

Spinal Fascia Closure Using the Spine Scorpion™ Suture Passer

Surgical Technique





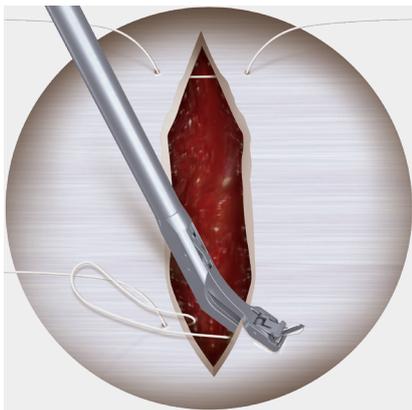
Spinal Fascia Closure Using the Spine Scorpion™ Suture Passer

The Spine Scorpion suture passer is ideal for closing the fascia at the end of minimally invasive spine procedures. The low-profile design allows for easy access to the fascia, at all depths, for procedures completed through either a tubular or mini open approach. The Spine Scorpion suture passer automatically passes and retrieves multiple types of suture, including 0 and 2-0 resorbable suture.

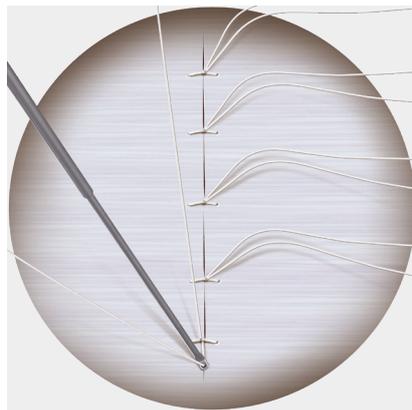
- Can decrease fascia closure time by 75%¹
- Consistent fascia closure at any depth
- Automatically and seamlessly passes and retrieves suture
- One-step suture loading
- Low-profile design for easy access through tubular or mini open approaches



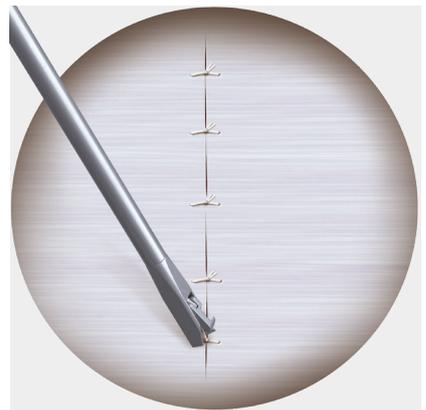
Pass...



Tie...



Cut.





Spine Scorpion™ suture passer in the standard open position.



Spine Scorpion suture passer with the handle depressed and the needle deployed through the foot.



Spine Scorpion suture passer with the trigger depressed and the jaw closed.



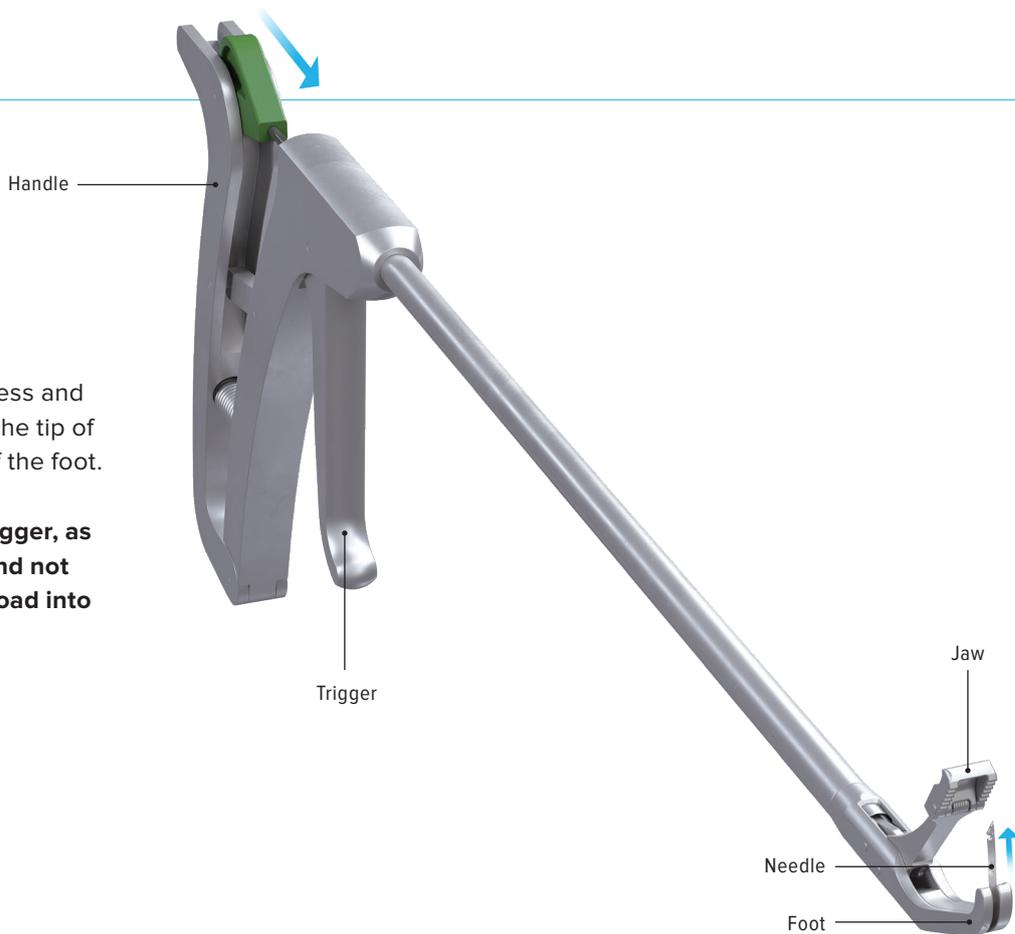
Spine Scorpion suture passer with the jaw closed and the needle deployed. **Note: To properly pass a suture, the jaw must be closed before the needle is deployed.**

Surgical Technique

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To load the suture, depress and hold the handle so that the tip of the needle comes out of the foot.

Note: Do not pull the trigger, as this will close the jaw and not allow for the suture to load into the foot correctly.



Once the needle is exposed, create a loop with the suture, leaving a tail of approximately 1 in. Then wrap the suture over the needle.



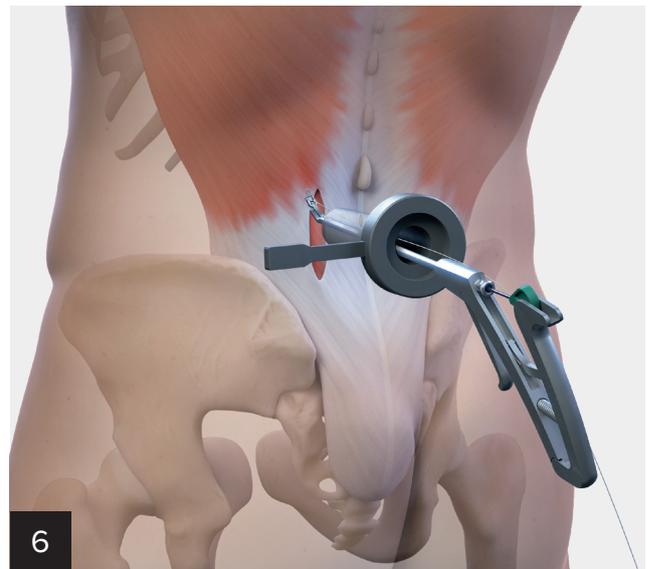
Pull the suture snug against the needle so that the suture engages with the notch at the tip of the needle.



While holding the suture in the notch and snug against the needle, release the handle. The needle will retract into the foot, pulling the suture with it.



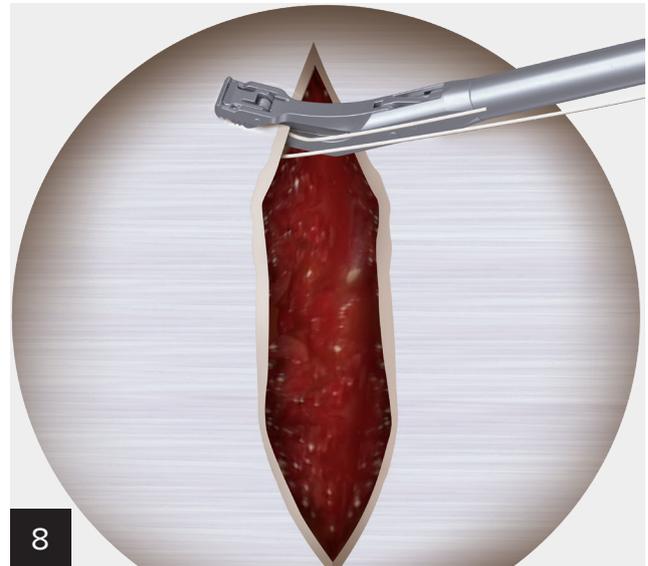
5 The suture will now be captured in the foot.



6 With the suture loaded and the jaw in the closed position, introduce the Spine Scorpion™ suture passer into the incision to the depth of the fascia.



7 Once the fascia has been located, open the jaw of the Spine Scorpion suture passer, ensuring the foot and jaw are on opposite sides of the fascia.

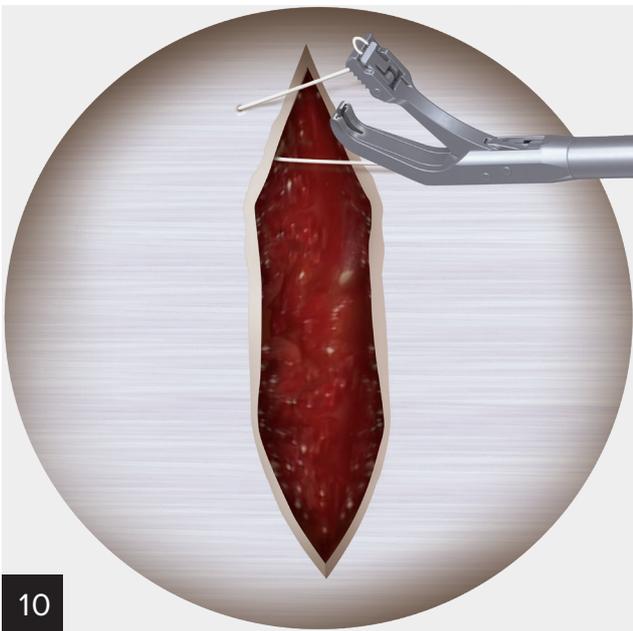


8 Gently close the jaw to grasp the fascia.

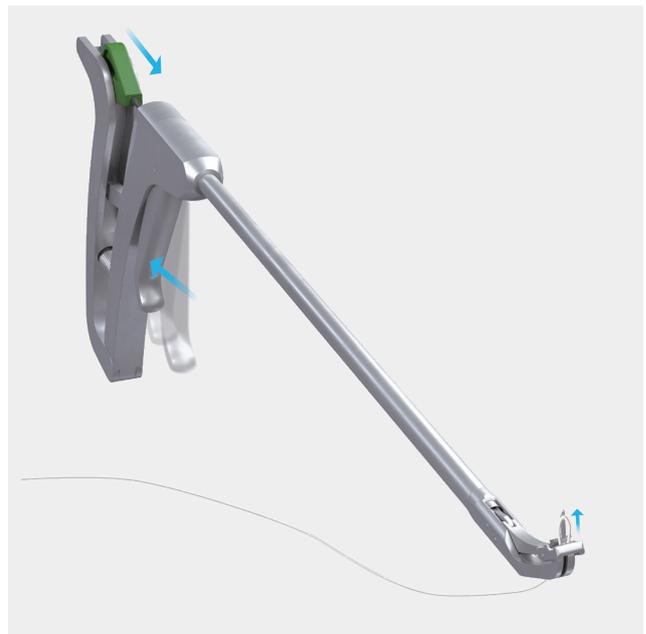
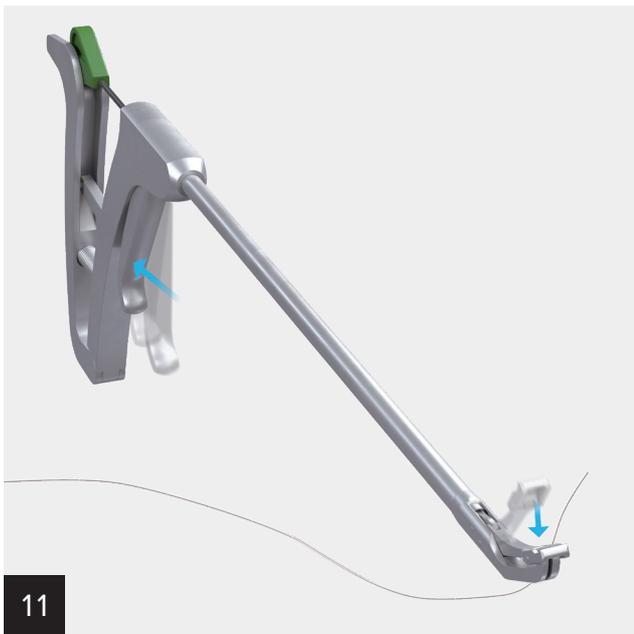
Note: Manipulate the fascia as needed to safely pass the needle and suture.



Squeeze the handle to advance the needle and suture through the fascia. The suture will be automatically captured in the jaw.



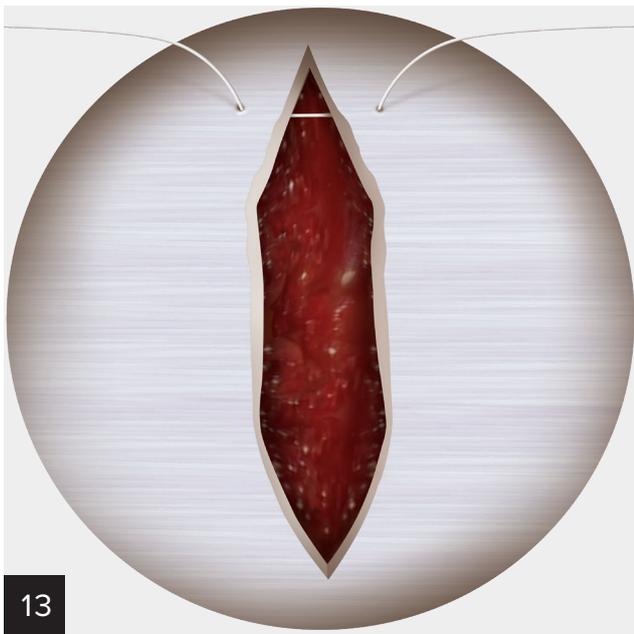
With the suture captured in the jaw, pull the Spine Scorpion™ suture passer back out of the incision.



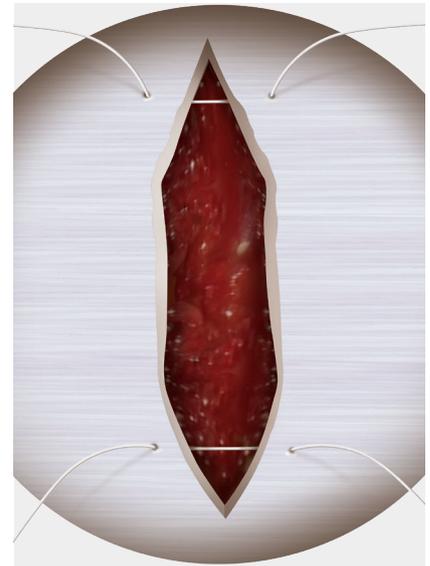
Remove the suture from the Spine Scorpion™ suture passer by pulling the trigger to close the jaw and squeezing the handle to advance the needle. While pulling on the suture with your opposite hand, release the handle and trigger to remove the suture from the jaw.



To pass the other end of the suture through the other side of the fascia, repeat technique steps 1 through 12.

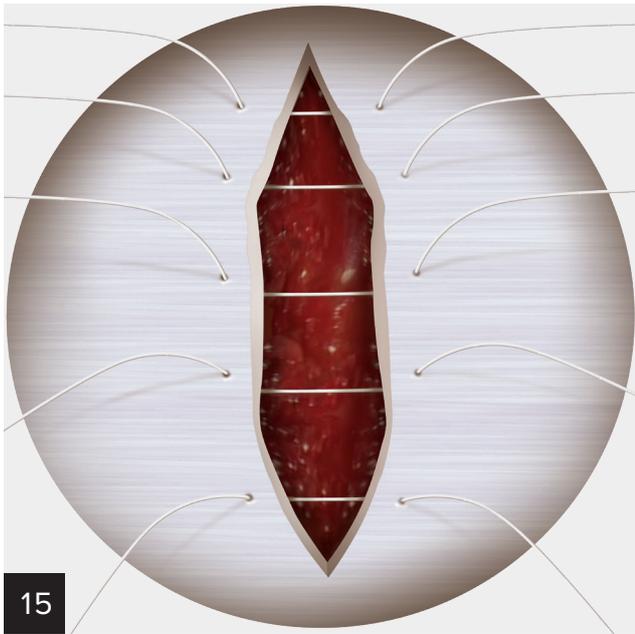


The suture is now properly passed through the fascia.
Note: Waiting until all sutures have been passed is recommended before tying and cutting the suture.

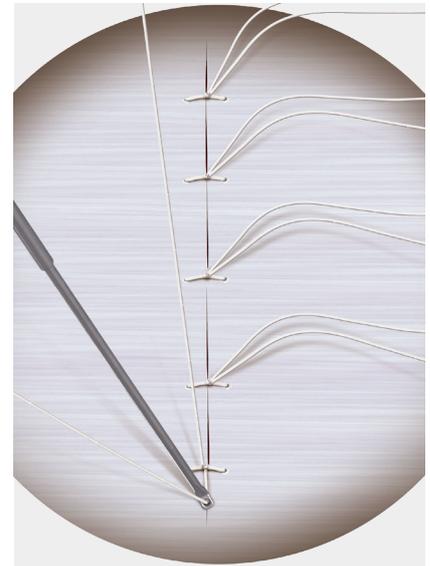
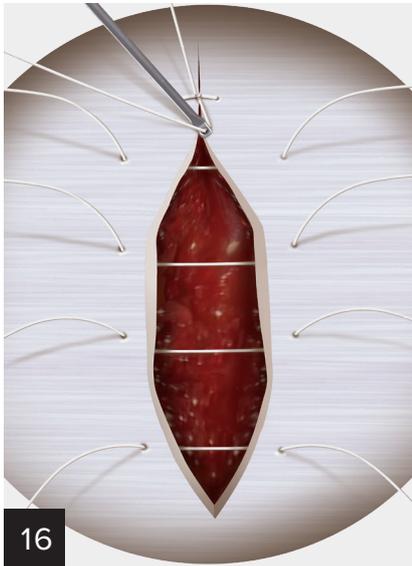


Repeat steps 1 through 12 in the opposite corners of the incision.

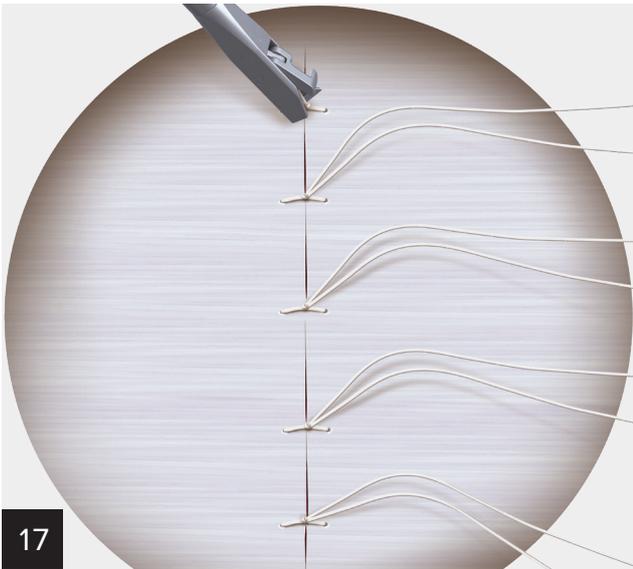
Note: It is recommended that the initial suture passes are made first in the cranial aspect of the fascial incision, then the caudal aspect. Work toward the middle in order to maximize access.



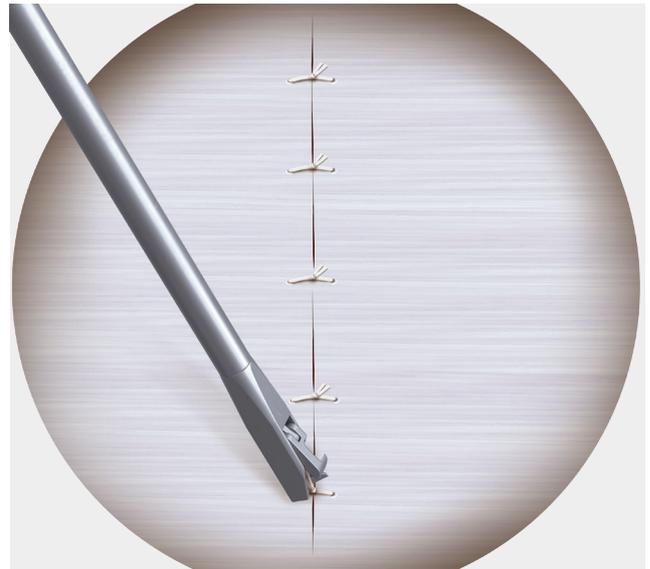
This action should be repeated as many times as needed until the surgeon feels that a sufficient number of sutures have been passed to allow the fascia to be adequately closed.



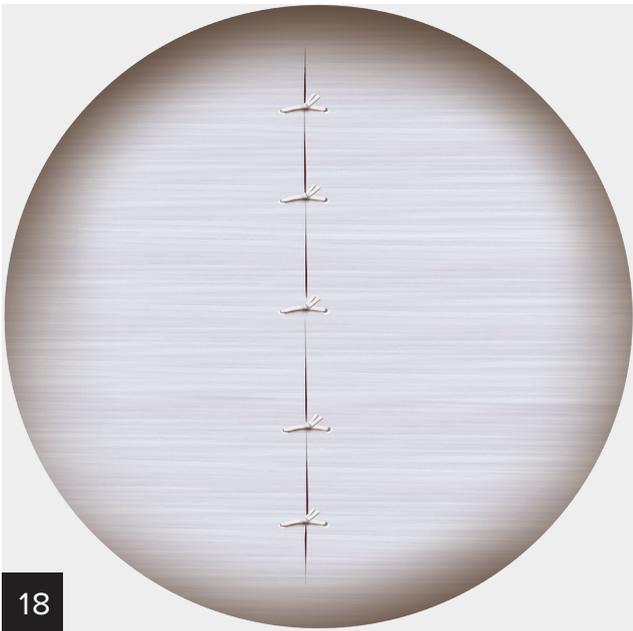
Depending on the depth of the incision, a knot pusher may be needed to appropriately secure the suture.



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A suture cutter may also be required beyond a certain depth to properly cut the suture at the knot, leaving a small tail.



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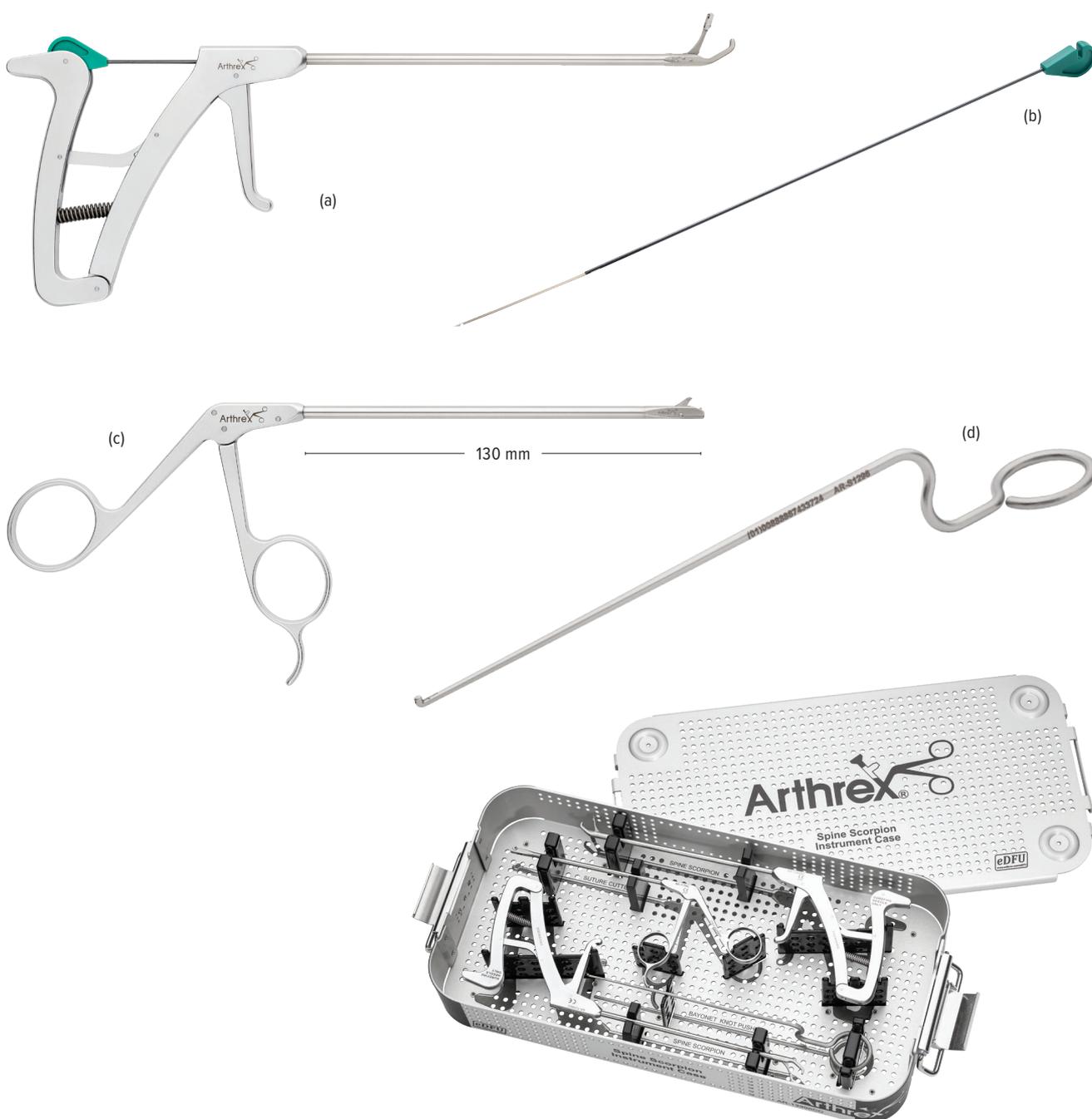
The fascia should now be closed.

Ordering Information

Product Description	Item Number
Spine Scorpion™ Instrument Set	AR-13998CS
Spine Scorpion Instrument Case	AR-13998CC
Spine Scorpion Suture Passer (a)	AR-13998C*
SureFire® Scorpion Needle (b)	AR-13991N*
Suture Cutter, open ended, left notch, 4.2 mm (c)	AR-11794L*
Suture Cutter, open ended, left notch, 4.2 mm × 220 mm	AR-16794L*
Bayonet Knot Pusher (d)	AR-S1296*

*Included in Spine Scorpion instrument set

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 05722). Naples, FL; 2021.



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 and/or outcomes.

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