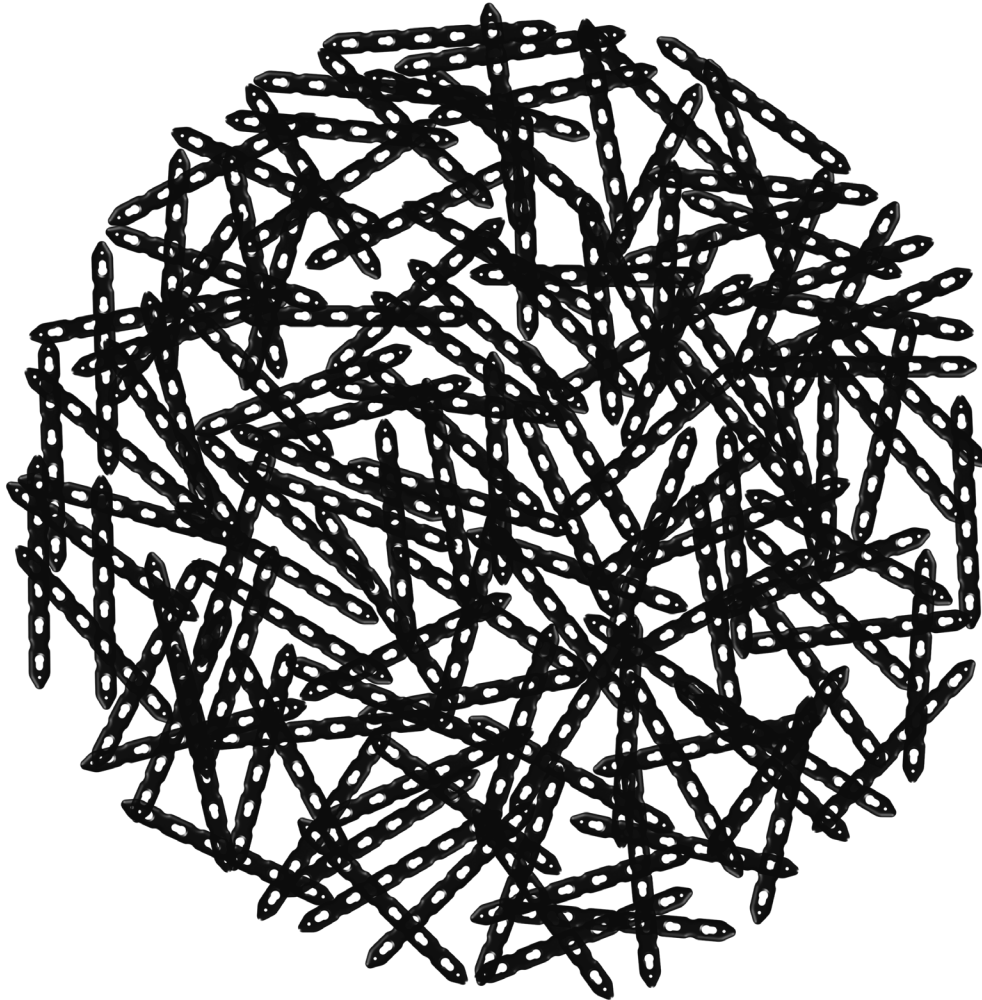


ITS.

Implants
trauma



SCL

Straight Compression Locking Plate

CAUTION: Federal Law (USA) restricts this device to sale by or on the order of a board certified physician.

WARNING: If there is no sufficient bone healing, wrong or incomplete postoperative care, plate might break.

All ITS plates are preformed anatomically as a matter of principle. If adjustment of the plate to the shape of the bone is required, this is possible by carefully bending gently in one direction once. Particular care is required when bending in the region of a plate hole, as deformation of the plate may lead to a failure of the locking mechanism. The plate must not be buckled or bent several times. This is particularly important in the case of titanium implants, to prevent material fatigue and subsequent failure. The method of bending is the conscious responsibility of the operating doctor; I.T.S. GmbH can accept no liability whatsoever for this.

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Introduction



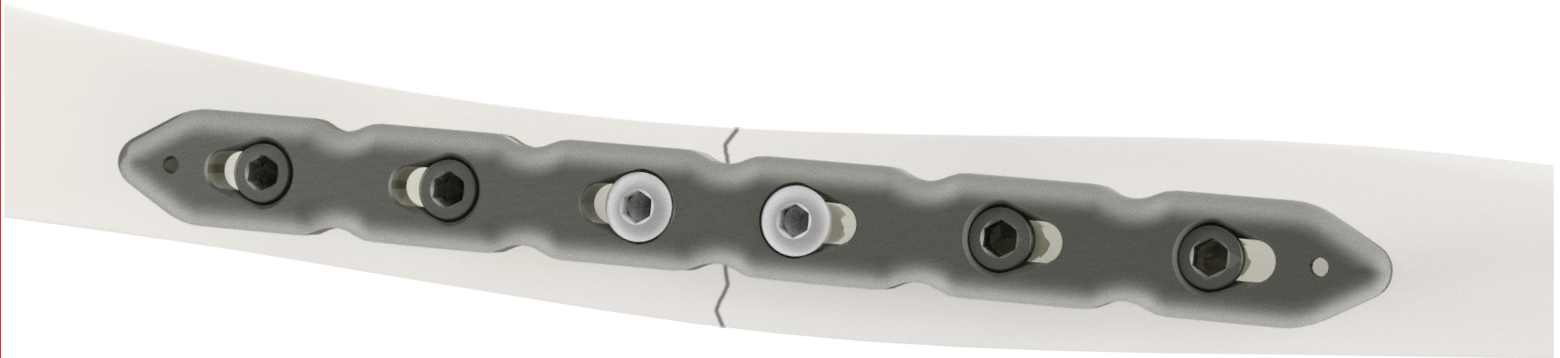
○ Preface

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

3735I-XX-N-N Cortical Screw, Locking, D=3.5mm, SH

61273-I00 Spiral Drill, D=2.7mm, L=100mm, AO Connector

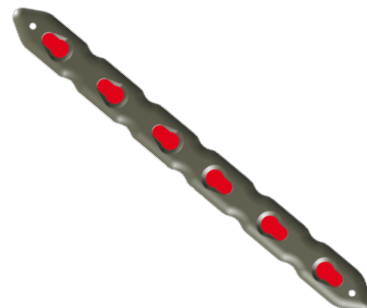
56252 Screwdriver, WS 2.5,
self-holding sleeve



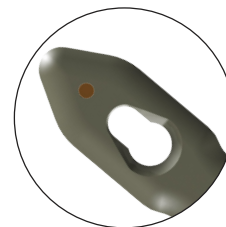
3235I-XX Cortical Screw, D=3.5mm

61273-I00 Spiral Drill, D=2.7mm, L=100mm, AO Connector

56252 Screwdriver, WS 2.5,
self-holding sleeve



35164-I50 Guide wire, steel, D=1.6mm,
L=150mm, TR, w. thread



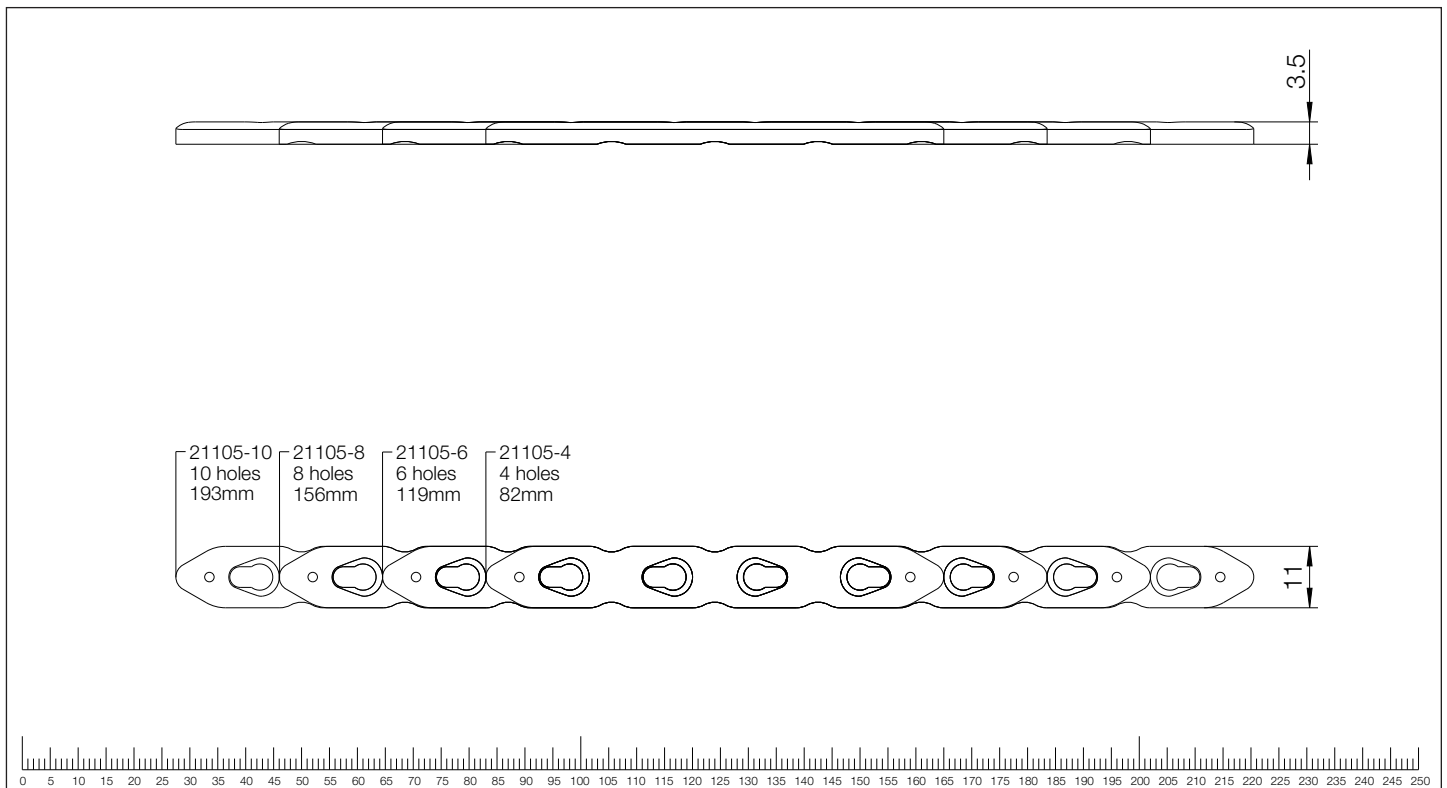
○ Properties

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
Optional: 5, 7-hole



◦ Indications, Contraindications & Time of operation

Indications:

- ♦ Comminuted fractures
- ♦ Supracondylar fractures
- ♦ Intra-articular and extra-articular condylar fractures
- ♦ Fractures in osteopenic bone
- ♦ Non-unions, mal-unions
- ♦ Fracture or osteotomy of the tibia, fibula, femoral condyle, acetabulum, humerus, ulna, middle hand and middle foot bones
- ♦ Treatment of calcaneal
- ♦ Hip arthrodesis

Contraindications:

- ♦ All situations that do not allow osteosynthesis

Time of operation:

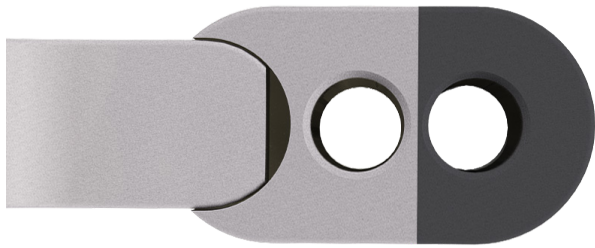
- ♦ Within the first hours after trauma
- ♦ After swelling decreases

2.

◦ Drill Guide

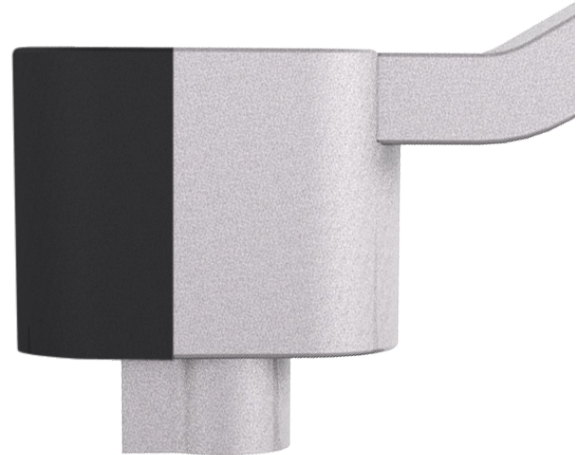
Properties:

- ♦ 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

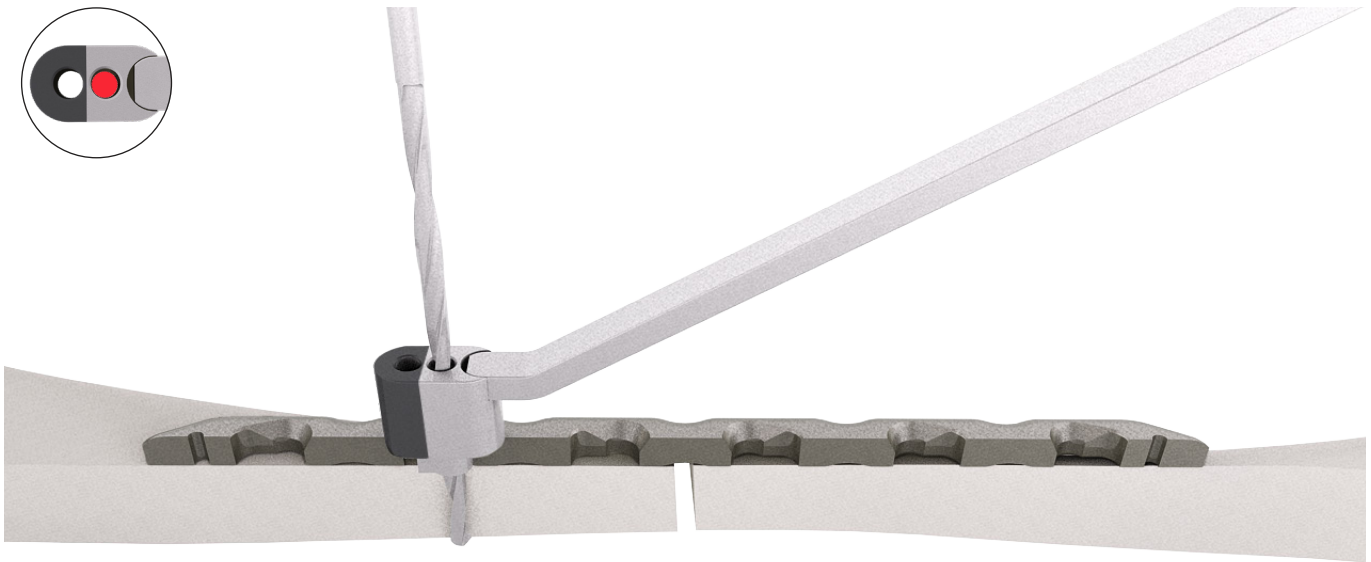
◦ Implantation

- ♦ 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.

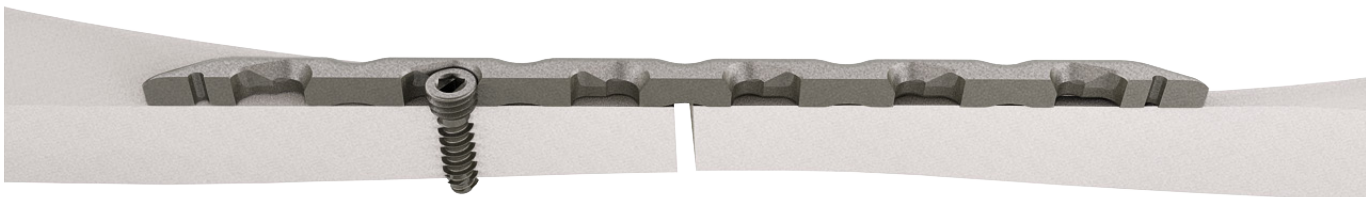
○ Compression 0 - 3.5mm

For the compression up to 3.5mm, a D=3.5mm cortical screw (**3235I-XX**) and the D=3.5mm locking cortical screw (**3735I-XX-N**) are placed on one side of the fracture for fixation of the plate on the bone. Always place a cortical (non-locking) screw in the hole closest to the fracture.

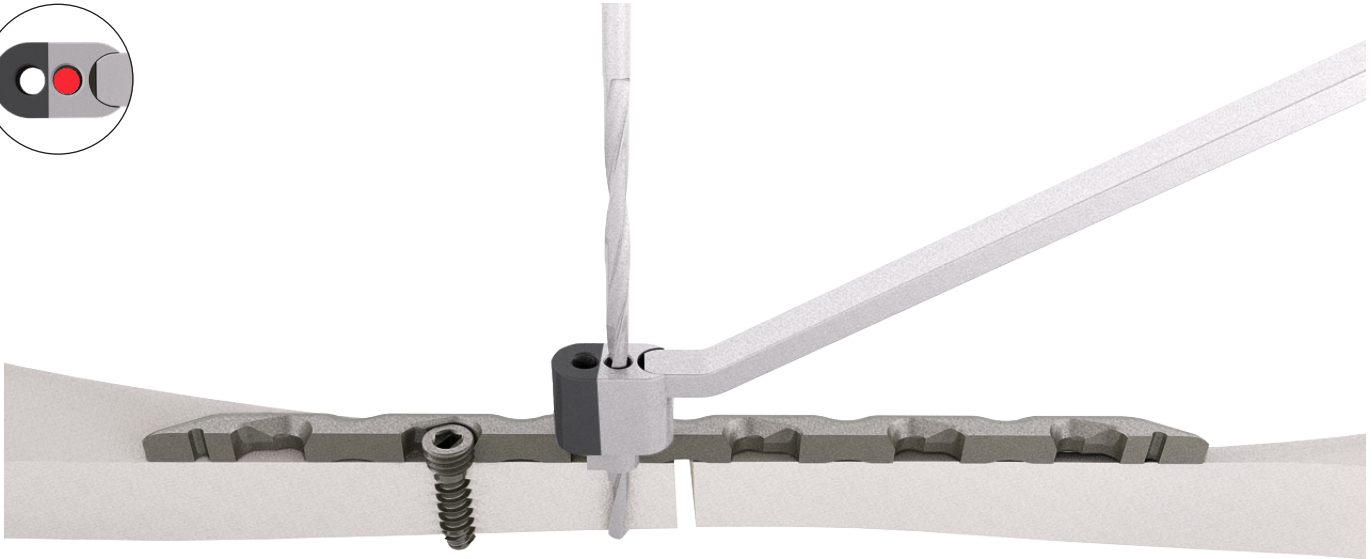
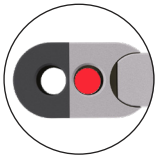
Attach the drill guide, D=2.7mm (**62216**) in any plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (**61273-100**) to drill through the hole close to handle of the drill guide.



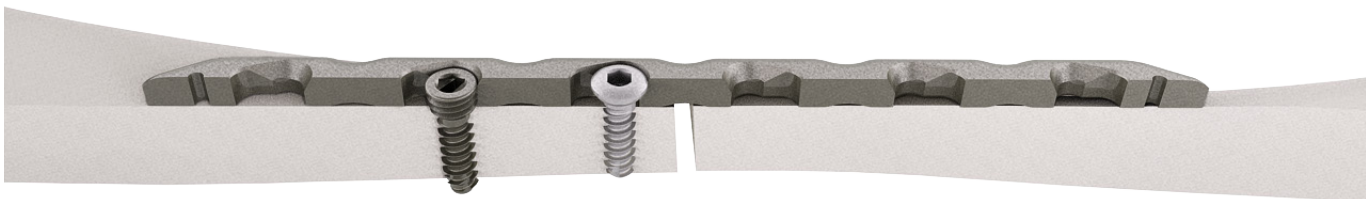
In accordance with the measured length, a D=3.5mm locking cortical screw (**3735I-XX-N**) is placed.



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.

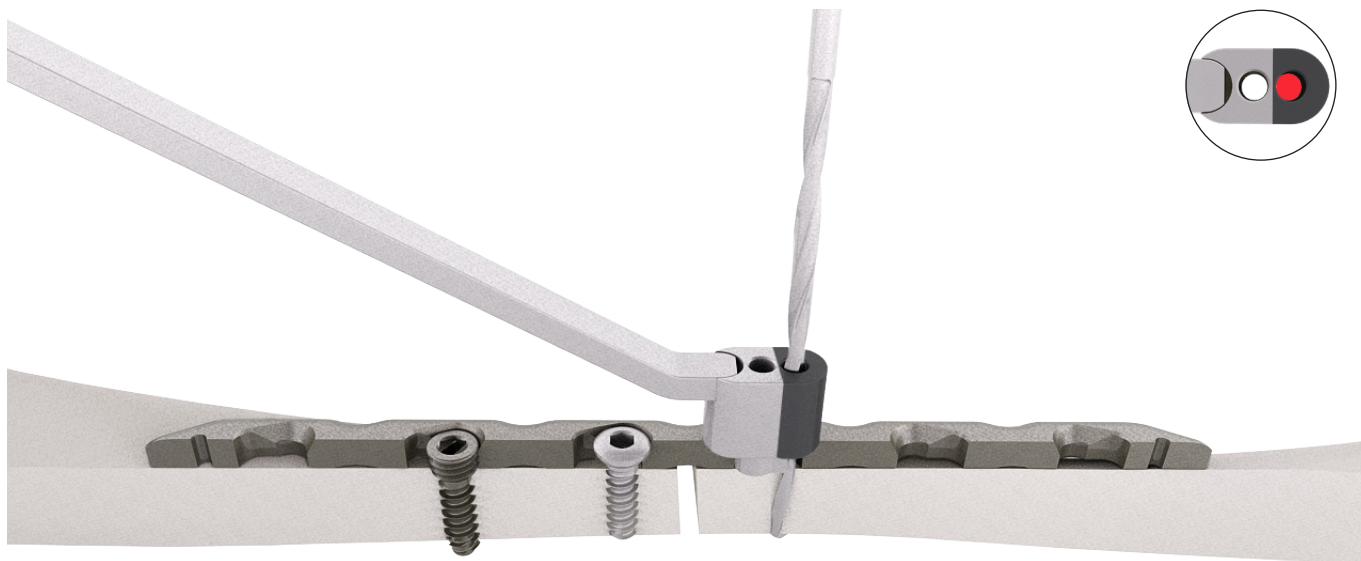


In accordance with the measured length, a D=3.5mm cortical screw (**32351-XX**) is placed.

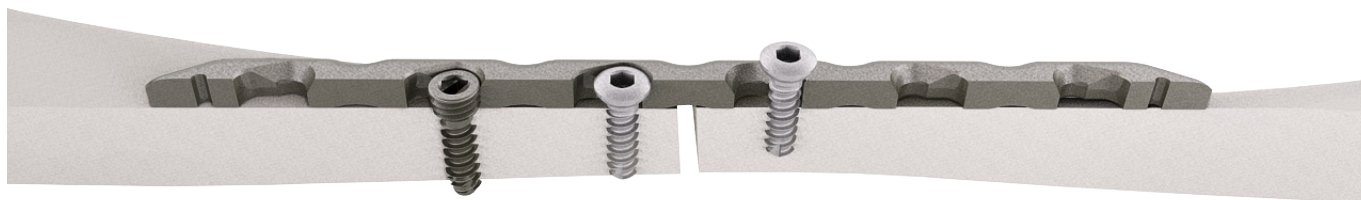


On the other side of the fracture, the D=3.5mm cortical screw (**3235I-XX**) and the D=3.5mm locking cortical screw (**3735I-XX-N**) are placed for compression.

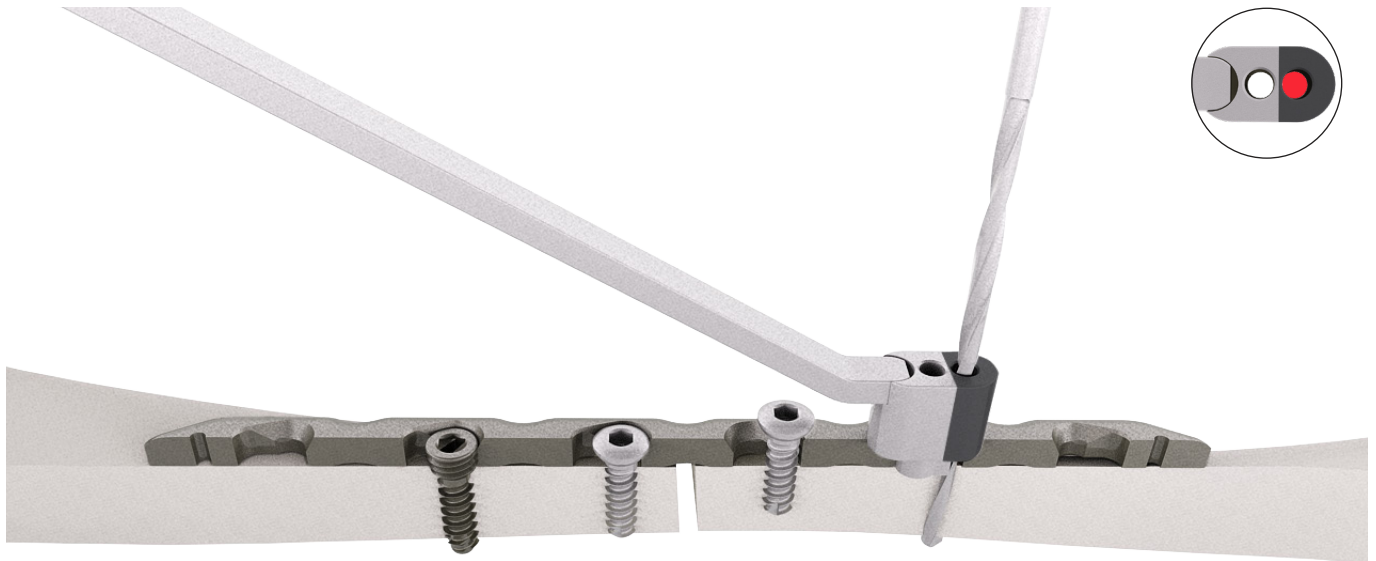
Attach the drill guide (**622I6**) in the opposite plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (**6I273-I00**) to drill through the dark gray marked hole of the drill guide, D=2.7mm (**622I6**).



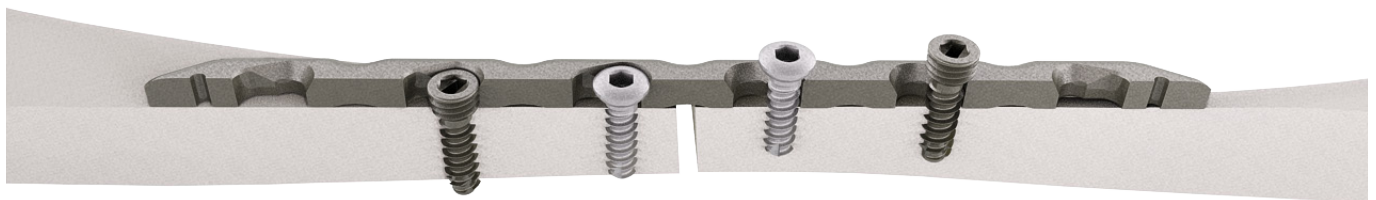
In accordance with the measured length, a D=3.5mm cortical screw (**3235I-XX**) is placed half way down as it is used as a guide screw during the compression.



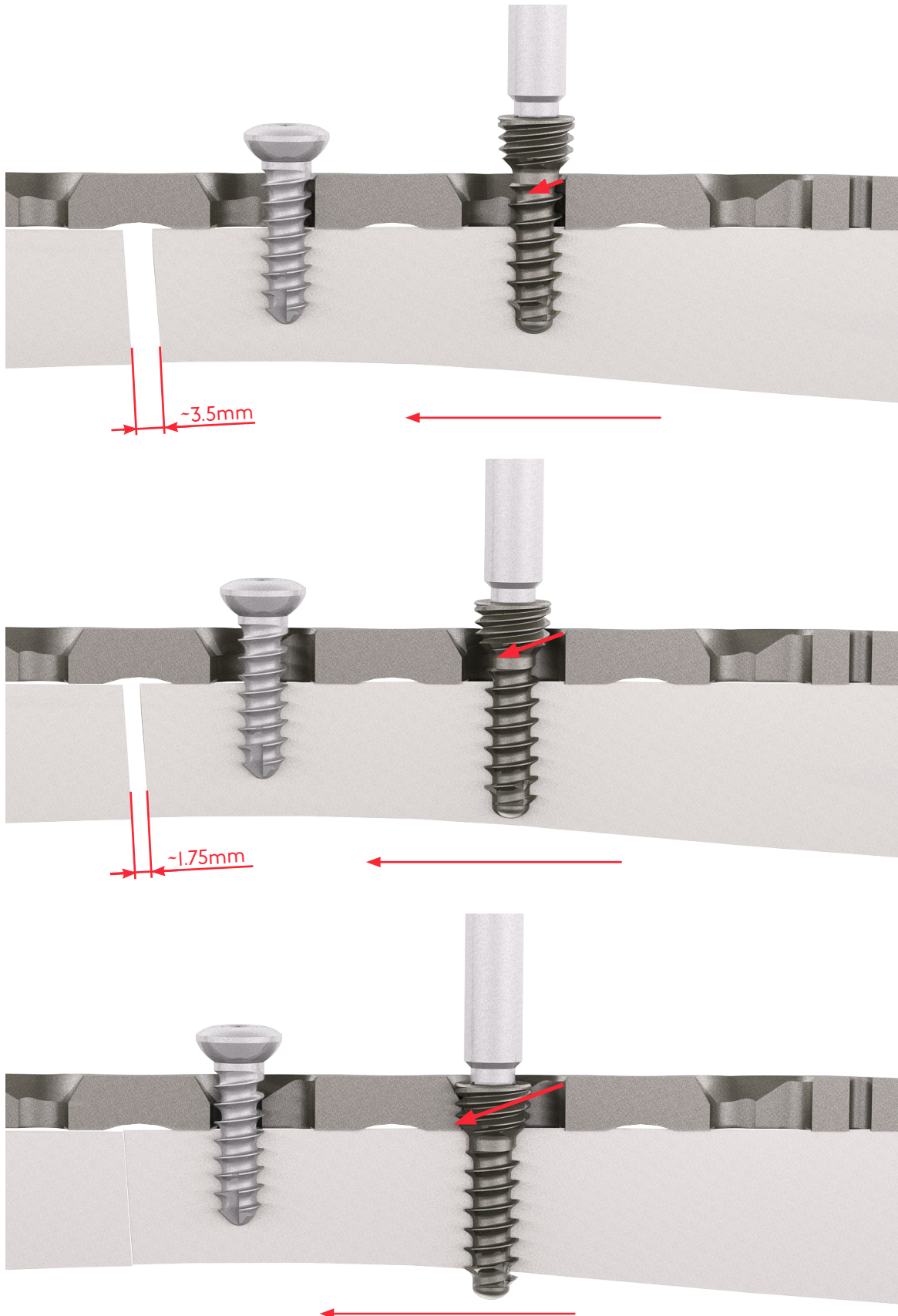
Attach the drill guide (**62216**) in the adjacent plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (**61273-100**) to drill through the dark gray marked hole of the drill guide, D=2.7mm (**62216**).



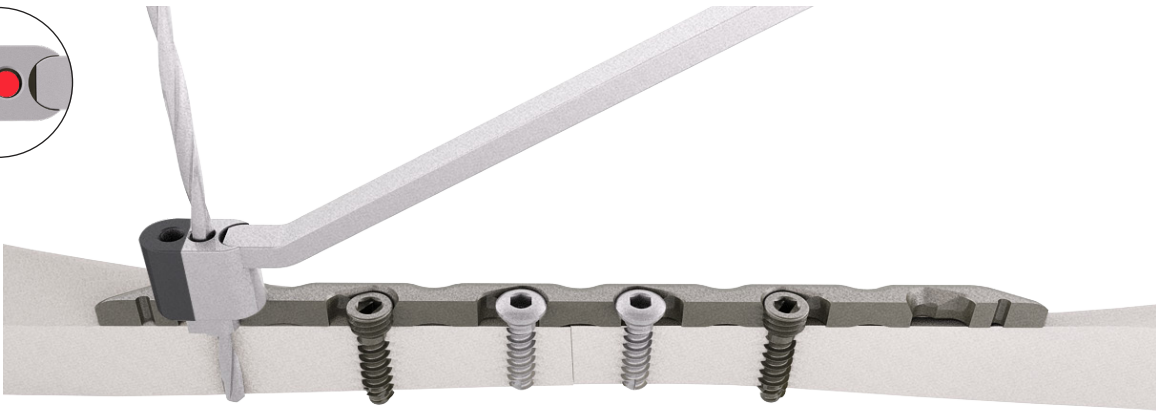
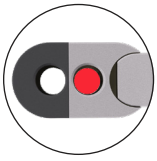
In accordance with the measured length, a D=3.5mm locking cortical screw (**37351-XX-N**) is placed half way down.



During screwing in the D=3.5mm locking cortical screw (**3735I-XX-N**), compression is exerted to the fracture gap (see pictures below).



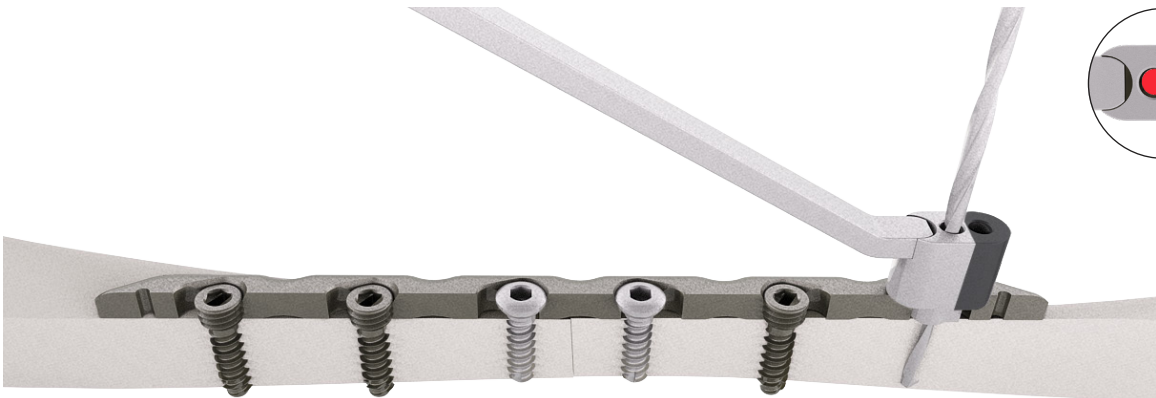
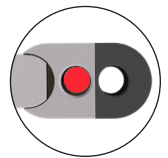
Afterwards, attach the drill guide, D=2.7mm **(62216)** to the furthest left plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector **(61273-100)** to drill through the hole closest to handle of the drill guide.



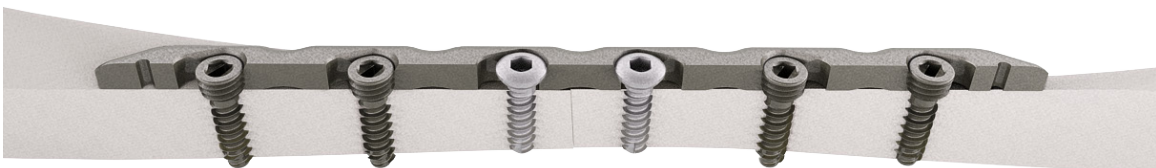
In accordance with the measured length, a D=3.5mm locking cortical screw **(37351-XX-N)** is placed.



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.



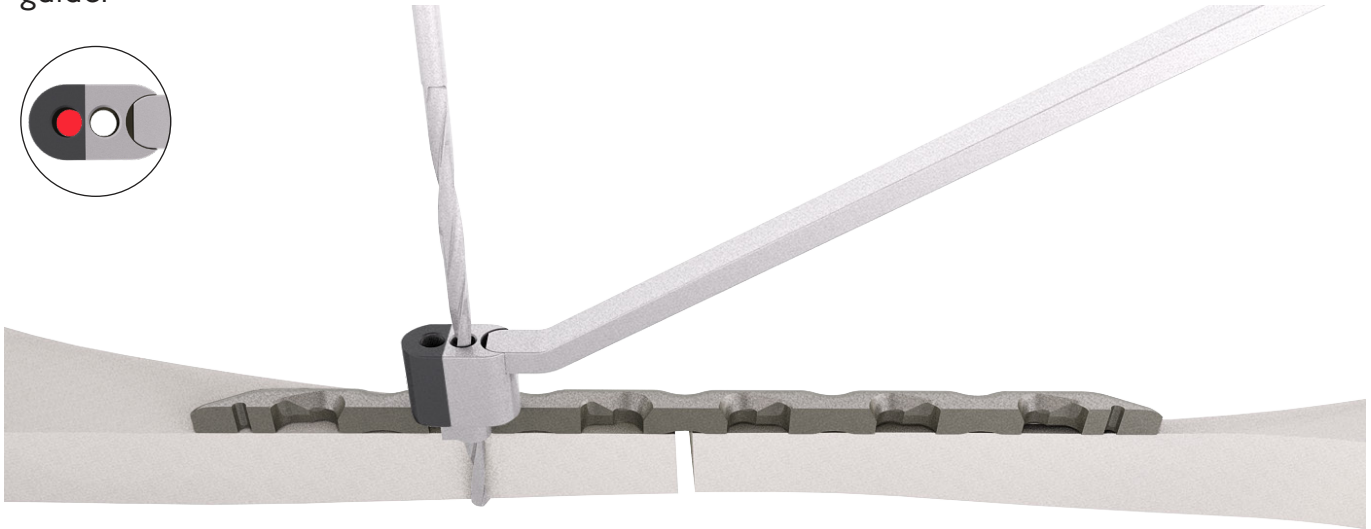
In accordance with the measured length a D=3.5mm locking cortical screw **(37351-XX-N)** is placed.
Finally, check the compression and the plate position with the fluoroscopy.



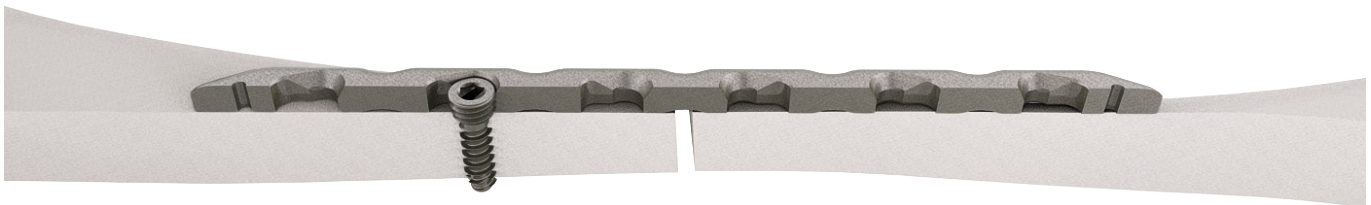
○ Compression 0 - 7mm

For the compression up to 7mm, the D=3.5mm locking cortical screws (**3735I-XX-N**) are used at both sides of the fracture for compression. The D=3.5mm cortical screws (**3235I-XX**) and the D=3.5mm locking cortical screws (**3735I-XX-N**) in both plate holes farthest to the fracture are for fixation.

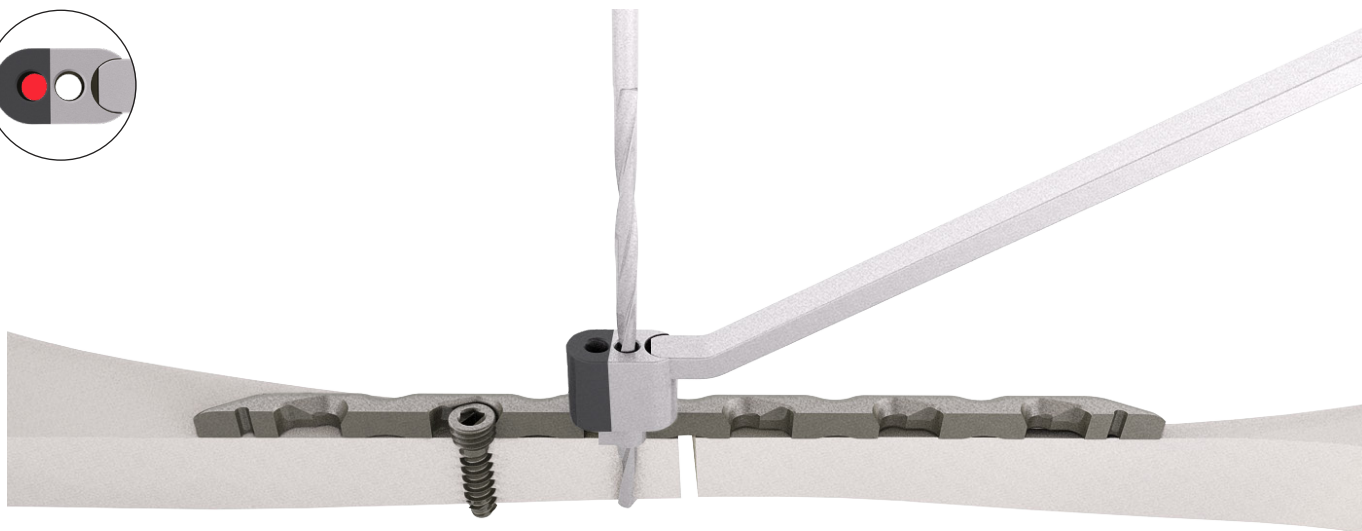
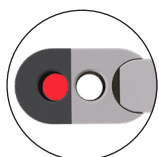
Attach the drill guide, D=2.7mm (**622I6**) in any plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (**6I273-I00**) to drill through the dark gray marked hole of the drill guide.



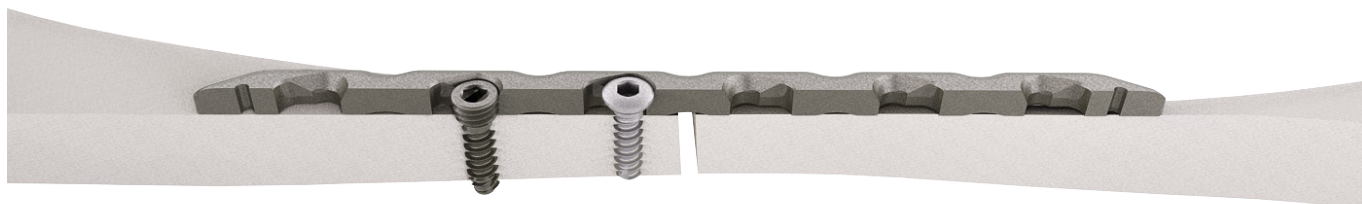
In accordance with the measured length, a D=3.5mm locking cortical screw (**3735I-XX-N**) is placed half way down (screw head may not have contact to the plate).



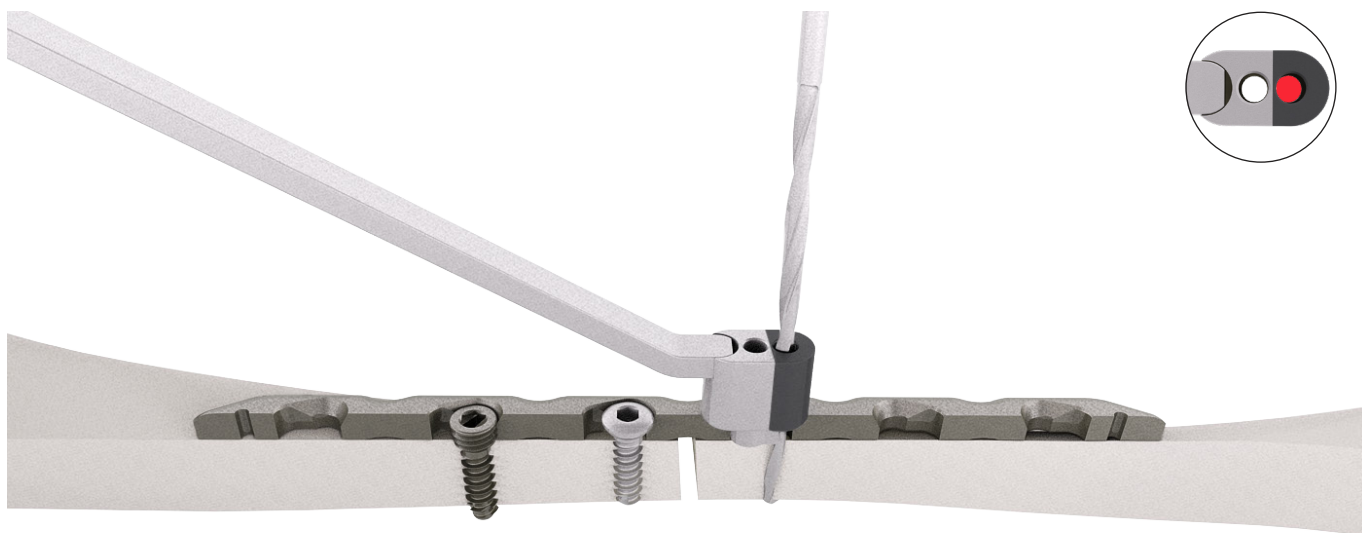
Use the spiral drill, D=2.7mm, L=100mm, AO Connector (**61273-100**) to drill through the dark gray marked hole of the drill guide, D=2.7mm (**62216**) in the plate hole near the fracture.



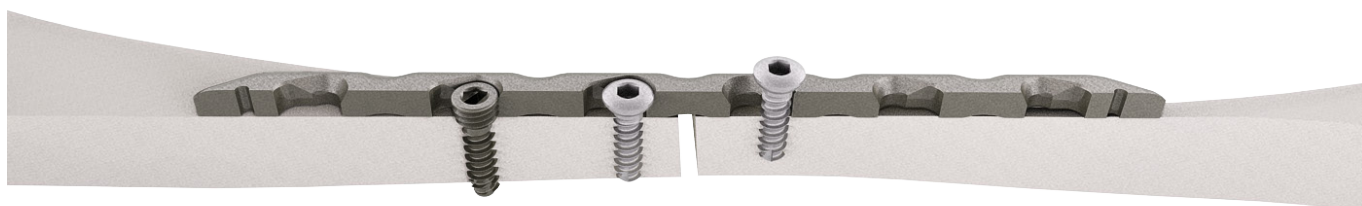
In accordance to the measured length, a D=3.5mm cortical screw (**3235I-XX**) is placed half way down.



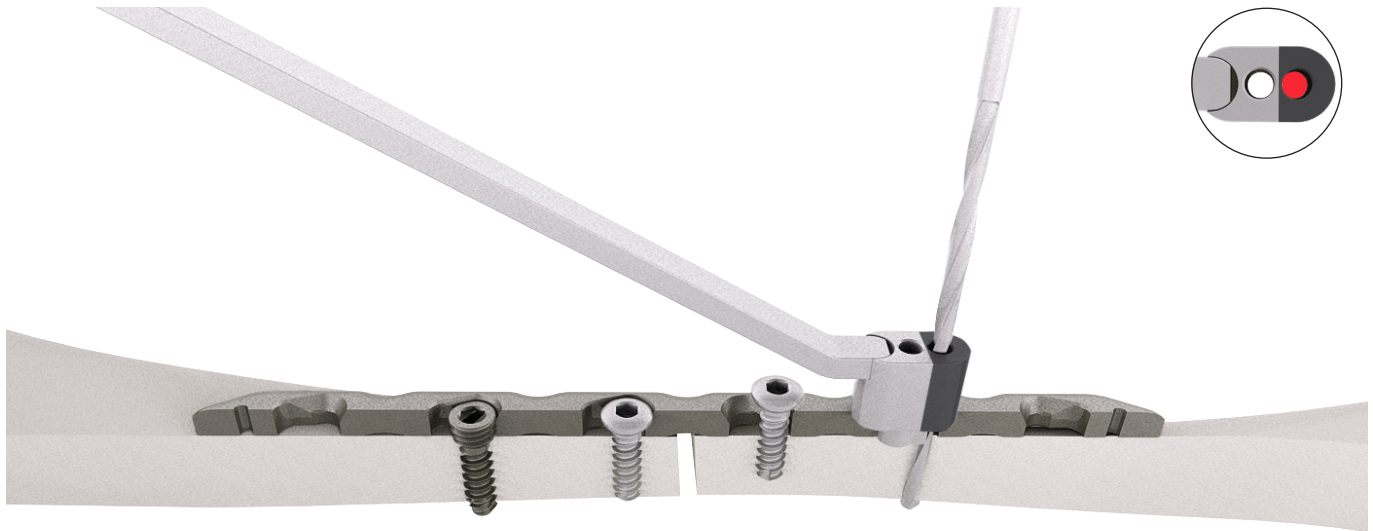
Attach the drill guide, D=2.7mm **(62216)** in the opposite plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector **(61273-100)** to drill through the dark gray marked hole of the drill guide.



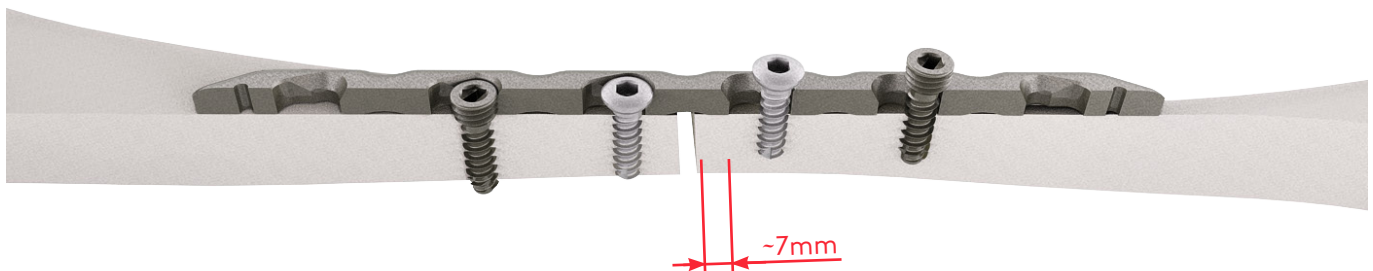
In accordance with the measured length, a D=3.5mm locking cortical screw **(37351-XX-N)** is placed half way down (screw head may not have contact with the plate).



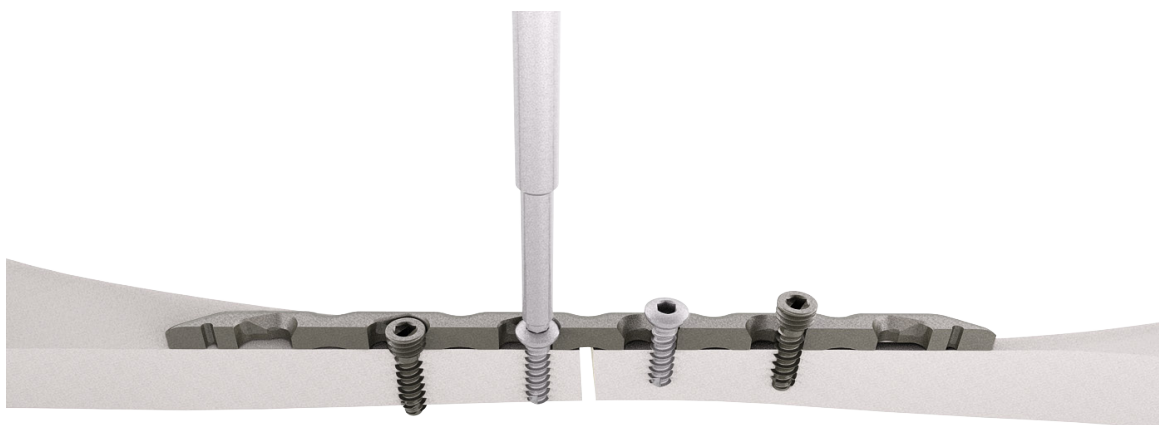
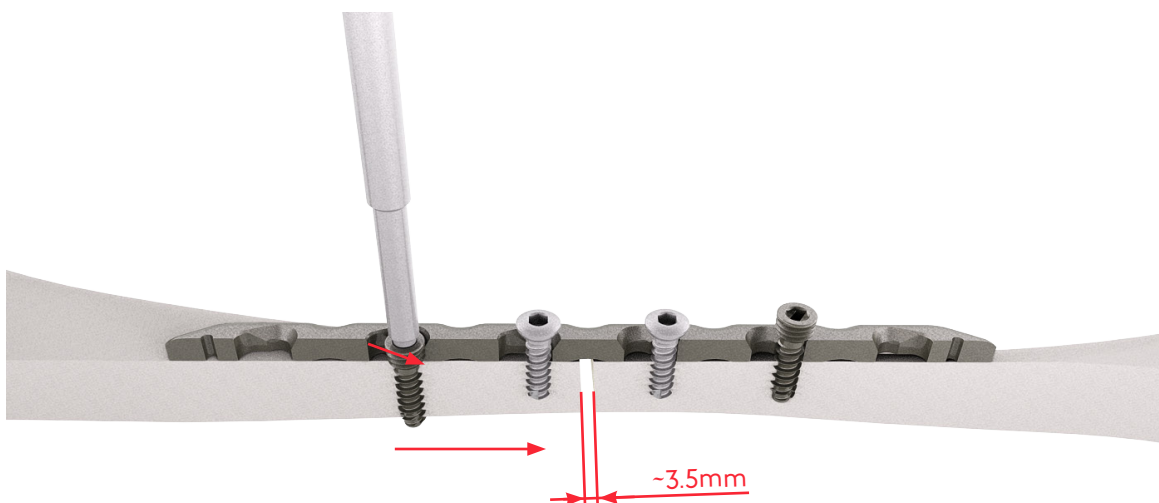
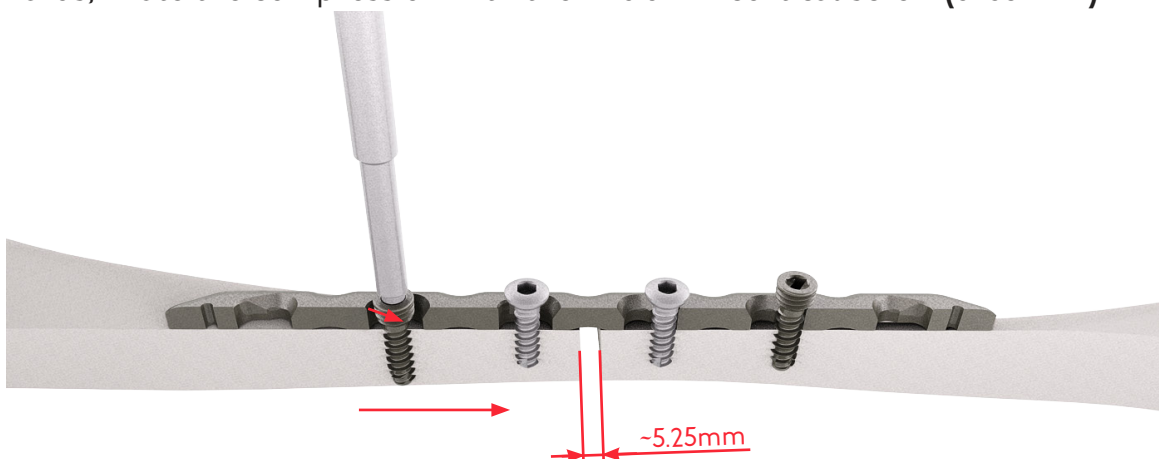
Use the spiral drill, D=2.7mm, L=100mm, AO Connector (**61273-100**) to drill through the dark gray marked hole of the drill guide, D=2.7mm (**62216**) in the plate hole near the fracture.



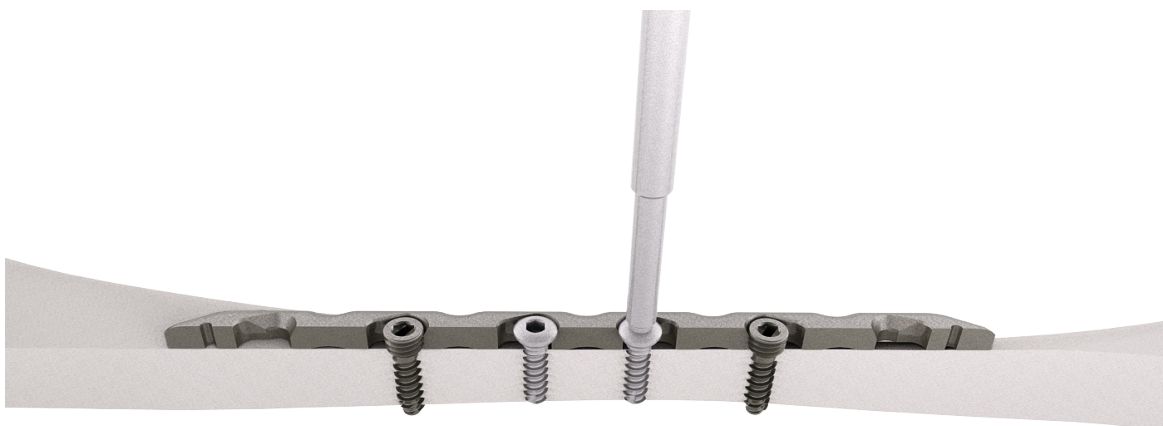
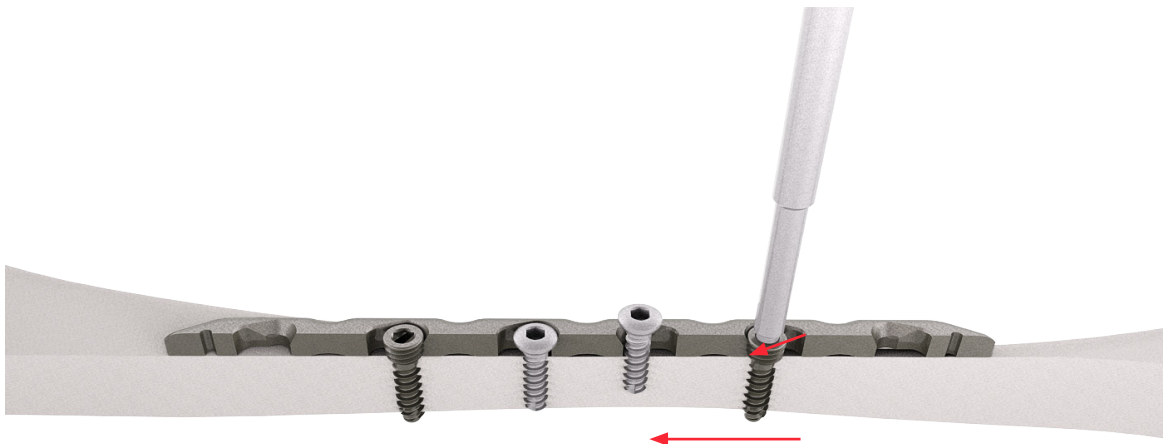
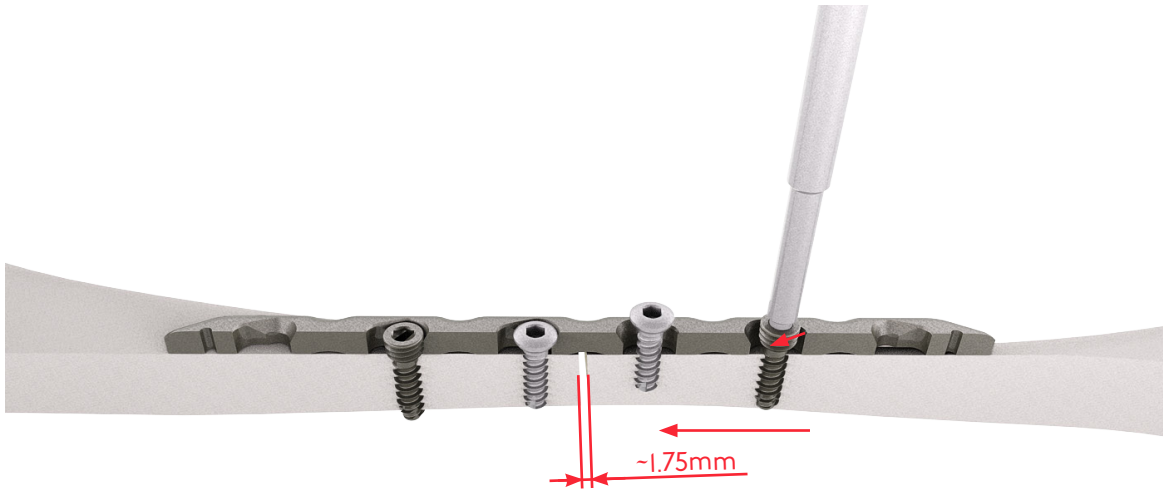
In accordance with the measured length, a D=3.5mm cortical screw (**3235I-XX**) is placed half way down.



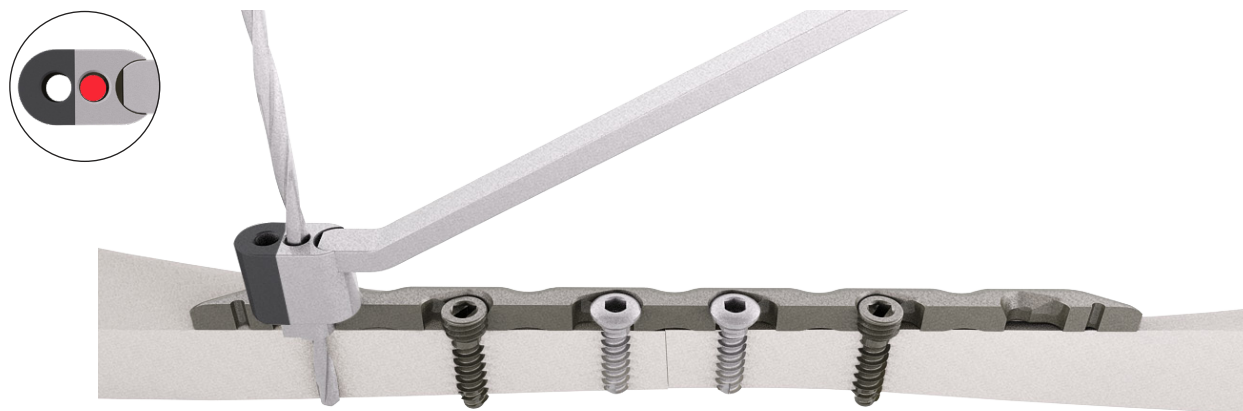
At a fracture gap up to 7mm, the compression occurs at both sides of the fracture. First screw in the D=3.5mm locking cortical screw (**3735I-XX-N**). Afterwards, fixate the compression with the D=3.5mm cortical screw (**3235I-XX**).



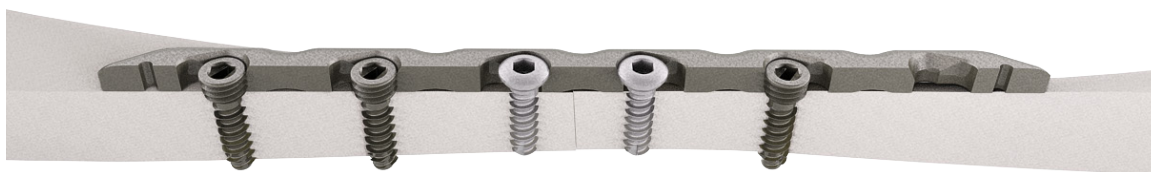
Afterwards, screw in the D=3.5mm locking cortical screw (**3735I-XX-N**). Then turn in the D=3.5mm cortical screw (**3235I-XX**) to fixate the completed compression.



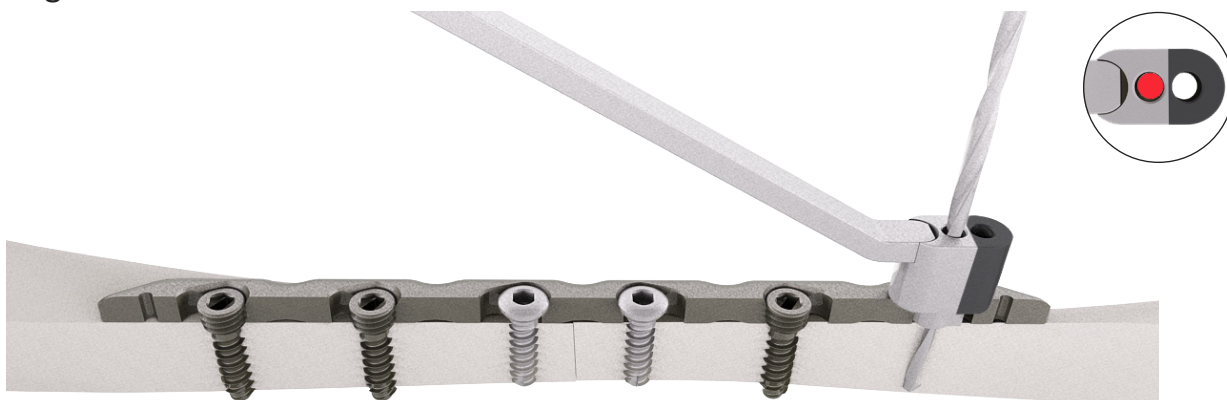
Afterwards, attach the drill guide, D=2.7mm (**62216**) to the furthest left plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (**61273-100**) to drill through the hole close to handle of the drill guide.



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



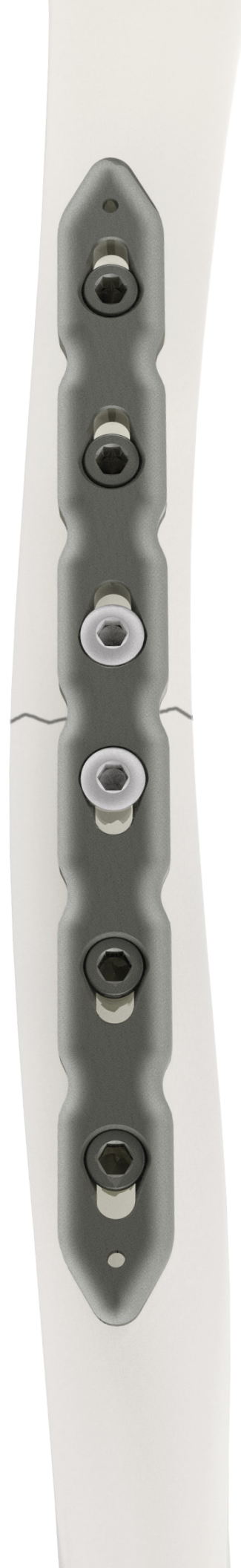
Attach the drill guide, D=2.7mm (**62216**) to the furthest right plate hole. Use the spiral drill, D=2.7mm, L=100mm, AO Connector (**61273-100**) to drill through the hole close to handle of the drill guide.



In accordance with the measured length, a D=3.5mm locking cortical screw (**3735I-XX-N**) is placed.
Finally, check the compression and the plate position with the fluoroscopy.



Redon drainage before skin closure for 12-24 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 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.

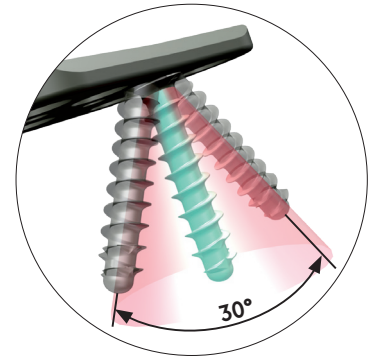
Information

3.

○ 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:

- $\pm 15^\circ$ and Locking
- No pre threading
- No cold welding
- No debris
- You can re-set the screw up to 3 times

○ Anodization Type II

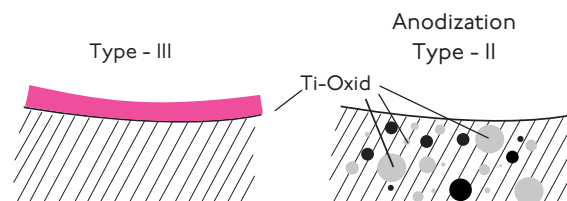
Chemical process - anodization in a strong alkaline solution*

Type III anodization

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

Type II anodization

- Layer thickness 1000-2000nm
- + 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
Straight Compression Plate, 8-hole
Straight Compression Plate, 10-hole

21105-4
21105-6
21105-8
21105-10



Cortical Screw, Locking, D=3.5mm, L=12mm, SH
Cortical Screw, Locking, D=3.5mm, L=14mm, SH
Cortical Screw, Locking, D=3.5mm, L=16mm, SH
Cortical Screw, Locking, D=3.5mm, L=18mm, SH
Cortical Screw, Locking, D=3.5mm, L=20mm, SH
Cortical Screw, Locking, D=3.5mm, L=22mm, SH
Cortical Screw, Locking, D=3.5mm, L=24mm, SH
Cortical Screw, Locking, D=3.5mm, L=26mm, SH
Cortical Screw, Locking, D=3.5mm, L=28mm, SH
Cortical Screw, Locking, D=3.5mm, L=30mm, SH
Cortical Screw, Locking, D=3.5mm, L=32mm, SH
Cortical Screw, Locking, D=3.5mm, L=34mm, SH
Cortical Screw, Locking, D=3.5mm, L=36mm, SH
Cortical Screw, Locking, D=3.5mm, L=38mm, SH
Cortical Screw, Locking, D=3.5mm, L=40mm, SH

37351-12-N
37351-14-N
37351-16-N
37351-18-N
37351-20-N
37351-22-N
37351-24-N
37351-26-N
37351-28-N
37351-30-N
37351-32-N
37351-34-N
37351-36-N
37351-38-N
37351-40-N



Cortical Screw, D=3.5mm, L=10mm
Cortical Screw, D=3.5mm, L=12mm
Cortical Screw, D=3.5mm, L=14mm
Cortical Screw, D=3.5mm, L=16mm
Cortical Screw, D=3.5mm, L=18mm
Cortical Screw, D=3.5mm, L=20mm
Cortical Screw, D=3.5mm, L=22mm
Cortical Screw, D=3.5mm, L=24mm
Cortical Screw, D=3.5mm, L=26mm
Cortical Screw, D=3.5mm, L=28mm
Cortical Screw, D=3.5mm, L=30mm
Cortical Screw, D=3.5mm, L=32mm
Cortical Screw, D=3.5mm, L=34mm
Cortical Screw, D=3.5mm, L=36mm
Cortical Screw, D=3.5mm, L=38mm
Cortical Screw, D=3.5mm, L=40mm

32351-10
32351-12
32351-14
32351-16
32351-18
32351-20
32351-22
32351-24
32351-26
32351-28
32351-30
32351-32
32351-34
32351-36
32351-38
32351-40



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

Optional (on request)*

Straight Compression Plate, 5-hole

21105-5

Straight Compression Plate, 7-hole

21105-7



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

* Delivery times, prices & minimum quantities may vary from standard

Notes

[illegible]



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1778 Park Avenue N, Suite 200
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