	Observation in Surgical Session at 1/F, Main Building, DKCH	8:30 am Ward Round at Ward K13, QMH 10:30 am Participate in research activity
PM	Observation in Surgical Session at Block F4, QMH	Observation in Surgical Session at 1/F, Main Building, DKCH	Observation in Adult Spine Clinic at Outpatient Department, DKCH	Observation in Surgical Session at 1/F, Main Building, DKCH	1:00 pm Attend Pre-operative Case Discussion Meeting at Lecture Theatre, Professorial Block, QMH 2:00 pm Observation in General Spine Clinic at Block S7, QMH

I was pleased to see that it was a mix of operating room visits, clinics, teaching activities and ward rounds.

Operating Room

One of the primary reasons I wanted to visit QMH/DKCH for my fellowship was that being a quaternary-level academic institute, one would have the opportunity to witness the full gamut of spine surgery at one place. And true to its reputation – even in a short period of three weeks, I had the chance of seeing surgery for patients with adult spine deformities (including a pedicle-subtraction osteotomy for a flat-back), pediatric spine deformities (including a posterior fusion of a rigid idiopathic scoliosis presenting in adulthood), spinal tumors and spinal trauma.

Some of the remarkable cases which I saw during these three weeks were:

- Thoracoscopic anterior vertebral body tethering: Prof. Jason Cheung is one of the few surgeons in the Asia-Pacific region who perform this novel fusion-sparing surgical technique on selected patients with idiopathic scoliosis. I realized that more than mastering the technique, it was equally important to understand how to select a patient for AVBT so that the best outcome can be achieved without performing a fusion.
- Craniovertebral junction surgery: Dr Paul Koljonen has a special interest in rotatory atlantoaxial dislocation in children and it was really illuminating to see his cases and learn the nuances of his surgical technique. He shared a lot of things that he had learnt from his vast experience in managing these cases.
- En-bloc tumor resections: Prof Kwan performed a complex en-bloc resection of a malignant primary bone tumour (chondrosarcoma) – it was very interesting to see the preoperative planning that aimed to achieve a wide margin of resection and how the plan was executed during surgery.

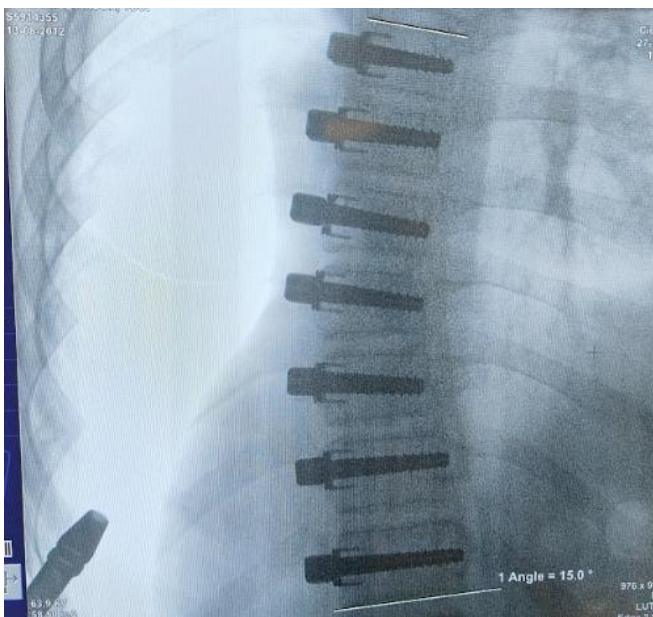
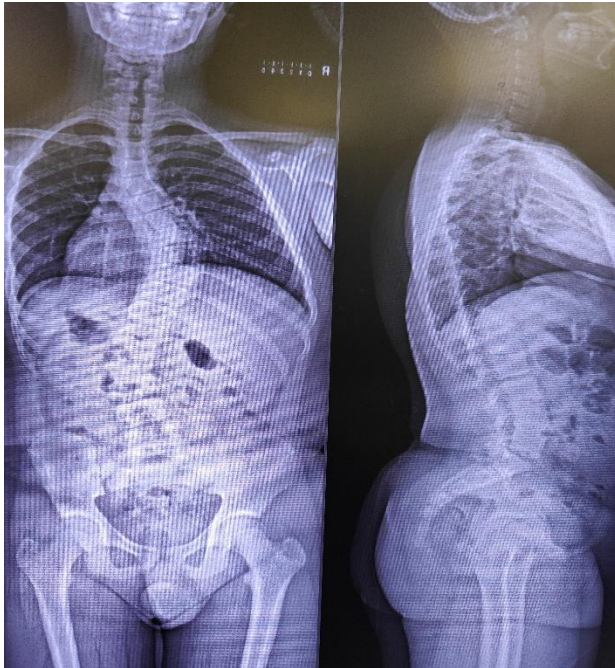
- Biportal endoscopy: The surgeons at HKU are also accomplished at endoscopic spine surgery and I had an opportunity to see two cases of UBE decompressions done for degenerative lumbar stenosis.
- Technology in the OR: The operating rooms were remarkably well-equipped with a robot and 7D Flash Navigation system which uses camera-based technology rather than intraoperative imaging for navigation.



Case-1: Rigid idiopathic scoliosis presenting in adulthood



Case-2: Adolescent idiopathic scoliosis, treated with thoracoscopic AVBT



Clinics

We had three clinics every week:

- A pediatric spine clinic on Monday where I could see patients with pediatric spine deformities. The Division runs a very successful school-screening program since the last 20+ years as a result of which they have large numbers of pediatric spinal deformity patients visiting their clinic. Apart from surgical candidates, this also included patients who were indicated for bracing.
- The adult spine clinic on Wednesday was mainly visited by post-operative follow-up patients and we could see the surgical outcomes with short, intermediate and long-

term follow-ups and discuss the nitty-gritties of the surgical strategies with the consultants

- The general spine clinic on Friday was mainly new cases/walk-in patients.

Academics

There were two grand ward rounds every week – at DKCH on Wednesday and at QMH on Friday. The ward rounds provided a platform for interactive learning as the surgical plans were discussed for the preoperative patients and the outcomes were discussed for the postoperative patients. It was heartening to see the amount of involvement of the nursing and physiotherapy team members in the in-hospital care of the patient.

The best part of the week was the clinical meet on Friday – here, the residents presented the cases which were lined up for surgery in the subsequent two weeks and the clinical findings and the surgical plan was dissected and discussed in great detail. One of the Friday clinical meets was also attended by Prof Keith Luk – the former Head of the Department – and it was an honour to interact with him and learn from the wisdom he shared during the course of the meet.

On every Wednesday, we had a lecture or the morbidity-mortality (M&M) meet of the Orthopaedics department, which also included topics and cases of spine surgery being presented.





Other activities

Dr Koljonen – who is also the Deputy Chief of the adjoining Macle hose Medical Rehabilitation Centre – also took us on a tour of this wonderful facility. This is a state-of-the-art rehabilitation centre which offers long-term, targeted care to patients with major disabilities that have been discharged from hospitals. Dr Koljonen not only showed us the existing infrastructure but also spoke at length about the future vision for the facility and how it would look after its expansion. I also visited the orthotic centre at DKCH and the 3D printing facility at QMH.

Snapshots from lovely Hong Kong!

Hong Kong is a beautiful city and it was a delight to spend three weeks there – with a chance to explore during the weekends.





Acknowledgement

I would like to acknowledge the amazing support provided by the APSS Secretariat – specially Ms. Jennifer Mathew and later Ms. Anna Magnaye – who helped me make arrangements and coordinate with the team at Hong Kong.

I also express my heartfelt gratitude to Ms. Alison Sin from the Department of Orthopaedics and Traumatology and Hong Kong University who helped me with all the paperwork required to get a training/employment visa for Hong Kong.

And lastly, I'm extremely thankful to all the faculty and staff of HKU with whom I had the pleasure of interacting during my three weeks at Hong Kong – Prof. Jason Cheung, Prof. Kenny Kwan, Dr Paul Koljonen, Dr Shea and others – who ensured that my experience at Hong Kong was comfortable, enriching and worthwhile. Watching them all work was an inspiration in itself and I'm committed to using this experience to improve myself as a surgeon and a healthcare provider.

