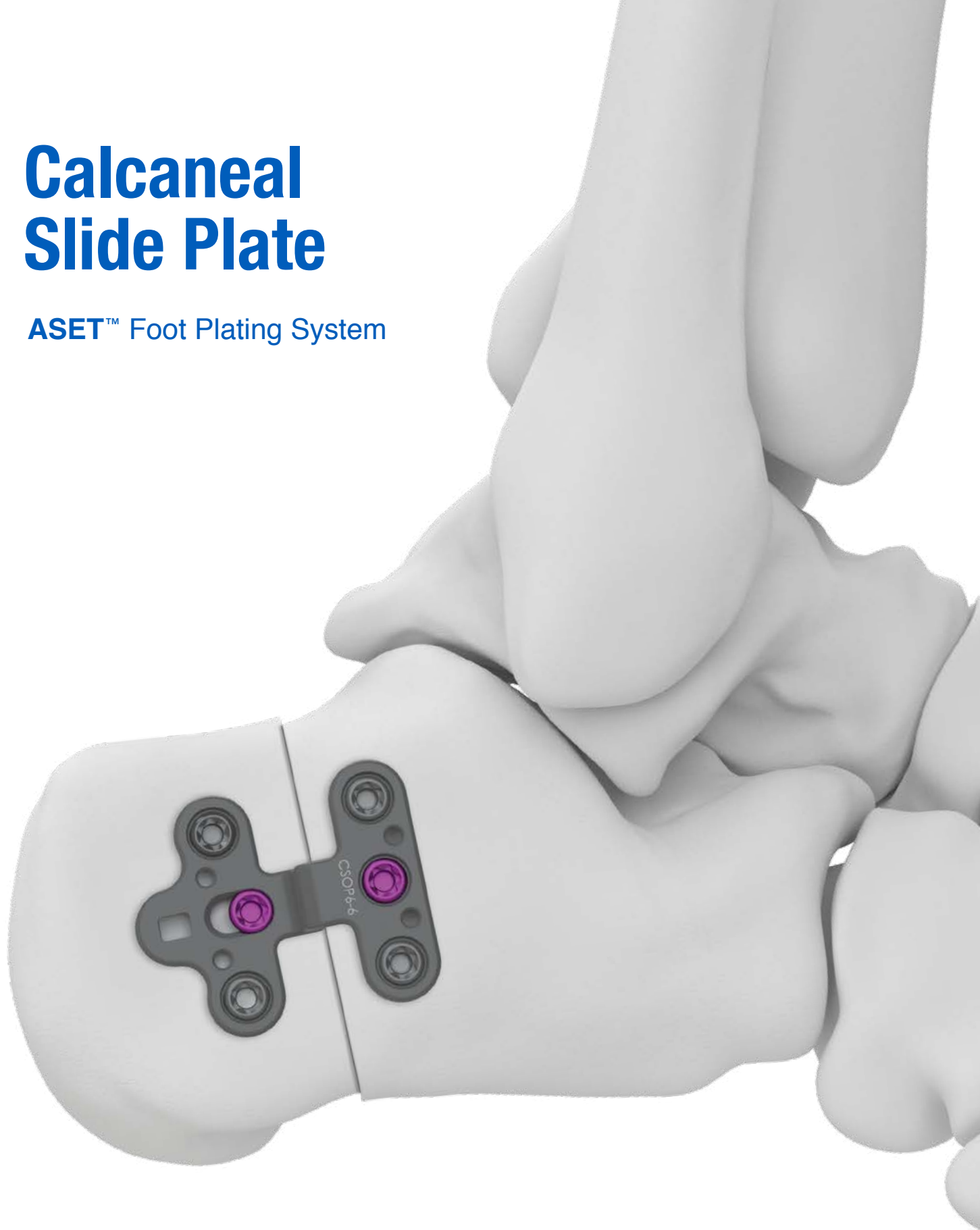


# Calcaneal Slide Plate

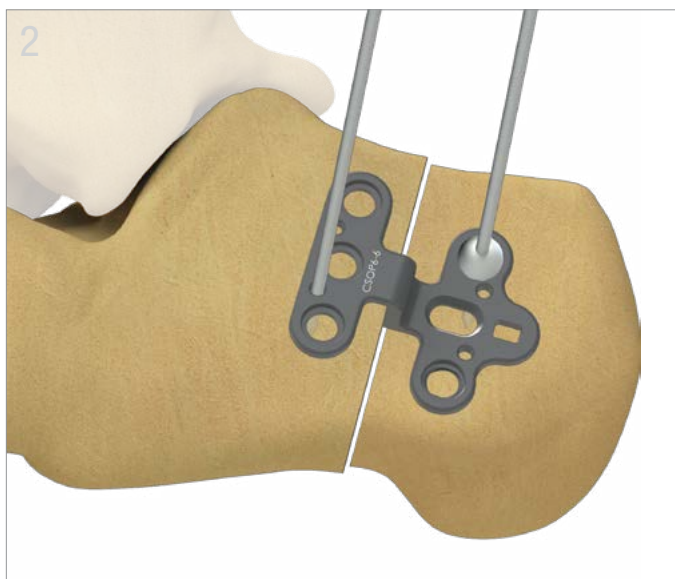
ASET™ Foot Plating System





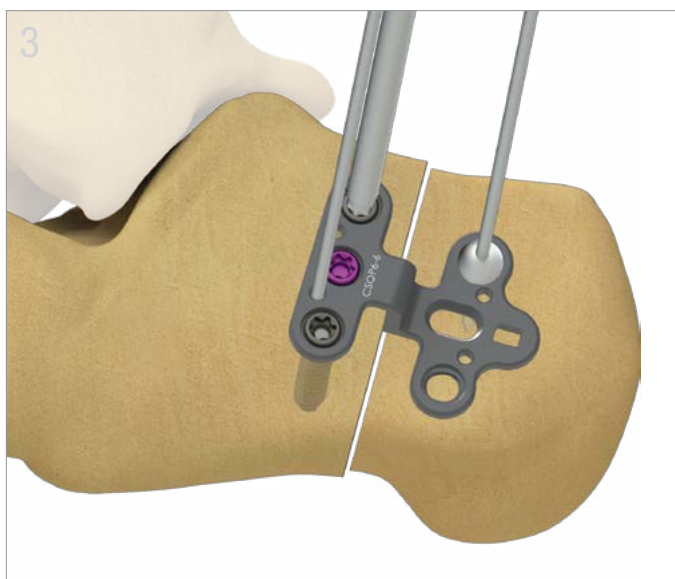
### Exposure and Osteotomy

- Make a lateral incision and dissect soft tissue to expose lateral wall of calcaneus.
- Carefully perform the osteotomy in the desired position. Take precautions to avoid injury to the neurovascular bundle medially.
- A large osteotome can be helpful to break the medial cortex completely.
- Use K-wires or bone clamps for temporary fixation of the osteotomy site.



### Plate Application

- Position an appropriately sized plate over the osteotomy site.
- Provisionally secure the plate to bone with K-wires, and/or olive wires.

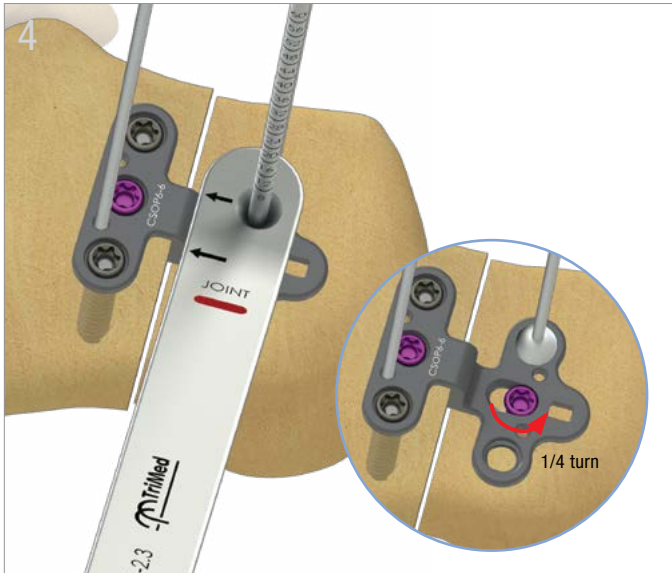


### Initial Fixation

- Prepare holes for distal screws into the body of calcaneus.<sup>1</sup> Secure plate distally with either locking screws (using standard and variable angle locking guide).<sup>2</sup>
- Place and tighten an appropriately sized screws.

<sup>1</sup> **Warning:** Irrigation is recommended during drilling.

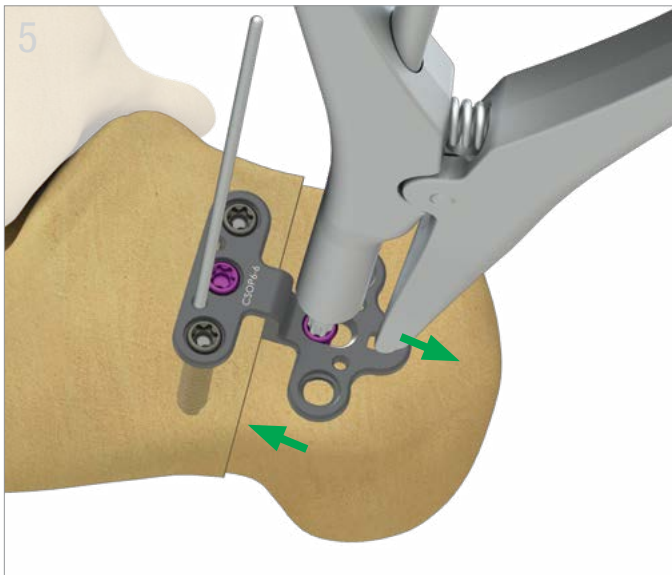
<sup>2</sup> **Warning:** A screw placement at an angle exceeding 15 degrees for locking and non-locking screws is not recommended.



### Fixation Calcaneal Tuberosity

- Position oblong drill guide in the slotted hole with the laser marked arrows pointing toward the osteotomy.
- Drill a pilot hole for a bicortical **2.7mm or 3.5mm** non-locking screw.<sup>3</sup>
- Place and tighten (**finger tight**) 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.
- Remove all K-Wires, olive wires, and plate tacks.

<sup>3</sup> **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 into the head of the screw in the slotted hole. Engage the hook of the other arm into the smaller slot at the end of the plate.
- Gently squeeze the tool to apply compression with one hand, taking care to maintain downward pressure on the driver tip with the other to avoid slippage.<sup>4</sup>
- Secure by tightening the non-locking screw.<sup>5</sup>

<sup>4</sup> **Note:** Maximum screw travel in the slotted hole is 2.5mm.

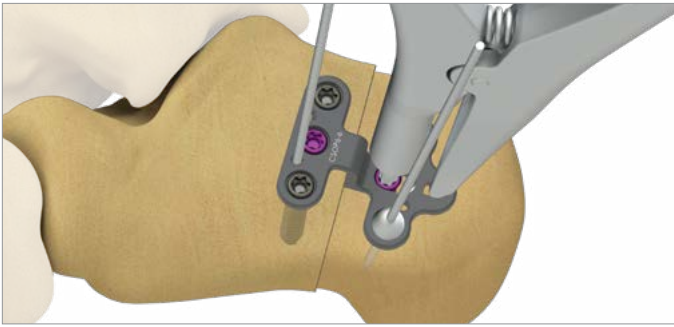
<sup>5</sup> See **TIPS** for securing compression, if needed.



### Final Fixation







- Insert additional locking and non locking screws for final fixation.

**TIPS**



**To Secure Compression Temporarily**

Prior to releasing the Expander/Compression Tool from the compressed position, insert a K-wire or 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
<b>Length</b>	08-40mm *	08-40mm *	08-50mm * 50-60mm **	08-50mm * 50-60mm **	08-50mm * 50-60mm **	08-50mm * 50-60mm **
<b>Drill</b>	● 2.0mm (2.7mm Overdrill)	● 2.0mm	● 2.3mm (3.5mm Overdrill)	● 2.3mm	● 2.7mm (4.0mm Overdrill)	● 2.7mm
<b>Guide</b>	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
<b>Driver</b>	T15	T15	T15	T15	T15	T15

\* 2mm increments    \*\* 5mm increments

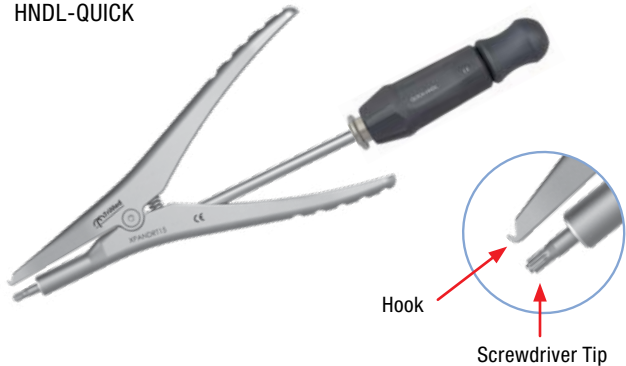
**Calc Slide Plate**

- CSOP6-6
- CSOP8-6
- CSOP10-6



**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](http://trimedortho.com/ifu).

See [trimedortho.com/patents](http://trimedortho.com/patents) for all patent information.