

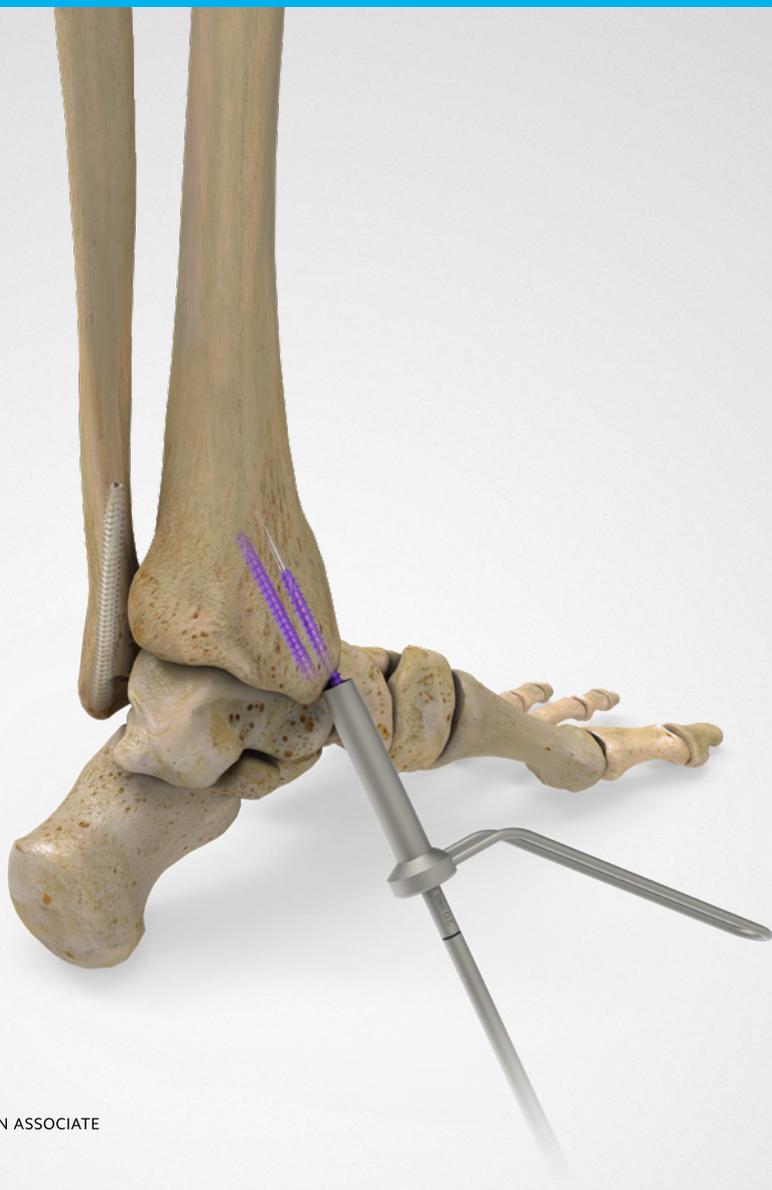


acumed®

Acutrak 2® Headless Compression Screw System

4.7 mm and 5.5 mm Screws

Supplemental Use Guide—Medial & Lateral Malleolus



Acumed® is a global leader of innovative orthopaedic and medical solutions.

We are dedicated to developing products, service methods, and approaches that improve patient care.



Acumed® Acutrak 2® Headless Compression Screw System—4.7 mm and 5.5 mm

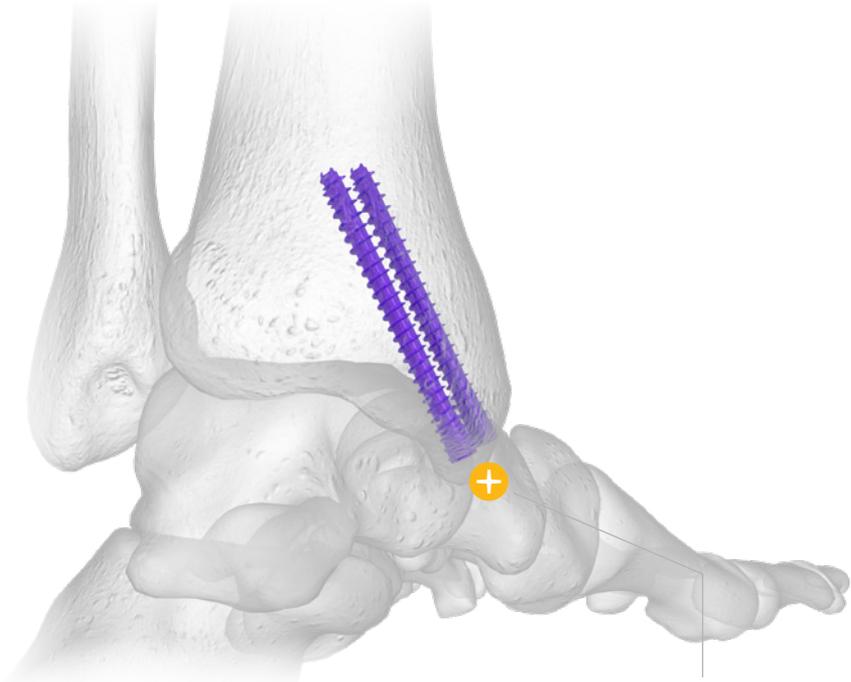
This guide is intended for supplemental use only and is not intended to be used as a stand-alone surgical technique. Reference the Acumed Acutrak 2 Headless Compression Screw System Surgical Technique (SPF00-02) for more information.

	Definition
Warning	Indicates critical information about a potential serious outcome to the patient or the user.
Caution	Indicates instructions that must be followed in order to ensure the proper use of the device.
Note	Indicates information requiring special attention.

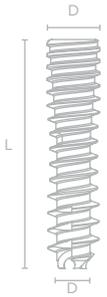
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System Features



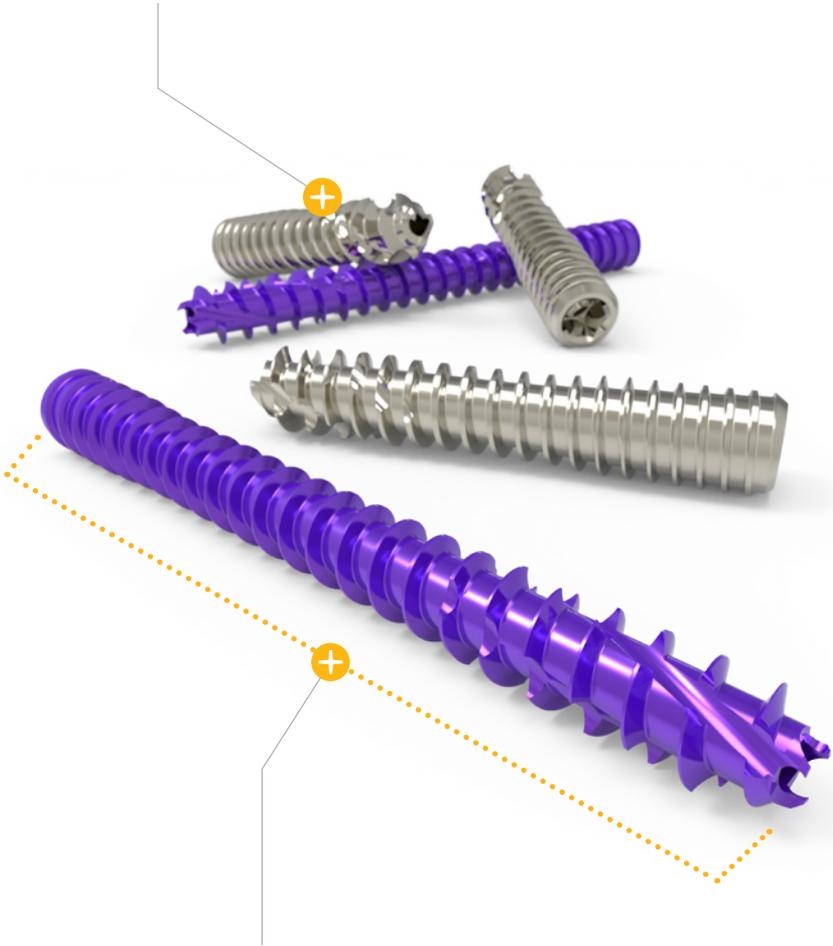
Headless screw design is intended to minimize soft tissue irritation



Acutrak 2 Screws	Diameter	Length
4.7 mm	Tip: 4.5 mm	2 mm increments 20–30 mm
	Tail: 4.7 mm	5 mm increments 30–50 mm
5.5 mm	Tip: 5.2 mm	5 mm increments 25–60 mm
	Tail: 5.5 mm	

System Features

Self-cutting and self-tapping screw is designed to facilitate insertion into hard bone



Fully threaded, continuously variable thread pitch allows each thread along the entire length of the screw to aid in the reduction and compression of the fracture

Fibula Fracture (Weber A and B Fractures) Surgical Technique: Acutrak 2®—5.5

Figure 1



1 Site Preparation

Prepare the fracture, fusion, or osteotomy site using the surgeon's preferred technique. Remove any fibrous or interposed tissue, and bone graft as needed. For an open approach, use either a straight longitudinal or J-shaped incision. For a percutaneous approach, make a stab incision at the screw entry site. Bluntly dissect down to the tip of the fibula.

Fibula Fracture (Weber A and B Fractures) Surgical Technique: Acutrak 2®—5.5



Figure 2

2 Guide Wire Insertion

Insert a .062" guide wire to the appropriate depth. The recommended entry point is 2 mm medial to the fibular tip. Direct the guide wire parallel to the medullary canal. Check placement of the wire under fluoroscopy. To prevent rotation of the fragment, use the same procedure to insert a second guide wire parallel to the first wire. Take care to avoid the posterior tibial tendon just posterior to the malleolus.

Fibula Fracture (Weber A and B Fractures) Surgical Technique: Acutrak 2®—5.5

Figure 3



3 Determine Screw Length

Measure the guide wire with a Large Acutrak 2® Screw Sizer. This ensures contact with cortical bone. Or, place a second wire at the entry point and subtract the difference. This measurement indicates the appropriate screw length that will place the screw at the tip of the guide wire. Subtract appropriately for any anticipated fragment reduction resulting from screw insertion.

Fibula Fracture (Weber A and B Fractures) Surgical Technique: Acutrak 2®—5.5



Figure 4

4 Drill Far Fragment

Drill into the far fragment with the long drill for each implant. Typically, the drill must only advance 4–5 mm past the fracture site to be effective.

Caution: The long drill is recommended to mitigate the effects of varying bone density and distraction upon screw insertion.

Fibula Fracture (Weber A and B Fractures) Surgical Technique: Acutrak 2®—5.5

Figure 5



5 Drill the Near Cortex

The near cortex is opened using the appropriate size profile drill to accommodate each implant.

Fibula Fracture (Weber A and B Fractures) Surgical Technique: Acutrak 2®—5.5

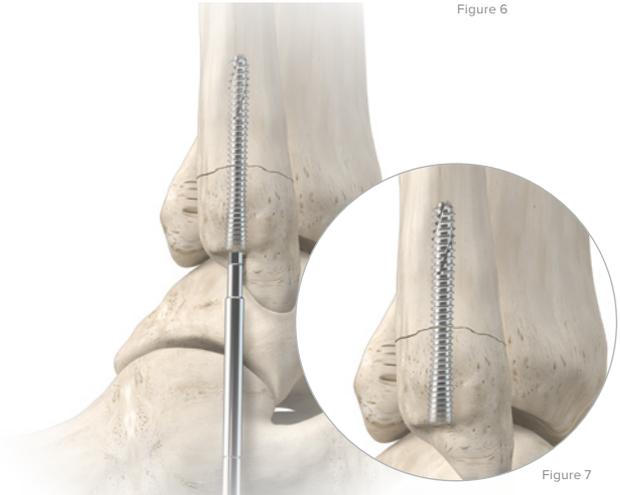


Figure 6

Figure 7

6 Screw Insertion

Insert the correct size of screw with the appropriate hex driver. If resistance is met upon insertion or if distraction occurs: stop, remove the screw, re-drill with the long drill, and re-insert the screw. Confirm the placement and length of the screw under fluoroscopy, ensuring that both the leading and the trailing threads of the screw are within the bone. Lastly, remove the guide wires.

Medial Malleolus Surgical Technique: Acutrak 2®—4.7

Figure 1



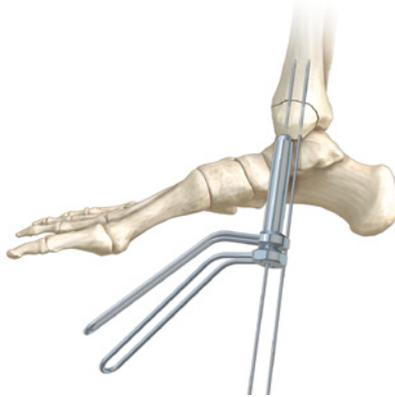
1 Site Preparation

For an open approach, use either a straight longitudinal or J-shaped incision. Prepare the fracture, fusion, or osteotomy site using the surgeon's preferred technique. Remove any fibrous or interposed tissue, and bone graft as needed.

For a percutaneous approach, make a stab incision at the screw entry site then bluntly dissect down to the tip of the malleolus.

Medial Malleolus Surgical Technique: Acutrak 2®—4.7

Figure 2



2 Guide Wire Insertion

Insert the .062" guide wire to the appropriate depth. Check placement of the wire under fluoroscopy. To prevent rotation of the fragment, insert a second guide wire parallel to the first wire, following the same procedure. Take care to avoid the posterior tibial tendon just posterior to the malleolus.

Medial Malleolus Surgical Technique: Acutrak 2®—4.7

Figure 3



3 Determine Screw Length

Each guide wire is measured using the Large Acutrak 2 Screw Sizer, ensuring contact with cortical bone, or by placing a second wire at the entry point and subtracting the difference. This measurement indicates the appropriate screw length to place the screw at the tip of the guide wire. Subtract appropriately for any anticipated fragment reduction resulting from screw insertion.

Medial Malleolus Surgical Technique: Acutrak 2®—4.7



Figure 4

4 Drill Far Fragment

Next, drill into the far fragment with the long drill for each implant. Typically the drill must only advance 4–5 mm past the fracture site to be effective.

Caution: The long drill is recommended to mitigate the effects of varying bone density and distraction upon screw insertion.

Medial Malleolus Surgical Technique: Acutrak 2®—4.7

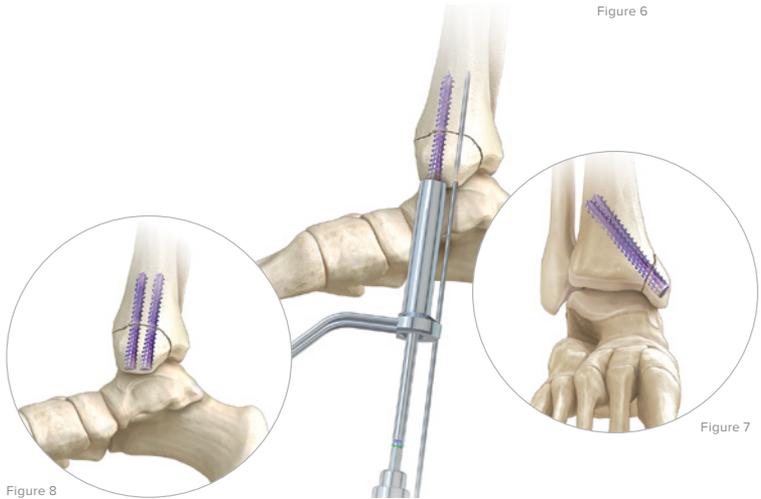
Figure 5



5 Drill the Near Cortex

The near cortex is opened using the appropriate size profile drill to accommodate each implant.

Medial Malleolus Surgical Technique: Acutrak 2®—4.7



6 Screw Insertion

Insert the correct size screw with the appropriate hex driver. If resistance is met upon insertion or if distraction occurs: stop, remove the screw, re-drill with the long drill, and re-insert the screw. Confirm placement and length of the screw under fluoroscopy, ensuring that both the leading and the trailing edges of the screw are beneath the articular surfaces. Repeat steps for the additional screw. Lastly, remove the guide wires.

Ordering Information

Acutrak 2®—4.7

Implants

20 mm Acutrak 2—4.7 Screw	30-0620
22 mm Acutrak 2—4.7 Screw	30-0622
24 mm Acutrak 2—4.7 Screw	30-0624
26 mm Acutrak 2—4.7 Screw	30-0626
28 mm Acutrak 2—4.7 Screw	30-0628
30 mm Acutrak 2—4.7 Screw	30-0630
35 mm Acutrak 2—4.7 Screw	30-0635
40 mm Acutrak 2—4.7 Screw	30-0640
45 mm Acutrak 2—4.7 Screw	30-0645
50 mm Acutrak 2—4.7 Screw	30-0650

Instrumentation

Acutrak 2—4.7 Profile Drill	80-0945
Acutrak 2—4.7 Long Drill	80-0946

Ordering Information

Acutrak 2®—5.5

Implants

25 mm Acutrak 2—5.5 Screw	30-0021
30 mm Acutrak 2—5.5 Screw	30-0023
35 mm Acutrak 2—5.5 Screw	30-0025
40 mm Acutrak 2—5.5 Screw	30-0027
45 mm Acutrak 2—5.5 Screw	30-0029
50 mm Acutrak 2—5.5 Screw	30-0031
55 mm Acutrak 2—5.5 Screw	30-0084
60 mm Acutrak 2—5.5 Screw	30-0085

Instrumentation

Acutrak 2—5.5 Profile Drill Large AT2	80-0955
Acutrak 2—5.5 Long Drill Large AT2	80-0956

Additional Instrumentation

4.7 and 5.5 Instrumentation

1.6 mm Guide Wire Probe	80-0992
1.6 mm (.062") x 9.25" Guide Wire	80-0950
3.0 mm Cannulated QR Hex Driver Tip AT2	80-0958
3.0 mm Solid QR Hex Driver Tip AT2	80-0959

Ordering Information

Additional Instrumentation

4.7, 5.5 and 7.5 Instrumentation

Large Acutrak 2 Drills and Driver Platter	80-0870
Large Acutrak 2 Common Instrument Platter	80-0871
Small Ratchet Handle with QR Connection	80-0398
Forceps	AT-7005
Sharp Hook	PL-CL06
3.0 mm Easyout, Quick Release	80-0601
Large Acutrak 2 4.7 and 5.5 Screw Platter	80-0876
Large Acutrak 2 4.7 Screw Caddy	80-0878
Large Acutrak 2 5.5 Screw Caddy	80-0880
Large Acutrak 2 Screw 2 x 2 Base	80-0884
Large Acutrak 2 Screw Lid	80-0885
Large Acutrak 2 Screw System Lid	80-0869

Note: All screws are also available sterile-packed. Add an -S to end of product number for sterile product.

To learn more about the full line of Acumed innovative surgical solutions, please contact your local authorized Acumed distributor, call 888.627.9957, or visit www.acumed.net.



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