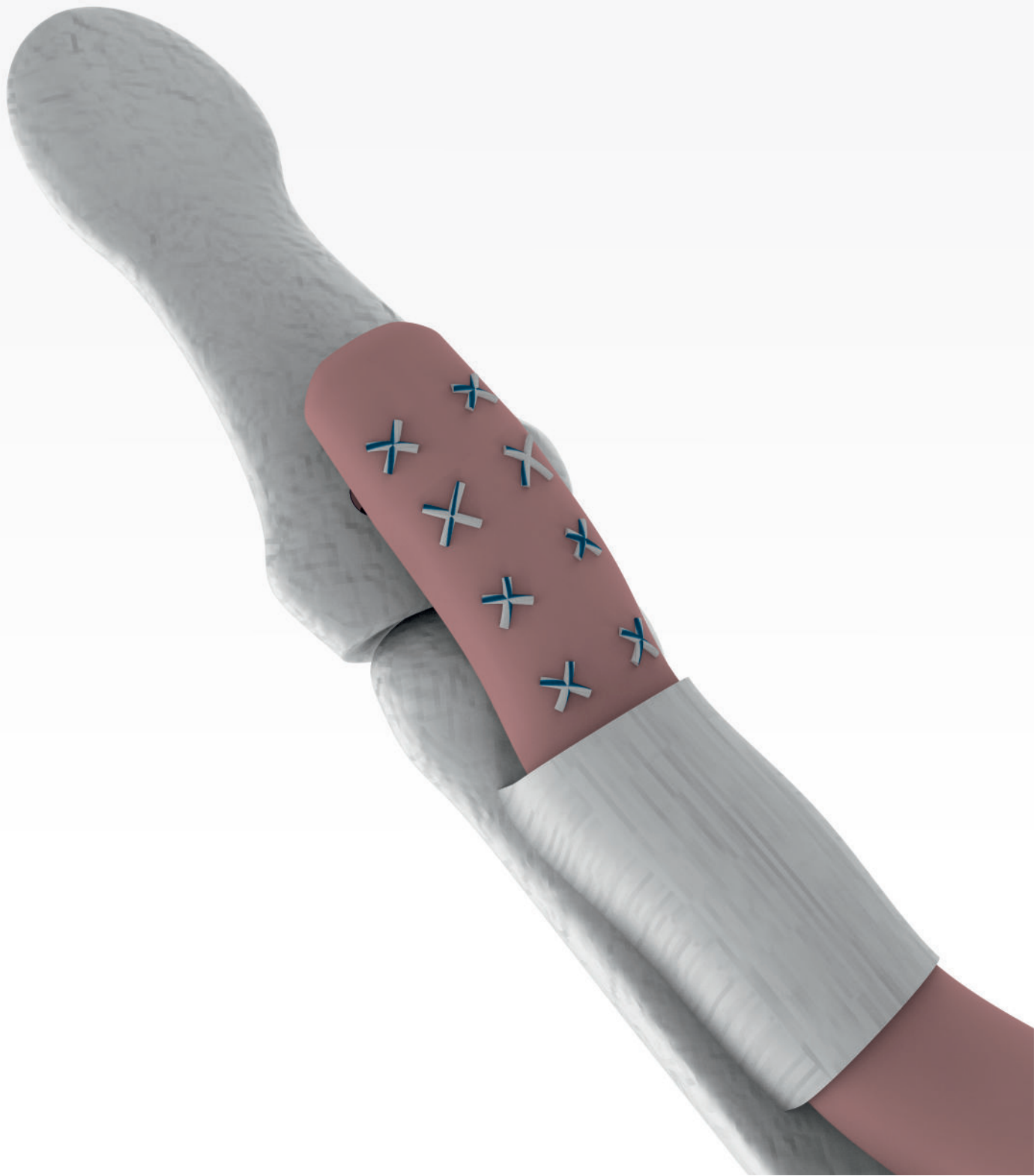


Surgical Technique

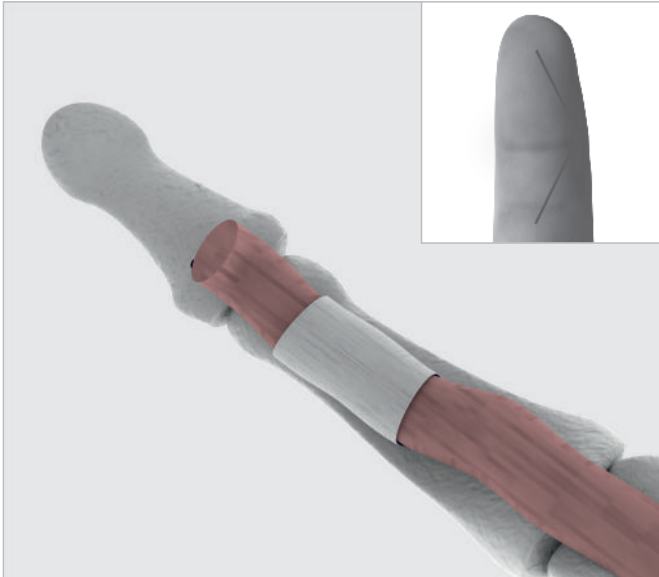
FDP Avulsion Repair using 2.0mm Titanium Screw-in Suture anchor



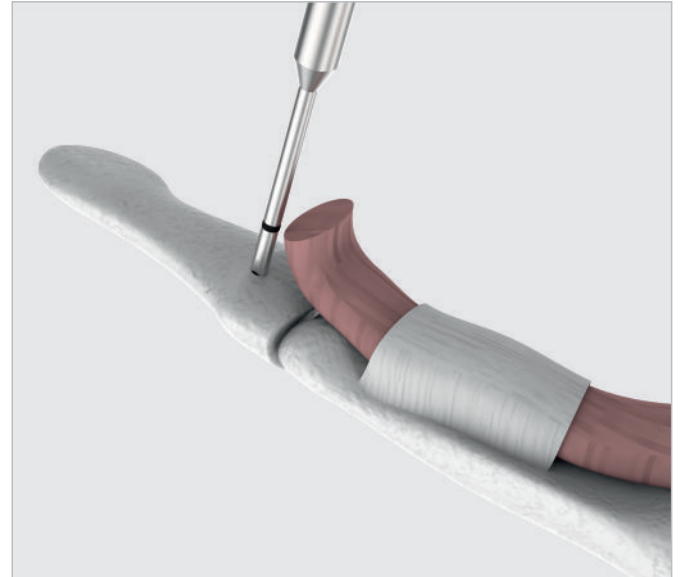
2.0mm Titanium Screw-in Suture Anchor



AUXILOCK® Titanium anchors are the screw-in anchors available in diameter of 2mm and 2.5mm with single loaded options. It is a self-tapping suture anchor mostly used in Hand and wrist. The anchor design incorporates a cortical thread to maximise pull-out strength in a cortical or hard bone. The anchor is designed for delivering its ultimate mechanical properties (pull-out strength, tensile strength, etc.) and ease-of-use. The drill guide and drill bit are provided in the instrument set for the accurate placement of the anchor. It in turn minimizes the anchor slippage or breakage during the surgery. The anchors are also available with needles.

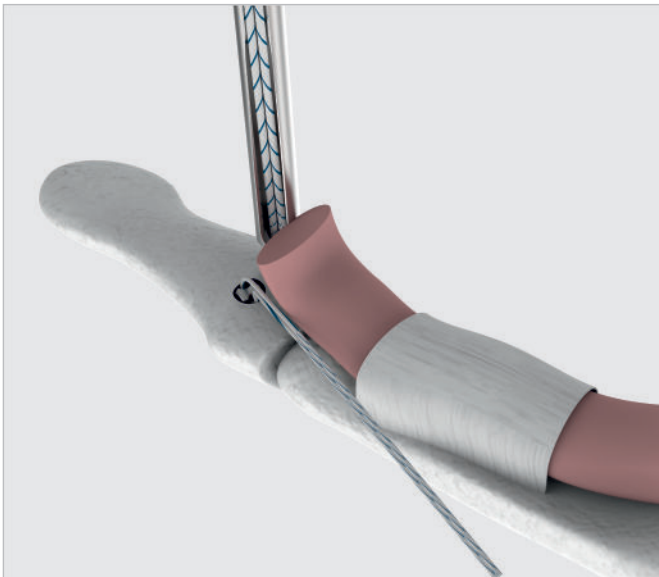


Perform the surgical approach to the injured finger. Locate the severed flexor digitorum profundus (FDP) tendon proximally. After finding the tendon, advance it distally through the pulley system while trying to preserve the A2 and A4 pulleys. Incise the stump of the FDP tendon longitudinally to expose the base of the distal phalanx. A portion of the distal attachment can be retained for later reinforcement after reattachment of the tendon back to the bone.

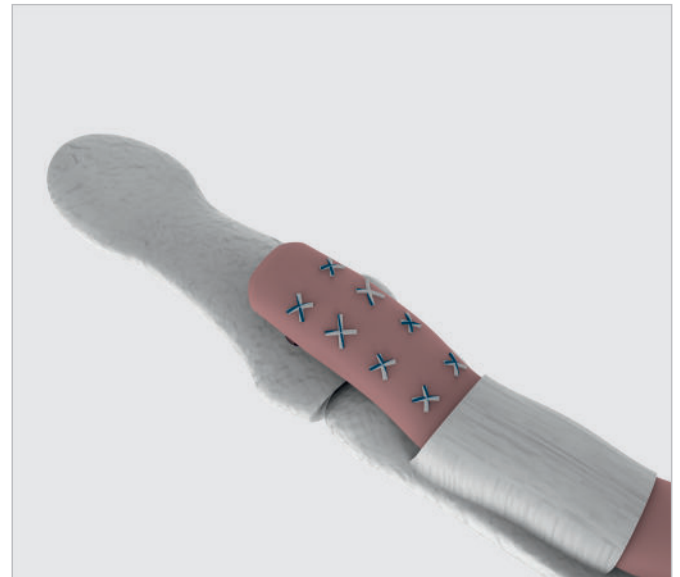


Drill with the appropriate soft- or hard-bone $\text{\O}1.2\text{mm}$ Drill Bit to the first laser line. Do this slightly radial and ulnar to the midline of center so that two anchors can be placed safely side-by-side in good bone. This should be done either at a parallel angle to the joint or at a slightly acute angle.

Note: Drilling at a slight angle may help avoid inadvertently violating the dorsal cortex. Confirm length and drill angle on mini C-arm if needed.









Place the 2.0mm Titanium screw-in anchors into the previously drilled holes in the distal phalanx.



The BioBraid suture is used to perform a modified Becker or alternative repair of preference, and the tendon is brought back to bone. You may supplement your repair by suturing the FDP remnant back over the top of your repair site using a BioBraid suture. Close the wound and splint per routine protocol.

Ordering Information

Code	Product Description	Suture/Tape Colour	Needle
6-005-16	AUXILOCK® 2.0mm Titanium Screw-In Suture Anchor With One #0 BioBraid: White/Blue		
6-005-11	AUXILOCK® 2.0mm Titanium Screw-In Suture Anchor With One #0 BioBraid: White/Blue, With Needles		
6-005-15	AUXILOCK® 2.5mm Titanium Screw-In Suture Anchor With One #1 BioBraid: White/Blue		
6-005-12	AUXILOCK® 2.5mm Titanium Screw-In Suture Anchor With One #1 BioBraid: White/Blue, With Needles: MO-6		

Recommended Instrumentation

Code	Product Description	Compatible Implants
7-139-01	Ø1.2mm X 100mm Drill Bit	6-005-11, 6-005-16
7-139-02	8 Point Slotted Drill Guide, Length 50mm	6-005-11, 6-005-12, 6-005-16, 6-005-15
7-139-66	Ø1.8mm X 100mm Drill Bit	6-005-15, 6-005-12

USA**Auxein Inc.**

1500 Nw 89th Court, Suite 107-108
Doral, Florida 33172
Tel: +1 305 395 6062
E Fax: +1 305 395 6262
Email: USoffice@auxein.com

MEXICO**Auxein México, S.A. de C.V.**

Tepic 139 int 801, Colonia Roma Sur,
Alcaldía Cuauhtémoc, CDMX,
México, C.P. 06760
Tel: +521 55 7261 0318
Email: info@auxein.mx

INDIA**Auxein Medical Pvt. Ltd.**

Plot No. 168-169-170, Phase-4,
Kundli Industrial Area,
HSIIDC, Sector-57, Sonapat - 131028, Haryana
Tel: +91 99106 43638 | Fax: +91 86077 70197
Email: info@auxein.com