

SCLStraight Compression Locking Plate



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Introduction



Preface

The special feature of this implant is its compression hole.

Due to an innovative technology it is possible to compress a fracture gap up to 7mm.

A special design of the compression hole enables the use of a locking screw, which locks automatically after the full distance of compression.

Indentations on the rear side of the plate for protection of the periosteum.



Screws

Cortical Screw, Locking, D=3.5mm, SH 37351-XX-N-N Spiral Drill, D=2.7mm, L=100mm, AO Connector 61273-100 56252 Screwdriver, WS 2.5, self-holding sleeve 32351-XX Cortical Screw, D=3.5mm Spiral Drill, D=2.7mm, L=100mm, AO Connector 61273-100 and the state of t 56252 Screwdriver, WS 2.5, self-holding sleeve 35164-150 Guide wire, steel, D=1.6mm, L=I50mm, TR, w. thread

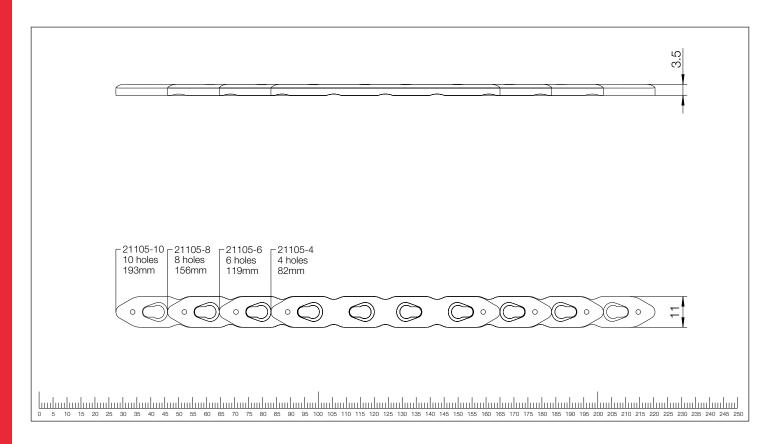
Properties

Properties of the material:

- Plate material: Titanium
- Material of screws: TiAl6V4 ELI
- Easier removal of the implant after the fracture has healed
- Improved fatigue strength of the implant
- Reduced risk of cold welding
- Reduced risk of inflammation and allergy

Properties of the implant:

- Multi-directional Locking
- Indentations on the rear side of the plate for protection of the periosteum
- Anatomical plate design
- K-Wire holes for preliminary plate fixation
- Fracture gap compression up to 7mm
- Plate lengths: 4, 6, 8, 10-hole



Indications, Contraindications & Time of operation

Indications:

- The plate should primarily be used to reconstruct an anatomic situation
- Corrective osteotomies

Contraindications:

- The plate is not intended for shaft fractures of large bones such as femur and tibia
- Advanced osteoporosis
- In cases of skin and soft tissue problems
- Obesity
- Lack of patient compliance

Time of operation:

- Within the first hours after trauma
- After swelling subsides

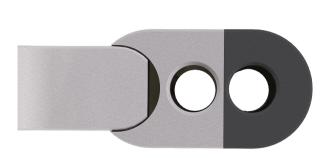
Surgical Technique



Drill Guide

Properties:

- Two drill holes for free choice of using compression or static fixation
- Special design of drill guide enables centric placement in the plate hole



Hole close to handle for drilling a fixation screw Dark grey marked hole for drilling a compression screw



Asymmetric centering assistance for easy placement in the plate hole

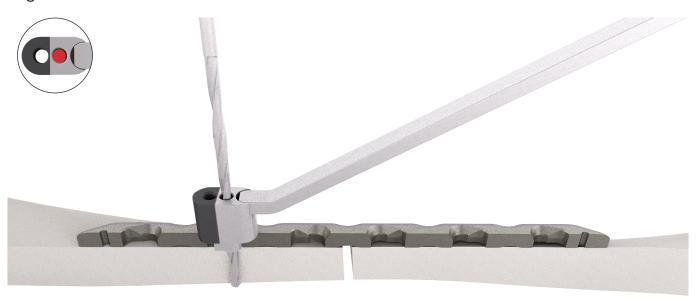
Implantation

- Prepare the patient with a general or regional anesthetic to the affected limb and use a pneumatic (tourniquet) for partial deprivation of the blood supply.
- During the procedure, observe (using intra-operative x-ray fluoroscopy) the fractured bone segment area(s).
- Make the proper incision to the limb subchondral bone fracture site.
- Proceed with transection of musculature if possible along the course of muscle fibers.
- Reduce and align fracture segments using bone holding forceps.

Compression 0 - 3.5mm

For the compression up to 3.5mm alternatively the D=3.5mm cortical screw and the D=3.5mm locking cortical screw can be used at one side of the fracture to fixate the plate on the bone.

Attach the drill guide, D=2.7mm (62216) in any plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (61273-100) to drill through the hole close to handle of the drill guide.



In accordance with the measured length, a D=3.5mm locking cortical screw (3735I-XX-N) is placed.



Use the spiral drill, D=2.7mm, L=100mm, AO Connector (61273-100) to drill through the hole close to handle of the drill guide, D=2.7mm (62216) in the plate hole near the fracture.

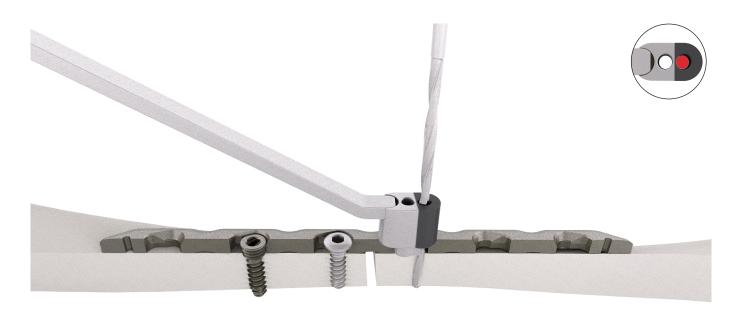


In accordance with the measured length, a D=3.5mm cortical screw (3235I-XX) is placed.



On the other side of the fracture, the D=3.5mm cortical screw (32351-XX) and the D=3.5mm locking cortical screw (37351-XX-N) are placed for compression.

Attach the drill guide (62216) in the opposite plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (61273-100) to drill through the dark gray marked hole of the drill guide, D=2.7mm (62216).



In accordance with the measured length, a D=3.5mm cortical screw (32351-XX) is placed half way down as it is used as a guide screw during the compression.



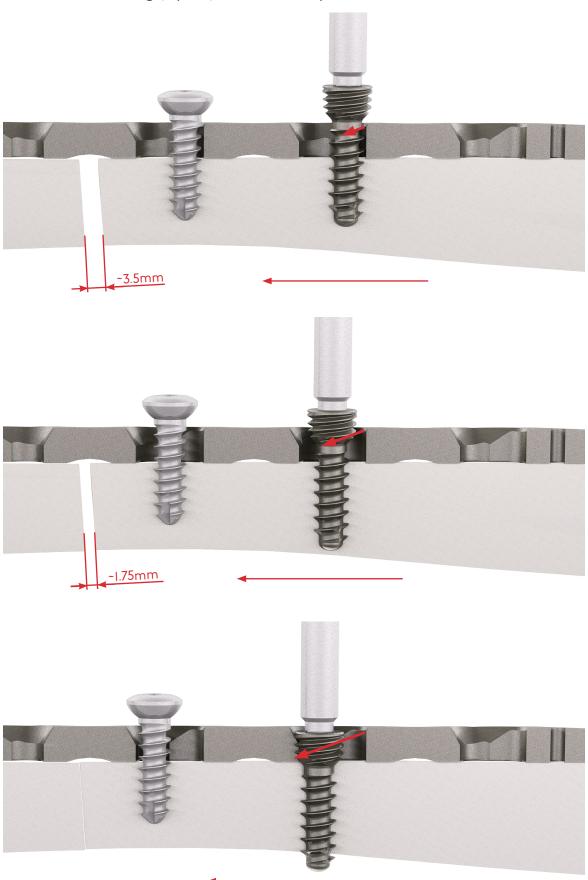
Attach the drill guide (62216) in the adjacent plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (61273-100) to drill through the dark gray marked hole of the drill guide, D=2.7mm (62216).



In accordance with the measured length, a D=3.5mm locking cortical screw (3735I-XX-N) is placed half way down.



During screwing in the D=3.5mm locking cortical screw (37351-XX-N), compression is exerted to the fracture gap (see pictures below).



Afterwards, attach the drill guide, D=2.7mm (62216) to the furthest left plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (61273-100) to drill through the hole closest to handle of the drill guide.



In accordance with the measured length, a D=3.5mm locking cortical screw (3735I-XX-N) is placed.



Attach the drill guide, D=2.7mm (62216) to the furthest right plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (61273-100) to drill through the hole close to handle of the drill guide.



In accordance with the measured length a D=3.5mm locking cortical screw (37351-XX-N) is placed.

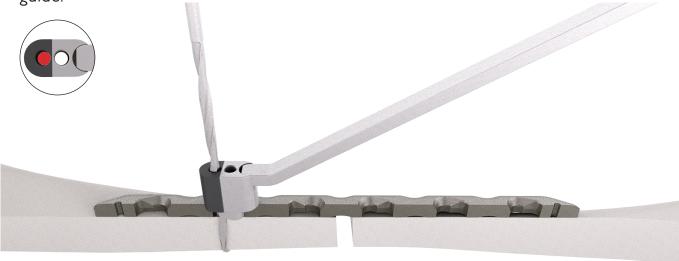
Finally, check the compression and the plate position with the fluoroscopy.



Compression 0 - 7mm

For the compression up to 7mm, the D=3.5mm locking cortical screws (37351-XX-N) are used at both sides of the fracture for compression. The D=3.5mm cortical screws (32351-XX) and the D=3.5mm locking cortical screws (37351-XX-N) in both plate holes farthest to the fracture are for fixation.

Attach the drill guide, D=2.7mm **(62216)** in any plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector **(61273-100)** to drill through the dark gray marked hole of the drill guide.



In accordance with the measured length a D=3.5mm locking cortical screw (37351-XX-N) is placed half way down (screw head may not have contact to the plate).



Use the spiral drill, D=2.7mm, L=100mm, AO Connector (61273-100) to drill through the dark gray marked hole of the drill guide, D=2.7mm (62216) in the plate hole near the fracture.



In accordance to the measured length, a D=3.5mm cortical screw (3235I-XX) is placed half way down.



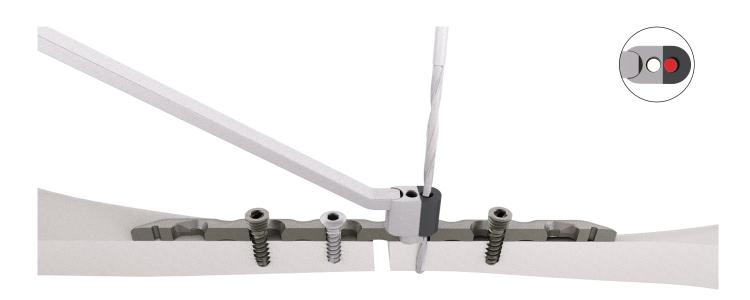
Attach the drill guide, D=2.7mm (62216) in the opposite plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (61273-100) to drill through the dark gray marked hole of the drill guide.



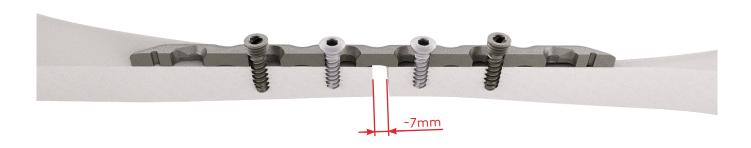
In accordance with the measured length, a D=3.5mm locking cortical screw (3735I-XX-N) is placed half way down (screw head may not have contact with the plate).



Use the spiral drill, D=2.7mm, L=100mm, AO Connector **(61273-100)** to drill through the dark gray marked hole of the drill guide, D=2.7mm **(62216)** in the plate hole near the fracture.

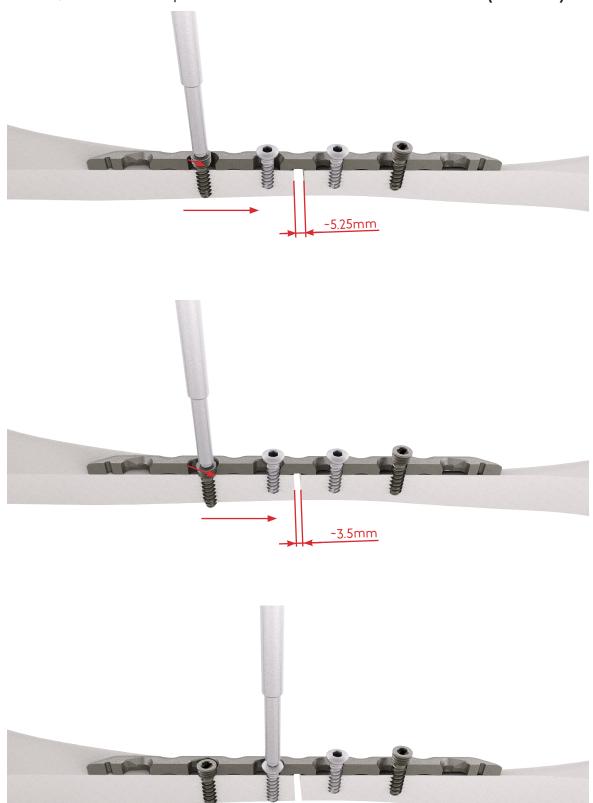


In accordance with the measured length, a D=3.5mm cortical screw (3235I-XX) is placed half way down.

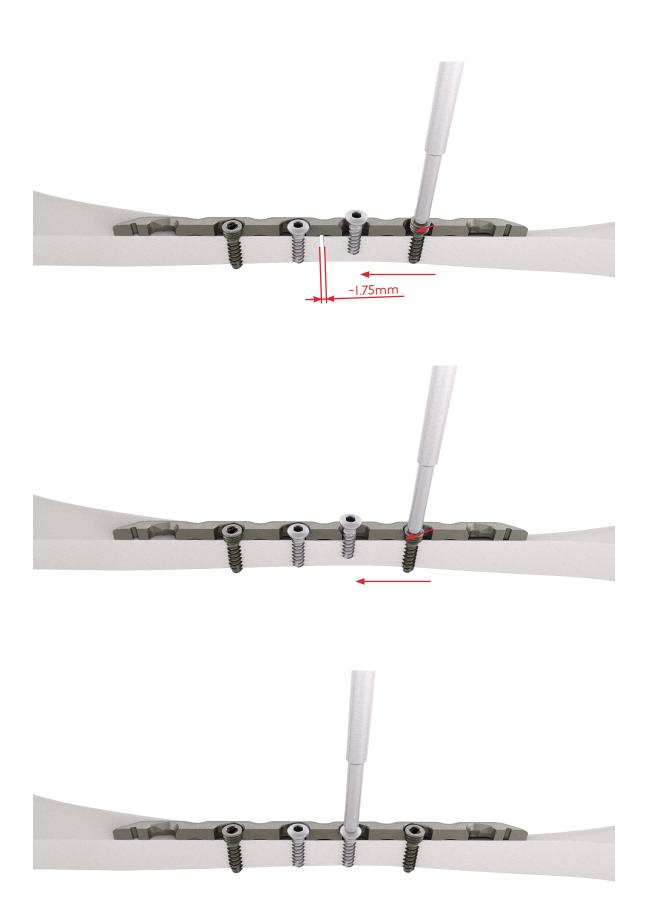


At a fracture gap up to 7mm, the compression occurs at both sides of the fracture. First screw in the D=3.5mm locking cortical screw (3735I-XX-N).

Afterwards, fixate the compression with the D=3.5mm cortical screw (3235I-XX).



Afterwards, screw in the D=3.5mm locking cortical screw (3735I-XX-N). Then turn in the D=3.5mm cortical screw (3235I-XX) to fixate the completed compression.



Afterwards, attach the drill guide, D=2.7mm (62216) to the furthest left plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (61273-100) to drill through the hole close to handle of the drill guide.



In accordance with the measured length, a D=3.5mm locking cortical screw (37351-XX-N) is placed.



Attach the drill guide, D=2.7mm (62216) to the furthest right plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (61273-100) to drill through the hole close to handle of the drill guide.



In accordance with the measured length, a D=3.5mm locking cortical screw (37351-XX-N) is placed.

Finally, check the compression and the plate position with the fluoroscopy.



Redon drainage before skin closure for I2-24 hours can be useful to prevent postoperative haematoma in some cases and is recommended.



Postoperative treatment

- Proper bandage dressing for 2 weeks (until the wound heals)
- Physical therapy for 5-7 weeks
- Full weight-bearing: approx. week 8 after fracture has healed

Explantation

Removal is possible, if desired by the patient.

Implant removal is performed 6 months - $1\frac{1}{2}$ years post-operative and if the fracture has healed.

The problem of cold welding was resolved by using a special surface treatment (for further information see page 27).

Summary

The special feature of this implant is the compression hole.

Due to an innovative technology it is possible to compress a fracture gap up to 7mm. A special design of the compression hole enables the use of a locking screw, which locks automatically after the full distance of compression.

Indentations on the rear side of the plate for protection of the periosteum.

Information



Locking

Locking works because:

- Screw material (TiAlV) is slightly harder than plate material (Titanium Grade 2)
- Screw head **forms** thread into the plate (no cutting)

Benefits:

- ± 15° and Locking
- No pre threading
- No cold welding
- No debris
- You can re-set the screw up to 3 times



Dotize®

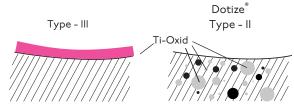
Chemical process - anodization in a strong alkaline solution*

Type III anodization

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

Dotize Type II anodization

- Layer thickness 2000-I0 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

Order list

Straight Compression Plate, 4-hole Straight Compression Plate, 6-hole	21105-4
Straight Compression Plate, 8-hole	21105-8
Straight Compression Plate, 10-hole	21105-10
Cortical Screw, Locking, D=3.5mm, L=12mm, SH	37351-12-N 37351-14-N
Cortical Screw, Locking, D=3.5mm, L=14mm, SH	37351-14-N
Cortical Screw, Locking, D=3.5mm, L=16mm, SH	37351-16-N
Cortical Screw, Locking, D=3.5mm, L=18mm, SH	37351-18-N
Cortical Screw, Locking, D=3.5mm, L=20mm, SH	37351-20-N
Cortical Screw, Locking, D=3.5mm, L=22mm, SH	37351-22-N
Cortical Screw, Locking, D=3.5mm, L=24mm, SH	37351-24-N
Cortical Screw, D=3.5mm, L=10mm	32351-10
Cortical Screw, D=3.5mm, L=12mm	32351-10 32351-12
Cortical Screw, D=3.5mm, L=14mm	32351-14
Cortical Screw, D=3.5mm, L=16mm	32351-16
Cortical Screw, D=3.5mm, L=18mm	32351-18
Cortical Screw, D=3.5mm, L=20mm	32351-20
Cortical Screw, D=3.5mm, L=22mm	32351-22
Cortical Screw, D=3.5mm, L=24mm	32351-24
Screwdriver, WS 2.5, self-holding sleeve	56252
Spiral Drill, D=2.7mm, L=100mm, AO Connector	61273-100
Depth Gauge, Solid Small Fragment Screws	59022
Drill Guide, D=2.7mm	62216
Guide Wire, Steel, D=1.6mm, L=150mm, TR, w. thread	35164-150
Sterilization Tray, Straight Compression Plate	50231

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

Notes



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