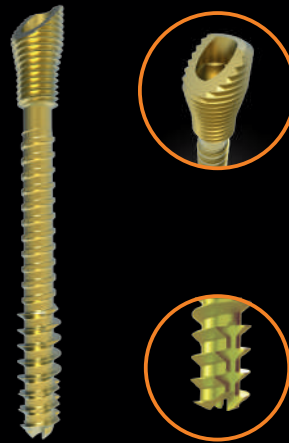




Surgical technique

TOOL VIP SCREWS

Verified Intrathread Performance



Osteotomy for the hallux valgus correction
Calcaneus-cuboidal or talus-navicular arthrodesis
Various interosseous arthrodesis in the hand
Mono and bi-cortical osteotomies in the foot or hand
Fusion of the MTF1 and interphalangeal joints



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.

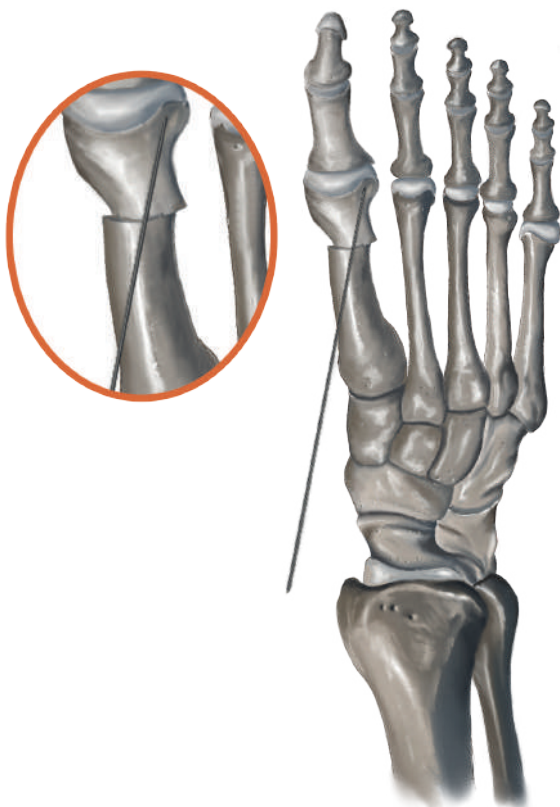
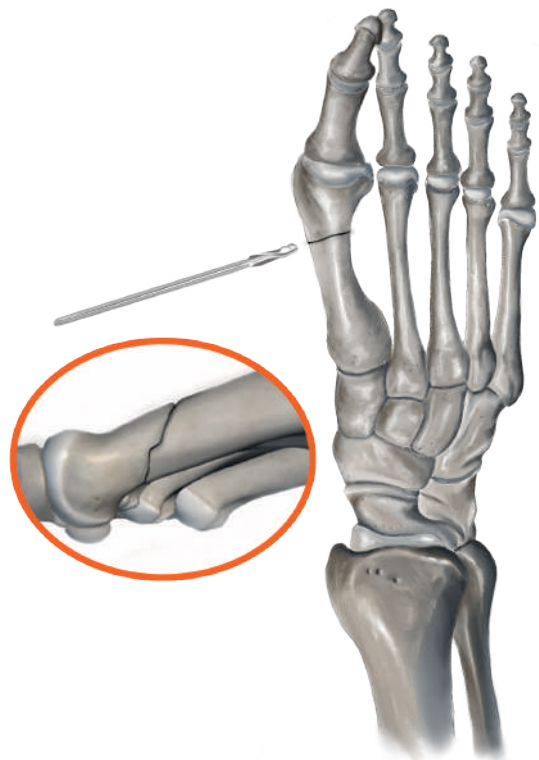


1

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.

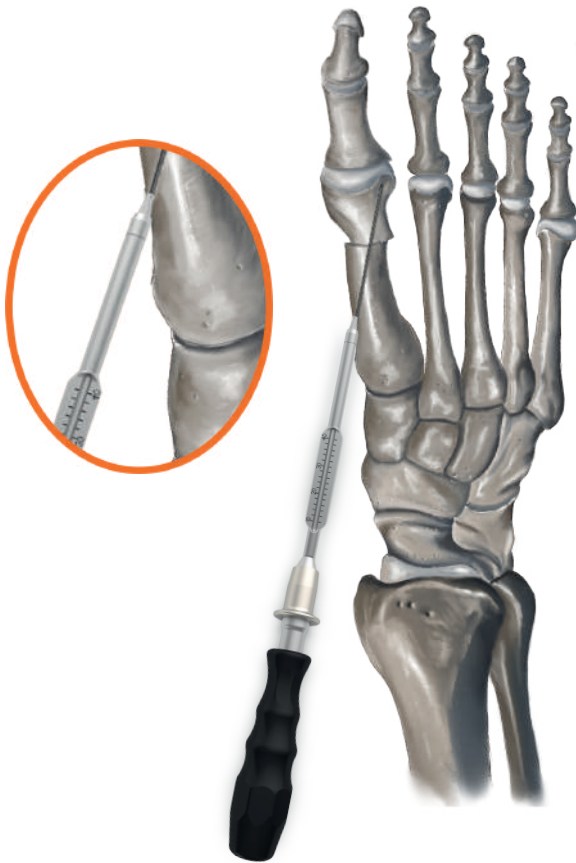
2

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.



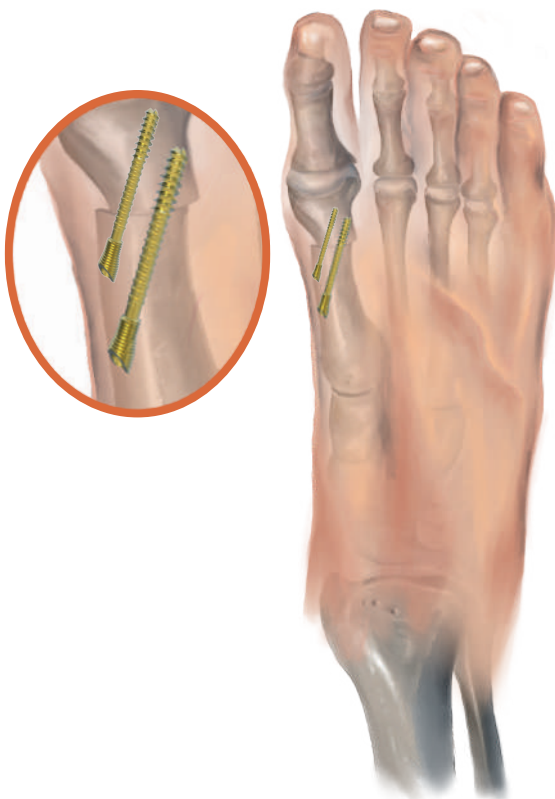
3

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.



5

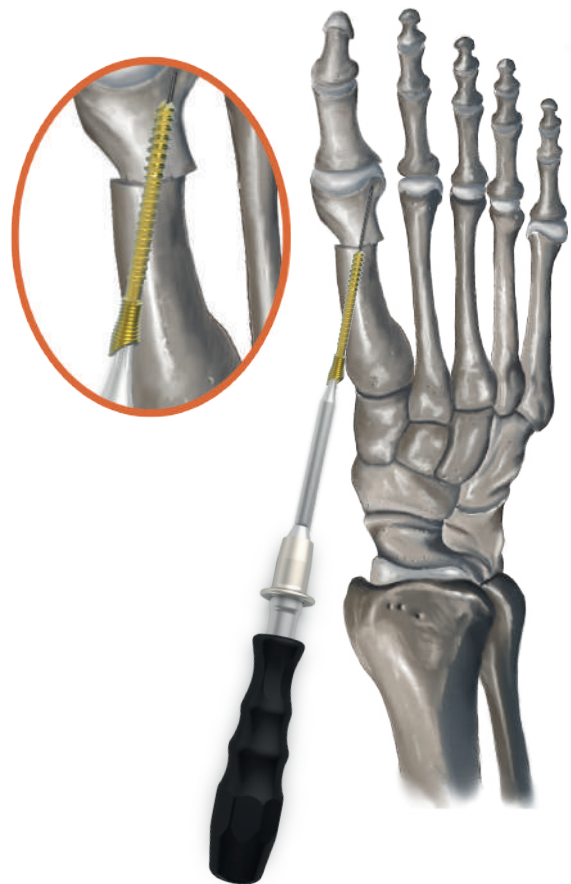
Using the cannulated screwdriver, insert the screw with the correct length and diameter into the bone. It is important to select the right screw length, so that once inserted, the tip does not protrude from the bone fragment and that the screw head remains slightly below the surface of the bone, in order 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.



4

Use the counterink with depth gauge to prepare the first cortex and determine the length of the screw to be implanted: insert the counterink on the portion of the wire protruding from the bone and, in rotation, penetrate the first cortex as far as the instrument allows. In this position the back end of the wire (or the reference notch) will indicate, on the graduated plane of the instrument, the length of the screw to be implanted.

Note: For patients with high bone density, it may be necessary to use the cannulated tip to prepare the hole for the screw (the screw is self-drilling so this step can be ignored if the patient does not have a very hard bone).



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

Countersink

STVI22500K
STVI23000K
STVI240000KCountersink TOOL VIP 2.5
Countersink TOOL VIP 3.2
Countersink TOOL VIP 4.0

Cannulated Tips

STVI220000P
STVI224000P
STVI234000PCannulated Tip Ø1.8mm
Cannulated Tip Ø2.0mm
Cannulated Tip Ø2.9mm

Screwdrivers with or without depth gauge

STVI2ES017C
STVI2ES017P
STVI2ES017
STVI2ES020C
STVI2ES020P
STVI2ES020
STVI2ES025C
STVI2ES025P
STVI2ES025Screwdriver with Depth Gauge Ex.1,7
Solid Screwdriver Ex.1,7
Cannulated Screwdriver Ex.1,7
Screwdriver with Depth Gauge Ex.2,0
Solid Screwdriver Ex.2,0
Cannulated Screwdriver Ex.2,0
Screwdriver with Depth Gauge Ex.2,5
Solid Screwdriver Ex.2,5
Cannulated Screwdriver Ex.2,5

Wires tube

UKWI00080T
UKWI00120TTube for K-wire L80mm
Tube for K-wire L120mm

Instruments box (empty)

STVI00000BP

TOOL VIP small instruments box

INSTRUMENTS SET



SET.TOOLVIPP

TOOL VIP Screws instruments box