

TIGER CANNULATED SCREW SYSTEM

The Tiger Cannulated Screw is a self-drilling, self-tapping, titanium alloy lag screw with the look, strength, and bite of a "Tiger".

CANNULATED SCREW FIXATION

- Tiger stripe flute intended to channel out bone particulate, increase implant-to-bone surface area for better osteointegration capabilities, and disperse insertion stress
- Self-retaining, low profile, cruciform head with incorporated tapered proximal shaft to add torsional strength at time of greatest need
- Multiple cutting edges and augers to provide tremendous bite, cutting power, and ease of insertion in dense cortical bone
- Offered in 2.0, 2.4, 3.0, and 4.0mm diameters with lengths of 8-56mm



TIGER CANNULATED SCREW SYSTEM



Diameter	2.0mm	2.4mm	3.0mm	4.0mm
Screw Lengths*	8-42mm	8-48mm	10-40mm	10-56mm

*Offered in 2mm increments



All associated instrumentation included in a single system

Certain system features are covered under US Patent No 9,387,028. FDA cleared 510(k) K081510 & K153338. Trilliant products are made in the U.S.A.



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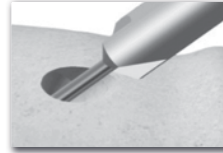
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SURGICAL TECHNIQUE



STEP 1: Place a bone clamp to create the necessary compression across the osteotomy or fusion site (when applicable). Note: This step is very important if bone is very dense and in arthrodesis, as the axial force necessary for inserting the Tiger cannulated screw could temporarily distract the fragments at the fracture/arthrodesis line.

STEP 2: Insert the appropriately sized K-wire to the correct length under image intensification. Avoid bending the K-wire when placing into bone by inserting in 15mm-20mm increments.



STEP 3: Slide the appropriately sized depth gauge/countersink over the K-wire until the countersink tip contacts bone. Rotate the countersink clockwise and counterclockwise to create the necessary recess in the bone.



STEP 4: Measure for the desired screw length by examining the end of the guide wire in relation to the marks on the depth gauge.



STEP 5: It is recommended to pre-drill in cases of dense bone, when using a screw over 24mm, or when passing through three or more cortices.

STEP 6: Remove the desired Tiger Cannulated Screw from the screw block. Slide the screw over the K-wire.



STEP 7: Using the screw driver and appropriate driver shaft, drive the Tiger screw into bone until the desired compression is achieved.



STEP 8: Remove and discard the K-wire.

CANNULATED SCREWS FOR ARTHRODESIS OF 2ND - 5TH DIGITS

STEP 1: Expose the joint space dorsal of the proximal interphalangeal joint.

STEP 2: Resect the articular surfaces of the proximal interphalangeal joint.

STEP 3: Using the wire pin driver and a 0.035" double trocar K-wire, insert the K-wire centrally into the middle phalanx, drilling towards the distal phalanx.

STEP 4: Position the distal phalanx in the desired position and continue inserting the K-wire, maintaining a central position.

STEP 5: Continue driving proximal to distal until the K-wire is protruding through the distal phalanx. Assure that the K-wire is sufficiently exposed to allow for capture with the wire pin driver.

STEP 6: With the wire pin driver, retract the K-wire until the proximal end is only exposed 1 to 2 mm.

STEP 7: Extend the digit to obtain proper alignment between the K-wire and the proximal phalanx. Surgeon judgment should be used to ensure sagittal plane stability and toe purchase.

STEP 8: Drive the K-wire to engage the proximal phalanx, assuring that the K-wire does not pass into the metatarsophalangeal joint.

STEP 9: CAUTION: Intra-operative imaging should be used to verify that the metatarsophalangeal joint space is not compromised by the K-wire. Verify that the wire is not bent in any way.

STEP 10: OPTIONAL: Countersink if desired and bone surface is adequate.

STEP 11: Use the appropriate depth gauge to determine screw length.

STEP 12: OPTIONAL: Drill if necessary in dense bone using the appropriate cannulated drill.

STEP 13: Place screw on K-wire and drive the screw until fully seated.

STEP 14: Remove the K-wire and discard.