Centerline[™] Endoscopic Carpal Tunnel Release System

Surgical Technique Guide



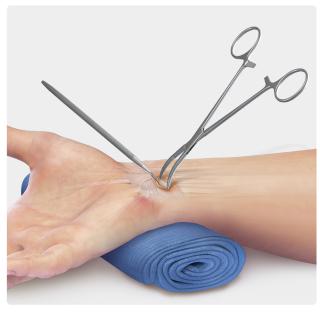


Centerline™ Carpal Tunnel Release System

Features and Benefits

- Scope securely clicks into the Centerline disposable, eliminating any rotational image instability
- Integrated disposable blade and handle unit diminishes risk of mechanical failure
- Integrated thumb trigger allows for smoother blade release, improving both steadiness and control
- > Attaches to any standard video camera and light source
- Endoscopic release has been shown to provide faster recovery in the first 2 weeks following surgery¹
- > Endoscopic and open release have shown similar complication rates in office-based procedure room vs operating room settings²

Centerline Release System Technique



1

Make a surgical incision transversely in one of the wrist flexion creases between the flexor carpi ulnaris and the palmaris longus. Start soft-tissue dissection on the radial aspect of the incision and take directly down to the antebrachial fascia. Divide the antebrachial fascia in line with the incision to create access to the carpal tunnel. Place a small, 2-pronged skin retractor on the leading edge of the transverse carpal ligament and use it to elevate this structure.



2

The Centerline instrumentation is equipped with 2 sequentially sized Hegar dilators to widen the carpal tunnel and create a track for the Centerline device. Aim the dilators at the base of the ring finger while holding the wrist in slight extension. Gently pass the dilators distally down the ulnar side of the tunnel, hugging the hook of the hamate and advancing distally until the tip is past the carpal tunnel.



3

Use the synovial elevator to dissect adherent synovium from the underside of the transverse carpal ligament. This allows for clear visualization of the transverse fibers of the ligament. Follow the same path as the dilator. A noticeable rough, washboard-like effect will be felt.



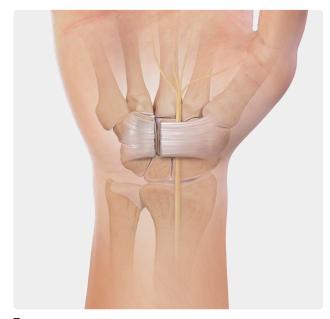
Insert the scope into the Centerline™ device. Align the light post on the scope with the corresponding cutout on the Centerline device. A click will be heard when the scope is fully inserted.



5

With the patient's wrist in slight extension, insert the Centerline device into the carpal tunnel, pressing the viewing window snugly against the deep side of the ligament. While aiming at the base of the ring finger, advance the instrument distally, hugging the hook of the hamate to ensure an ulnar course. Use a sufficient number of proximal-to-distal passes to accurately define an ulnar "strip" of the transverse carpal ligament. Transverse fibers of the ligament should be visible within this strip. Palpating with the thumb, define the distal margin of the ligamanent at its junction with a pad of fat and align the point of entry markers at this junction.





6

Once a clear path from the distal end of the transverse carpal ligament to the proximal end is confirmed, deploy the knife distally and divide the transverse carpal ligament while withdrawing the device along the previously established path.

Reinsert the device to confirm complete division of the transverse carpal ligament.

Final view of divided transverse carpal ligament.

References

- 1. Vasiliadis HS, Xenakis TA, Mitsionis G, Paschos N, Georgoulis A. Endoscopic versus open carpal tunnel release. Arthroscopy. 2010;26(1):26-33. doi:10.1016/j. arthro.2009.06.027
- 2. Randall DJ, Peacock K, Nickel KB, Olsen M, Tyser AR, Kazmers NH. Comparison of complication risk for open carpal tunnel release: in-office versus operating room settings. Plast Reconstr Surg Glob Open. 2021;9(7):e3685. doi:10.1097/GOX.000000000003685

Ordering Information



Centernine disposable device	
Centerline ECTR	AR-8850
*scope sold separately	An-0030
Centerline scope	
Reverse post light scope, 2.9 mm	AR-3350-2930
Centerline instrument set (AR-8850S)	
Dilator, 4.8 mm	AR-8851
Dilator, 6.8 mm	AR-8852
Synovial elevator	AR-8853
Instrument case for scope	AR-8850SC
Centerline ECTR instrument case	AR-8850DC

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.

Ordering Information

Alternative Product

NanoScopic™ Carpal Tunnel Release System

A simplified, all-in-one sterile system, the NanoScopic carpal tunnel release system streamlines endoscopic carpal tunnel release procedures. Designed for precision and efficiency, this disposable system includes a 180 mm NanoNeedle™ scope, a Centerline™ device, and a dilator/synovial scraper instrument.



NanoScopic release system	AR-8850DS
NanoScope™ tablet control unit	AR-3200-0030
Mobile cart	AR-3502-CRT
Mobile NanoScope console mount, for mobile cart	ATX-2601
NanoScope console battery supply replacement	150-0012-00-A

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Notes	

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