



DX Knotless FiberTak[®] Anchor

Product Highlights

Product Overview

- 21 mm Anchor Sheath
- #2 Coreless Machine-Tapered Suture
- Needles Attached
- 1.8 mm K-Wire Drill (recommended)
- 1.6 mm K-Wire Drill (soft bone)
- 20 mm Drill Depth



Key Features and Benefits

- Low-profile, knotless suture fixation with patented tensionable technology and the ability to interconnect with similar anchors.
- No knot impingement or knot loosening.
- **Minimal Bone Removal**—less morbidity and more room for other anchors, including *InternalBrace*[™] ligament augmentation repair for lateral ankle ligament instability.
- **Tremendous Pull-Out Strength**—equivalent to 3.0 mm BioComposite SutureTak[®] anchor. Surgeons can be confident in the ability of this anchor even with a small diameter footprint¹

References

1. Arthrex, Inc. Data on file (APT-05037). Naples, FL; 2021

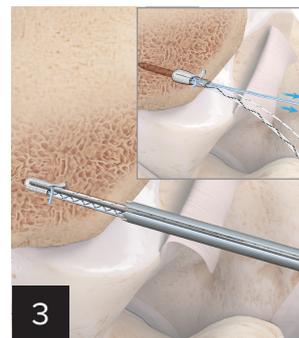
Brostrom Repair Surgical Technique Overview Using DX Knotless FiberTak Anchor



1
Measuring roughly 1 cm from the distal tip of the fibula, use the DX knotless drill guide and the 1.8 mm K-wire to create a bone tunnel. The drill should be inserted to the automatic stop at the back of the drill guide.



2
Keeping the guide in place, insert the DX Knotless FiberTak anchor and impact it with gentle mallet taps until the handle is flush with the guide.



3
Remove the inserter and guide; do not pull hard. Do not set the anchor fully.



4
Pass the blue working suture through the tissue in a mattress stitch fashion.

Brostrom Repair Surgical Technique Overview Using DX Knotless Fibertak Anchor (Cont.)



5
Cut the needle off at the first purple marking closest to the needle. Pass the working blue suture through the black and white FiberLink™ loop and double it over at the second purple marking. Pull the SutureTape end of the FiberLink suture axially to the anchor insertion using small, **short tugs** to advance the knotless mechanism through the anchor.



6
Pull the blue working suture in an axial motion to tighten the knotless stitch and secure the tissue back down to bone and fully seat the anchor against the cortex.



7a
Cut the excess suture and repeat the steps with the second anchor for final fixation of the Brostrom repair.



7b
Option to interconnect anchors by feeding working blue suture into the opposite anchor's FiberLink loop then repeating from the other anchor to the opposite anchor's FiberLink loop and securing tissue to bone.

Ordering Information

DX Knotless Fibertak Anchor

Product Description	Item Number
DX Knotless Fibertak Anchor with one #2 coreless machine tapered suture, needle attached, 26.2 mm ½ circle	AR-8991
DX Knotless Fibertak Anchor Disposables Kit	
Drill Guide	AR-8991DS
K-Wire Drill, AO, 1.8 mm (recommended)	
K-Wire Drill, AO, 1.6 mm (soft bone)	

This description of technique is provided as an educational tool and clinical aid to assist properly licensed medical professionals in the usage of specific Arthrex products. As part of this professional usage, the medical professional must use their professional judgment in making any final determinations in product usage and technique. In doing so, the medical professional should rely on their own training and experience and should conduct a thorough review of pertinent medical literature and the product's directions for use. Postoperative management is patient-specific and dependent on the treating professional's assessment. Individual results will vary and not all patients will experience the same postoperative activity level or outcomes.