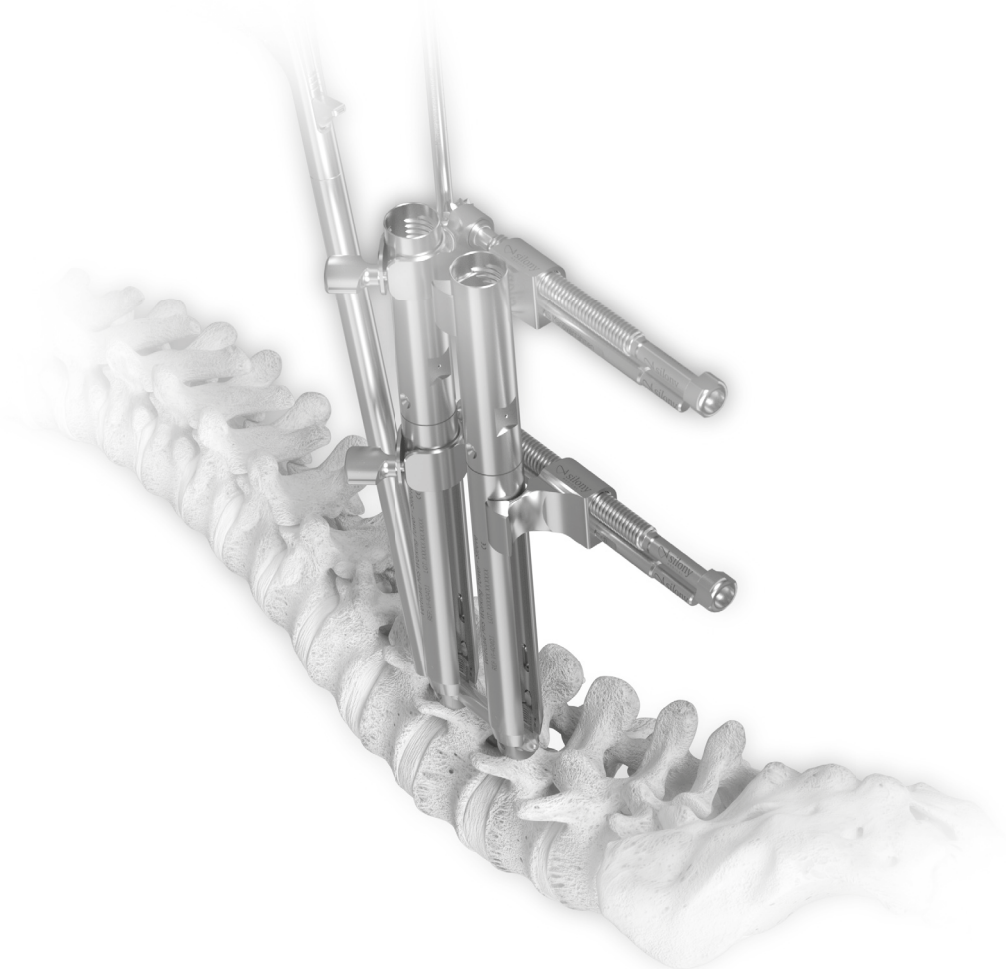


VERTICALE[®] MIS SCREW ROD SYSTEM

ADDITIONAL PRODUCT INFORMATION FOR VERTICALE MIS
INSTRUMENTATION GUIDE D30049



MADE IN GERMANY

Position and approach

The patient is positioned in the prone position, as is common for the posterior approach. Corresponding bearing frames or padding underneath the pelvis and thorax can be used for this purpose. The VERTICALE MIS System supports both percutaneous and paraspinous access. It is the responsibility of the attending surgeon to select the approach in accordance with experience and preference. Using an image intensifier for verification, the pedicles are localized and the position of the incision determined on the skin. The required incisions of the skin and fasciae are carried out in accordance with the selected approach. Blunt dissection of the soft tissue is then carried out in order to establish initial access to the pedicle.

Localization of the pedicle

VI-1060
Guide Wire Diamond Tip



VI-4020
VERTICALE MIS Dilator Guide
Wire



A Jamshidi needle is inserted through the incision and under control of an image intensifier the pedicle entry point is identified by aligning the Jamshidi needle with the anatomy of the pedicle.

Once the cortex has been drilled, a guidewire can be placed into the Jamshidi needle and guided through the pedicle while using an image intensifier for verification. Make sure that the Jamshidi needle remains in position.

After that, remove the Jamshidi needle and the VERTICALE MIS dilating sleeves can be placed in order starting with VI-4020 MIS dilatation sleeve guidewire (Fig. 1).

* Additional guide wires can be found in D30049.b.EN.



Fig. 1 Dilation with VI-4020 VERTICALE MIS Dilator Guide Wire

Note: It is very important to ensure that the inserted guide wires remain in position throughout the entire instrumentation. This should be monitored using an image intensifier for verification in order to prevent perforation of the anterior wall of the vertebral body and injury to the vessels in front.

Dilation of the Incision

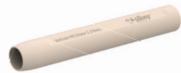
VI-4020
VERTICALE MIS Dilator Guide
Wire



VI-4022
VERTICALE MIS Dilator 2
(13 mm)



VI-4023
VERTICALE MIS Dilator 3
(17 mm)



VI-4024
VERTICALE MIS Dilator 4
(20 mm)



To ensure that the inserted guide wires remain in position, the dilators are inserted while using an image intensifier for verification. Once the incision has been fully dilated, the inner dilators are removed by pulling the first dilator (Fig. 3). In doing so, ensure that the guide wire remains in its position. The external VERTICALE MIS Dilator 4 (20 mm) should remain in position. It provides protection for the surrounding soft tissue during the subsequent instrumentation steps.



Fig. 2 Dilation from 9mm to 20mm



Fig. 3 Removal of the inner MIS dilators: pulling dilator 1 automatically removes dilators 1-3.

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