



THE ART of TRAUMA SURGERY

The Art of Trauma Surgery is a collaborative project between I.T.S. and Austrian artist Oskar Stocker that celebrates the skill, perseverance, and artistry of surgeons and engineers who work tirelessly to improve outcomes for trauma patients.

At I.T.S., we stand for long-term, trusting relationships with our customers, suppliers, and development partners. Through our devotion to innovation and development, we continuously seek to improve and optimize products and techniques in the field of traumatology.

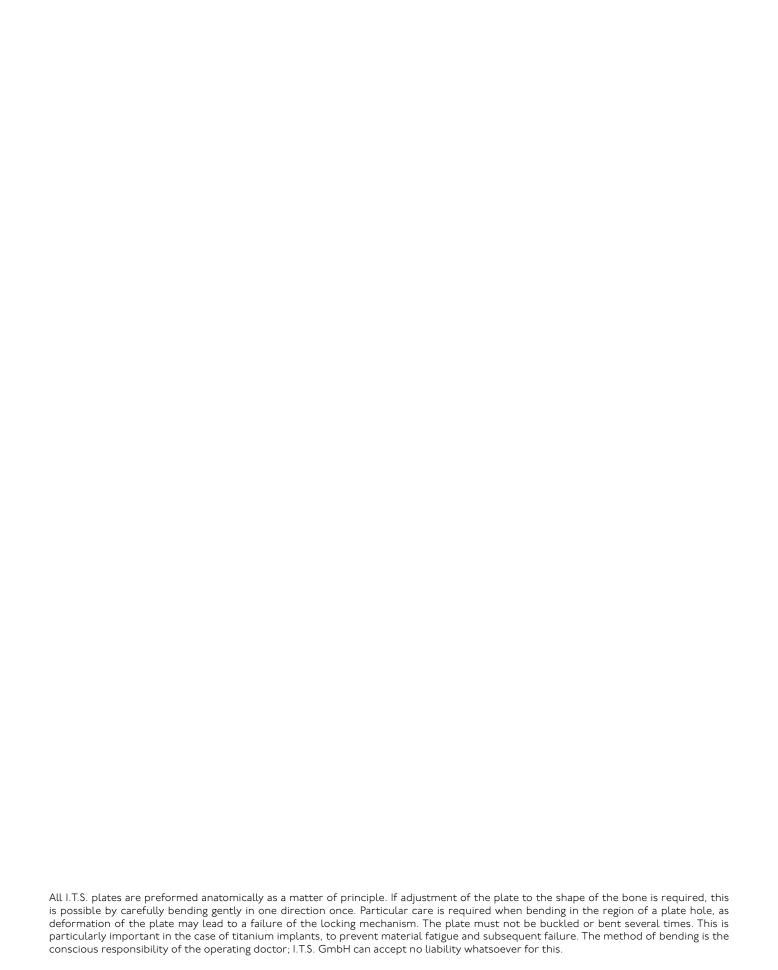
We believe that the success of our mission lies in the combination of the technical expertise, compassion and dedication of surgeons and engineers to help patients regain their health and well-being. Join us in celebrating these remarkable individuals and *The Art of Trauma Surgery!*

About the Artist

The Austrian artist Oskar Stocker (b. 1956) lives and works in Graz, Austria. He has become known internationally through the exhibition Facing Nations, which consists of portraits of more than 120 people of various nationalities living in Graz; it was shown first in Graz itself, then in Vienna, and later culminated in 2010 with its display at the UN Headquarters in New York City.

In addition to the portraits of individual people, he devotes himself to the depiction of landscapes and objects, down to the smallest detail.





Introduction

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Introduction

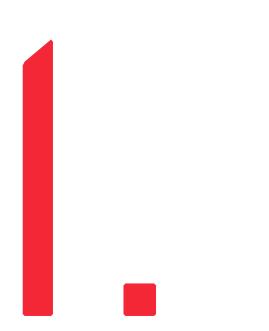
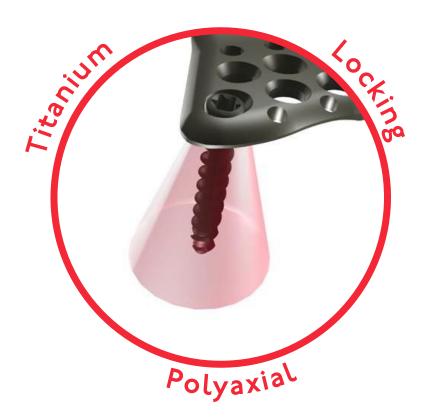


Plate Technology

At I.T.S., we stand for long-term, trusting relationships with our customers, suppliers, and development partners. Through our dedication to innovation and development, we continuously seek to improve and optimize products and techniques for trauma surgery.

ONE Technology for all implants

All I.T.S. plates are made from Titanium Grade 2, whereas the screws are made of a harder titanium alloy. This allows the plates to have only non-threaded holes, which all (with the exception of oblong holes) accept both non-locking and locking screws.



When a locking screw is inserted, it forms threads into the plate. There is no cutting and thus no debris is created. Each locking screw can be locked at a free placement within a cone of angulation up to \pm 15° and can be re-positioned up to three times.

System Overview

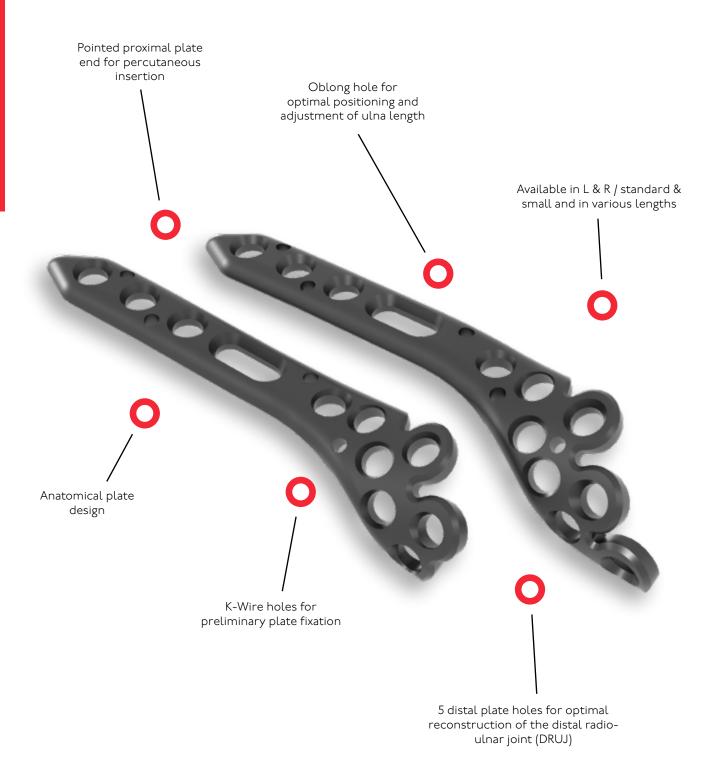
The ITS. Distal Ulna Locking Plate System is a plate system that can be fitted with locking screws and adapted to the contour of the distal ulna. Due to the palmar position, the plate is covered by the musculature so that metal removal is not always necessary.

The ulnar head is stabilized using locking screws and the plate configuration supports the transition to the neck area.

The use of locking screws in the proximal portion increases rigidity.



Properties



Screws

32271-xx **NON-LOCKING** LOCKING 3724I-xx Cortical Screw, D=2.7mm Stabilization Screw, D=2.4mm Spiral Drill, D=I.8mm Spiral Drill, D=2.0mm Torque, T9 Torque, T9 37303-xx LOCKING 37304 **LOCKING** Cancellous Stabilization Screw, Cortical Stabilization Screw, D=3.0mm D=3.0mm Spiral Drill, D=2.4mm Spiral Drill, D=2.0mm Torque, T9 Torque, T9

Indications

- Fractures of the ulnar head
- Multifragmentary fractures of the ulnar head
- Subcapital fractures of the ulnar head
- Metaphyseal comminuted fractures of the distal ulna
- Combined ulnar head and ulnar shaft fractures

Contraindications

- Existing infections in the fracture zone and operation area
- Common situations that do not allow osteosynthesis (osteoporosis)
- Obesity
- Lack of patient compliance

Time of Operation

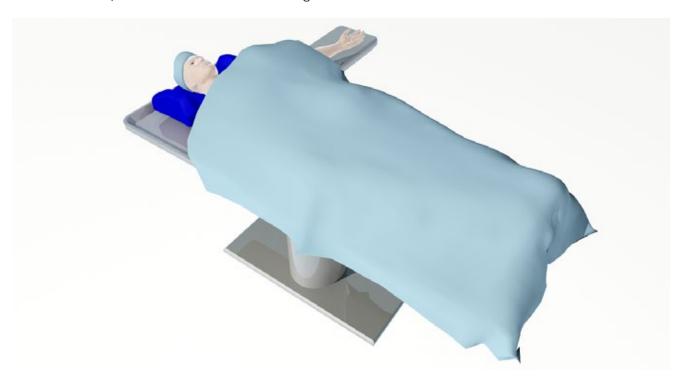
- Immediately after trauma or delayed
- After regression of swelling

Surgical Technique



Pre-operative patient preparation

- The patient is placed in the supine position with pneumatic deprivation of blood supply
- The hand is positioned on a radiolucent surgical hand table



Exposure

- The skin incision is made approx. 5mm to the palmar side of the mid lateral line from the tip of the ulna head handle to 5-7cm proximally.
- After sectioning of the skin and the subcutis, outline the superficial branch and the ulnar nerve in the distal region.
- Sharply separate the pronator quadratus muscle on the ulnar side and hold subperiostally medially.
- The fracture area is outlined and exposed to the joint capsule.

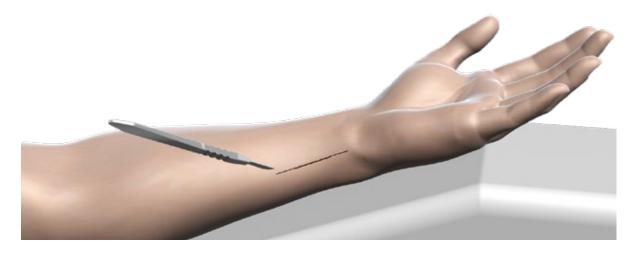


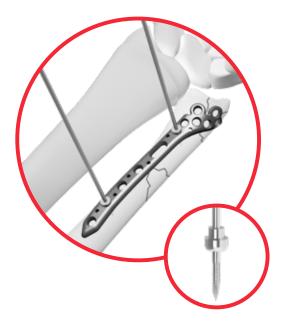
Plate Insertion

- Temporary reduction of the fractured sections with the aid of forceps or guide wires.
- Subsequent control under fluoroscopy.



OPTIONAL: Temporary Plate Fixation

• Optionally, the plate can be stabilized using the Temporary Plate Holder (58/64-/50).



Screw Placement

With the spiral drill, D=2.0mm, L=100mm, AO Connector (6/203-/00) drill through the drill guide, D=2.0/2.4mm (622/5) into the oblong hole..



Determine appropriate length using the depth gauge, PROlock II (59026). Insert the D=2.7mm cortical screw (32271-XX) with the screwdriver, Torque, T9x70 (56095-70).

TIP: For optimal alignment of the plate with ulna length, we recommend to first fill the oblong hole.



• Then insert a D=2.4mm stabilization screw (3724/-XX) or a D=3.0mm cancellous stabilization screw (37303-xx) with the screwdriver, Torque, T9x70 (56095-70) into a distal plate hole.

	Screw	Ø	Drill
	Screw		Article Number
3724I-xx	Stabilization Screw	1.8	61183-100
37303-xx	Cancellous Stabilization Screw	2.0	61203-100



Use the screwdriver, Torque, T9x70 (56095-70) to insert a D=3.0mm cortical stabilization screw (37304-XX) or a D=3.0mm cortical screw (32271-XX) of appropriate lengths determined previously with the depth gauge, PROlock II (59026) into a shaft plate hole.



	Screw	Ø	Drill Article Number
3227I-xx	Cortical Screw	2.0	61203-100
37304-xx	Cortical Stabiliza- tion Screw	2.4	61243-100

- The remaining plate holes are then filled, with either locking or non-locking screws.
- Subsequent control of plate position under fluoroscopy.



Postoperative Treatment

- Dorsal splint (I-2 weeks)
- With mobilization stability: physical therapy possible in the immediate postoperative period

Explantation

If desired by the patient, the implant can be removed.

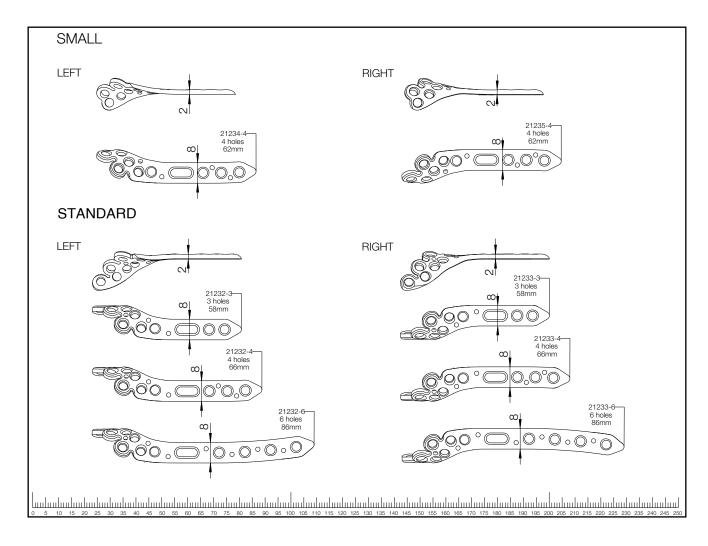
Removal should be performed at the earliest one and a half years later or after radiographic verification of the healed bone.

The ITS. Type II anodization surface treatment reduces the risk of cold welding of titanium implants (for more information, see page 2I).

Information



Technical Information



For detailed cleaning and sterilization instructions, please refer to package insert.

Not true to scale

Type II Anodization

Chemical process - anodization in a strong alkaline solution*

Type III anodization

- Layer thickness 60-200nm
 - + Different colors
 - Implant surface remains sensitive to:

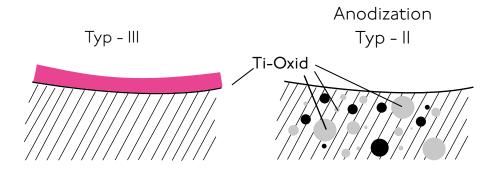
Chipping

Peeling

Discoloration

Type II anodization

- Layer thickness 2000-l0 000nm
 - + Film becomes an interstitial part of the titanium
 - No visible cosmetic effect



Anodization Type II leads to following benefits*

- Oxygen and silicon absorbing conversion layer
- Decrease in protein adsorption
- Closing of micro pores and micro cracks
- Reduced risk of inflammation and allergy
- Hardened titanium surface
- Reduced tendency of cold welding of titanium implants
- Increased fatigue resistance of implants
- Improved wear and friction characteristics

^{*} White Paper: Ti6AL4V with Anodization Type II: Biological Behavior and Biomechanical Effects; Axel Baumann, Nils Zander

Ordering Information

Distal Ulna Plate



Description		Holes	Article Number
Distal Ulna Plate	Right	3	21233-3
Distal Ulna Plate	Left	3	21232-3
Distal Ulna Plate	Right	4	21233-4
Distal Ulna Plate	Left	4	21232-4
Distal Ulna Plate	Right	6	21233-6
Distal Ulna Plate	Left	6	2 2332-6







Description		Holes	Article Number
Distal Ulna Plate, Small	Right	3	21235-3
Distal Ulna Plate, Small	Left	3	21234-3
Distal Ulna Plate, Small	Right	4	21235-4
Distal Ulna Plate, Small	Left	4	21234-4
Distal Ulna Plate, Small	Right	6	21235-6
Distal Ulna Plate, Small	Left	6	21234-6

Screws

Cortical Screw, D=2.7mm	Length	Article Number
Non-Locking	8	32271-8
	9	32271-9
	10	32271-10
	II	32271-11
	12	32271-12
	14	32271-14
	16	32271-16
	18	32271-18
	20	32271-20
	22	32271-22
	24	32271-24

Stabilization Screw, D=2.4mm	Length	Article Number
Locking	8	37241-8
	10	37241-10
- Control of the Cont	12	37241-12
	14	37241-14
	16	37241-16
	18	37241-18
	20	37241-20
	22	37241-22
	24	37241-24

Cancellous Stabilization Screw, D=3.0mm	Length	Article Number
Locking	8	37303-8
	9	37303-9
#	10	37303-10
	Ш	37303-II
	12	37303-12
	14	37303-14
	16	37303-16
	18	37303-18
	20	37303-20
	22	37303-22
	24	37303-24

Cortical Stabilization Screw, D=3.0mm	Length	Article Number
Locking	8	37304-8
	9	37304-9
	10	37304-10
	Ш	37304-II
	12	37304-12
	14	37304-14
	16	37304-16
	18	37304-18
	20	37304-20
	22	37304-22
	24	37304-24

Instruments

Guide Wire

35164-150

Description	Article Number
Guide Wire, Steel, D=I.6mm, L=I50mm, TR, w. Thread	35164-150

(Optional) Plate Holder



58164-150

Description	Article Numer
Temporary Plate Holder, For 3.5/4.2mm Screws	58164-150

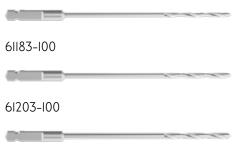
Depth Gauge



59026

Description	Article Number
Depth Gauge, PROlock II	59026

Spiral Drill



61243-100

Description	Article Number
Spiral Drill, D=I.8mm, L=I00mm, AO-Connector	6 83- 00
Spiral Drill, D=2.0mm, L=100mm, AO-Connector	61203-100
Spiral Drill, D=2.4mm, L=100mm, AO-Connector	61243-100

Drill Guide



Description	Article Number
Drill Guide, D=2.0/2.4mm	62215

Screwdriver



Description	Article Number
Screwdriver , Torque, T9x70	56095-70

Disclaimer:

The intended users are limited to medical personnel with appropriate product training by the medical product consultants or knowledge of the surgical procedure to be applied. The medical staff must ensure that the use of I.T.S. GmbH medical devices is appropriate, taking into account the medical condition and medical history of the patient. Prior to product use, medical personnel must refer to complete information on product label and in IFU, including, but not limited to, indications, contraindications, warnings and preventative measures, and cleaning and sterilization instructions. Product availability is dependent on country registrations and clearances. For more information, please visit www.its-implant.com or contact us at office@its-implant.com. Unless otherwise noted, all information herein is the intellectual property of I.T.S. GmbH.



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