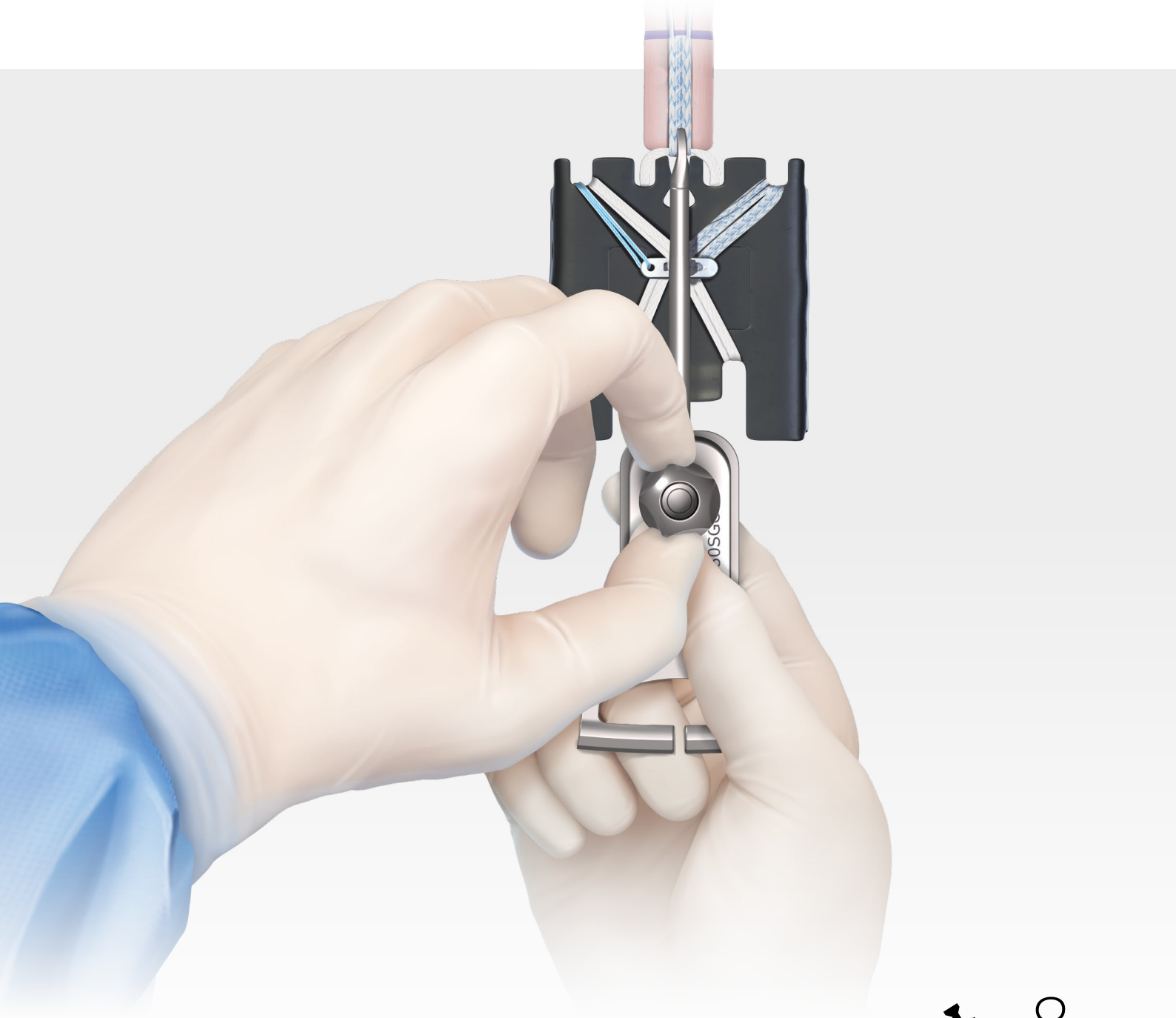
QuadLink™ Graft Preparation Using the FiberTag® TightRope® II Implant and Sliding GraftClamp Instruments

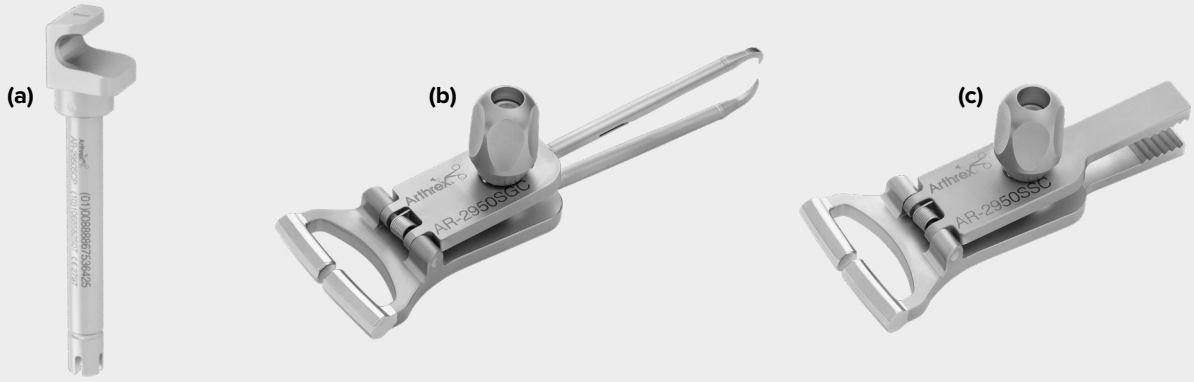
Surgical Technique



Arthrex®

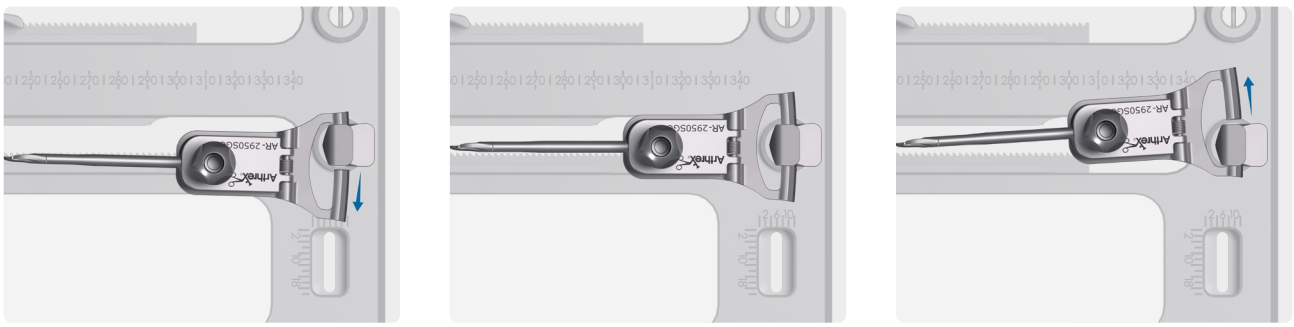
Introduction to Sliding GraftClamp Instruments

Expanding on the comprehensive GraftPro® graft preparation system, new sliding GraftClamp instruments offer versatility and ease like never before. Additional updates include a universal post **(a)** compatible with both the sliding GraftClamp instrument **(b)** and sliding soft-tissue clamp **(c)**. The sliding GraftClamp instrument features the same slot for the FiberTag® TightRope® II implant card as the standard GraftClamp instrument, along with the suture cutout for secure graft preparation. The sliding soft-tissue clamp features an alligator-style clamp for securing soft-tissue grafts with minimal tissue disruption. The sliding soft-tissue clamp can also be used to secure the FiberTag TightRope implant card after one side of the graft has been prepared. These innovative new clamps provide a more efficient and versatile graft preparation experience, with performance up to 40% faster than conventional preparation techniques.[1]

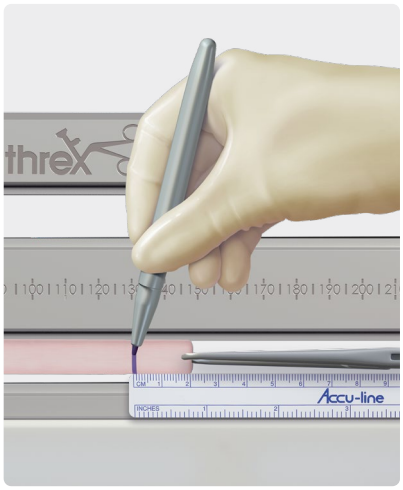


KEY FEATURES AND BENEFITS

- **Effortless Single-User Assembly:** A unique sliding trapdoor mechanism allows for complete graft suturing without removing the graft from tension on the GraftPro board.
- **Enhanced Versatility:** Sliding clamps and a universal post accommodate graft preparation in various orientations on the GraftPro board.
- **Improved Efficiency:** The sliding feature ensures that the clamps remain attached to the GraftPro system, reducing the need for additional handling and enhancing overall workflow. In turn, the sliding graft clamps allow graft preparation to be performed more quickly and easily than ever before, leading to a notable reduction in OR time.



Surgical Technique



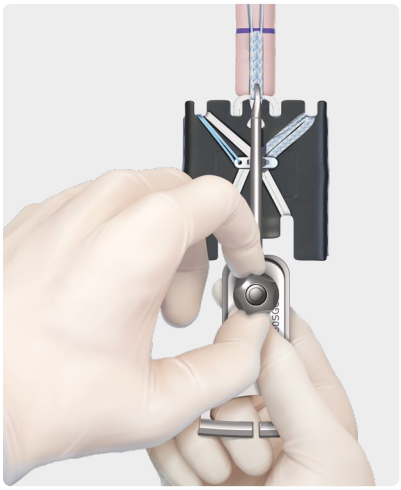
1

Mark the tendon at the desired length of whipstitch.

2

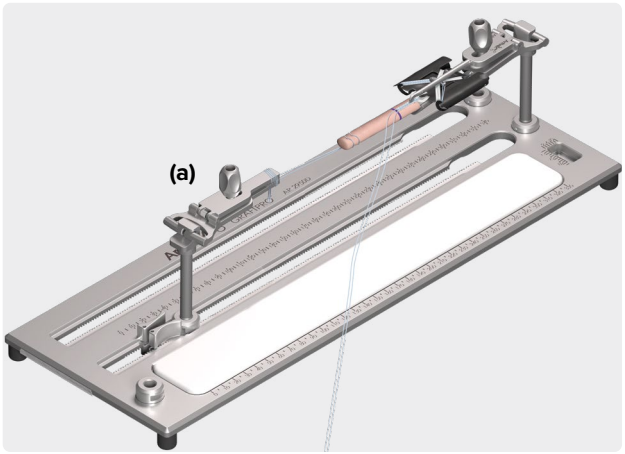
Remove the FiberTag® TightRope® II suture card from the larger packaging card. For controlled assembly, remove the sliding clamp from the post while manually securing the card. Orient the suture card with the FiberTag® suture facing the teeth of the sliding GraftClamp instrument (AR-2950SGC). Load the card into the card-holding slot of the instrument, using the top-notched tooth of the sliding GraftClamp instrument to pierce the FiberTag suture.

> **Note:** Ensure the TightRope® implant is not pierced by the GraftClamp instrument.



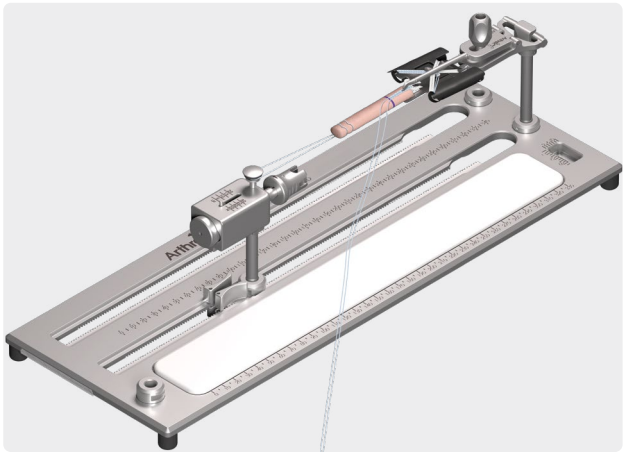
2a

Clasp the sliding GraftClamp instrument approximately 2 mm from the end of the graft. Provisionally place the FiberTag suture on the graft to determine the appropriate positioning. Once confirmed, manually pinch the clamp closed, and lock in place by turning the knob clockwise.



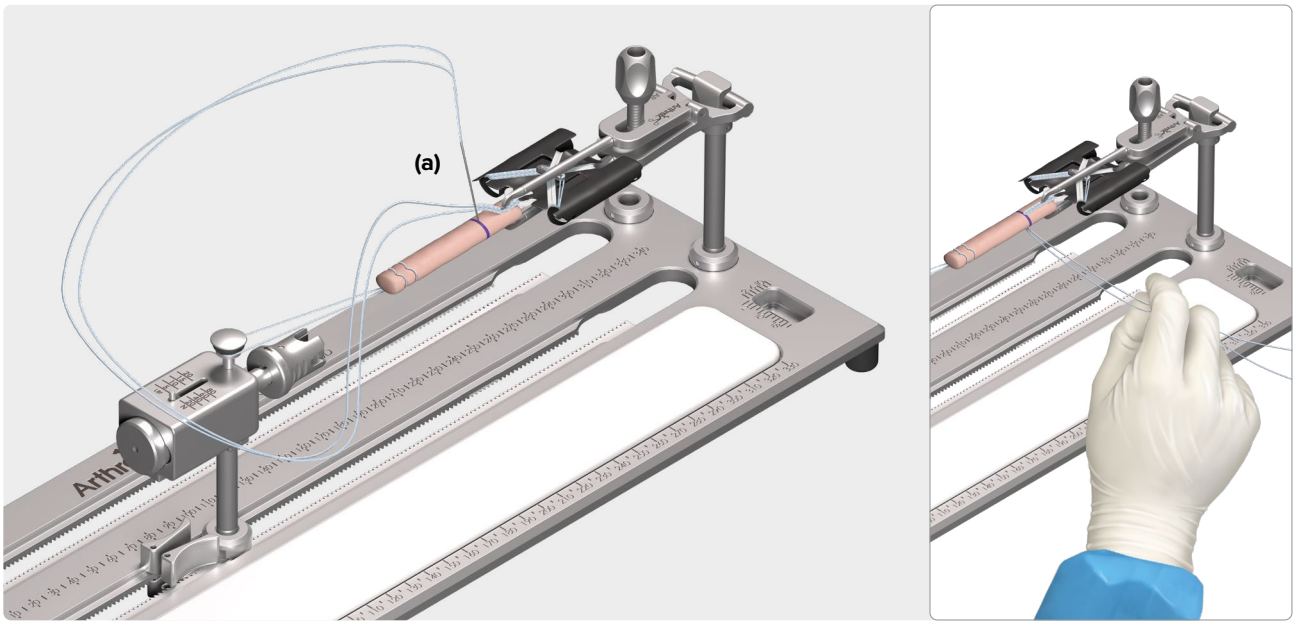
3

Once the GraftClamp instrument is securely fastened onto the graft, assemble the clamp onto the post. The sliding soft-tissue clamp **(a)** can be used to secure the traction sutures on the opposite end of the graft during preparation.



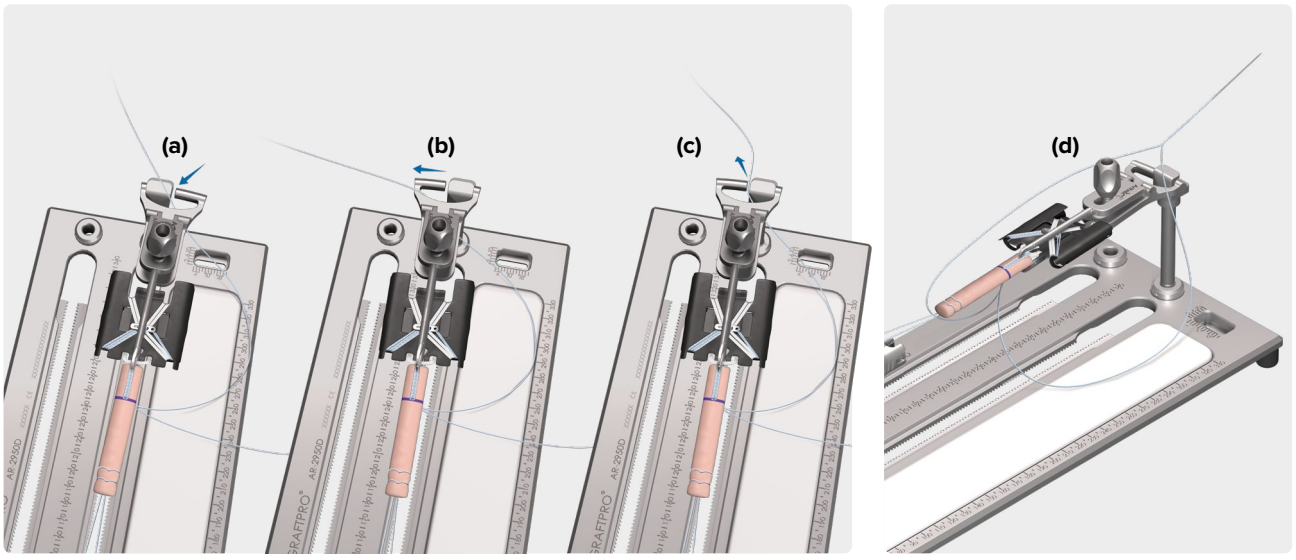
3a

Alternatively, the traction sutures can be wrapped around the GraftLink® tensioner knob to maintain countertension during graft preparation.



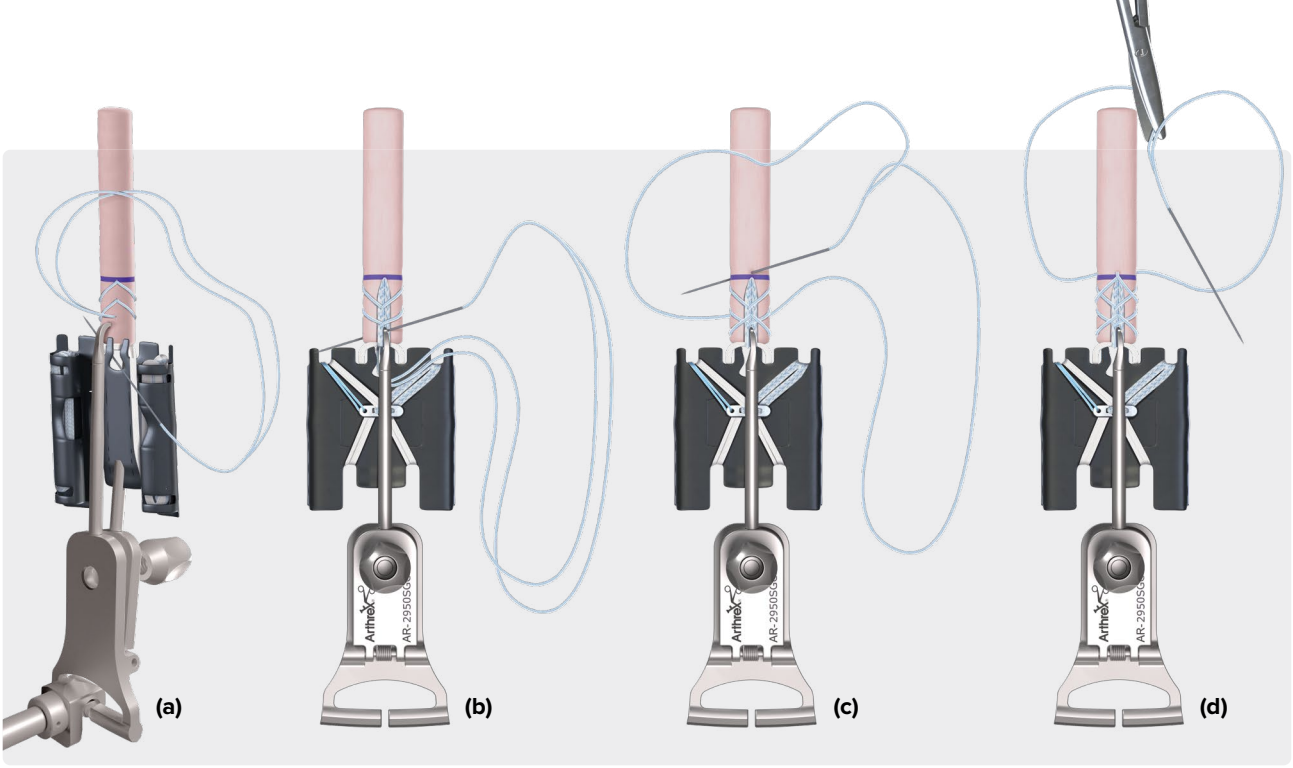
4

Use the needle's initial pass through the graft to determine the position of the FiberTag® suture **(a)**. This pass should occur where the FiberTag suture converts to FiberLoop® suture.



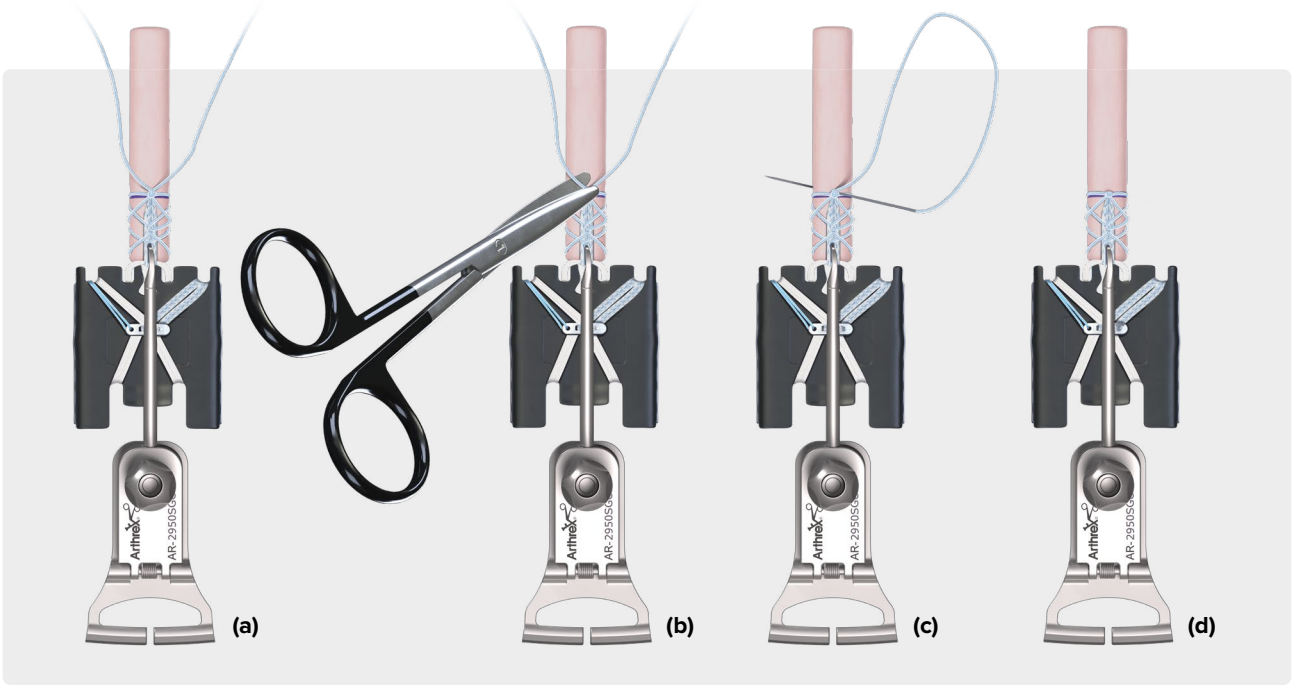
5

After the initial pass through the graft, perform the standard SpeedWhip™ rip-stop technique, working toward the FiberTag® TightRope® II suture card and ensuring the FiberTag suture is captured with each needle pass. Using the sliding GraftClamp instrument, apply gentle tension on one suture limb, pull up through the bottom of the clamp **(a)**, slide over to activate the sliding trapdoor mechanism **(b)** and then down through the trapdoor opening **(c)**. When completed, a suture limb will be on each side of the clamp **(d)**.



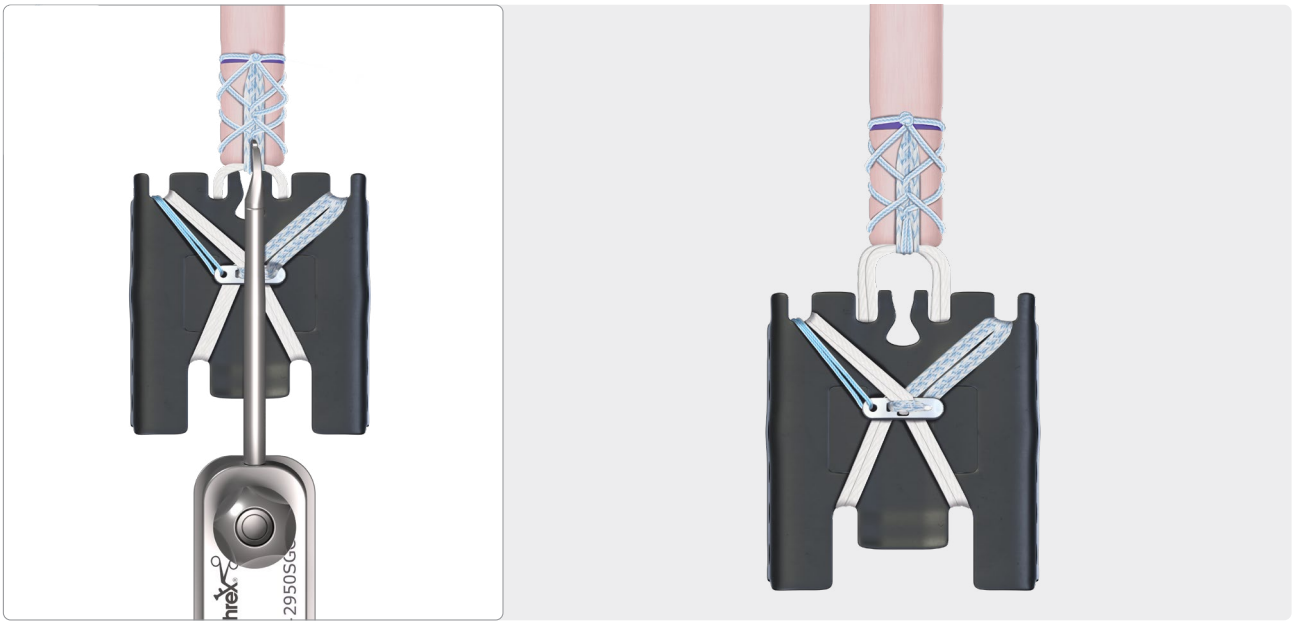
6

After placing two SpeedWhip™ stitches in the graft, pass the needle through the slot in the suture card, ensuring the needle passes over the TightRope® implant **(a)**. Next, repeat the SpeedWhip rip-stop technique with two additional passes, working away from the sliding GraftClamp instrument and ensuring that the FiberTag® suture is captured with each pass **(b)**. Make a final pass at the end of the FiberTag suture **(c)**. Cut one limb of suture just below the splice of the needle **(d)**.



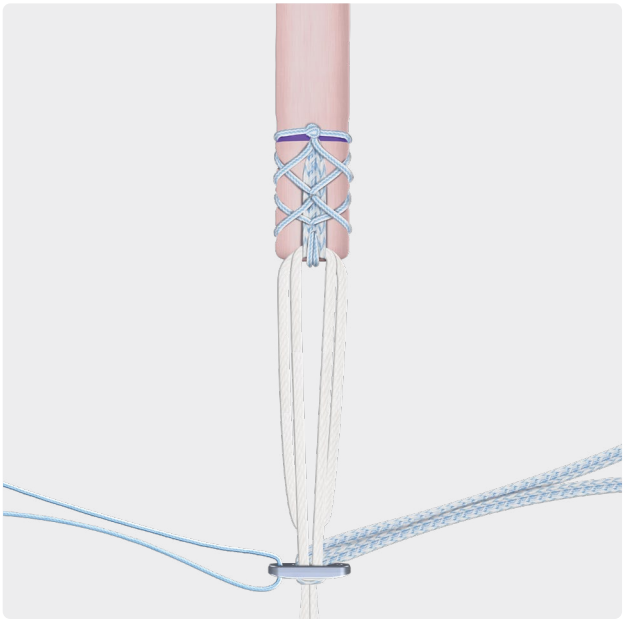
7

Wrap the suture limbs around the graft and tie the knot to secure the construct **(a)**. Cut the suture limb without the needle just above the knot **(b)**. Pierce the needle through the tendon on the knot side **(c)**. Pull the needle and suture completely through the graft and apply tension to bury the knot in the graft **(d)**. Cut the suture limb flush to the graft.



8

Remove the FiberTag® TightRope® suture card from the GraftClamp instrument. Unwrap the sutures from the suture-card cleat and remove the TightRope® implant loops from the retaining slots in the card.



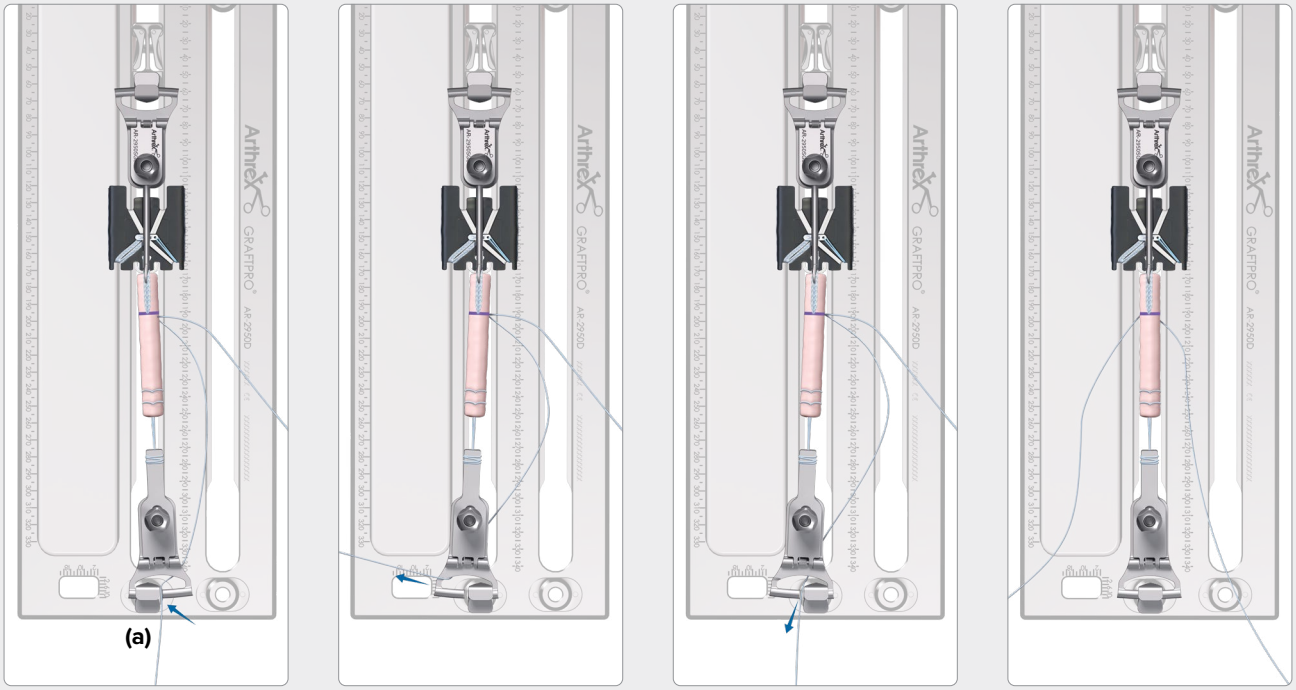
9

Graft preparation is complete; prepare the opposite end of the graft as desired.

10

Final construct using the QuadLink™ technique and FiberTag TightRope implant.

Alternative Orientation



11

The sliding graft clamps allow graft preparation to be performed with the GraftPro® board in various configurations based on surgeon preference. If desired, graft preparation can be performed using the sliding trapdoor mechanism on the sliding soft-tissue clamp **(a)**.

Ordering Information

Instruments	
Sliding GraftClamp instrument	AR-2950SGC
Sliding GraftClamp set	AR-2950SGCS
Sliding soft-tissue clamp	AR-2950SSC
Sliding soft-tissue clamp set	AR-2950SSCS
Universal post	AR-2950SCP
GraftPro graft preparation set	AR-2950DS

FiberTag® TightRope® II Implants	
FiberTag TightRope II implant for the *Internal*Brace™ technique	AR-1588RTT2-IB
FiberTag TightRope II implant	AR-1588RTT2
FiberTag TightRope II ABS implant	AR-1588TNT2

FiberTag TightRope II Implant Systems	
All-Inside QuadLink™ Kits	
All-inside QuadLink kit, 8 mm	AR-1288QAI-80
All-inside QuadLink kit, 9 mm	AR-1288QAI-90
All-inside QuadLink kit, 10 mm	AR-1288QAI-100
All-inside QuadLink kit, 11 mm	AR-1288QAI-110

Tibial Tunnel QuadLink Kits	
Tibial tunnel QuadLink kit, 8 mm	AR-1288QTT-80
Tibial tunnel QuadLink kit, 9 mm	AR-1288QTT-90
Tibial tunnel QuadLink kit, 10 mm	AR-1288QTT-100
Tibial tunnel QuadLink kit, 11 mm	AR-1288QTT-110
Implant Systems for the *Internal*Brace Technique	
FiberTag TightRope II implant w/ FiberTape® suture for the *Internal*Brace technique w/ FlipCutter® III drill and FiberSnare® suture	AR-1288RTT2-FC3
FiberTag TightRope II implant w/ FiberTape suture for the *Internal*Brace technique w/ ACL TightRope® drill pin and FiberLink™ suture	AR-1288RTT2-IBS
FiberTag TightRope II implant w/ FiberTape suture for the *Internal*Brace technique w/ flexible ACL TightRope drill pin and FiberLink suture	AR-1288RTT2-IBSF

Products advertised in this brochure/surgical technique guide may not be available in all countries. For information on availability, please contact Arthrex Customer Service or your local Arthrex representative.

Reference

1. Arthrex, Inc. Data on file (APT-07376). Naples, FL; 2025

The *Internal*Brace surgical technique is intended only to augment the primary repair/reconstruction by expanding the area of tissue approximation during the healing period and is not intended as a replacement for the native ligament. The *Internal*Brace technique is for use during soft tissue-to-bone fixation procedures and is not cleared for bone-to-bone fixation.

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.

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US patent information

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