

7.0 Cannulated Screw System

Surgical Technique



7.0 mm Cannulated Screws

Introduction

Features and Benefits

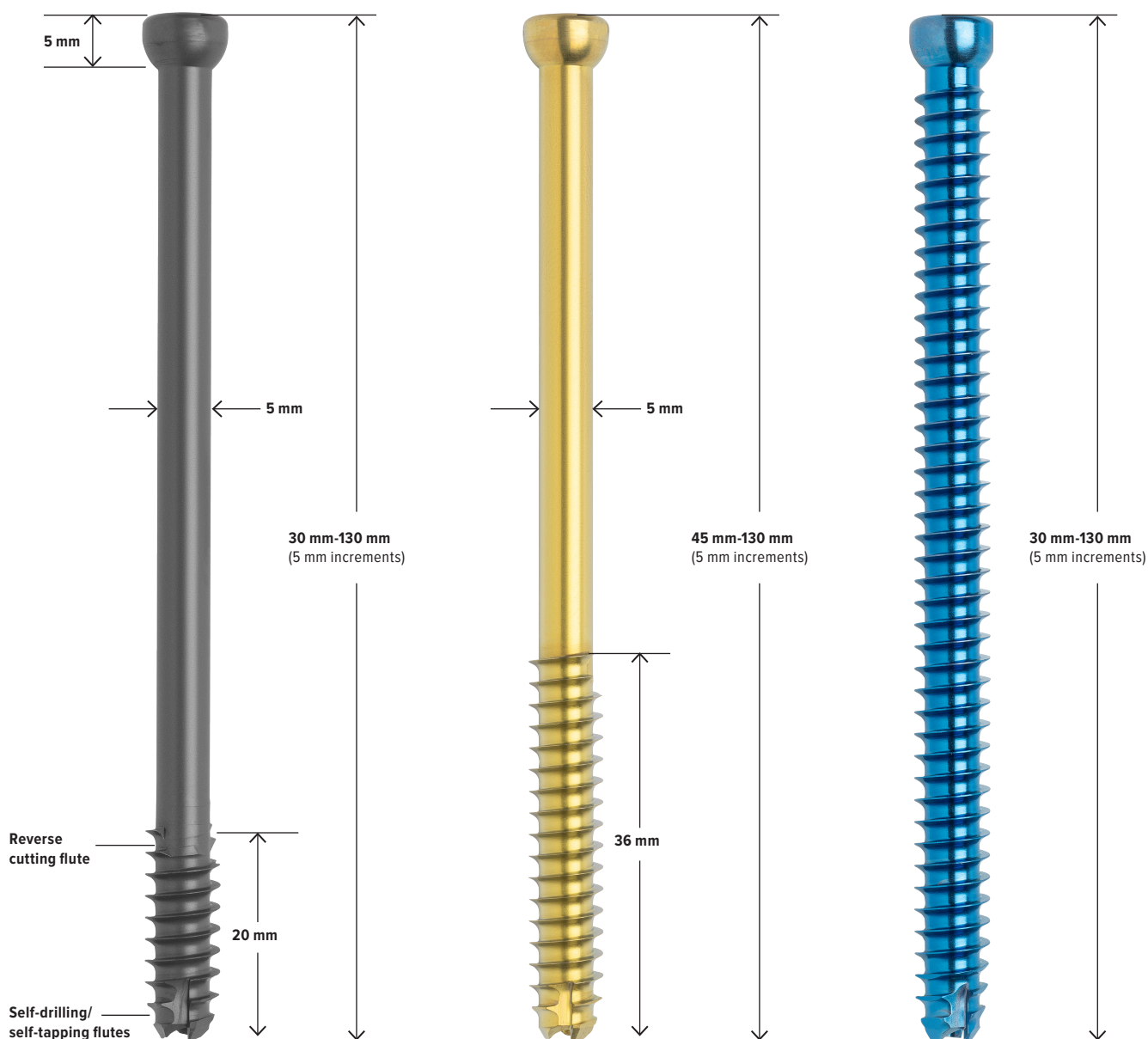
- › Low-profile screw head to minimize soft-tissue irritation
- › Titanium alloy Ti6Al4V for biocompatibility and improved strength
- › Composed of CT compatible materials
- › Reverse cutting flutes for ease of removal
- › Self-drilling/tapping design for efficient cutting
- › Large 3.2 mm diameter threaded-tip guide pin for ease of insertion and improved stability

Applications

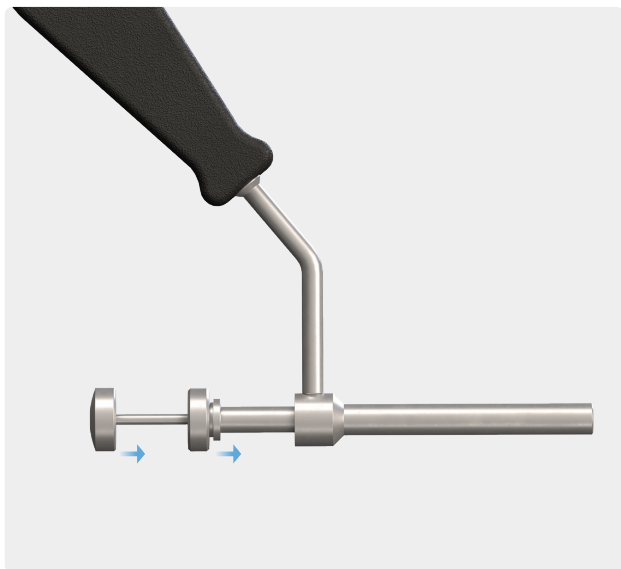
The 7.0 Cannulated Screw System is intended for use of fixation of fractures in the:

- › Pelvis
- › Distal femur
- › Proximal femur
- › Proximal tibia
- › Foot and ankle
- › Calcaneus

| **Note:** This system is not intended for use in the spine.



Insert Guide Pin



1a

After making a stab incision, insert the percutaneous sheath and trocar assembly. This consists of the:

- › Screw sheath
- › 3.2 mm pin guide
- › 3.2 mm trocar



1b

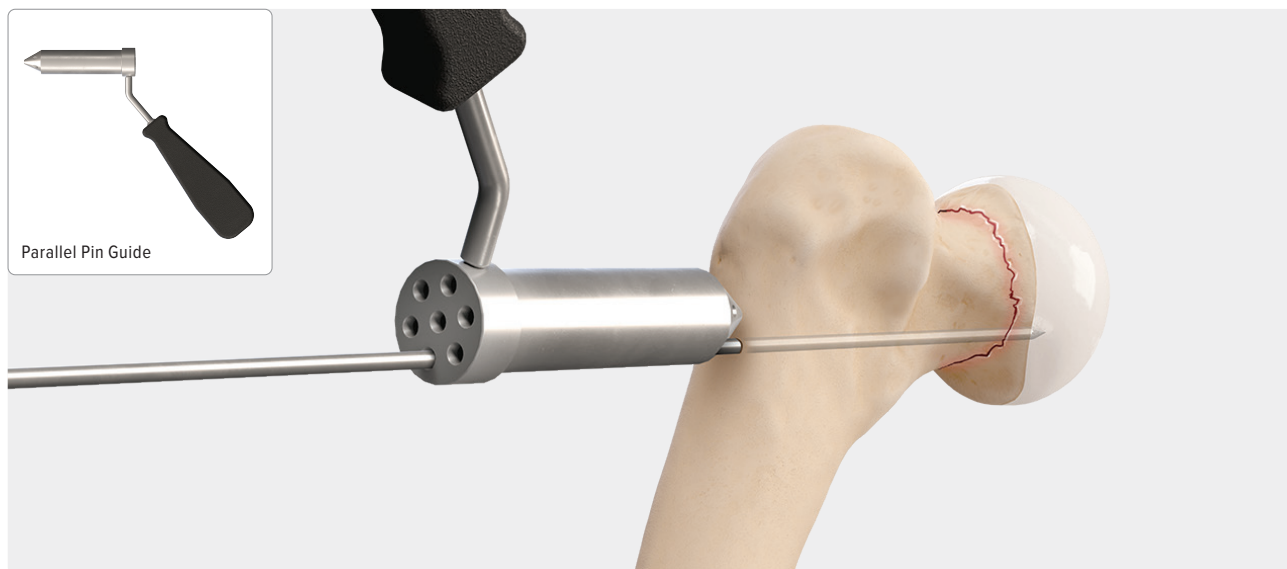
Remove the 3.2 mm trocar and insert a 3.2 mm guide pin to the appropriate depth.



1c

Radiographically confirm pin placement. Remove all drill sleeves.

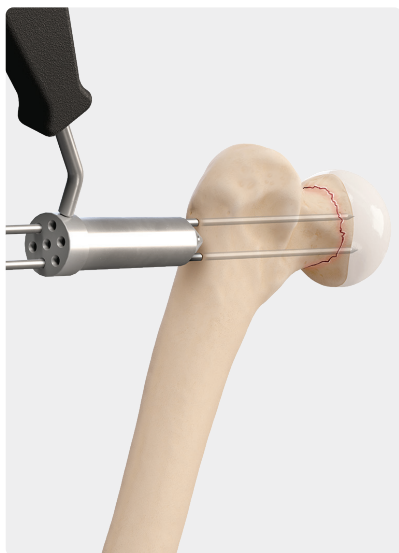
Insert Parallel Guide



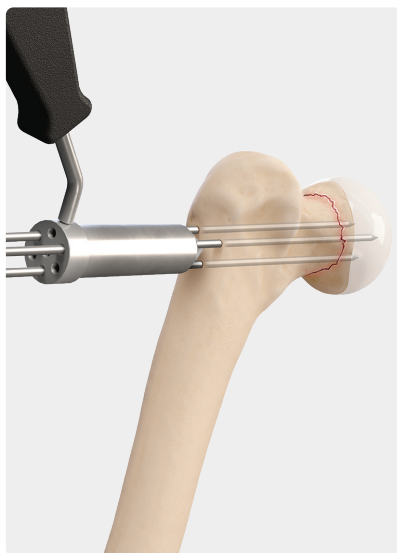
2

Insert the 3.2 mm parallel pin guide by placing the guide over the previously inserted guide pin. Secure the guide directly to the bone.

Insert Additional Pins



3a



3b



Note: The distance between the center hole to any of the circumferential holes of the parallel pin guide is 7.9 mm.

Insert a second guide pin into any of the remaining 6 holes of the parallel pin guide. Repeat step 3a as needed for any additional pins.

Measure for Screw Length



4

Slide the tapered end of the cannulated screw depth gauge over the guide pin. This reading determines appropriate screw length.

Predrill (optional)



5

Predrilling is optional due to the aggressive self-drilling screw threads. If desired, use the 5 mm cannulated drill and 5 mm drill guide to drill to the appropriate depth. Take care not to penetrate the far cortex.

Tip: In osteoporotic bone, the use of a 7 mm washer may be beneficial in preventing the screw head from sinking into the bone. The screw sheath must be removed prior to inserting a washer.

Tap (optional)



6

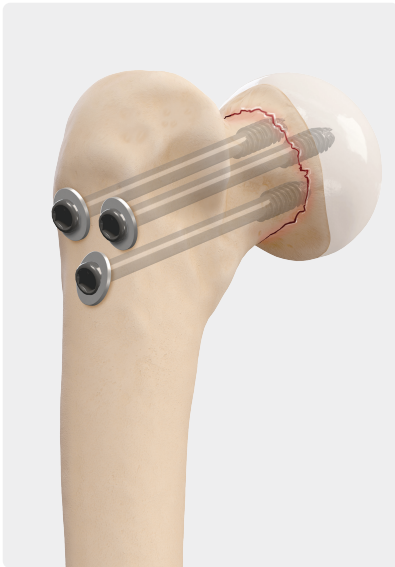
Tapping is optional due to the self-tapping screw threads. If necessary, tap the near cortex with the 7 mm cannulated tap through the screw sheath. In dense bone, it may be beneficial to tap over the entire length of the nonthreaded area of the guide pin.

Insert Screws



7

Using the 5 mm cannulated hex driver, insert the appropriate size screw as previously measured. Remove and discard the guide pin.



8

Final fixation.

Implant Removal (optional)



Remove 7 mm cannulated screws using the 5 mm cannulated hex screwdriver. If problems arise with screw removal, use the easyout screw extractor to tap lightly into the cannulation of the screw. Turn counterclockwise to remove the screw.

Supporting Products

Trochanteric Nail System

The trochanteric nail is a next-generation hip nail that addresses the remaining shortcomings of current systems such as lateral lag screw irritation, lag-screw cutout, workflow inefficiencies, and loss of rotational reduction. The system consists of 3 nail types—short nails, long nails, and the innovative ES nails.



Telescoping Lag Screw—The telescoping lag screw allows for controlled self-contained collapse within the lag screw. Other lag screws are designed to slide within the nail during the healing process, which can cause the lateral end of the lag screw to protrude into the patient's soft tissue, causing irritation and/or bursitis.

Biological augmentation

System allows for the delivery of orthobiologics through the lag screw and instrumentation

Advanced instrumentation

Designed to facilitate ease of workflow

ES nail option

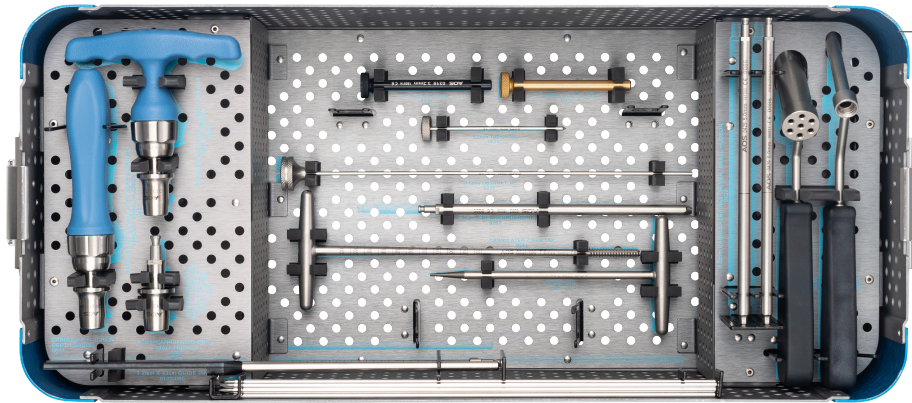
Combines the mechanical advantages of a long nail with the ease of a short nail. The ES hole is easily targeted through the nail jig without the need for perfect circles.

Antirotation screw

Allows for rotational control of the femoral head to provide additional postoperative rotational stability



Instruments and implants



Accessory instruments

Ordering Information

7.0 mm Titanium Cannulated Screw System

Instruments

Obturator, 3.6 mm	0227-000
Tap, cannulated, cancellous, T-handle, 7 mm	0241-100
Drill, cannulated, small Hudson, 5 mm adapter	0243-000
Screw Countersink, 7 mm	0262-000
Pin Guide, 3.2 mm	0319-000
Drill Guide, 5 mm	0320-000
Parallel Pin Guide, bullet nose, 3.2 mm	0322-000
Hex Driver, cannulated, small Hudson adapter, 5 mm	0429-000
T-Handle, ratcheting comfort, cannulated ^a	0430-100
Handle, ratcheting, large axial, cannulated, small Hudson ^a	0431-100
Adaptor, large Hudson male, small female Hudson ^a	0443-100
Screw Depth Gauge, cannulated	0517-000
Pin Guide, trocar, 3.2 mm	0614-000
Screw Sheath, assembly	0615-000
Cannulated Screw Tray, 7 mm	9913-000

7.0 mm Screws, Cannulated, Cancellous

20 mm thread, 7 mm × 30 mm-130 mm (5 mm increments)	8040-30-130
36 mm thread, 7 mm × 45 mm-130 mm (5 mm increments)	8041-45-130
Full thread, 7 mm × 30 mm-130 mm (5 mm increments)	8042-30-130
Flat Washer, 7 mm	8039-000

Disposables

Non-sterile guide pin, 3.2 mm × 330 mm	AR-9095-40
Guide pin, 3.2 mm × 330 mm	AR-9095-40S
Extractor, easyout	0815-000

a. Substitute, if needed: S0100-000 with 0100-000, 0430-100 with 0430-000, 0431-100 with 0431-000, and/or 0443-100 with 0443-000.

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.



Arthrex manufacturer, authorized representative, and importer information (Arthrex eIFUs)



US patent information