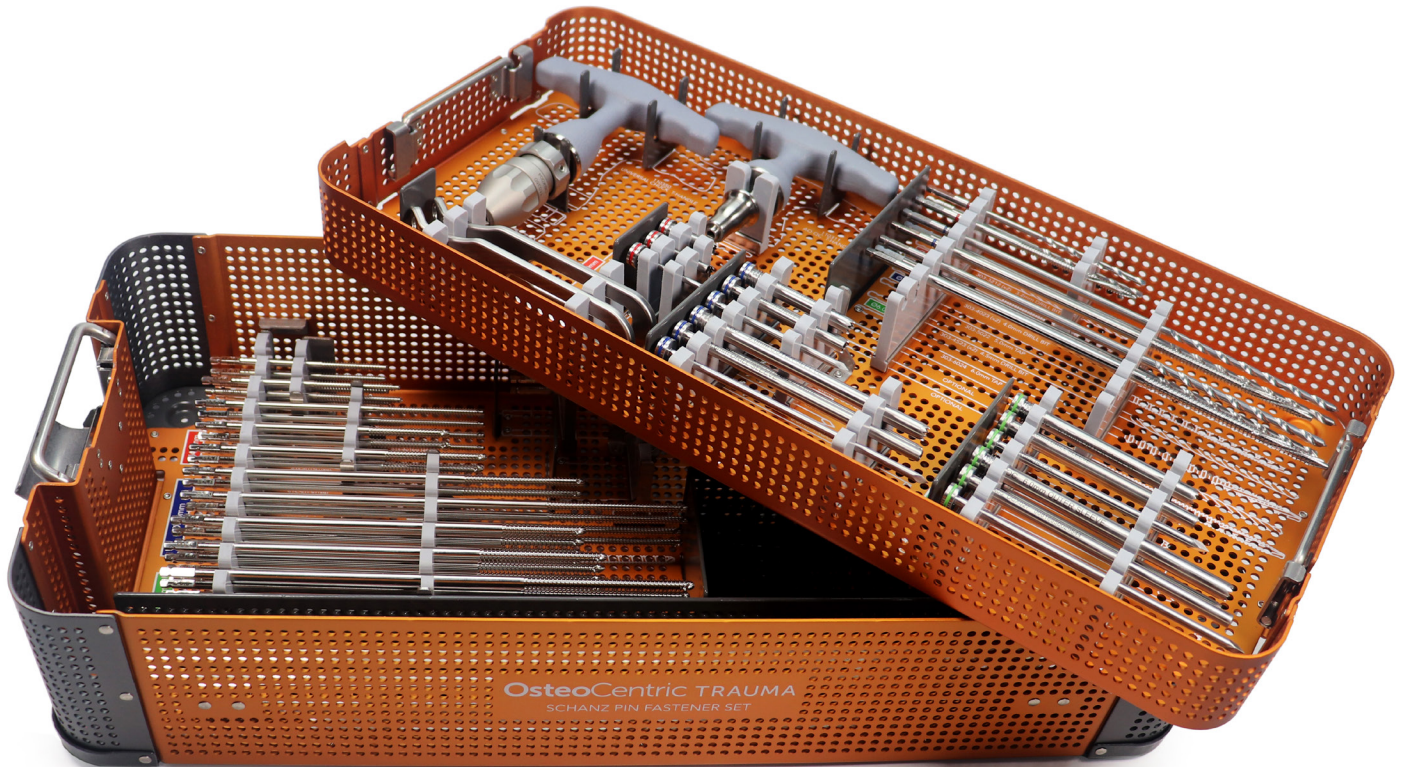


OsteoCentric Trauma

Schanz Pin Fastener System

Surgical Technique

Non-Sterile | Prescription Use Only | Do Not Reuse

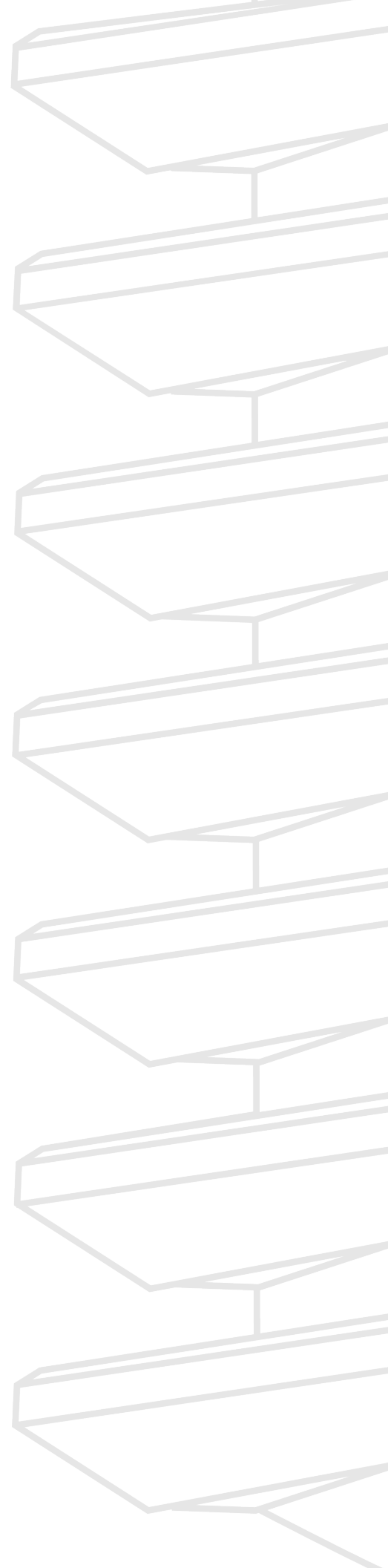


OsteoCentric
TECHNOLOGIES

OsteoCentric Trauma Schanz Pin Fasteners

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Description

The OsteoCentric Schanz Pin Fastener System consists of implants in a variety of lengths and diameters to accommodate different anatomic sizes of patients and associated instrumentation. The devices are provided non-sterile. All implantable devices are manufactured from Stainless Steel per ASTM F138.

Indications for use:

The OsteoCentric Schanz Pin Fastener System is intended for use in external fixation for fracture fixation (open and closed), pseudoarthrosis or non-union of long bones, limb lengthening by epiphyseal or metaphyseal distraction, correction of bony or soft tissue deformity, correction of segmental bony or soft tissue defects, and joint arthrodesis.

Contraindications:

The physician's education, training, and professional judgment are necessary to determine the appropriate treatment protocol and patient selection. Contraindications may be relative to each patient, and clinicians should always consider all risks and possible reactions when considering the proper treatment protocol. Specific contraindications include:

- Active or latent infection
- Material Sensitivity – If suspected, tests should be performed prior to implantation
- Insufficient quantity or quality of bone/soft tissue
- Sepsis
- Patients who are unwilling or incapable of following postoperative care instructions
- Spinal fixation – this device is not intended for screw attachment or fixation to the posterior elements (pedicles) of the cervical, thoracic, or lumbar spine.

MRI Information:

OsteoCentric Schanz Pin Fasteners are composed of similar materials and offered in similar diameters/lengths as pins found in many common external fixation systems. OsteoCentric Schanz Pin Fasteners have not been evaluated in an MR environment as part of a complete external fixation construct.




Schanz Pin Fastener Insertion Technique

1. Triple Sleeve Assembly & Placement

- Select appropriate size & length of Outer Sleeve, Drill Sleeve, & Trocar (Table 1). Thread the Outer Sleeve into the Sleeve Handle, then insert the Drill Sleeve into the Outer Sleeve and the Trocar into the Drill Sleeve.
- Push the Trocar head to guide the triple sleeve through the incision until it contacts bone at the desired location.
- Remove the Trocar.
- **Note: Outer Sleeves, Drill Sleeves, Trocars, Drill Bits, & Taps are color coded by pin diameter – always use the appropriately sized instruments for Schanz Pin Fastener insertion.**



Table 1: Triple Sleeves for Schanz Pin Fasteners

Fastener Ø	4.0mm	5.0mm	6.0mm
Length	30mm	60 & 120mm	90 & 120mm
Color			

2. Drilling

- Attach the appropriate Drill Bit (Table 2) to power, then insert through desired sleeve, and drill to appropriate depth.
- Remove the Drill Bit and Drill Sleeve.

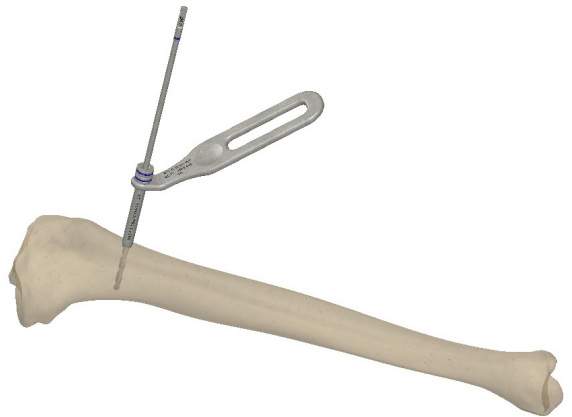
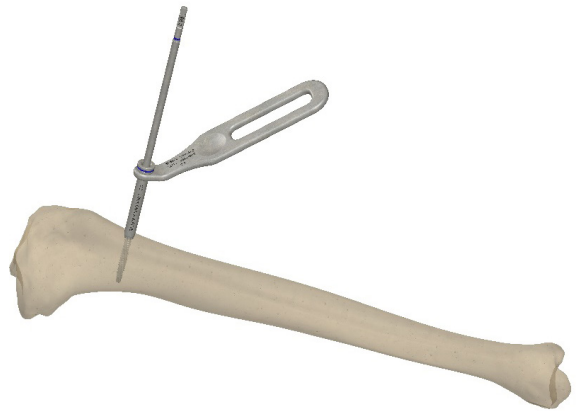


Table 2: Drill Bit diameters for Schanz Pin Fasteners

Fastener Ø	4.0mm	5.0mm	6.0mm
Drill Bit Ø	3.2mm	4.0mm	4.5mm

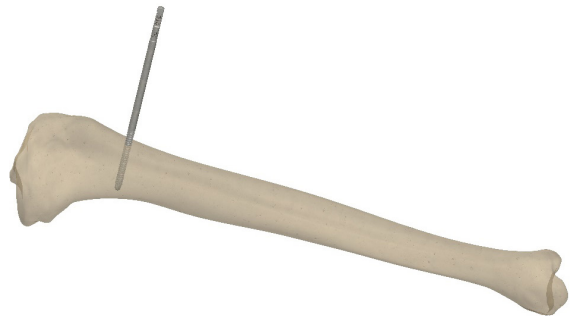
3. Tapping (optional)

- OsteoCentric Schanz Pin Fasteners are self-tapping. If tapping is desired, the corresponding tap size should be used.
- Attach the tap to the AO Quick Connect T Handle or power, then insert through the Outer Sleeve to protect soft tissue during tapping.
- **Note: If dense, hard bone is encountered tapping is recommended**



4. Schanz Pin Fastener Insertion

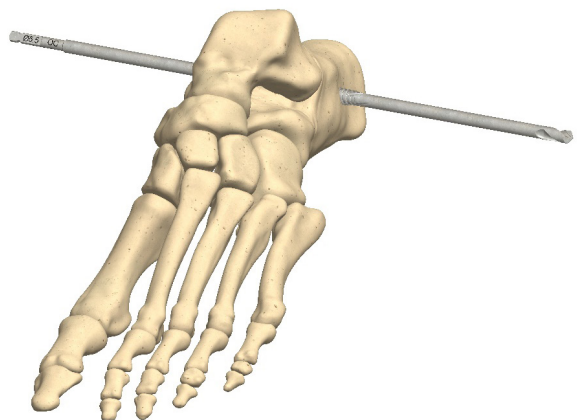
- Once the appropriate length is selected, connect the Schanz Pin Fastener to power or the AO QC T-Handle and advance to the desired depth.
- Disconnect the AO QC T Handle or power drill, then remove the Outer Sleeve & Sleeve Handle.



Centrally Threaded Pin Insertion Technique

1. Centrally Threaded Pin Insertion

- Centrally Threaded Pins are self-drilling and self-tapping.
- **Note: Centrally Threaded Pins are not designed to fit within any of the triple sleeves.**
- To insert, connect the Centrally Threaded Pin to a power drill. The AO QC T Handle can be used to advance the pin to the desired location.
- **Note: If desired, the 4.5mm Drill Bit may be used to drill the near cortex before Centrally Threaded Pin insertion.**



Implants

All implant components are manufactured from Stainless Steel per ASTM F138.

4.0mm Schanz Pin Fastener, self-tapping

Part Number	Total Length (mm)	Thread Length (mm)
303-40095	95mm	35mm
303-40105	105mm	45mm
303-40150	150mm	55mm



5.0mm Schanz Pin Fastener, self-tapping

Part Number	Total Length (mm)	Thread Length (mm)
303-50130	130mm	40mm
303-50150	150mm	50mm
303-50200	200mm	60mm
303-50250	250mm	70mm



6.0mm Schanz Pin Fastener, self-tapping

Part Number	Total Length (mm)	Thread Length (mm)
303-60200	200mm	40mm
303-60210	210mm	60mm
303-60250	250mm	80mm



Centrally Threaded Pins, Self-drilling

Part #	Pin/Thread Diameter	Total Length (mm)	Thread Length (mm)
303-50275	5/6mm	275mm	60mm
303-55275	5.5/7mm	275mm	60mm



Instrument List

Part Number	Description
110311	AO Quick Connect T Handle
110350	Universal Chuck T Handle
303-0001	Sleeve Handle
303-3212	OsteoGuard 3.2 X 125mm Drill Bit
303-4001	4.0 X 30mm Trocar
303-4002	4.0 X 30mm Drill Sleeve
303-4003	4.0 X 30mm Outer Sleeve
303-4012	4.0 X 125mm Tap
303-4023	OsteoGuard 4.0 X 235mm Drill Bit
303-4523	OsteoGuard 4.5 X 235mm Drill Bit
303-5001	5.0 X 60mm Trocar
303-5002	5.0 X 60mm Drill Sleeve
303-5003	5.0 X 60mm Outer Sleeve
303-5004	5.0 X 120mm Trocar
303-5005	5.0 X 120mm Drill Sleeve
303-5006	5.0 X 120mm Outer Sleeve
303-5022	5.0 X 225mm Tap
303-6001	6.0 X 90mm Trocar
303-6002	6.0 X 90mm Drill Sleeve
303-6003	6.0 X 90mm Outer Sleeve
303-6004	6.0 X 120mm Trocar
303-6005	6.0 X 120mm Drill Sleeve
303-6006	6.0 X 120mm Outer Sleeve
303-6024	6.0 X 240mm Tap

Note

This document is intended exclusively for physicians and is not intended for laypersons. Information on the products and procedures contained in this document is of a general nature and does not represent and does not constitute medical advice or recommendations. Because this information does not purport to constitute any diagnostic or therapeutic statement with regard to any individual medical case, each patient must be examined and advised individually, and this document does not replace the need for such examination and/or advice.

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