



Forearm









Trauma & Extremities

# AxSOS Locking Plate System

### **Operative Technique**

- Small Fragment
- Basic Fragment



### Introduction

This publication sets forth detailed recommended procedures for using Stryker Osteosynthesis devices and instruments.

It offers guidance that you should heed, but, as with any such technical guide, each surgeon must consider the particular needs of each patient and make appropriate adjustments when and as required.

A workshop training is recommended prior to first surgery.

All non-sterile devices must be cleaned and sterilized before use. Follow the instructions provided in our reprocessing guide (L24002000). Multi-component instruments must be disassembled for cleaning. Please refer to the corresponding assembly/ disassembly instructions.

See package insert (V15011 and V15013) for a complete list of potential adverse effects, contraindications, warnings and precautions. The surgeon must discuss all relevant risks, including the finite lifetime of the device, with the patient, when necessary.

#### Warning:

Fixation Screws: Stryker Osteosynthesis bone screws are not approved or intended for screw attachment or fixation to the posterior elements (pedicles) of the cervical, thoracic or lumbar spine.

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### Introduction

The AxSOS Periarticular Locking Plate System is Stryker's range of axially stable locking plates with locking screws designed to treat peri- or intraarticular fractures. Indications include the Proximal Humerus, Distal Femur, and Proximal and Distal Tibia.

The conventional SPS Small and Basic Fragment Sets are standard plating systems which offer a broad range of plates and screws to treat a variety of indications. The system includes Compression Plates, T-Plates, L-Plates, Buttress Plates, Clover Leaf Plates, Reconstruction Plates, One-Third Tubular Plates, Calcaneal Plates, and a complete range of Cortical and Cancellous ISO Screws.

Stryker has combined these systems to offer you the AxSOS Small and Basic Fragment Locking Plate Systems. The Systems include 3mm Threaded Hole 1/3 Tubular Plates; 4 and 5mm Threaded Hole Reconstruction Plates; and 4 and 5mm Compression Plates (Locking compatible). The Compression Plates can act as conventional compression plates or can be converted to locking plates by using the appropriate Locking Inserts.

The Threaded Hole Reconstruction Plates are made of annealed stainless steel; therefore, they can be bent to fit the anatomical structures in long bones and the pelvis.

The 1/3 Tubular Plate is designed to treat fractures in the fibula, metatarsals, and metacarpals.

In general, these locking plates are indicated for fractures requiring additional stability (e.g. severely comminuted fractures, etc.).

### 4mm & 5mm Compression Plates

#### **Innovative Locking Screw Design**

- Screws are guided into the Locking Insert.
- May reduce potential for cross threading or cold welding.

**Screws** 

irritation.

#### **Compression and/or Locking Plate Option**

• The Locking Inserts and Locking

Screws convert a standard

- compression hole to a locking hole. 'Waisted' Plate Shape • Uniform load transfer. **Equal Hole Spacing** • Greater operative flexibility for screw and plate placement. **Self-Tapping Locking or Cortical Bi-Directional Holes** 4 • Allows for compression and / or distraction. • Reduces the potential for soft-tissue **K-Wire and Reduction Holes** • Enhanced primary / temporary plate and fracture fixation. **K-Wire and Reduction Holes**
- **K-Wire and Reduction Holes** • Enhanced primary / temporaryplate and fracture fixation.

• May increase OR efficiency.

**Low Screw Head Profile** 

• Enhanced primary / temporary plate and fracture fixation.

### **Features & Benefits**

### Reconstruction and 1/3 Tubular Locking Plates

#### **Annealed Stainless Steel**

#### **Special Plate Shape**

- The reconstruction plates are made of annealed stainless steel, which facilitates three dimensional bending of the plate for an anatomical fit.
- The plate shapes are specifically designed to be bent.



#### **Threaded Locking Holes**

• The holes accept a Self Tapping Locking Screw. This adds stability to the plate/screw construct.

#### **K-Wire and Reduction Holes**

• Enhanced primary / temporary plate and fracture fixation.



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#### **Full Range of Locking Screws**

• 3, 4, and 5mm Self Tapping Locking Screws can be used for bi-cortical or mono-cortical fixation.

### **Indications, Precautions & Contraindications**

### Intended Use/Indications

#### **Annealed Stainless Steel**

The **Stryker AxSOS Small Fragment Plating System** is intended for internal fixation, stabilization and support of fractures as well as bone fixation after osteotomies in the following:

#### In Adults:

- 4mm Waisted Compression Plate radius, ulna, distal tibia, fibula, distal humerus, clavicle.
- 4mm Locking Insert.
- 4mm Locking Screws.
- 3.5mm Cortical Screws.
- 3mm One Third Tubular Plate fibula, metatarsals, metacarpals.
- 4mm Reconstruction Plate humerus, pelvis.

#### **In Pediatrics**

- 4mm Waisted Compression Plate - radius, ulna, distal tibia, distal humerus, clavicle.
- 4mm Locking Insert.
- 4mm Locking Screws.
- 3.5mm Cortical Screws.

The Stryker AxSOS Basic Fragment Plating System is intended for internal fixation, stabilization and support of long bone fractures as well as bone fixation osteotomies in the following:

#### In Adults:

- 5mm Waisted Compression Plate Broad –femur, tibia, humerus, pelvis.
- 5mm Waisted Compression Plate
  Narrow femur, tibia, humerus, pelvis.
- 5mm Locking Insert.
- 5mm Locking Screws.
- 4.5mm Cortical Screws.
- 5mm Reconstruction Plate femur, tibia, humerus, pelvis.

#### **In Pediatrics**

- 5mm Waisted Compression Plate Broad –femur, tibia, humerus.
- 5mm Waisted Compression Plate Narrow – femur, tibia, humerus.
- 5mm Locking Insert.
- 5mm Locking Screws.
- 4.5mm Cortical Screws.

### Precautions

Stryker Osteosynthesis systems have not been evaluated for safety and use in MR environment and have not been tested for heating or migration in the MR environment, unless specified otherwise in the product labeling.

#### **Caution:**

Additionally, the 4 and 5mm Compression plates are not intended to bridge or breach the growth plates (physes) of pediatric patients.

# Indications, Precautions & Contraindications

### Contraindications

The physician's education, training and professional judgement must be relied upon to choose the most appropriate device and treatment. Conditions presenting an increased risk of failure include:

- Any active or suspected latent infection or marked local inflammation in or about the affected area.
- Compromised vascularity that would inhibit adequate blood supply to the fracture or the operative site.
- Bone stock compromised by disease, infection or prior implantation that can not provide adequate support and/or fixation of the devices. • Material sensitivity, documented or suspected.
- Obesity. An overweight or obese patient can produce loads on the implant that can lead to failure of the fixation of the device or to failure of the device itself.
- Patients having inadequate tissue coverage over the operative site.
- Implant utilization that would interfere with anatomical structures or physiological performance.

- Any mental or neuromuscular disorder which would create an unacceptable risk of fixation failure or complications in postoperative care.
- Other medical or surgical conditions which would preclude the potential benefit of surgery.

Detailed information is included in the instructions for use being attached to every implant.

See package insert for a complete list of potential adverse effects and contraindications. The surgeon must discuss all relevant risks, including the finite lifetime of the device, with the patient, when necessary.

#### **Caution:**

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Bone Screws are not intended for screw attachment or fixation to the posterior elements (pedicles) of the cervical, thoracic or lumbar spine.

### AxSOS Compression Plate

#### **Annealed Stainless Steel**

The AxSOS Small and Basic Fragment Systems function in the same general operative manner as the SPS Small and Basic Fragment Systems in the conventional non-locking mode.

#### AxSOS Compression Plates or SPS Compression Plates

The AxSOS Compression Plate should not be confused with the SPS Compression Plate. The standard SPS Plate cannot be locked, and therefore should not be used with Locking Screws, Locking Inserts, or Cable Plugs.

The AxSOS Compression Plate can be used both in compression and / or locking mode. Each system has its own Reference Numbers, and there are 2 visible differences between the plates. The AxSOS plate has a matt finish, while the SPS plate has a polish finish. Second, the plates have different tapers at the plate ends as illustrated in Figure 1.

#### Bending

If the plate is used in a fully locked mode, plate bending is not recommended due to possible hole deformity and inability of Locking Insert placement (Fig. 2).

If the plate is used in a hybrid mode (compression with appropriate cortical screws and locking screws, (see table below), the plate should only be bent above the fracture line between the compression holes (Fig. 3). For a detailed Operative Technique, please refer to the SPS Small Fragment Brochure (REF 982181) or the SPS Basic Fragment Brochure (REF 982183).

The procedure how to convert an AxSOS Plate Hole from a compression mode to an locked mode is shown in Figs. 4 & 5.





Fig. 2 – Do not bend





#### Hybrid Mode Screw Insertion

Axsos Compression

Plates Small Fragments

basic Fragments

When using the plate in a hybrid mode (Fig. 3), it is essential to insert the Cortical Screws for axial compression before inserting any Locking Screws.

**Cortical Screws** 

3.5mm

4.5mm

Locking Screws

4.0mm

5.0mm

### **AxSOS** Compression Plate

#### **Locking Insert Application**

If an AxSOS Plate is used in a locking mode, pre-operative insertion of Locking Inserts is required.

A Locking Insert (4mm - REF 370002 / 5mm - REF 370003) is attached to the Locking Insert Inserter (4mm - REF 702762 / 5mm - REF 702763) and placed into the chosen hole(s) of the plate (Fig. 4). Ensure that the Locking Insert is properly placed. The Inserter should then be removed (Fig. 5).

Do not place Locking Inserts with the Drill Sleeve.

#### **Locking Screw Insertion**

Locking Screws can be placed in plate holes provided there is a pre-placed locking insert. The appropriate Drill Sleeve is threaded into the Locking Insert to ensure initial fixation of the Locking Insert into the plate. This will also facilitate subsequent screw placement.

A 3.1mm or 4.3mm Drill Bit is used to drill through both cortices. Avoid any angulation or excessive force on the drill, as this could dislodge the Locking Insert. The screw measurement is then taken.





Fig. 5

The appropriate sized Locking Screw is then inserted. Locking Screws should initially be inserted manually to ensure proper alignment. If the Locking Screw thread does not immediately engage the plate thread, reverse the screw a few turns and reinsert the screw once it is properly aligned.

Using the Solid Screwdriver together with the Torque Limiting Attachment and T-Handle, final tightening is performed. Maximum stability of the Locking Insert is achieved once the screw head is fully seated and tightened to 4Nm for the 4.0mm system, respectively 6Nm for the 5.0mm system. This procedure is repeated for all holes chosen for locked fixation.





Should removal of a Locking Insert be required for any reason, then the following procedure should be used. Thread the central portion (A) of the Locking Insert Extractor (4mm - REF 702767 / 5mm - REF 702768) into the Locking Insert that you wish to remove until it is fully seated. Then turn the outer sleeve/collet (B) clockwise until it pulls the Locking Insert out of the plate (Fig. 7). The Locking Insert must then be discarded, as it cannot be reused.





### AxSOS Reconstruction Plate

Clear identification classification of the fracture should first be established using proper imaging methods. The appropriate anatomical reduction should be carried out before any definitive fixation. X-Ray Templates are available to help choose the length of the plate intra operatively. Bending Templates are available to help determine the proper bend of the plate.

#### Step 1 – Bending

Since the holes in the plate are threaded, it is important to bend only between the holes. Bending the holes will cause a deformation which may cause the screw to not properly seat in the hole. Three types of bending may be performed on the plates with the bending irons (Fig. 1).

#### Step 2 – Primary Plate Fixation

After the proper implant has been selected and bent accordingly, the plate is temporarily fixed to the bone using K-Wires and/or reduction forceps (Fig. 2).

#### Step 3 – Locking Fixation

The AxSOS Reconstruction Plates act only in the locking mode. Screw "Lagging" is not possible through the plate. If Lagging is desired, use an independent lag screw, and note that the lag screw must not interfere with screw trajectory of the locking screws in the plate.

Using the appropriate Drill Sleeve (4mm – REF 702707/5mm – REF 702708) and Ø3.1 or Ø4.3 Drill Bit (4mm – REF 702742/5mm – REF 702743), drill the hole on each side of the fracture line.

Measure the depth of the hole using the Depth Gauge (REF 702884), and insert the screws using the Solid Screwdriver (4mm – REF 702747 / 5mm – REF 702748) and Screw Holding Sleeve (4mm – REF 702732 / 5mm – REF 702733) (Fig. 3).



Fig. 1 - Rotational Bending



**Posterior Bending** 



Fig. 1 – Medial Lateral Bending





Fig. 2 – K-Wire Fixation

Fig. 3 – Screw Insertion

Final tightening of Locking Screws should always be performed manually using the Torque Limiting Attachment (4mm – REF 702750 / 5mm – REF 702751) together with the Solid Screwdriver (4mm – REF 702753 / 5mm – REF 702754) and the T-Handle (4mm – REF 702427 / 5mm – REF 702430). Repeat the above technique until all desired holes in the plate are filled (Fig. 4).







### AxSOS 1/3 Tubular Plate

Clear identification classification of the fracture should first be established using proper imaging methods. The appropriate anatomical reduction should be carried out before any definitive fixation. The most common indication for the 1/3 Tubular Plate is a fracture of the fibula.

#### Step 1 – Bending

Since the holes in the plate are threaded, it is important to bend only between the holes. Bending the holes will cause a deformation which may cause the screw to not properly seat in the hole (See Step 1 of the Reconstruction Plate Operative Technique).

#### **Step 2 – Primary Plate Fixation**

After the proper implant has been selected, the plate is temporarily fixed to the bone using K-Wires and /or reduction forceps (Fig. 1).

#### Step 3 – Locking Fixation

Using the Drill Sleeve (REF 702706) and Ø2.3 Drill Bit (REF 702741), drill the hole on each side of the fracture line.

Measure the depth of the hole using the Depth Gauge (REF 702883), and insert the screws using the Torque Limiting Screwdriver (REF 702759) and Screw Holding Sleeve (REF 702731) (Fig. 2). Repeat the above technique until all desired holes in the plate are filled.



Fig. 1 – K-Wire Fixation



Fig. 2 - Screw Insertion

 Always use the threaded Drill Sleeve when drilling for Locking Screws (threaded plate hole or Locking Insert).



Free hand drilling will lead to a misalignment of the Screw and therefore result in screw jamming during insertion. It is essential, to drill the core hole in the correct trajectory to facilitate accurate insertion of the Locking Screws.

**2.** Always start inserting the screw manually to ensure proper alignment in the plate thread and the core hole.

It is recommended to start inserting the screw using **"the three finger technique"** on the Teardrop handle. Avoid any angulations or excessive force on the screwdriver, as this could cross-thread the screw.

- **3.** 3. If power insertion is selected after manual start (see above), use low speed only, **do not apply axial pressure**, and never "push" the screw through the plate! Allow the single, continuous threaded screw design to engage the plate and cut the thread in the bone on its own, as designed. Stop power insertion approximately 1cm before engaging the screw head in the plate.
- **4. It is advisable to tap hard (dense) cortical bone** before inserting a Locking Screw. Use relevant Tap.



If the Locking Screw thread does not immediately engage the plate thread, reverse the screw a few turns and re-insert the screw once it is properly aligned.



Power can negatively affect Screw insertion, if used improperly, damaging the screw/plate interface (screw jamming). This can lead to screw heads breaking or being stripped. Again, if the Locking Screw does not advance, reverse the screw a few turns, and realign it before you start re-insertion.



The spherical tip of the Tap precisely aligns the instrument in the predrilled core hole during thread cutting. This will facilitate subsequent screw placement.

**5.** Do not use power for final insertion of Locking Screws. It is imperative to engage the screw head into the plate using the Torque Limiting Screwdriver. Ensure that the screwdriver tip is fully seated in the screw head, but do not apply axial force during final tightening. If the screw stops short of final position, back up a few turns and advance the screw again (with torque limiter on).



### **Ordering Information - Implants**

The following ordering information lists the AxSOS Implants and Instruments. To order standard SPS Screws and Instruments, please refer to the SPS Small Fragment Brochure (REF 982181) or SPS Basic Fragment Brochure (REF 982183) for details.

#### **3MM ONE THIRD TUBULAR PLATES**

#### **4MM RECONSTRUCTION PLATES**

Stainless Steel REF	Holes	Length mm
427062	2	24
427063	3	37
427064	4	50
427065	5	63
427066	6	76
427067	7	89
427068	8	102
427069	9	115
427070	10	128
427072	12	154
427074	14	180

Stainless Steel REF	Holes	Length mm
427034	4	48
427035	5	60
427036	6	72
427037	7	84
427038	8	96
427039	9	108
427040	10	120
427042	12	144
427044	14	168
427046	16	192
427048	18	216
427050	20	240
427052	22	264

#### **4MM WAISTED COMPRESSION PLATES**

)	Stainless Steel REF	Holes	Length mm
5	427003	3	45
/	427004	4	58
1	427005	5	71
/	427006	6	84
)	427007	7	97
(	427008	8	110
0	427009	9	123
(	427010	10	136
)	427011	11	149
(	427012	12	162
)	427014	14	188
/	427016	16	214
	427018	18	240
	427020	20	266



REF	Description
4.0mm Locking Instru	uments
370002	4mm Small Fragment Locking Insert
370004	4mm Small Fragment Cable Plug

### **Ordering Information - Implants**

#### **5MM RECONSTRUCTION PLATES**

#### 5MM BASIC FRAGMENT WAISTED COMPRESSION PLATES - NARROW

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1	b
l	6

Stainless Steel REF	Holes	Length mm
427164	4	62
427166	6	94
427168	8	126
427170	10	158
427172	12	190
427174	14	222
427176	16	254

_	Stainless Steel REF	Holes	Length mm
	427102	2	43
	427103	3	61
	427104	4	79
	427105	5	97
_	427106	6	115
	427107	7	133
	427108	8	151
	427109	9	169
	427110	10	187
	427112	12	223
	427114	14	259
	427116	16	295
	427118	18	331
	427120	20	367
	427122	22	403

#### 5MM BASIC FRAGMENT WAISTED COMPRESSION PLATES - BROAD

0	Stainless Steel REF	Holes	Length mm
165	427136	6	119
<u> </u>	427137	7	137
0	427138	8	155
M(	427139	9	173
$(\mathbf{O})$	427140	10	191
)_(	427141	11	209
(D)	427142	12	227
10	427143	13	245
	427144	14	263
100	427146	16	299
0	427148	18	335
10	427150	20	371
9	427152	22	407



REF	Description
370003	5mm Basic Fragment Locking Insert
370005	5mm Basic Fragment Cable Plug

### **Ordering Information - Implants**

#### 3.0MM LOCKING SCREWS, SELF TAPPING T8 DRIVE

#### 4.0MM LOCKING SCREWS, SELF TAPPING T15 DRIVE

S	tainless Steel REF	Length mm	
	371008	8	
	371010	10	
	371012	12	
	371014	14	
	371016	16	
	371018	18	
	371020	20	
	371022	22	
	371024	24	
	371026	26	
	371028	28	
	371030	30	

Stainless Steel REF	Screw Length mm	
371514	14	
371516	16	
371518	18	
371520	20	
371522	22	
371524	24	
371526	26	
371528	28	
371530	30	
371532	32	
371534	34	
371536	36	
371538	38	
371540	40	
371542	42	
371544	44	
371546	46	
371548	48	
371550	50	
371555	55	
371560	60	
371565	65	
371570	70	
371575	75	
371580	80	
371585	85	
371590	90	

#### 5.0MM LOCKING SCREWS, SELF TAPPING T20 DRIVE

	Stainless Steel REF	Length mm	
	371314	14	
	371316	16	
	371318	18	
	371320	20	
	371322	22	
	371324	24	
	371326	26	
	371328	28	
	371330	30	
	371332	32	
15	371334	34	
<i>1</i>	371336	36	
v	371338	38	
	371340	40	
	371342	42	
	371344	44	
	371346	46	
	371348	48	
	371350	50	
	371355	55	
	371360	60	
	371365	65	
	371370	70	
	371375	75	
	371380	80	
	371385	85	
	371390	90	
	371395	95	

For Cortex screw reference numbers, please refer to the SPS Operative Techniques.

Note:

Cortex screws are only indicated for pediatric patients when used with the AxSOS Straight Compression Plates or as independant lag screws.

# **Ordering Information – AxSOS Instruments**

	REF	Description
	3mm Small Fragment	Locking Instruments
	702741	Drill Ø2.3mm x 125mm
	702771	Tap Ø3.0mm x 130mm
	702731	Screw Holding Sleeve
	702706	Drill Sleeve
	702883	Direct Depth Gauge for Locking Screws
	702759	Torque Limiter Screwdriver T8 / 3.0mm
	4mm Small Fragment	Locking Instruments
	702742	Drill Ø3.1mm x 204mm
	702772	Tap Ø4.0mm x 140mm
	702747	Screwdriver T15, L200mm
· · · · ·	702753	Solid Screwdriver T15, L115mm
	702732	Screw Holding Sleeve
<b>[</b> ]	702707	Drill Sleeve
	702884	Direct Depth Gauge for Locking Screws
	702750	Universal Torque Limiter T15 / 4.0mm
	702762	Locking Insert Inserter 4.0mm
	702767	Locking Insert Extractor
	702427	T-Handle Small, AO Fitting
	702756	Bending Irons (x2)
	Other Instruments	
	981096	X-Ray Template Compression Plate
	702782	Soft Tissue Elevator
	702919	Soft Tissue Spreader
	702961	Trocar (for Soft Tissue Spreader)
	702755	Torque Tester with Adapters

# **Ordering Information – AxSOS Instruments**

	REF	Description
	Basic Fragment Lockin	g Instruments
	702743	Drill Ø4.3mm x 289mm
anusaans.	702773	Tap Ø5.0mm x 140mm
	702748	Screwdriver T20, L300mm
	702754	Solid Screwdriver Bit T20, L180mm
	702733	Screw Holding Sleeve L118mm
	702708	Drill Sleeve L143mm
	702884	Direct Depth Gauge for Locking Screws 14-120mm
	702751	Universal Torque Limiter T20 / 5.0mm
	702763	Locking Insert Inserter
	702768	Locking Insert Extractor
	702430	T-Handle Medium, AO Fitting
	702906	Bending Irons for Recon Plate and Narrow Compression Plate (x2)
	Other Instruments	
	702782	Soft Tissue Elevator
	702918	Soft Tissue Spreader
3	702962	Trocar (for Soft Tissue Spreader)
a 🔤	702755	Torque Tester with Adapters
	702900	Table Plate Bender
	981097	X-Ray Template Compression Plate Narrow
	981098	X-Ray Template Compression Plate Broad

# **Ordering Information – AxSOS Cases**

REF	Description	
Basic Fragment System Cases and Trays		
902821	Metal Base – Instruments	
902822	Lid for Base – Instruments	
902823	Instrument tray 5.0mm	
902824	Generic Tray	
902825	Silicon Mat (Bottom)	
902826	Silicon Mat (Generic)	
902827-2	Plate Rack with Lid – AxSOS Compression Plates	
902832	Screw Rack with Lid – 5.0mm AxSOS Locking Screws	
902822	Lid for Plate Rack – 5.0mm AxSOS Compression Plates	
902829	Plate Rack With Lid – Generic	
902830	Metal Base – Implants	
902831	Lid for Base – Implants	
902828	Plate Rack with Lid – Special Plates	
902828-2	Lid for Plate Rack – Special Plates	
902929-2	Lid for Plate Rack – Generic	
902836	Screw Rack with Lid – Standard	

#### Small Fragment System Cases and Trays

902801	Metal Base – Instruments
902802	Lid for Base – Instruments
902803	Instrument tray 4.0mm
902805	Generic Tray
902806	Silicon Mat (Bottom)
902807	Silicon Mat (Top)
902808	Silicon Mat (Generic)
902809	Plate Rack with Lid – 4.0mm AxSOS Compression Plates
902813	Screw Rack with Lid – 4.0mm AxSOS Locking Screws
902809-2	2 Lid for Plate Rack – 4.0mm AxSOS Compression Plates
902811	Metal Base – Implants
902812	Lid for Base – Implants
902804	Instrument tray 3.0mm
902810	Plate Rack with Lid – Special Plates
902810-2	Lid for Plate Rack – Special Plates

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