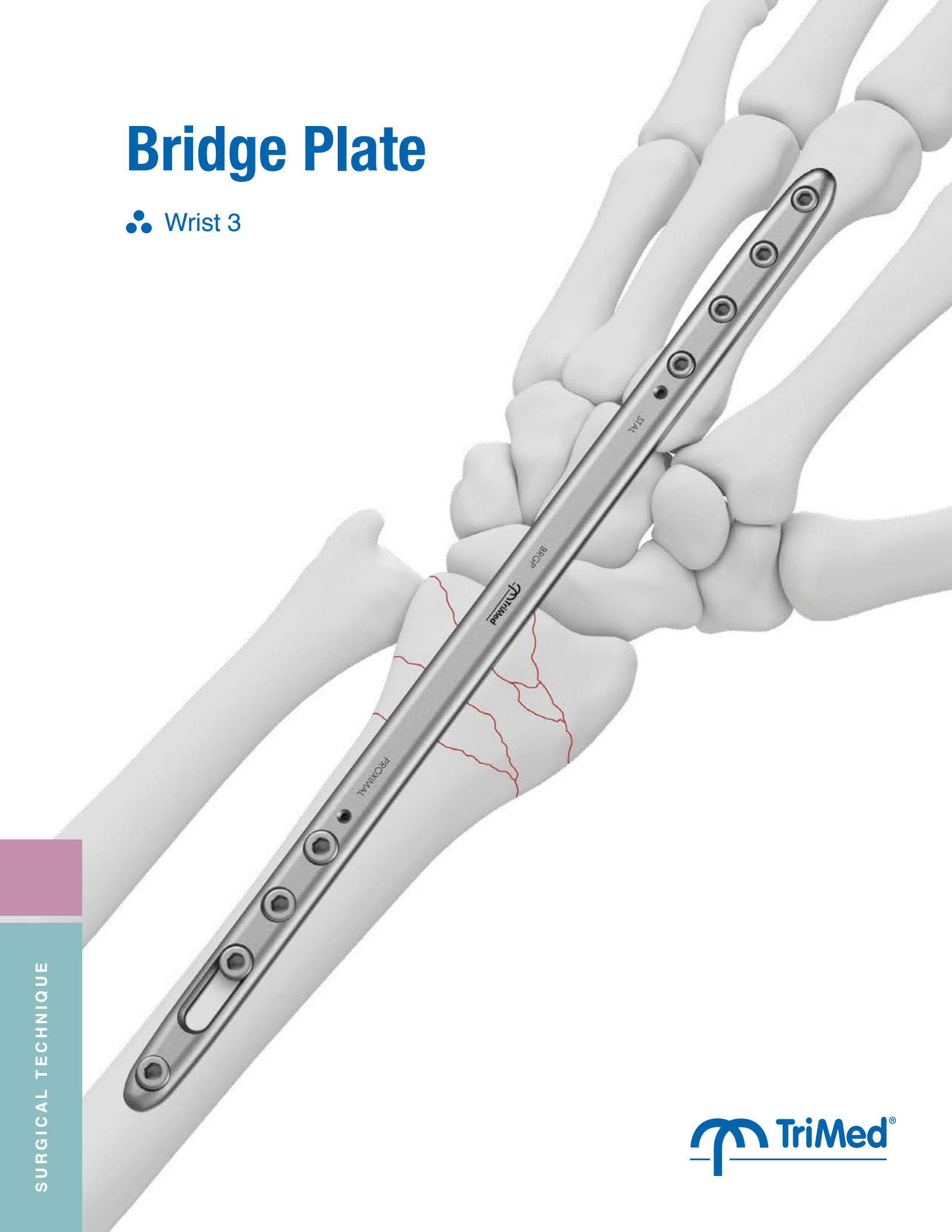
Bridge Plate

Wrist 3



SURGICAL TECHNIQUE

TriMed®

Exposure

- Reduce the fracture and restore alignment to the extent possible. Correct rotational alignment. For most cases, the thumb should align with the anterior surface of the elbow joint. Avoid fixing in pronation.
- Make an incision over the midshaft of either the 2nd or 3rd metacarpal. Retract the extensor tendon(s).
- Make a second incision just proximal to the APL/EPB tendons.
- Additional exposure is made as necessary (eg. to mobilize the EPL, reduce articular fragments, or create a graft portal).

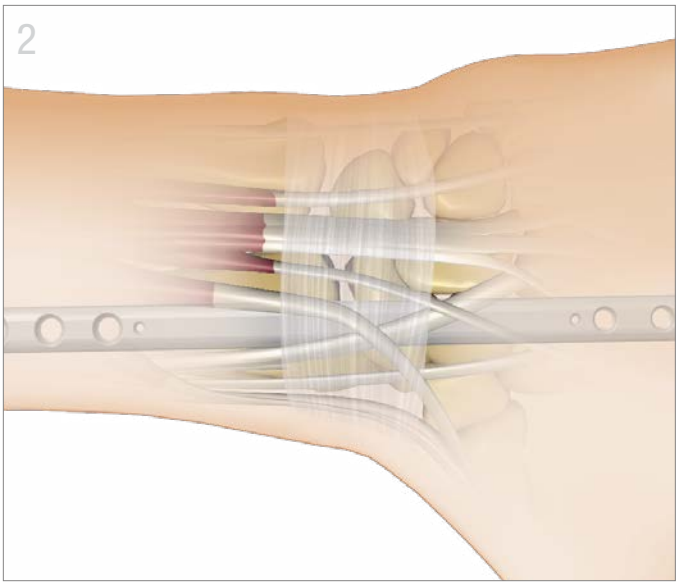
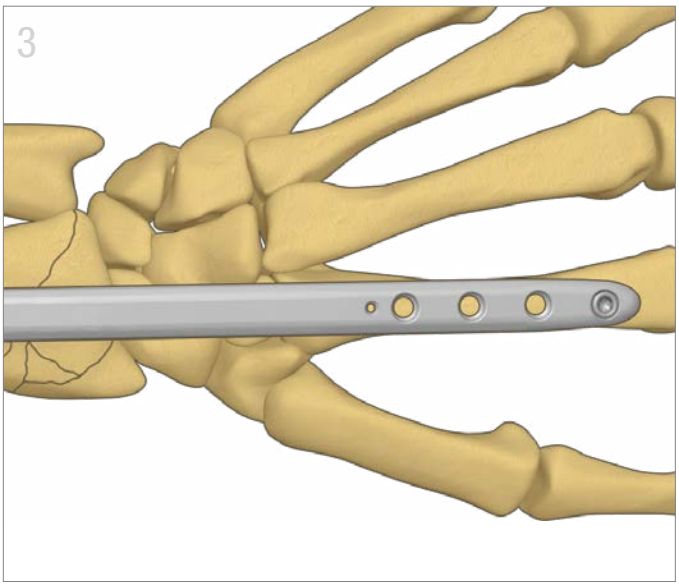


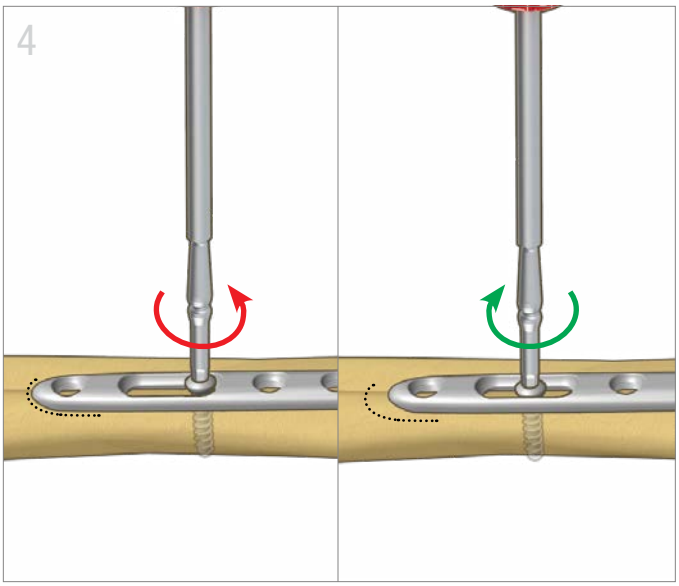
Plate Insertion

- Using the Bridge Plate Inserter, insert plate from proximal to distal, or from distal to proximal. It is usually easier to insert the bridge plate from the side that is more dorsally positioned.
- Pass the plate under the extensor tendons along the surface of the bone until it appears in the opposite incision.



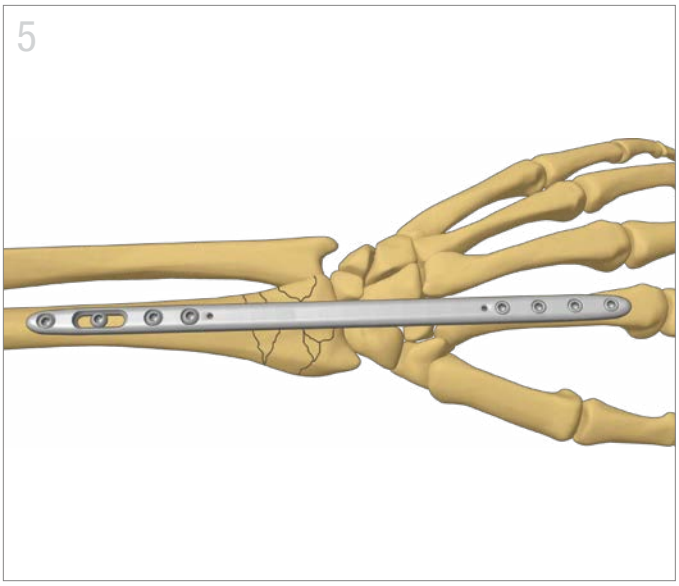
Provisional Distal Fixation

- Position the plate over the metacarpal to allow placement of distal 2.7mm screws. Ensure that the plate is centered over the bone by identifying the radial and ulnar margin of the bone.
- Place a non-locking 2.7mm screw using the 2.0mm (yellow) drill in the most distal hole to lag the plate to the bone.



Secure Plate and Restore Length

- With the forearm/wrist in neutral rotation, center the plate over the the radial shaft.
- Place a non-locking 3.2mm screw using the 2.3mm (red) drill into the distal end of the slotted hole.
- To gain additional length, loosen screw 1/4 turn, distract to the desired length and apply any coronal correction with the Expander/Compression Tool (Magic Screwdriver) and retighten screw. Avoid excessive distraction.



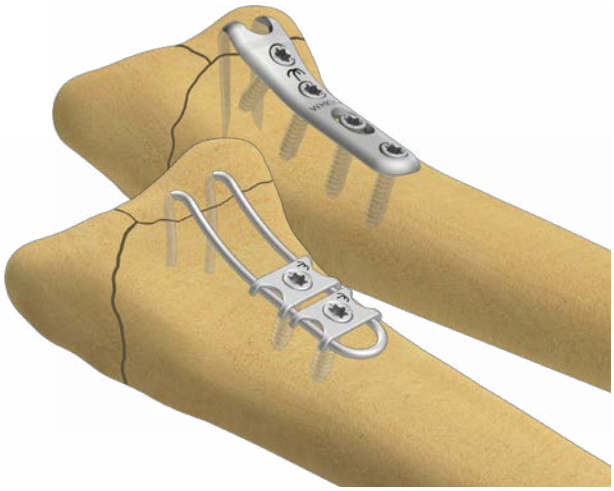
Final Fixation

- Secure the plate by placing additional screws as needed.
  - 2.7mm locking or non-locking screws distally
  - 3.2mm locking or non-locking screws proximally

Note: Use GUIDELCBS-2.0 for placement of 2.7mm locking screws and GUIDELHEX-2.3 or GUIDEQ-2.3 for placement of 3.2mm locking screws.

TIPS

- Displaced or unstable volar ulnar corner, dorsal ulnar corner, or die-punch fragments may require supplemental fixation.
- Fragment Specific implants such as Buttress Pins™, Hook Plates™, or Pin Plates™ can be used as adjunct fixation to a Bridge Plate.



All components are **Wrist Fixation System 3 (WS3)** items. All implants made from surgical grade stainless steel.

REMOVAL

- Make a standard incision over the proximal and distal end of the plate and dissect down to the plate, retracting tendons and any other soft tissue structures as needed.
- Remove the proximal 3.2mm screws with a 2.5mm Hex driver and the distal 2.7mm screws with a 2.0mm hex driver.

Screw Table

	Cortical Screw, 2.7mm	Locking Screw, 2.7mm	Cortical Screw, 3.2mm	Locking Screw, 3.2mm
	HEX2.7-XX	LCBS2.7-XX	HEX3.2-XX	LHEX3.2-XX
Length	08-18mm*	08-18mm*	08-20mm* 11-15mm**	10-20mm*
Drill	2.0mm		2.3mm	
Guide	GUIDELCBS-2.0		GUIDE-2.3/3.2	GUIDEQ-2.3 GUIDELHEX-2.3
Driver	2.0mm HEX		2.5mm HEX	

* 2mm increments ** 1mm increments

Bridge Plate

BRGP

Bridge Plate Inserter

INSRTR-BRG

Quick Guide

GUIDEQ-2.3

Drill Guide

GUIDELCBS-2.0

TriMed, Inc. / 27533 Avenue Hopkins / Santa Clarita, CA 91355 USA / 800-633-7221 / www.trimedortho.com

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 Wrist Fixation System 3 reference IFU on trimedortho.com/ifu.

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