

Type A: Pelvic ring stable

A1: fractures not involving the ring (i.e. avulsions, iliac wing or crest fractures)

A2: stable minimally displaced fractures of the pelvic ring

Type B: Pelvic ring rotationally unstable, vertically stable

B1: open book

B2: lateral compression, ipsilateral

B3: lateral compression, contralateral or bucket handle-type injury

Type C: Pelvic ring rotationally and vertically unstable

C1: unilateral

C2: bilateral

C3: associated with acetabular fracture

**Figure 1** Tile classification

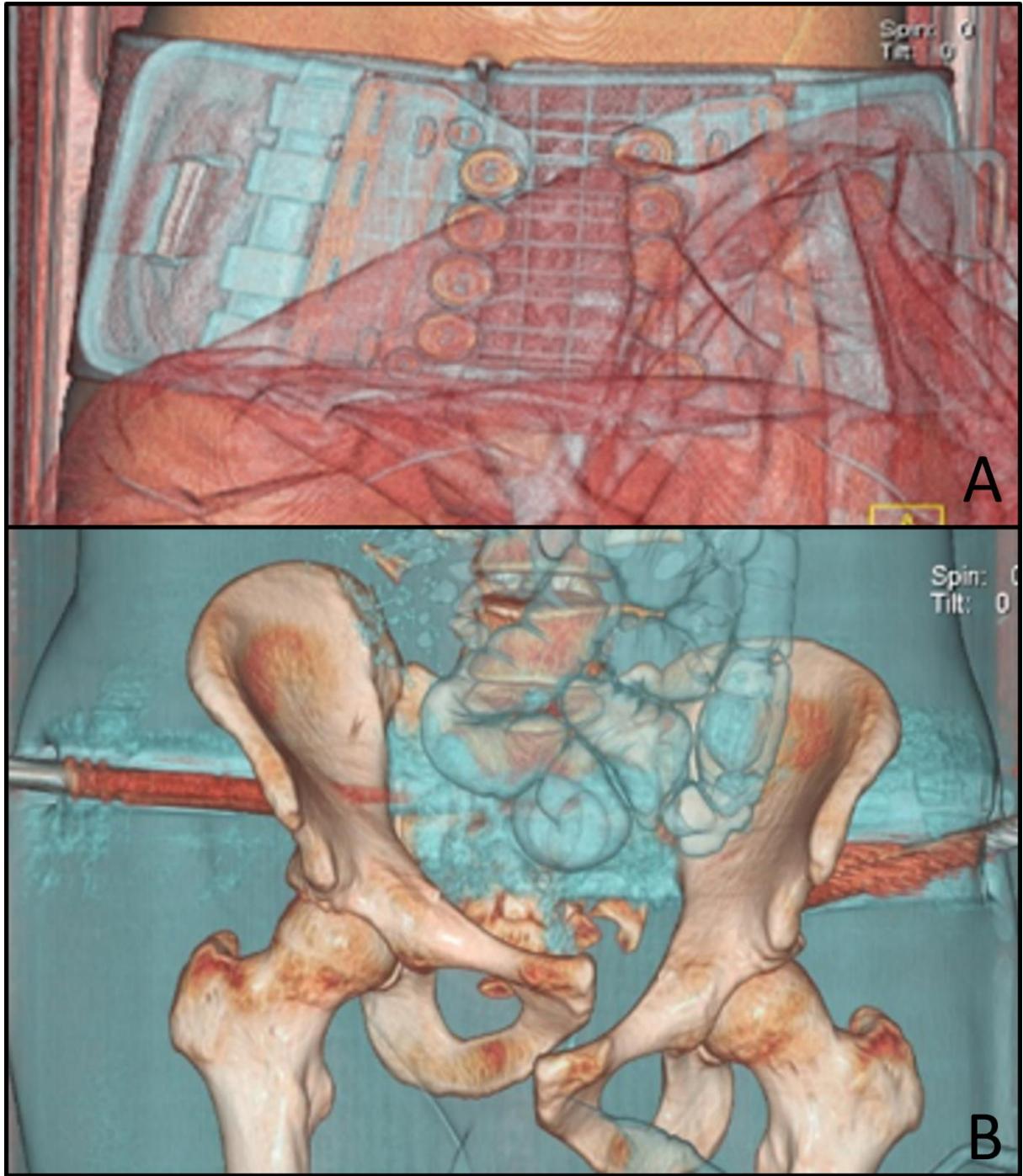


Figure 2 A) VRT of the T-POD, B) VRT of the external fixator



Figure 3 Computed Tomography



Figure 4 Devices used

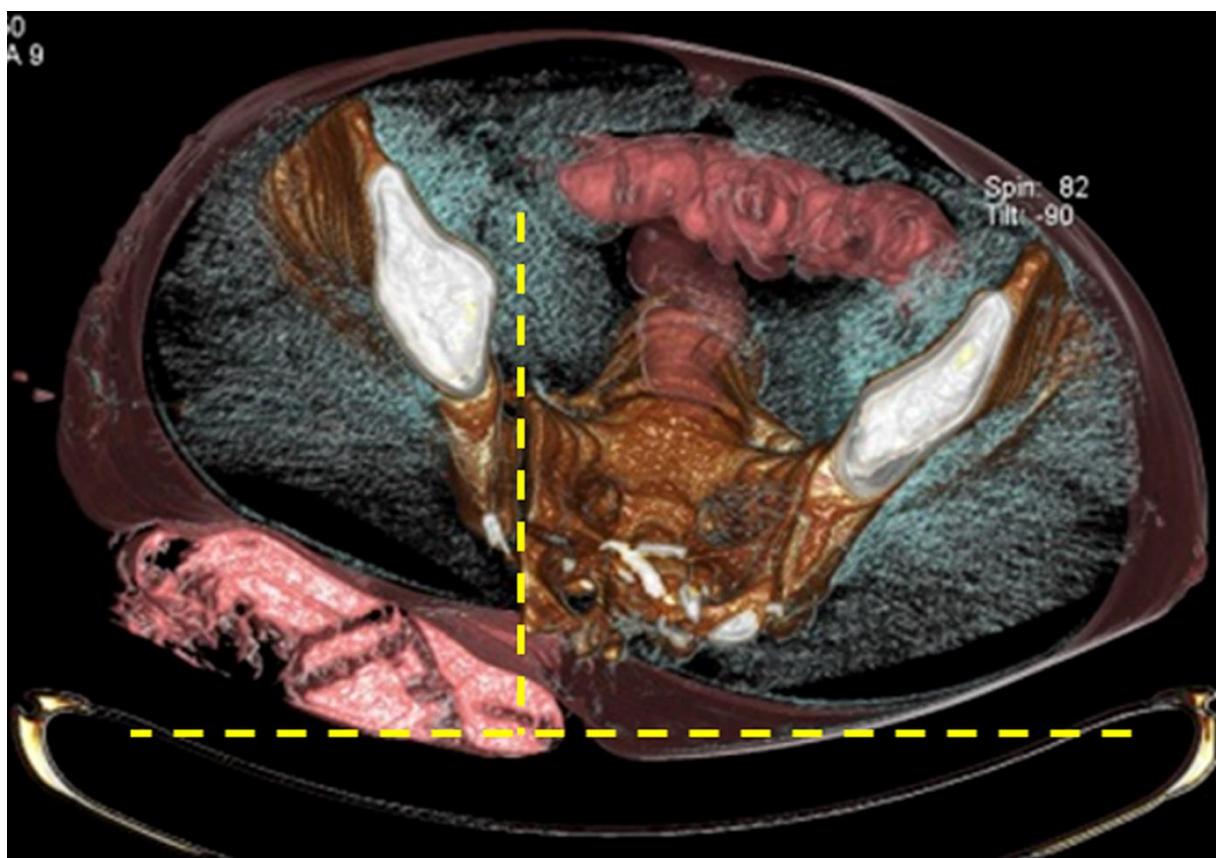
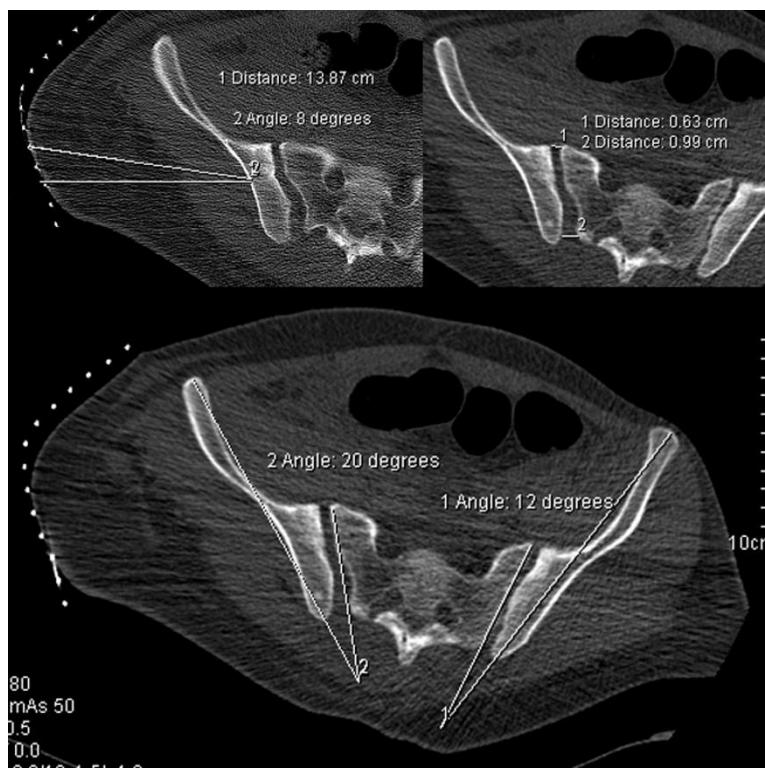


Figure 5 VRT image of patient's position



**Figure 6 measurement of angles and distances**

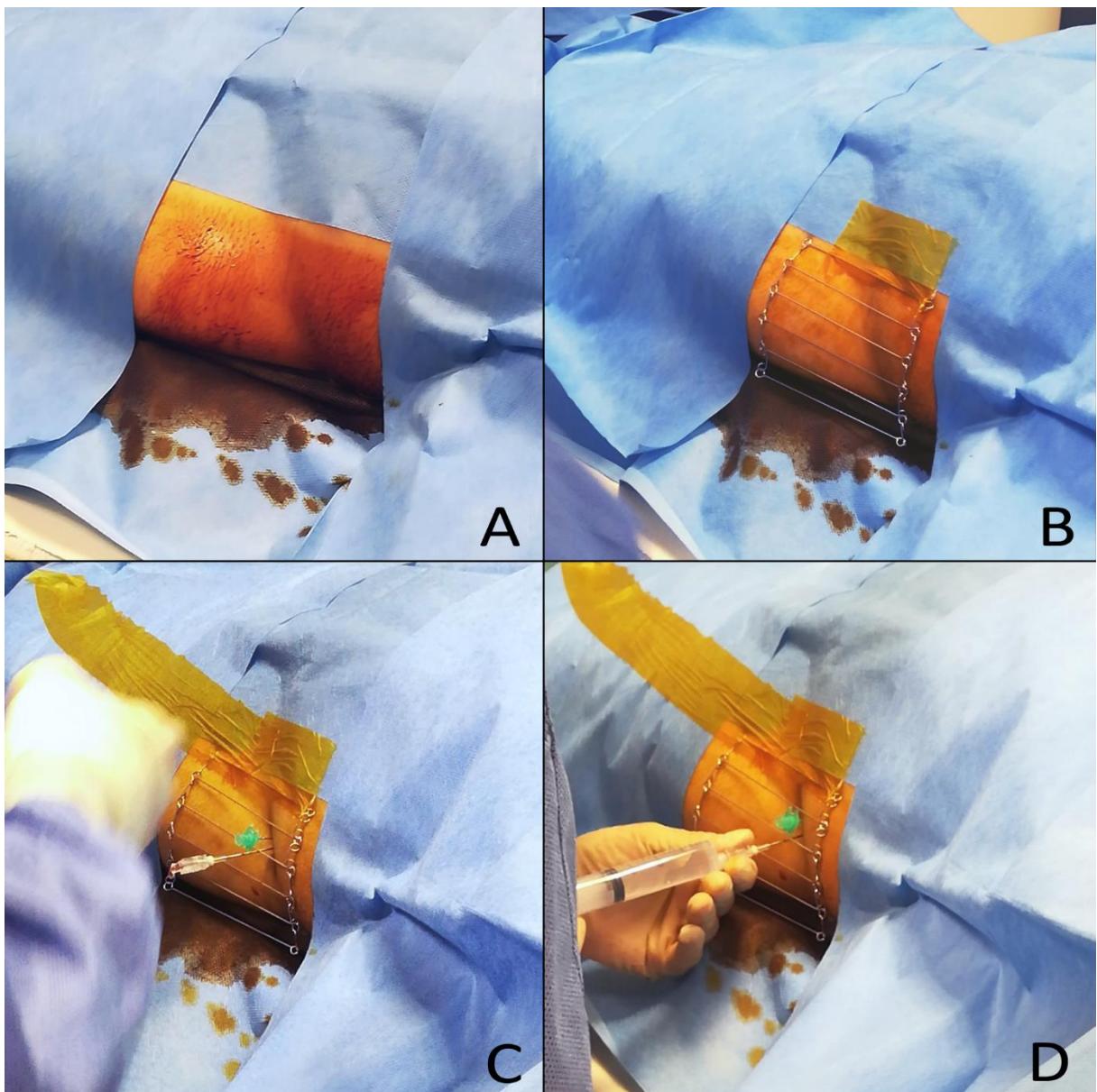


Figure 7 A) sterile zone, B) radiopaque grid, C) local anesthesia, D) deep anesthesia

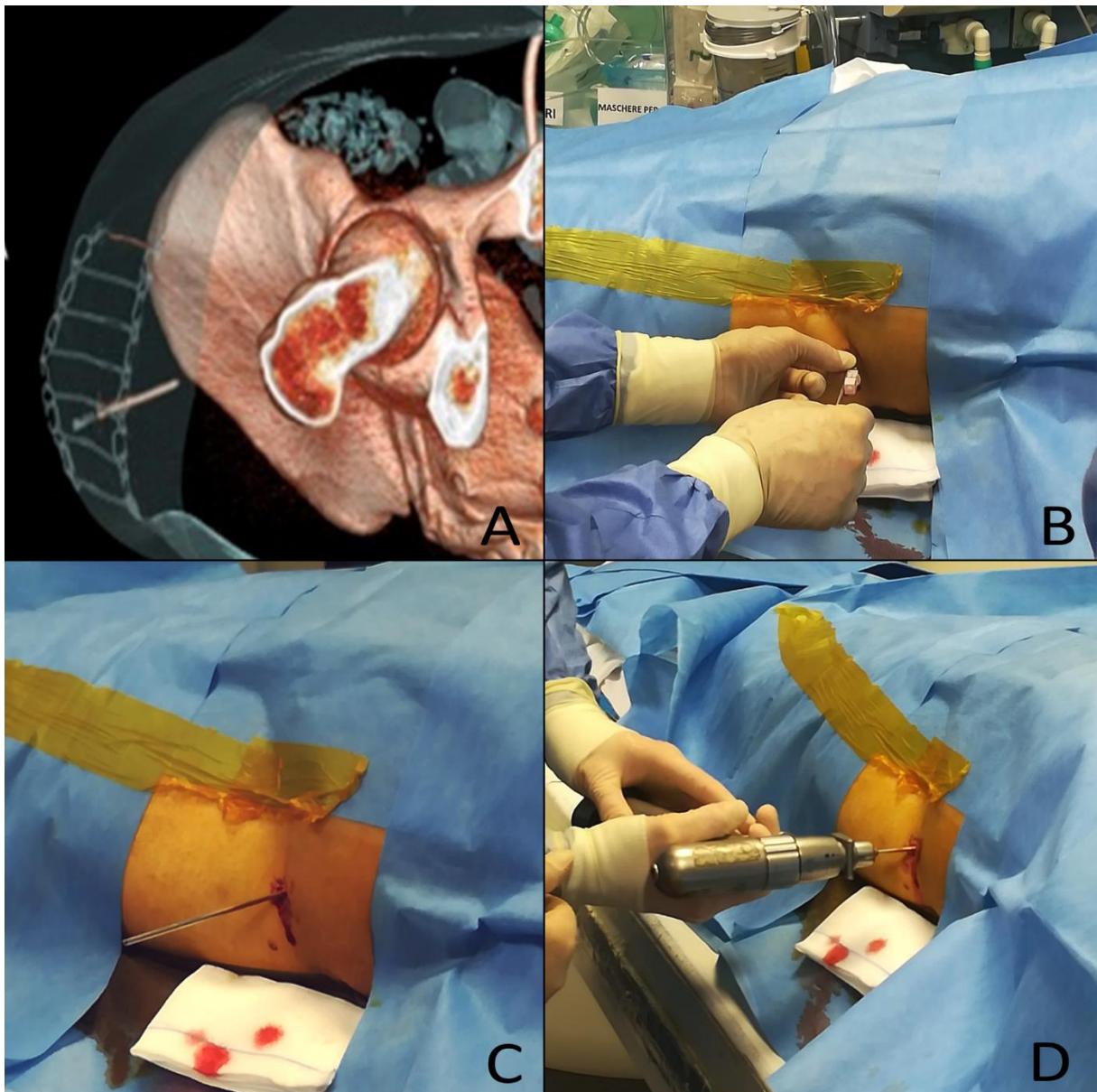


Figure 8 A) relation between Needle, grid and body, B) insertion of the guide wire, C) guide wire, D) deep insertion

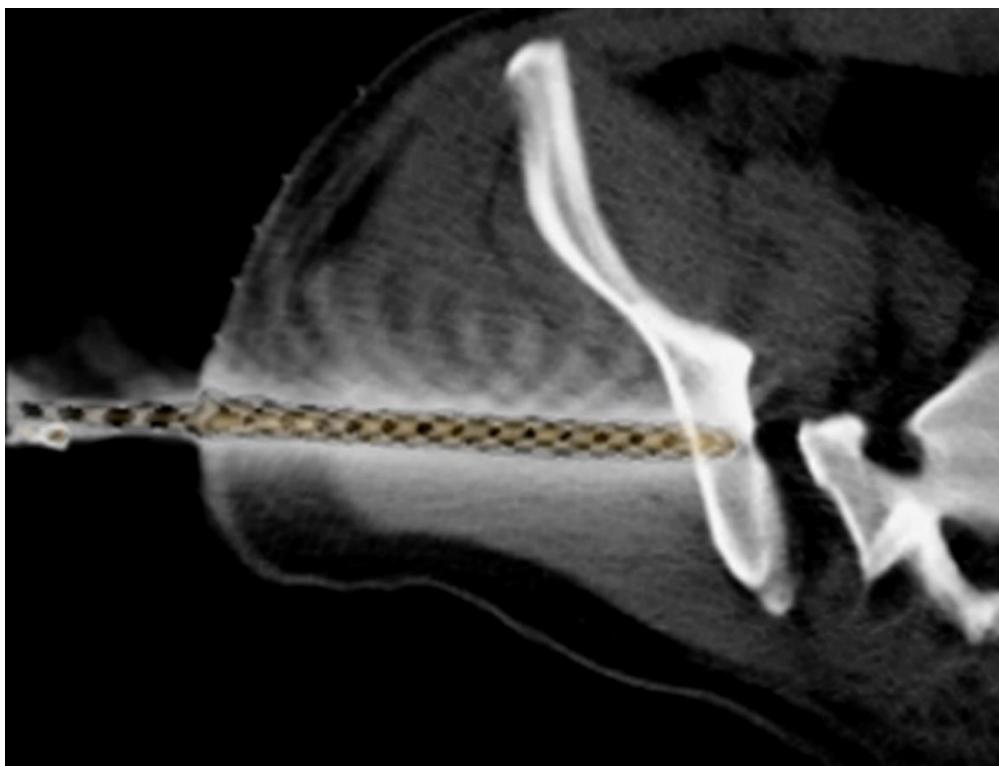


Figure 9 Drill

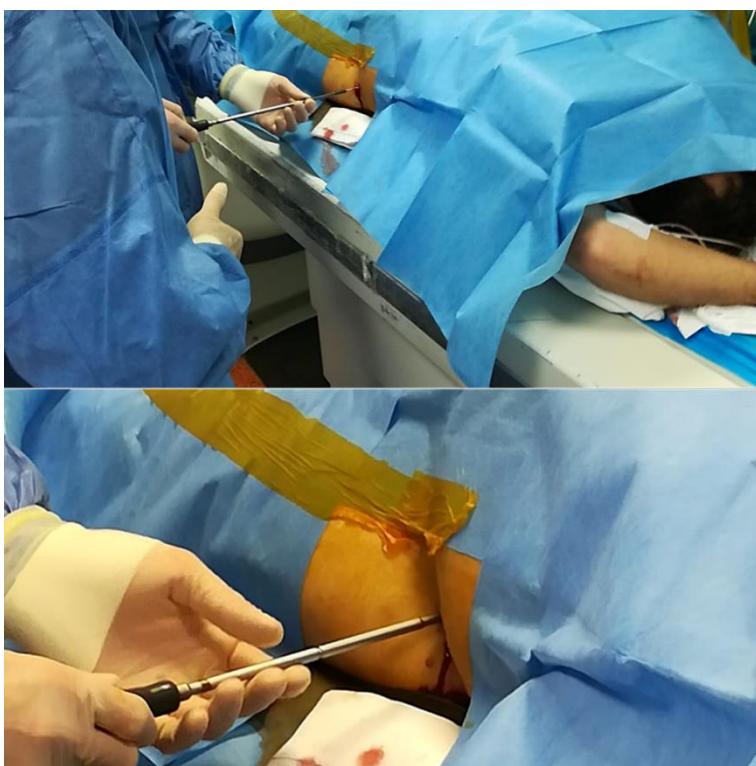


Figure 10 Insertion of the cannulated screw and final twist

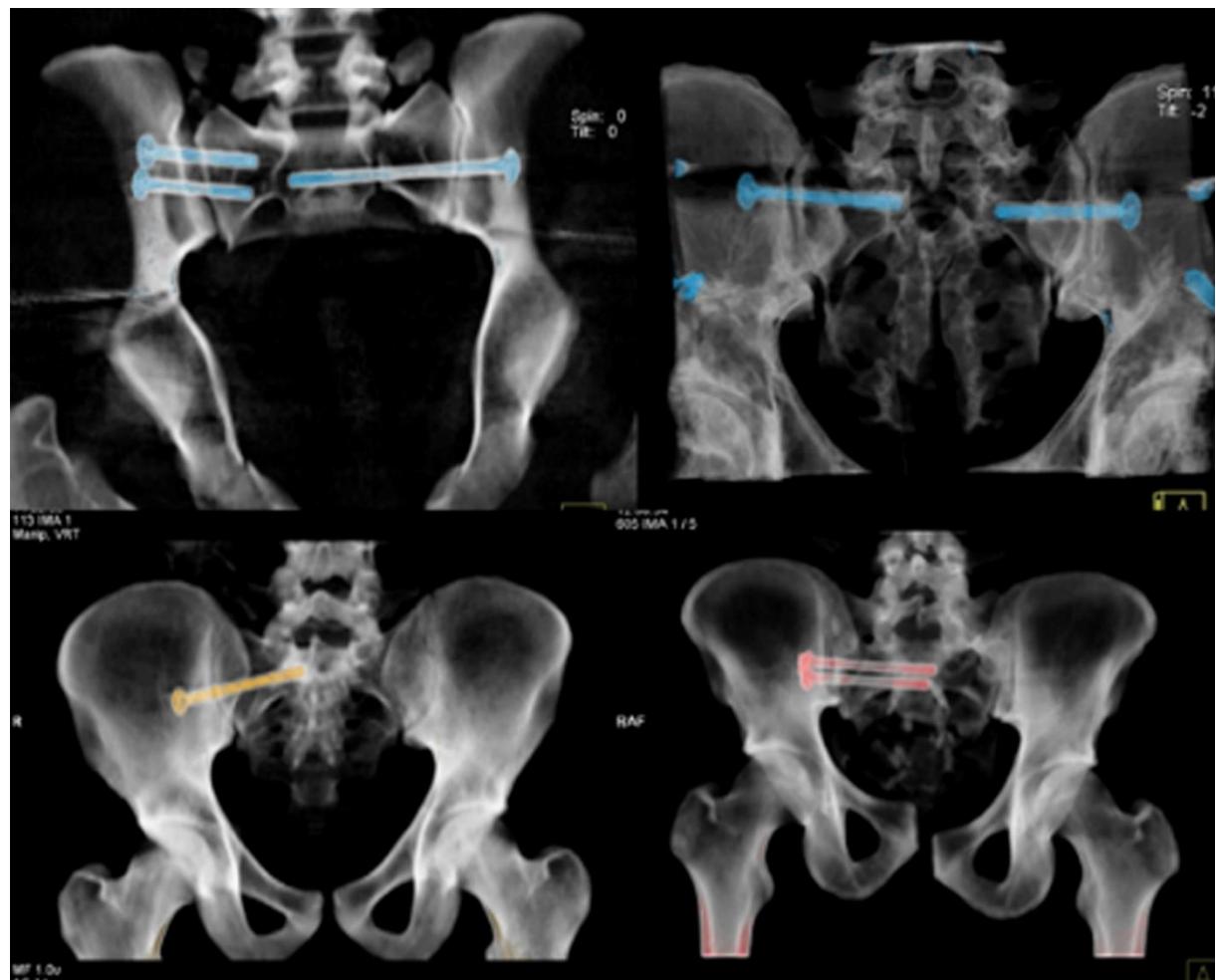


Figure 11 VRT reconstructions of the pelvis with the screws

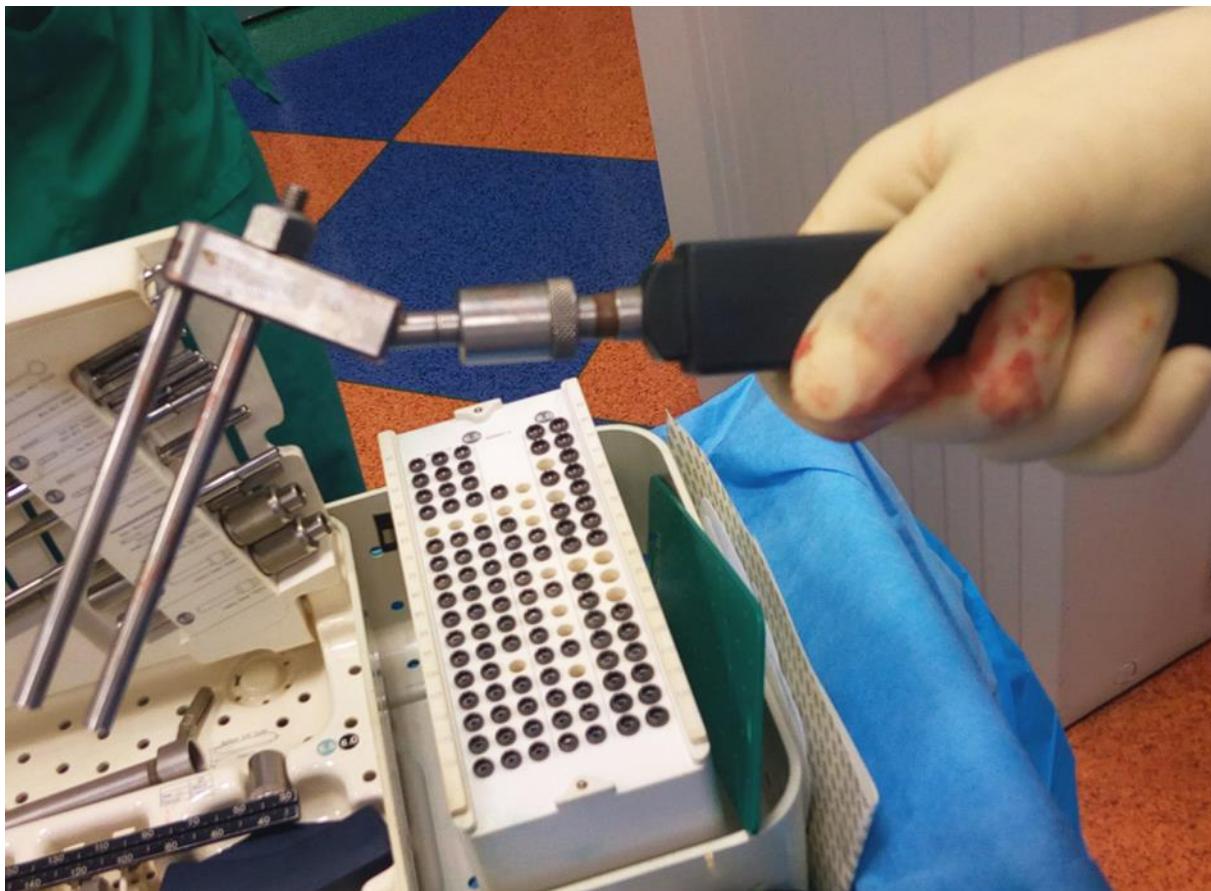


Figure 12 parallel guide

**Table 1: Outcome**

24 MONTHS	12 MONTHS	6 MONTHS	2 MONTHS	1 WEEK	PATIENT		OPERATION DAY															
					1	2	3	4	5*	6	7#	8	9@	10	11	12	13	14	15	16	17	18
G	0	0	0	2	0	0	+	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
M	0	0	0	2	0	0	+	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
A	1	1	1	0	1	2	+	1	2	1	1	1	2	1	2	1	1	1	1	1	1	2
P	1	1	2	0	1	0	+	2	3	1	1	3	1	1	1	2	1	1	1	1	1	1
G	2	2	2	3	2	2	+	2		2	2	1	2	2	2	2	2	2	2	2	2	2
M	2	2	2	3	2	2	+	2		2	2	1	2	2	2	2	2	2	2	2	2	2
A	1	1	1	0	1	2	+	1		1	1	1	2	1	2	1	1	1	1	1	1	2
P	0	0	0	0	0	0	+	0		0	0	0	0	0	0	0	0	0	0	0	0	0
G	3	3	3	3	3	3	+	3		3	3	2	3	3	3	3	3	3	3	3	3	
M	3	3	3	3	3	3	+	3		3	3	3	3	3	3	3	3	3	3	3	3	
A	1	1	1	0	1	2	+	1		1	1	1	2	1	2	1	1	1	1	1		
P	0	0	0	0	0	0	+	0		0	0	0	0	0	0	0	0	0	0	0	0	
G	3	3	3	3	3	3	+	3		3	3	3	3	3	3	3	3	3	3	3	3	
M	3	3	3	3	3	3	+	3		3	3	3	3	3	3	3	3	3	3	3	3	
A	1	1	1	0	1	2	+	1		1	1	1	2	1	2	1	1	1	1	1	1	
P	0	0	0	0	0	0	+	0		0	0	0	0	0	0	0	0	0	0	0	0	
G	3	3	3	3	3	3	+	3		3	3	3	3	3	3	3	3	3	3	3	3	
M	3	3	3	3	3	3	+	3		3	3	3	3	3	3	3	3	3	3	3	3	
A	1	1	1	0	1	2	+	1		1	1	1	2									
P	0	0	0	0	0	0	+	0		0	0	0	0	0	0	0	0	0	0	0	0	

**Legend:**

G (gait), M (mobility), A (asymmetry), P (pain).

RATING; 0 absent, 1 not very present, 2 present, 3 very present

\* No trauma, # died due to the severity of the trauma, @ location of the screw and new operation 10/15/2015

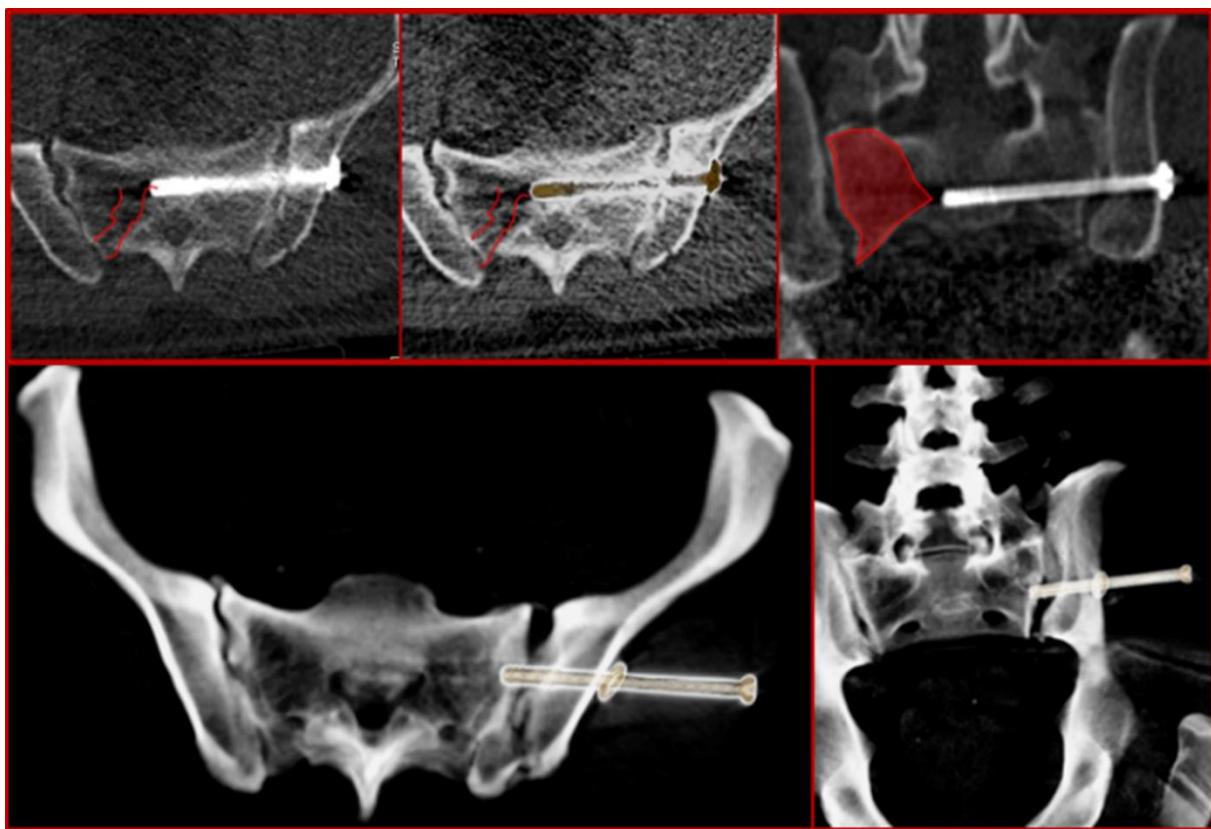


Figure 13 unacknowledged fracture and dislocated screw

**Table 2: Accuracy**

<b>Authors</b>	<b>Article</b>	<b>Patients</b>	<b>Accuracy</b>
Nelson DW, D.P.	"CT-guided fixation of sacral fractures and sacroiliac joint disruptions" - 1991	8	100%
Duwelius PJ, V. A.	"Computed tomography-guided fixation of unstable posterior ring disruption" - 1992	13	100%
Ziran BH, S. W.	"Iliosacral screw fixation of the posterior pelvic ring using local anaesthesia and computerised tomography" - 2003	-	100%
Berton R. Moed, B. L.	"MDw S2 Iliosacral Screw Fixation for Disruptions of the Posterior Pelvic Ring: A Report of 49 Cases" – 2006	49	98%
Gandhi G. et al.	"Estabilização sacroilíaca percutânea guiada por tomografia computadorizada nas fraturas pélvicas instáveis: uma técnica segura e precisa" - 2017	6	100%
Spanò F. et Al	"CT-guided sacroiliac screws placement"- 2019	19	100%