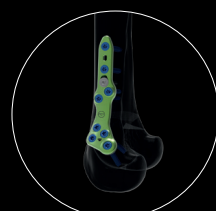
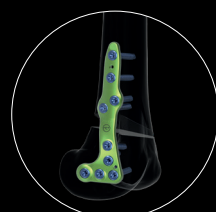
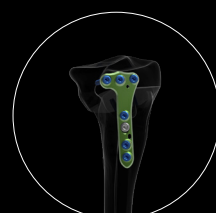
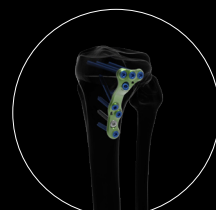
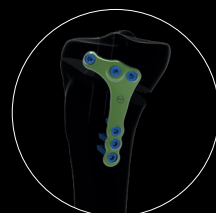
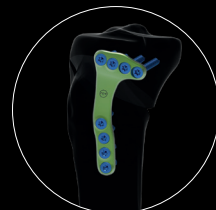
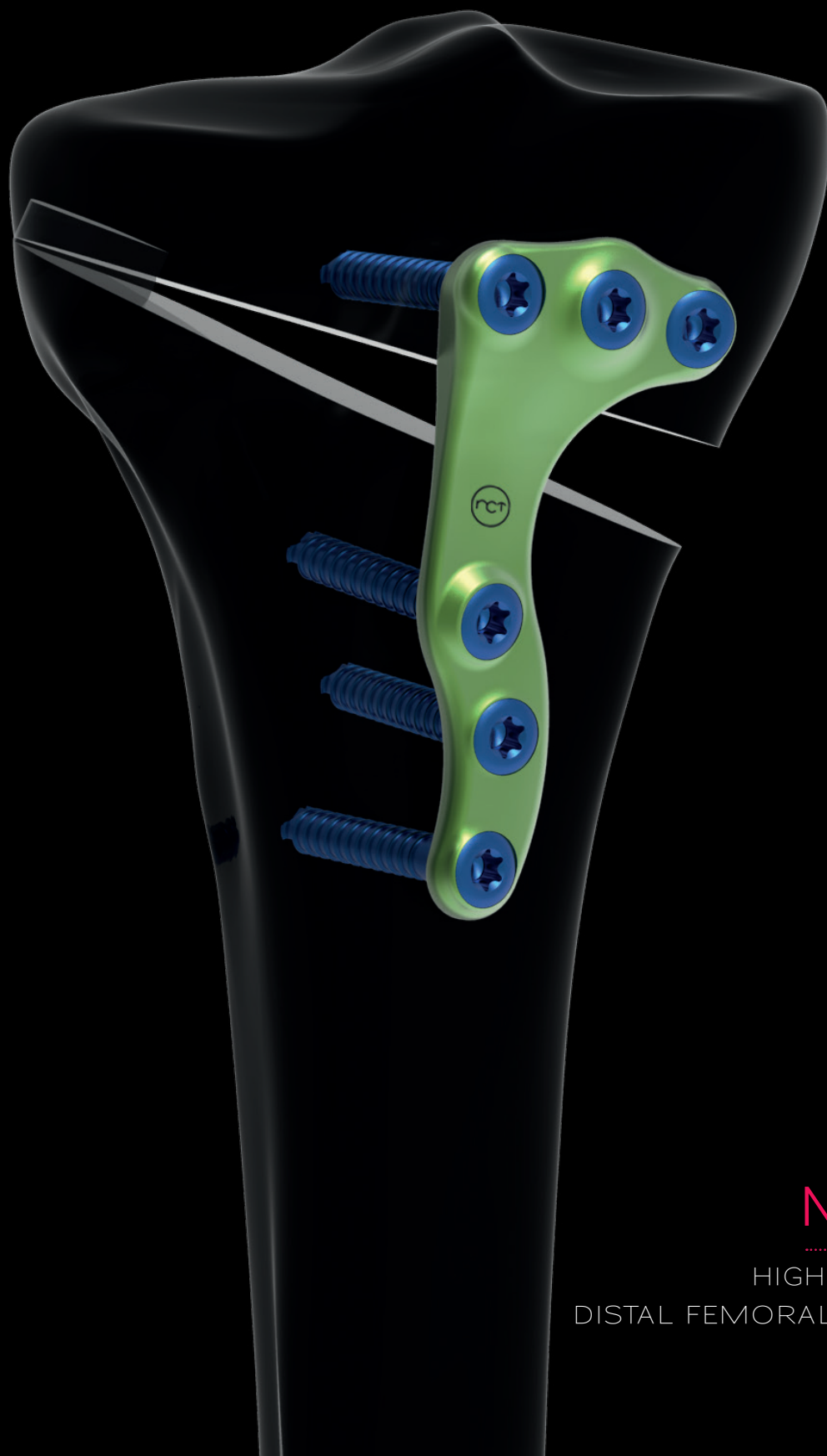




NEWCLIP
TECHNICS



ACTIV
MOTION

HIGH TIBIAL OSTEOTOMY &
DISTAL FEMORAL OSTEOTOMY PLATES

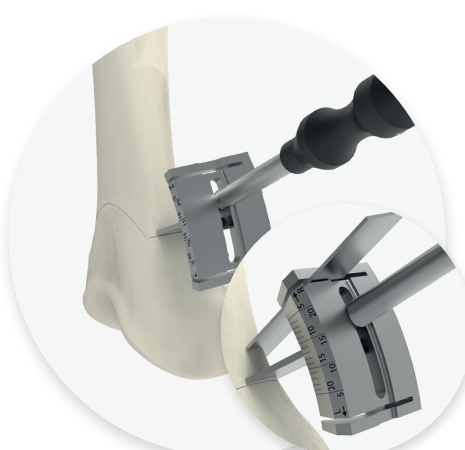
SURGICAL TECHNIQUE

MEDIAL CLOSING WEDGE DISTAL FEMORAL OSTEOTOMY PLATE (PAGE 1/2)



1. Perform the osteotomy:

Start the first cut approximately at 5 mm above the patella groove. The cut should end around 10 mm from the lateral cortical bone.



2. Perform the proximal 2nd cut by using the cutting guide (see page 14 on how to use the guide):

- Set the chosen correction angle on the cutting guide (ANC014-1 / ANC014-2).
- Insert the blade of the cutting guide into the first cut.
- Perform the second osteotomy in the cutting slot with an oscillating saw.

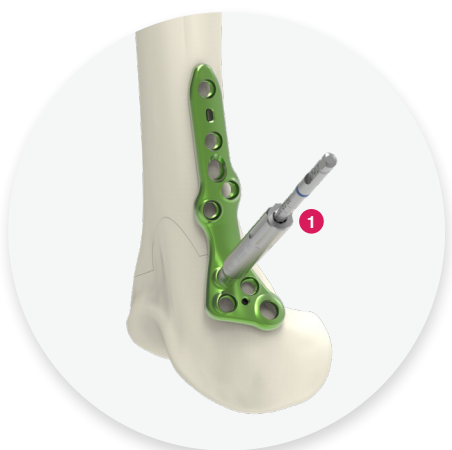
Remove the bone wedge and make sure that every residual bone fragment has been removed from the osteotomy.

Then, carefully close the osteotomy by applying continuous pressure to the lateral lower limb while stabilizing the knee joint region.



3. Position the plate onto the medial surface of the distal femur. The polyaxial hole must be positioned around 1 cm above the insertion of the medial collateral ligament.

It is important to ensure that the bridge area of the plate is located onto the osteotomy site and that the distal screws do not penetrate the joint.



4. Lock the first Ø4.0 mm drill guide (ANC998) into the hole situated below the osteotomy cut, drill using the Ø4.0 mm drill bit (ANC211). Determine the screw length directly on the drill (1), at the rear of the drill guide or with the length gauge (ANC210) (2). When using the length gauge (ANC210) in the epiphyseal part of the bone, please add 3 mm to the markings read.

N.B. to help lock the drill guide in the plate, use the hexagonal part of the screwdriver (ANC975).



5. Insert the Ø4.5 mm locking screw (ST4.5LxxD-ST) using the screwdriver (ANC975). Final tightening of the screws must be performed by hand.

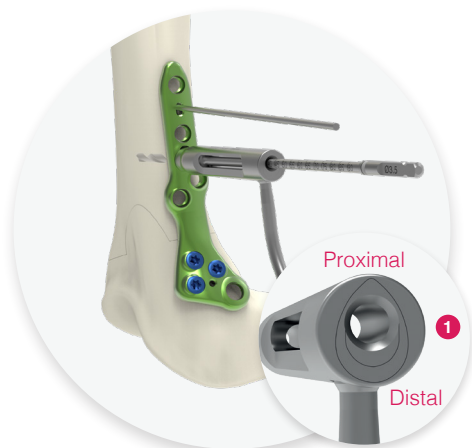
Repeat this procedure with the 2 other distal monoaxial holes.

N.B. To ease the insertion of the Ø4.5 mm locking screw, use the countersink (ANC120-US) to widen the first cortex previously drilled. If the insertion of the screw is difficult, remove the screw, countersink, and insert again the screw.



SURGICAL TECHNIQUE

MEDIAL CLOSING WEDGE DISTAL FEMORAL OSTEOTOMY PLATE (PAGE 2/2)



6. Insert a Ø2.2 mm pin (33.0222.200) into the **proximal part of the oblong hole for pin**. Drill into the **proximal part of the ramp oblong hole** using the dedicated drill guide (ANC1064) and the Ø3.5 mm drill bit (ANC1075). The orientation of the drill guide must be taken into account to allow compression (1).

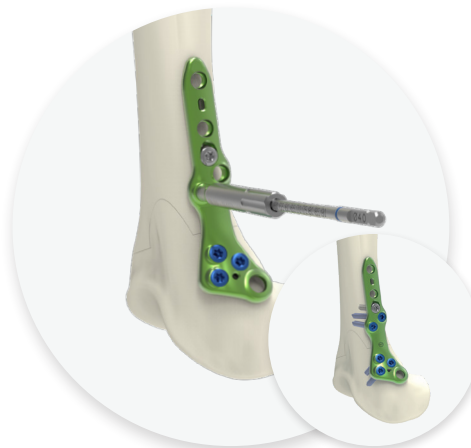
Determine the screw length directly on the drill at the rear of the drill guide or with the length gauge (ANC210).



Insert a Ø4.5 mm standard cortical screw (CT4.5LxxD-ST) and perform the compression using the screwdriver (ANC975).



Then remove the Ø2.2 mm pin.



7. Proceed similarly to step 4 for the insertion of the Ø4.5 mm locking screws (ST4.5LxxD-ST) into the 2 holes situated above the osteotomy cut.



8. Lock the Ø4.0 mm drill guide (ANC998) into the polyaxial hole. If necessary, adjust the drilling direction in order to avoid the intercondylar notch. Before drilling, a pin can be inserted through the reductor of the drill guide (ANC1009) (1).

Start drilling using the Ø4.0 mm drill bit (ANC211). Determine the screw length directly on the drill, at the rear of the drill guide or with the length gauge (ANC210). When using the length gauge (ANC210) in the epiphyseal part of the bone, please add 3 mm to the markings read.



Then, insert the Ø4.5 mm locking screw (ST4.5LxxD-ST) using the screwdriver (ANC975).



FINAL RESULT

Repeat the previous steps to insert the remaining Ø4.5 mm locking screws situated on the proximal part of the plate.

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