

Integra™

Spin® 2.0 - Spin® 2.7

Break-off screws

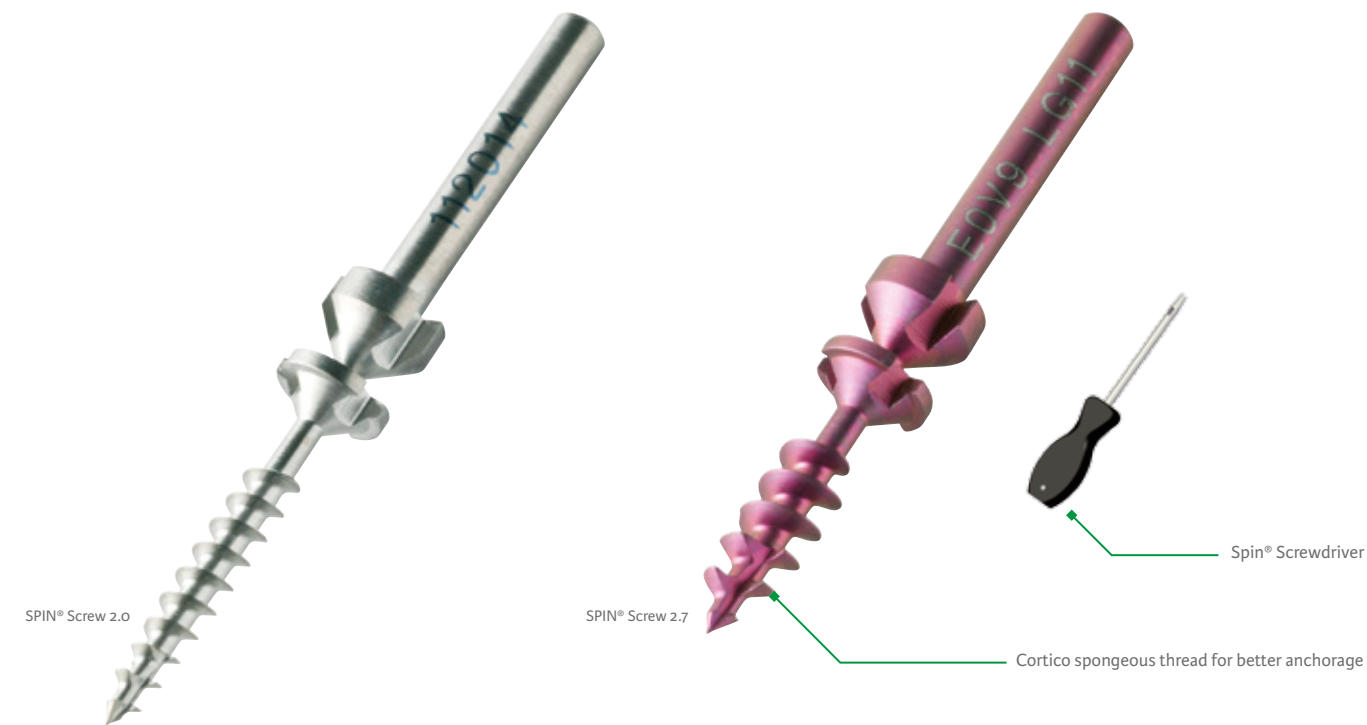
SURGICAL TECHNIQUE



INTEGRA™
LIMIT UNCERTAINTY

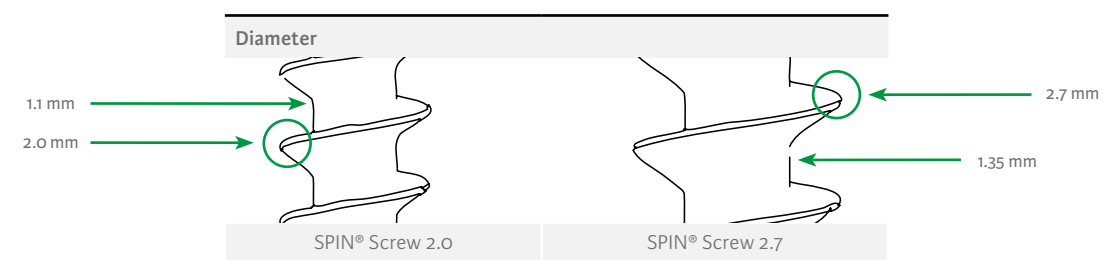
Notes

SPIN® 2.0 / SPIN® 2.7



Implants details

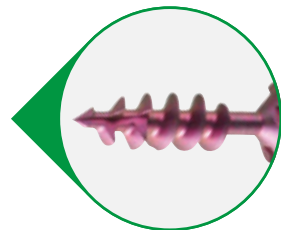
- Material: Titanium alloy, TiAl6VA, ISO 5832-3 ASTM F136.
- Sterile or non sterile implant.
- Lengths: 11, 12, 13, 14 mm.
- Lot n° and reference marking.
- SPIN® screw 2.7: cortico spongy thread ; recommended for porotic bones.



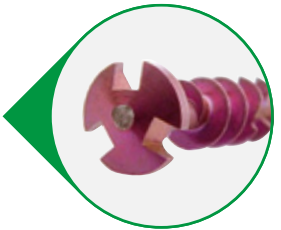
Indications

- For fixation of bone fractures or for bone reconstruction.
- Examples include:
 - Weil osteotomy.
 - Fixation of small bone fragments.
 - Mono-cortical fixation.
 - Osteotomies and fractures fixation in the foot and hand.

Self drilling, self tapping with starter tip.



Reduced soft tissue irritation with low profile head.



Power or screwdriver (3 head inclusions) implantation.



Non threaded part (lag) for optimal compression.





229 301
Spin® Screwdriver



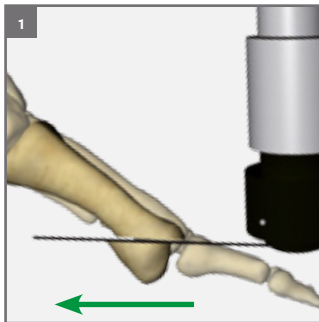
115 070(S)
K-wire
diam. 1.0 mm
L 70 mm

NEWDEAL as the manufacturer of this device, does not practice medicine and does not recommend this or any other surgical technique for use on a specific patient. The surgeon who performs any implant procedure is responsible for determining and using the appropriate techniques for implanting the device in each patient.

Surgical Technique

1 Weil osteotomy

Immediately after the Weil osteotomy, the metatarsal head will move proximally. The metatarsal formula will be controlled and/or restored. (fig. 1)



Caution

During screwing, the screwdriver or the power drill should be in the axis of the screw to avoid any lever effect which could lead to an inappropriate breakage of the screw.

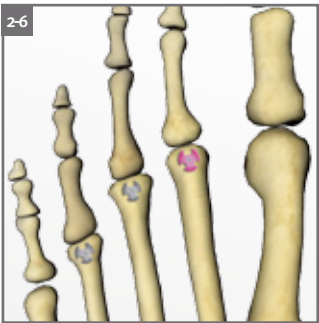
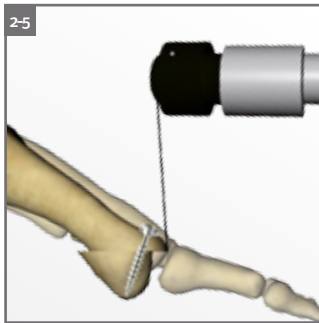
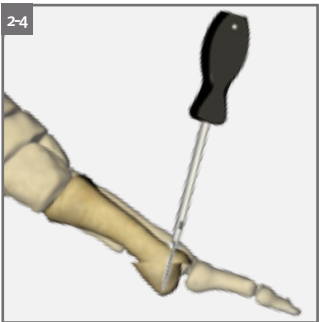
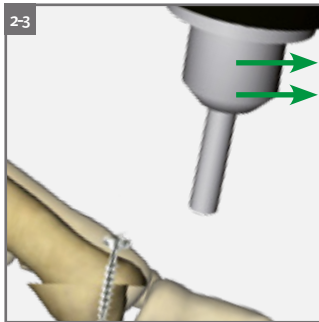
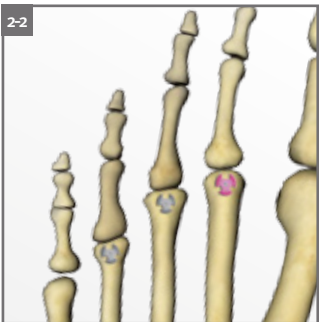
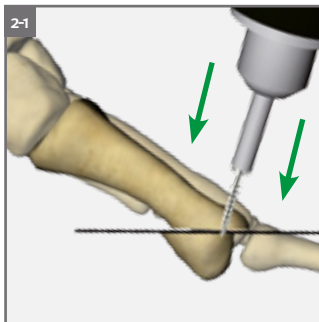
2 Fixation

Then, the SPIN® 2.0 or SPIN® 2.7 screw is introduced by a power drill (Jacobs Chuck) or screwdriver (229 301). (fig. 2-1) Although the SPIN® 2.0 or SPIN® 2.7 screw is self-drilling and self-tapping in most bone, it may be necessary to drill the cortex in certain cases with a k-wire diam 1.0mm (Length 70 mm: 115 070(S)), notably in extremely solid cortical bone. (fig. 2-2)

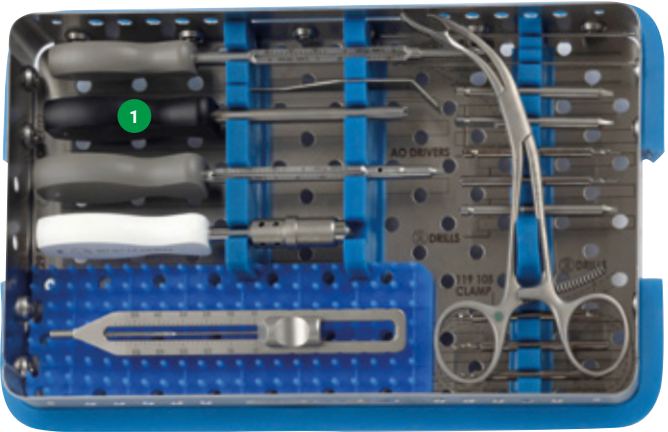
Sometimes (osteoporotic bone), it is necessary to initiate the snap off effect by moving forward the power drill or screwdriver. (fig.2-3)

When the head of the SPIN® screw gets into contact with the dorsal cortex, the holding device snaps off. If necessary, screw setting can be finalised by handling specific screwdriver (229 301). (fig.2-4)

Once the osteotomy is stabilised, the peak is removed handling the saw or the bonecutter. (fig. 2-5 and 2-6)

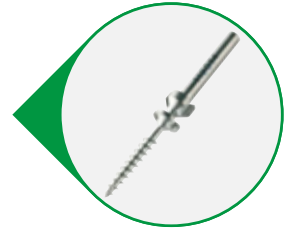


X ray - Weil osteotomy



SPIN® 2.0: Break off screw

Reference	Description
112 011(S)	Dia 2.0 - Length 11 mm
112 012(S)	Dia 2.0 - Length 12 mm
112 013(S)	Dia 2.0 - Length 13 mm
112 014(S)	Dia 2.0 - Length 14 mm

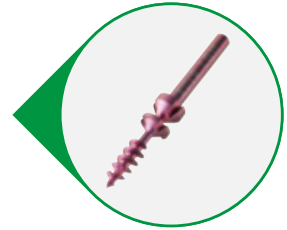


Associated instruments

#	Reference	Description
1	229 301	Spin screwdriver
	115 070(S)	K-wire dia 1.0 - length 70 mm
	229 951	Screws container which includes:
	229 961	Base
	229 970	Lid
	229971	Mat

SPIN® 2.7: Break off screw

Reference	Description
112 111(S)	Dia 2.7 - Length 11 mm
112 112(S)	Dia 2.7 - Length 12 mm
112 113(S)	Dia 2.7 - Length 13 mm
112 114(S)	Dia 2.7 - Length 14 mm



*(s) : delivered sterile and non sterile

Integra

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