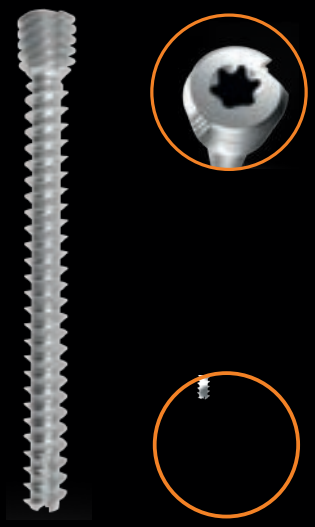
M3MED

Surgical technique
TOOL PRO SCREWS

The choice of compression



Midfoot arthrodesis
Talo-navicular arthrodesis
Tibio-tarsal arthrodesis
Calcaneal osteotomy

BRM® Extremities

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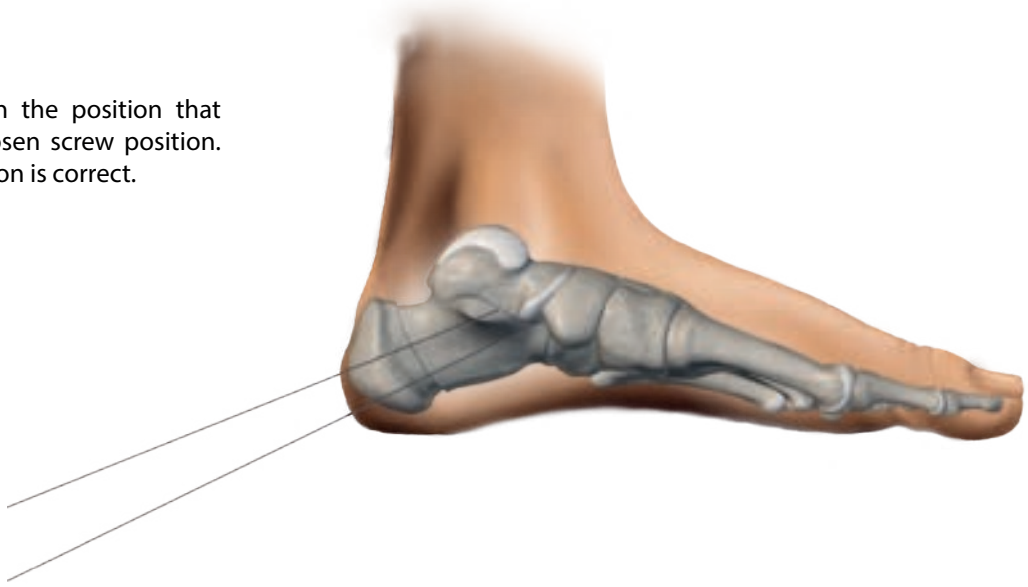
The following guidelines are indicative; it is responsibility of the surgeon to evaluate the adequacy and the use of this technique according to his experience and his medical skills.

1

Evaluate the fracture and select the proper diameter and design of the screw. Place the patient according to the technique chosen by the surgeon who is also responsible for the choosing of the operational access. After the temporary reduction of the fracture or osteotomy (performed according to the surgeon's technique and eventually with Kirschner wires), the surgeon has to choose the design and the diameter of the screw he wants to implant.

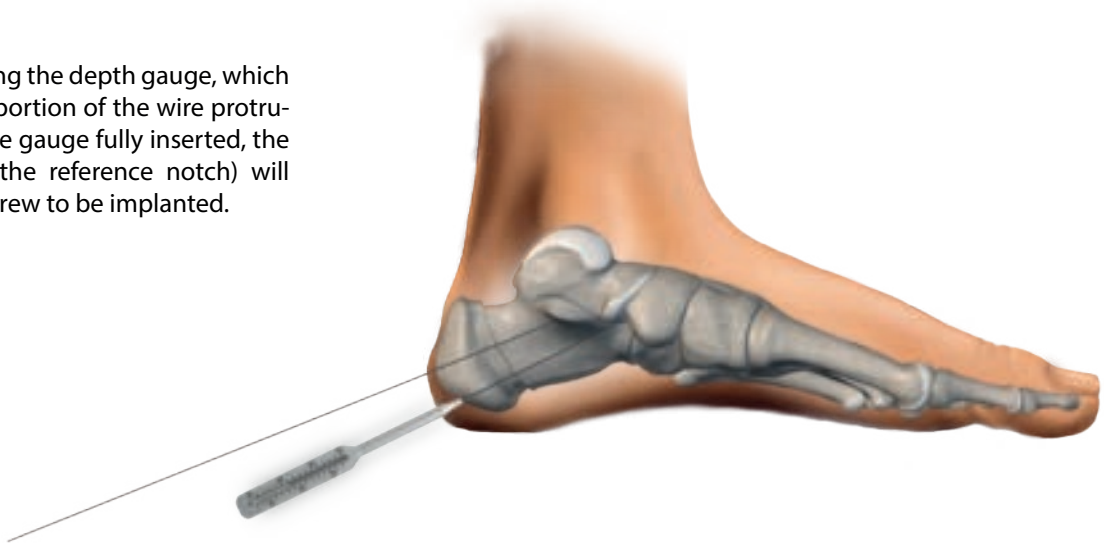
2

Insert the Kirschner guide wire in the position that allows the surgeon to get the chosen screw position. Check with fluoroscopy if the position is correct.



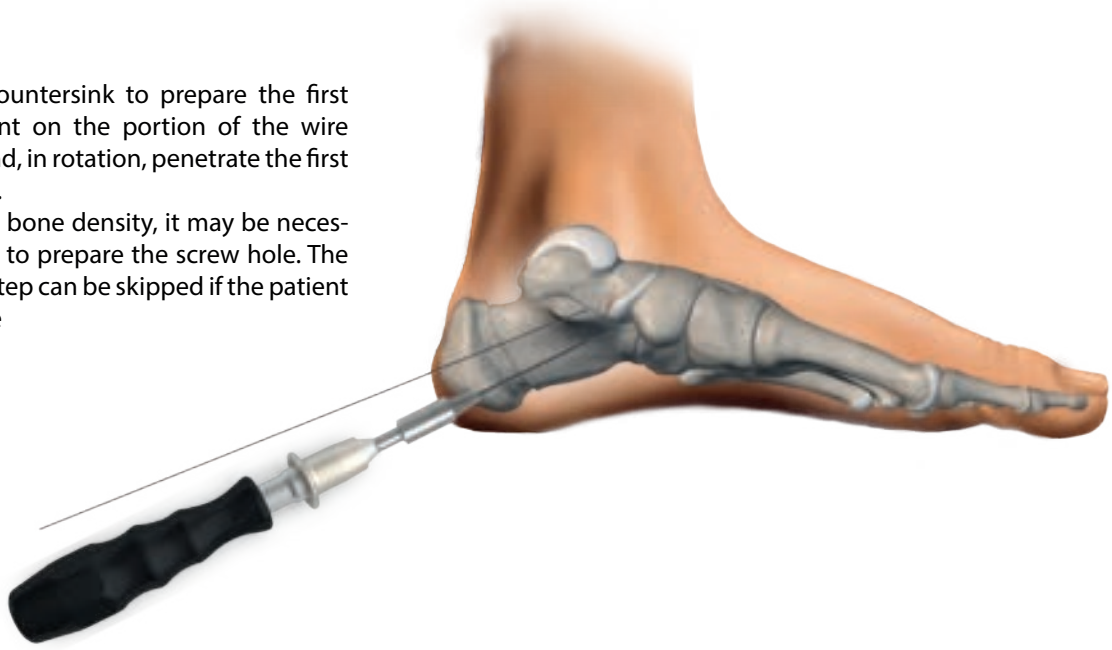
3

Determine screw length using the depth gauge, which has to be inserted into the portion of the wire protruding from the bone: with the gauge fully inserted, the back end of the wire (or the reference notch) will indicate the length of the screw to be implanted.



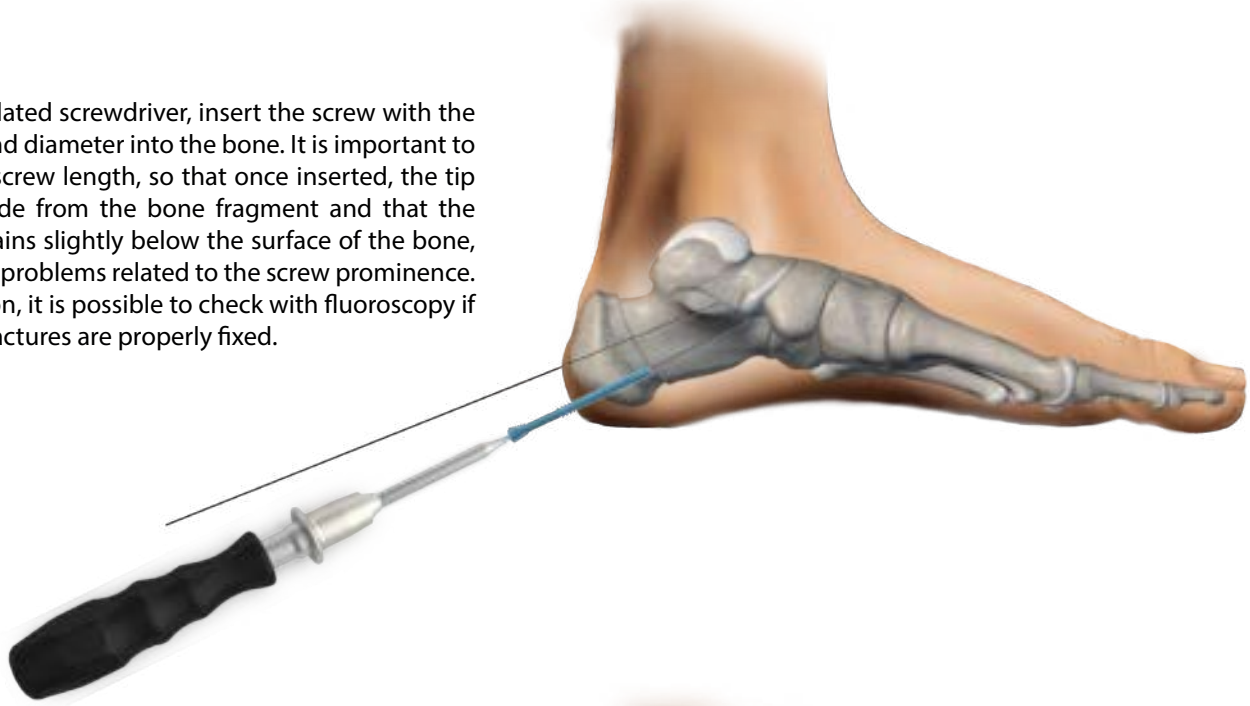
4

Now use the cannulated countersink to prepare the first cortex: insert the instrument on the portion of the wire protruding from the bone and, in rotation, penetrate the first cortex as far as allowed by it.
Note: For patients with high bone density, it may be necessary to use a cannulated tip to prepare the screw hole. The screw is self-drilling, so this step can be skipped if the patient doesn't have very hard bone



5

Using the cannulated screwdriver, insert the screw with the correct length and diameter into the bone. It is important to select the right screw length, so that once inserted, the tip does not protrude from the bone fragment and that the screw head remains slightly below the surface of the bone, in order to avoid problems related to the screw prominence. After the insertion, it is possible to check with fluoroscopy if the screw and fractures are properly fixed.



6

Remove the Kirschner wire and close the wound.

If the screw removal is required, it is possible to remove the devices using the proper surgical instruments. Uncover the head of the screws and extract them using the proper extractor screwdriver.

Handles

CODE	DESCRIPTION
UAOI0MA000	Quick coupling handle
UAOI0MT000	T-Type quick coupling handle

Depth gauges

STAI256000M	Depth Gauge L 75mm
STAI270000M	Depth Gauge L 110mm

Countersink

STAI256000K	Countersink 5.6
STAI270000K	Countersink 7.0

Cannulated Tips

STAI239000P	Cannulated tip Ø3.9mm
STAI246000P	Cannulated tip Ø4.6mm
STAI255000P	Cannulated tip Ø5.5mm

Screwdrivers

STAI100020	Screwdriver BTX20
STAI100020P	Solid Screwdriver BTX20
STOI100025	Screwdriver BTX25
STOI100025P	Solid Screwdriver BTX25

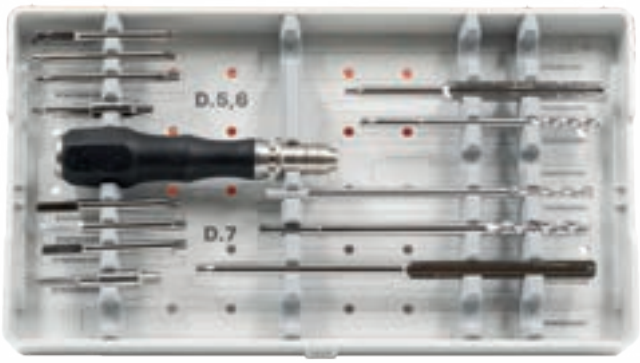
Wires tube

UKWI00120T	Tube for K-wire L120mm
UKWI00200T	Tube for K-wire L200mm

Instruments box (empty)

STOI056070BP	TOOL PRO 5.6-7.0 small instruments box

INSTRUMENTS SET



SET.TOOL5670P	TOOL PRO Ø5.5-7.0 Screws instruments box