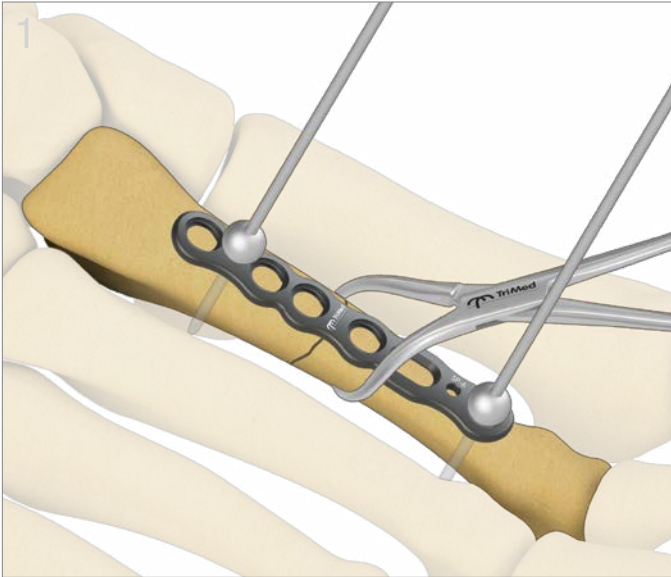


Universal Straight & T Plates

ASET™ Foot Plating System

SURGICAL TECHNIQUE





Site Preparation and Plate Positioning

- Prepare articular surfaces or reduce fracture/osteotomy segments in an anatomical position using K-wires or bone reduction clamps.
- Secure the plate temporarily to the bone using K-wires, olive wires or plate tacks.

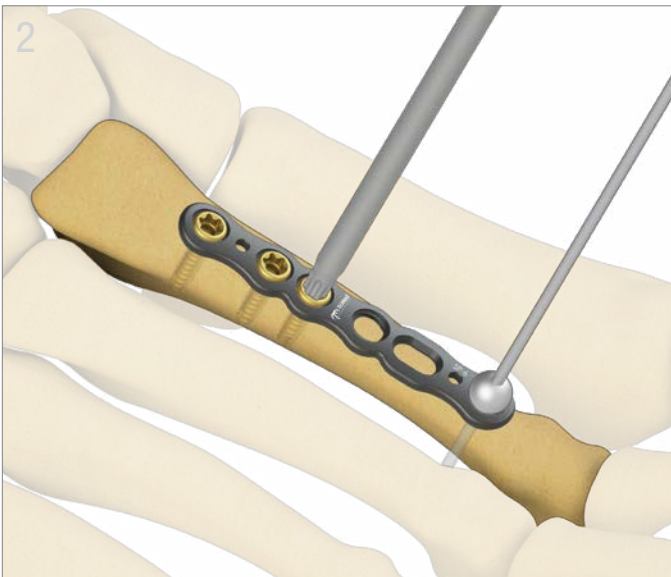


Plate Application on Proximal Fragment/Bone

- Prepare holes for screws in proximal fragment/bone.¹ For locking screws, utilize standard locking or variable angle locking guides. For non-locking cortical screws, use standard drill guides.²
- Place and tighten appropriately sized screws in proximal fragment/bone.

¹ **Warning:** Irrigation is recommended during drilling.

² **Warning:** A screw placement at an angle exceeding 15° for locking and non-locking screws is NOT recommended.

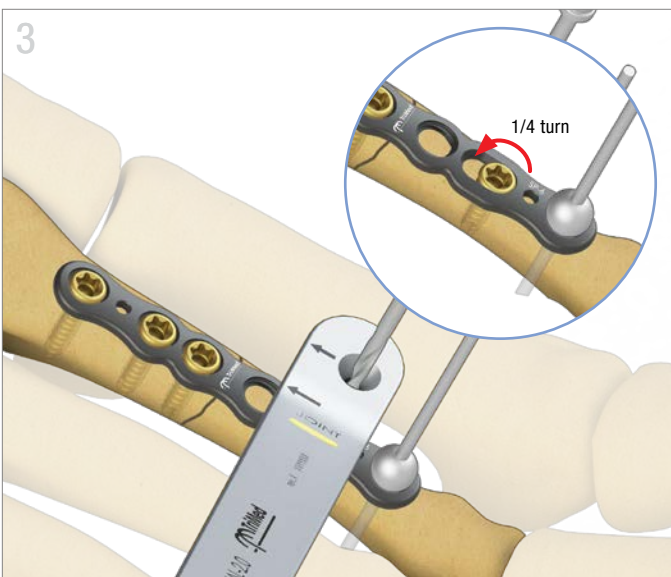
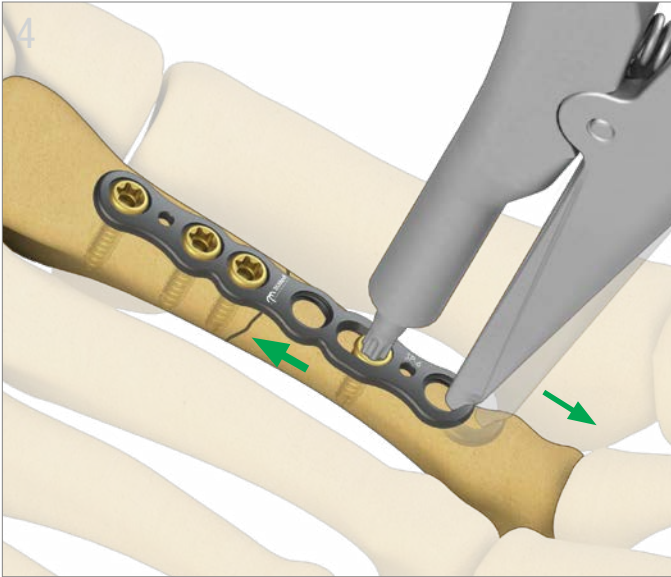


Plate Application on Distal Fragment / Bone

- Position oblong drill guide in the slotted hole with the laser marked arrows pointing toward the joint/fracture/osteotomy site.
- Drill a pilot hole for a bicortical **2.7mm or 3.5mm** non-locking screw.³
- Place and tighten an appropriately sized non-locking screw.
- Loosen the non-locking screw a **1/4** of a turn to allow the plate to slide underneath the screw head freely.
- Remove all K-Wires, olive wires, and plate tacks.

³ **Warning:** Do not use a 4.0mm non-locking screw in the slotted hole.

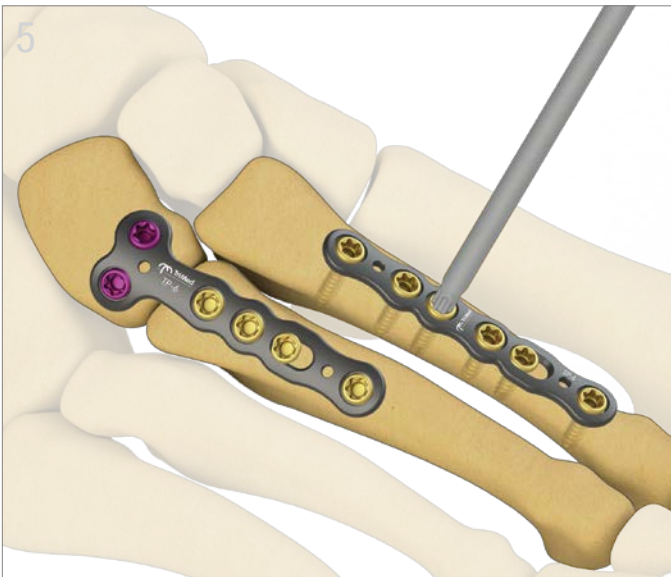


Surgeon-Controlled Compression

- Engage the driver tip of the Expander/Compression Tool with 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.⁴ 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.⁵

⁴ **Note:** Maximum screw travel in the slotted hole is 2.5mm.

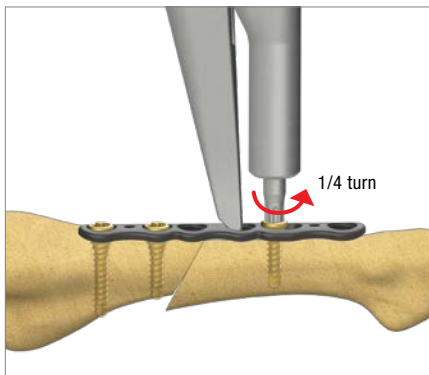
⁵ See **TIPS** for securing compression, if needed.



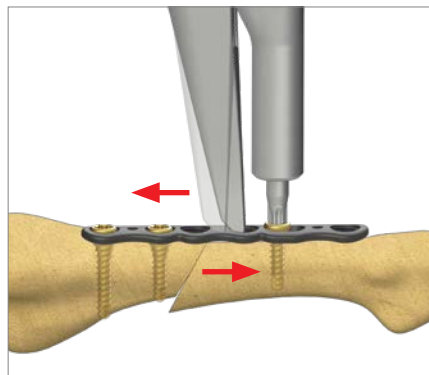
Final Fixation

- Insert remaining screws for final fixation.
- Surgical closure should be performed per the surgeon's preferred technique.

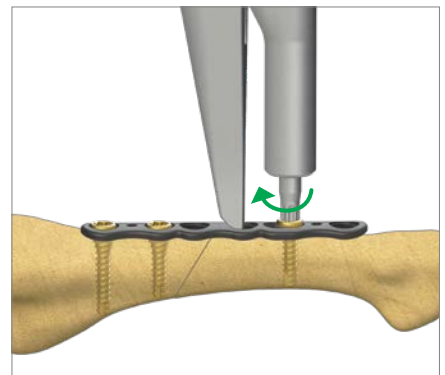
TIP 1 - DISTRACTION



Insert the hook into the hole close to the fracture line

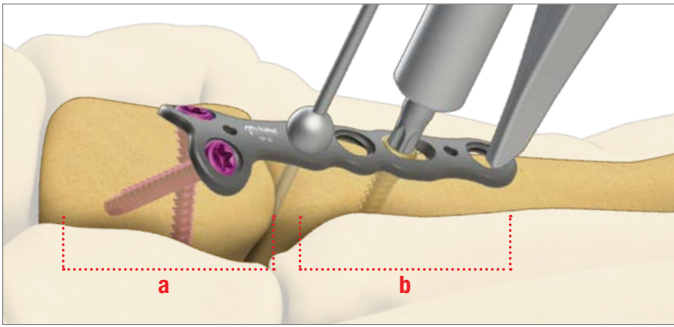


Squeeze to distract



Tighten the screw and finalize fixation

TIP 2



- a. For the T Plate's proximal end, use a variable angle locking guide to angle screws away from each other for screw lengths 10mm and above.

To Secure Compression Temporarily

- b. Prior to releasing the Expander/Compression Tool from the compressed position, insert a plate tack or an olive wire, if needed.

Screw Table						
	TRXC2.7-XX T	TRXV2.7-XX T	TRXC3.5-XX T	TRXV3.5-XX T	TRXC4.0-XX T	TRXV4.0-XX T
Length	08-40mm *	08-40mm *	08-50mm * 50-60mm **	08-50mm * 50-60mm **	08-50mm * 50-60mm **	08-50mm * 50-60mm **
Drill	● 2.0mm (2.7mm Overdrill)	● 2.0mm	● 2.3mm (3.5mm Overdrill)	● 2.3mm	● 2.7mm (4.0mm Overdrill)	● 2.7mm
Guide	GUIDEFPS-2.0/2.7	GUIDELFPS-2.0 GUIDEVAL-2.0	GUIDEFPS-2.3/3.5	GUIDELFPS-2.3 GUIDEVAL-2.3	GUIDEFPS-2.7/4.0	GUIDELFPS-2.7 GUIDEVAL-2.7
Driver	T15	T15	T15	T15	T15	T15

* 2mm increments ** 5mm increments

Universal Straight Plate

- SP-2
- SP-3
- SP-4
- SP-6

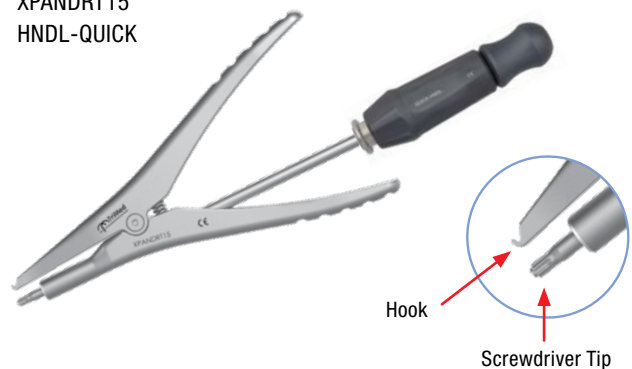


T Plate

- 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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For indications, contraindications, warnings and precautions related to TriMed ASET Foot Plating System reference IFU on trimedortho.com/ifu.

See trimedortho.com/patents for all patent information.