Universal Straight & T Plates

Surgical Technique | TriMed ASET™ Foot Plating System
Site Preparation and Plate Positioning

- Prepare articular surfaces or reduce fracture/osteotomy segments in an anatomic position using K-wires or bone reduction clamps.

- Secure the plate temporarily to the bone using K-wires, olive wires or plate tacks.

Plate Application on Proximal Fragment/Bone

- Prepare holes for screws in proximal fragment/bone. For locking screws, utilize standard locking or variable angle locking guides. For non-locking cortical screws, use standard drill guides.\(^1\)

- Place and tighten screws in proximal fragment/bone.

\(^1\) Warning: Irrigation is recommended during drilling. 
Warning: A screw placement at an angle exceeding 15° for locking and non-locking screws is **NOT** recommended.

Plate Application on Distal Fragment/Bone

- Position oblong drill guide in the slotted hole with arrows pointing toward the joint/fracture/osteotomy site to prepare a hole for a bicortical non-locking screw.

- Using the guide, drill a hole and measure. Place and tighten a **2.7mm** or **3.5mm** non-locking screw.\(^2\)

- Loosen the non-locking screw by a 1/4 of a turn.

\(^2\) Warning: Do not use a 4.0mm non-locking screw in a slotted hole.
Surgeon Controlled Compression

- Engage the driver tip of the Expander/Compression Tool in the socket of the screw and the hook into the adjacent hole away from the joint/fracture/osteotomy sites.

- Gently squeeze the tool to apply the desired compression with one hand. Control the driver’s position in the screw head socket with the other hand to avoid slippage of the driver from the screw head socket.

- Tighten the non-locking screw.

*Note:* Maximum screw travel in the slotted hole is 2.5mm.

Final Fixation

- Place two distal screws for final fixation.

- Surgical closure should be performed per the surgeon’s usual technique.

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**TIP - DISTRACTION**

- Insert the hook into the hole close to the fracture line
- Squeeze to distract
- Tighten the screw and finalize fixation

Indications, contraindications, warnings and precautions related to TriMed ASET Foot Plating System reference IFU, LC-73-9004-001.
All implants made from surgical grade titanium

## Screw Table

<table>
<thead>
<tr>
<th>Length</th>
<th>Drill</th>
<th>Guide</th>
<th>Driver</th>
</tr>
</thead>
<tbody>
<tr>
<td>08-40mm *</td>
<td>2.0mm</td>
<td>GUIDEPS-2.0/2.7</td>
<td>T 15</td>
</tr>
<tr>
<td>08-40mm *</td>
<td>2.0mm</td>
<td>GUIDELFPS-2.0</td>
<td>T 15</td>
</tr>
<tr>
<td>08-50mm *</td>
<td>2.3mm</td>
<td>GUIDELFPS-2.3/3.5</td>
<td>T 15</td>
</tr>
<tr>
<td>08-50mm *</td>
<td>2.3mm</td>
<td>GUIDELFPS-2.3</td>
<td>T 15</td>
</tr>
<tr>
<td>08-50mm *</td>
<td>2.7mm</td>
<td>GUIDELFPS-2.7/4.0</td>
<td>T 15</td>
</tr>
<tr>
<td>08-50mm *</td>
<td>2.7mm</td>
<td>GUIDELFPS-2.7</td>
<td>T 15</td>
</tr>
</tbody>
</table>

* 2mm increments  ** 5mm increments

## Universal Straight Plate
- SP-2
- SP-3
- SP-4
- SP-6

## T Plate
- TP-5
- TP-6

## Expander/ Compression Tool
- DVTX-15/180 AO
- XPANDRT15
- HNDL-QUICK

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*The technique presented is one suggested surgical technique. The decision to use a specific implant and the surgical technique must be based on sound medical judgment by the surgeon that takes into consideration factors such as the circumstances and configuration of the injury.*

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