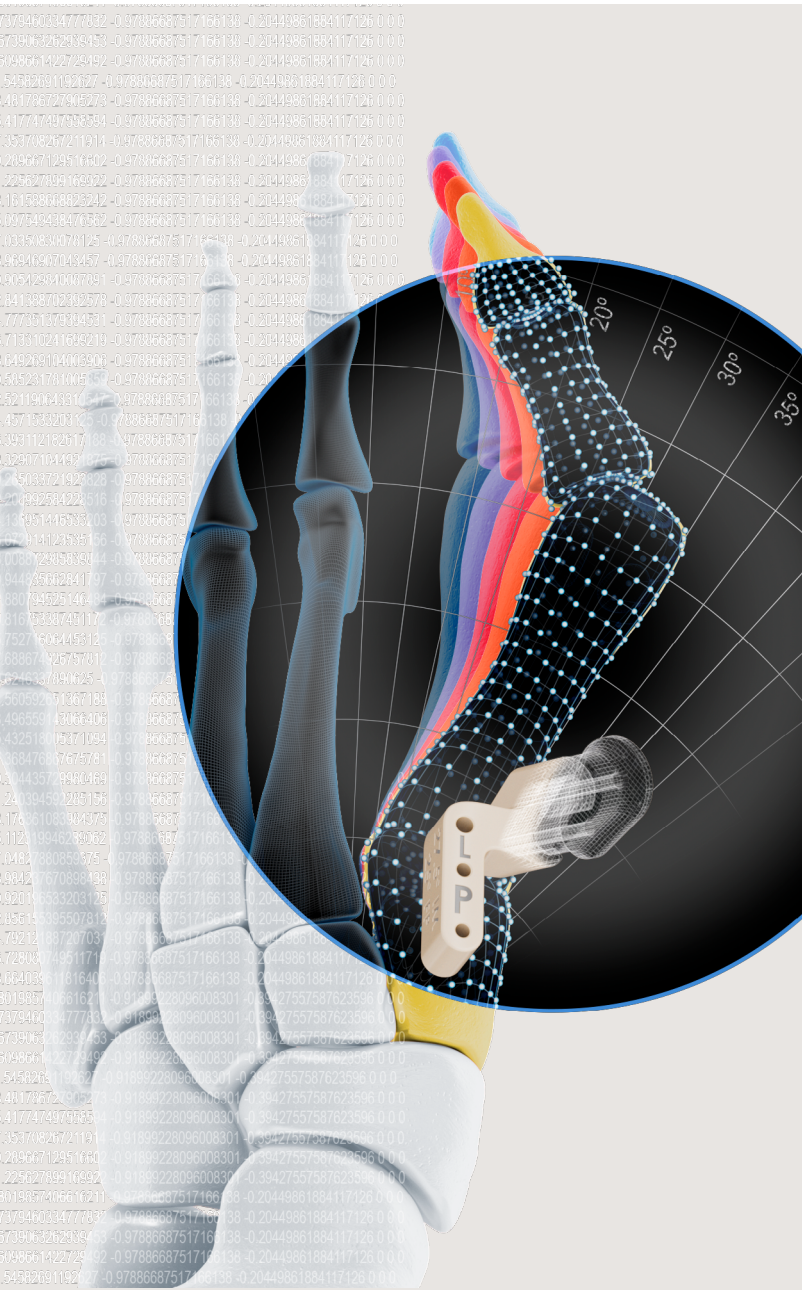
VIRTUGUIDE™ SYSTEM

AI-Powered Patient Matched Lapidus Correction

Surgical Technique



Johnson&Johnson
MedTech

Introduction

Intended Use

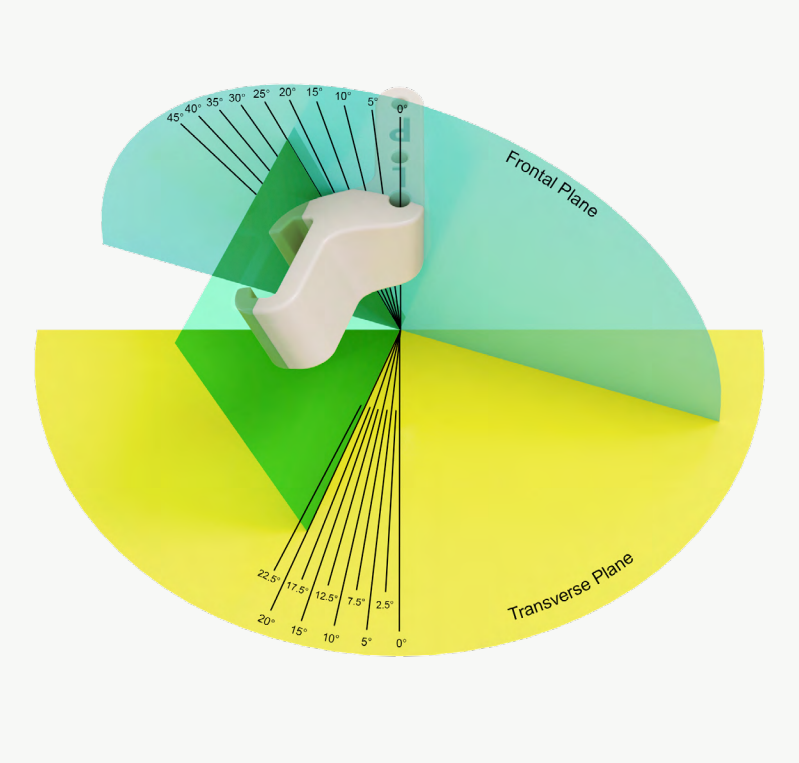
Please refer to the user manual available at:
https://help.peekmed.com/user-manual
before using the PeekMed® web software.

The Patient-Matched VAC Guide

The VIRTUGUIDE™ System includes a pre-operative AI powered planning software[1] that suggests a patient-matched Virtual Alignment Correction (VAC) Guide used for Lapidus arthrodesis procedures.
The Virtual Alignment and Correction (VAC) Guide is matched to each patient's deformity. The Guide incorporates the correction Intermetatarsal (IM) and Frontal Plane (FP) angles for the patient to allow wire placements in the specific deformity positions required for the correction.

The Re-Alignment and Compression (RAC) Block is then utilized to align the four Wires and generate compression.

The 3D printed VAC Guide comes off the shelf sterile packed.



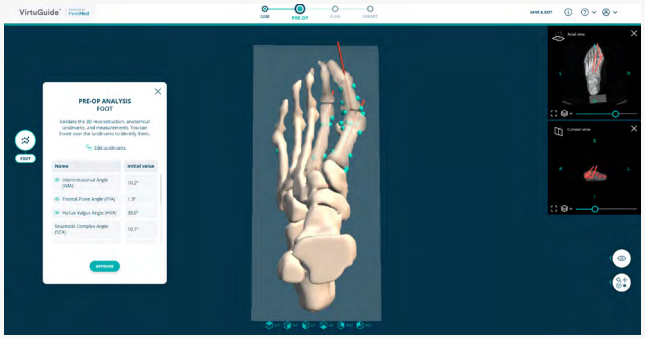
Virtual Alignment and Correction (VAC) Guide.

VIRTUGUIDE™ Software

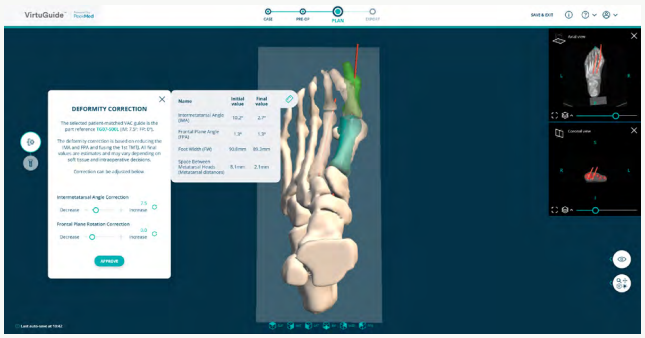
The VIRTUGUIDE™ pre-operative planning software[1] utilizes AI to analyze the patient's foot anatomy by identifying specific landmarks. The software[1] outputs key measurements relevant to Lapidus surgery including common metrics and measurements.

The software[1] generates a plan of the surgery and helps in the selection of a patient matched VAC Guide. Additionally, the user is able to template various implant options to virtually assess placement and fit.
All measurements and instrument choices can be adjusted manually as needed.

Experience in usage and a clinical assessment is necessary for the proper use of the system in the review and approval of the case as well as the output of the planning.



AI Automated Analysis of anatomical landmarks (blue spheres).



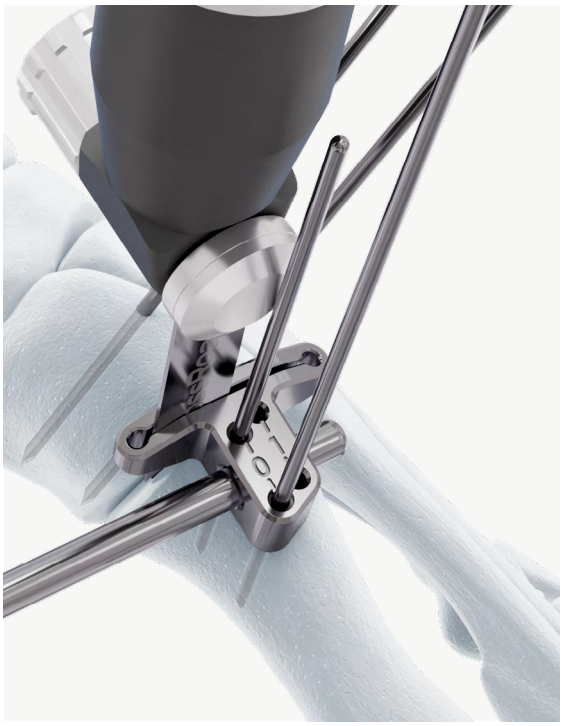
Virtual Deformity Correction & VAC Guide Recommendation.

Surgical Technique Summary

1

Placement of Joint Seeking Pin and VAC Guide.

2



Cut Guide for Bone Resections.

3

Realignment and Compression with RAC Block.

4

Fixation.*

* Implants are not part of the VIRTUGUIDE™ system.

Surgical Technique

Pre-operative Planning

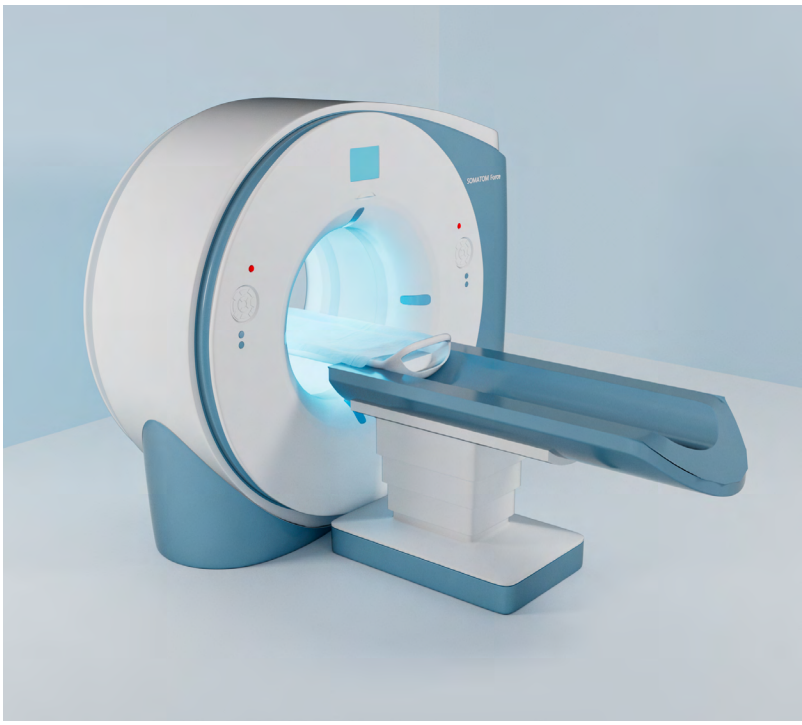
Overview Pre-operative Planning Steps:

1. **Consider Imaging Parameters**
2. **Create a Case**
   - Create PeekMed® Software[1] Account
   - Start a Case
3. **Upload Images**
4. **Approve Pre-Op Analysis**
5. **Plan the Case**
6. **Review the Case**
7. **Export the Case**

Surgical Technique

Consider Imaging Parameters

The VIRTUGUIDE™ Software[1] is presently configured to accept weight bearing CT scans.
Weight bearing may influence the deformed anatomy and therefore provide a more accurate analysis of the deformity correction needed. While Standard CT scans can be uploaded, they may result in a less desired deformity correction. When performing scans and gathering files,
ensure the images meet noted image requirements in the adjacent table.



CT scan.

Image Requirements
CT Scan of the Foot
DICOM File (.dcm)
Slice Thickness: <0.7mm Slice Spacing: <0.7mm Pixel Spacing: <0.35mm
512x512 Image Size or Greater, Square Sizes Only
Includes All Axial Slices
Low observational noise preferably presents a visually good contrast between bone and tissue
It is recommended to avoid images with metallic materials, such as prostheses

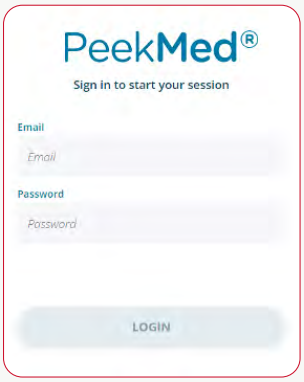
Please refer to the PeekMed® web User Manual - Pre-operative Planning Software for Instruction on Use.

Create the Case

Create a PeekMed® Software Account

To create a VIRTUGUIDE™ Software[1] account, the local sales consultant sends an email to **VirtuGuide@its.jnj.com**. This email should contain the name and email addresses of both the surgeon and sales consultant. Both entities will receive an account activation email within one business day.

Once the password is created, the users can log-in at **app.peekmed.com**. The surgeon users and their respective sales consultants accounts are automatically linked.



Create your PeekMed® account | app.peekmed.com

Start a Case

To begin a case, enter the “Case Manager” page and select “Create New Case”.

Note

Previous or other upcoming cases can be viewed and selected on the Case Manager page.

1. Enter the initial case information on the proceeding page. Upload the patient image files.

2. Once uploaded, image slices can be reviewed prior to proceeding.

3. Enter remaining case and patient information prior to proceeding with planning.

Start a case and upload CT scans.

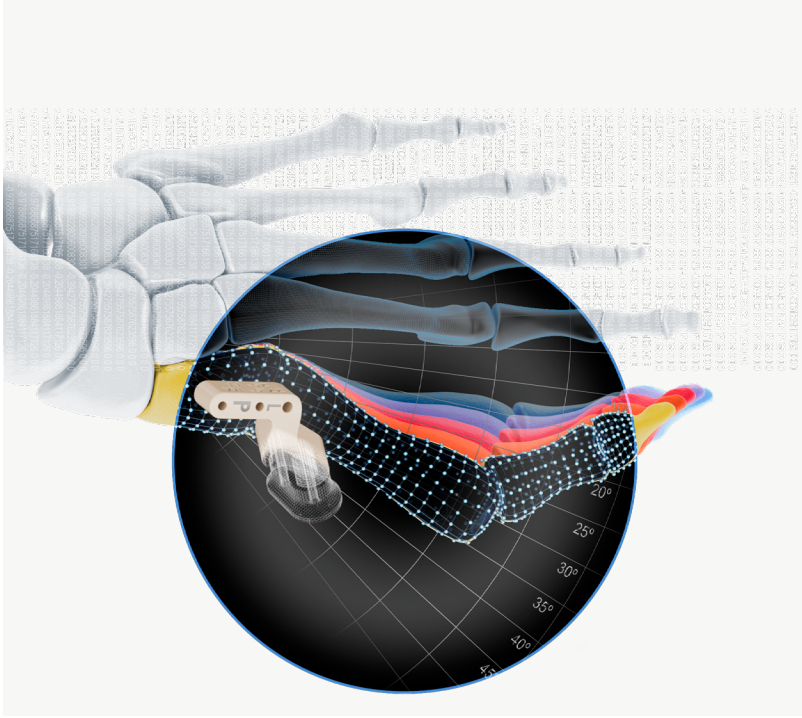
Surgical Technique

Approve the Pre-Operative Analysis

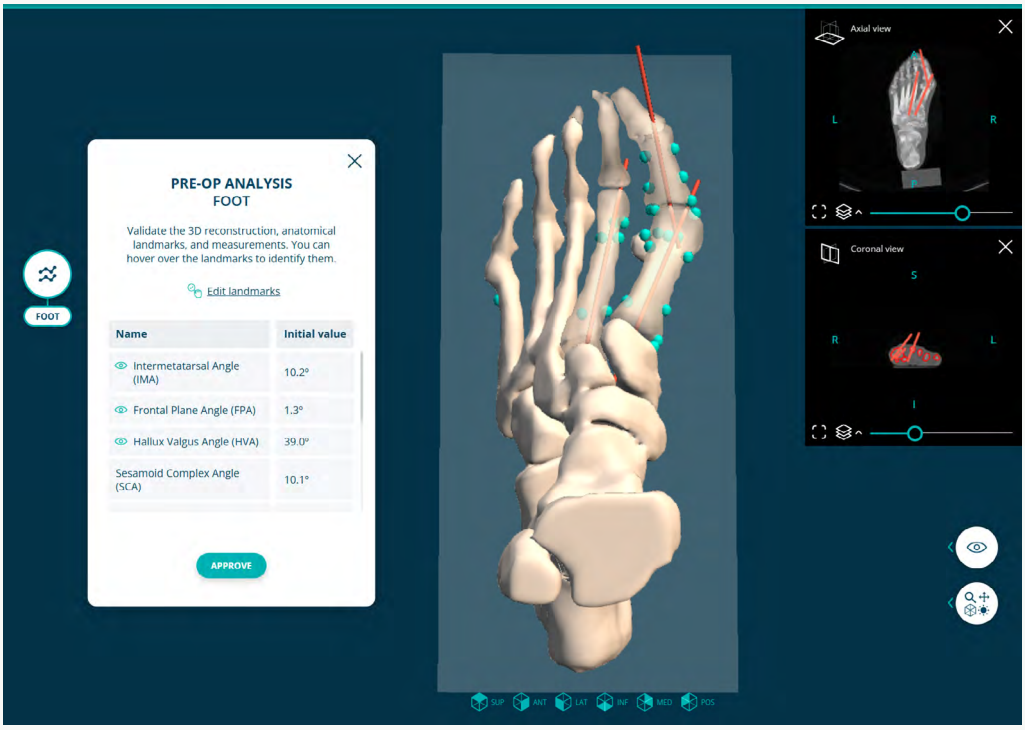
Preoperative AI Automated Anatomy Analysis

The VIRTUGUIDE™ AI Planning Software[1] will analyze the patient's anatomy based on the provided images. The software[1] outputs key measurements relevant to Lapidus surgery including common metrics and measurements. The analysis generates anatomical landmarks that are used to determine measurements.

Adjust and approve the anatomical landmarks as needed.



Pre-operative – AI Automated Anatomy Analysis.



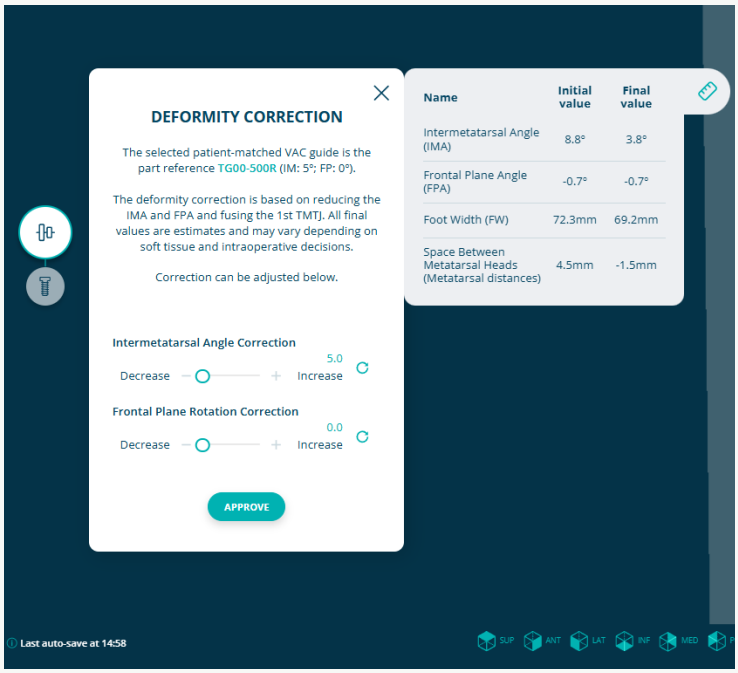
Pre-operative Analysis.

Plan the Case

The software[1] automatically generates a virtual “Deformity Correction”, providing updated surgical plan measurements and suggesting a patient matched VAC Guide.

Adjust Intermetatarsal and Frontal Plane angle correction as desired.

Under “Implant Templating”, various Lapidus implants options can be selected and assessed for positioning on the bones.

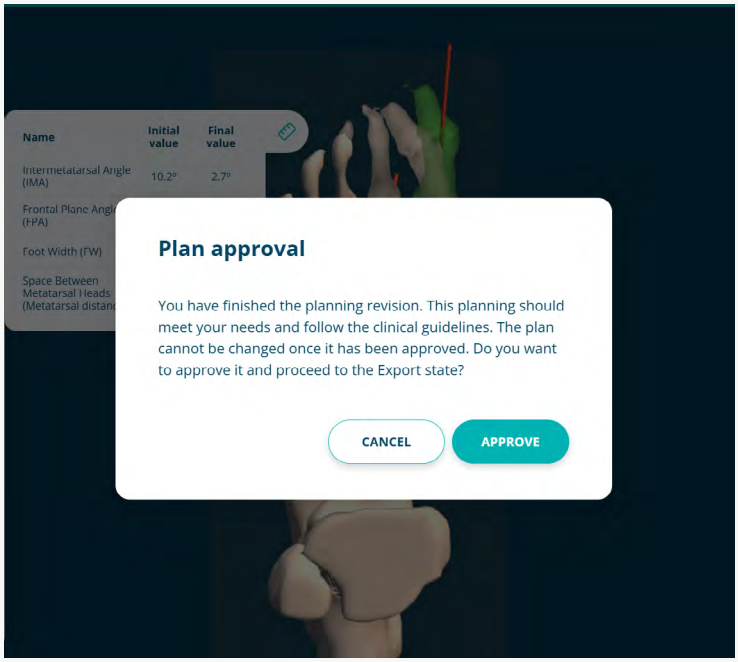


Pre-operative Plan, Adjustments, & Templating.

Review and Approve the Case

Review the plan. The plan cannot be changed once it has been approved.

Should you agree with the plan, provide your approval.

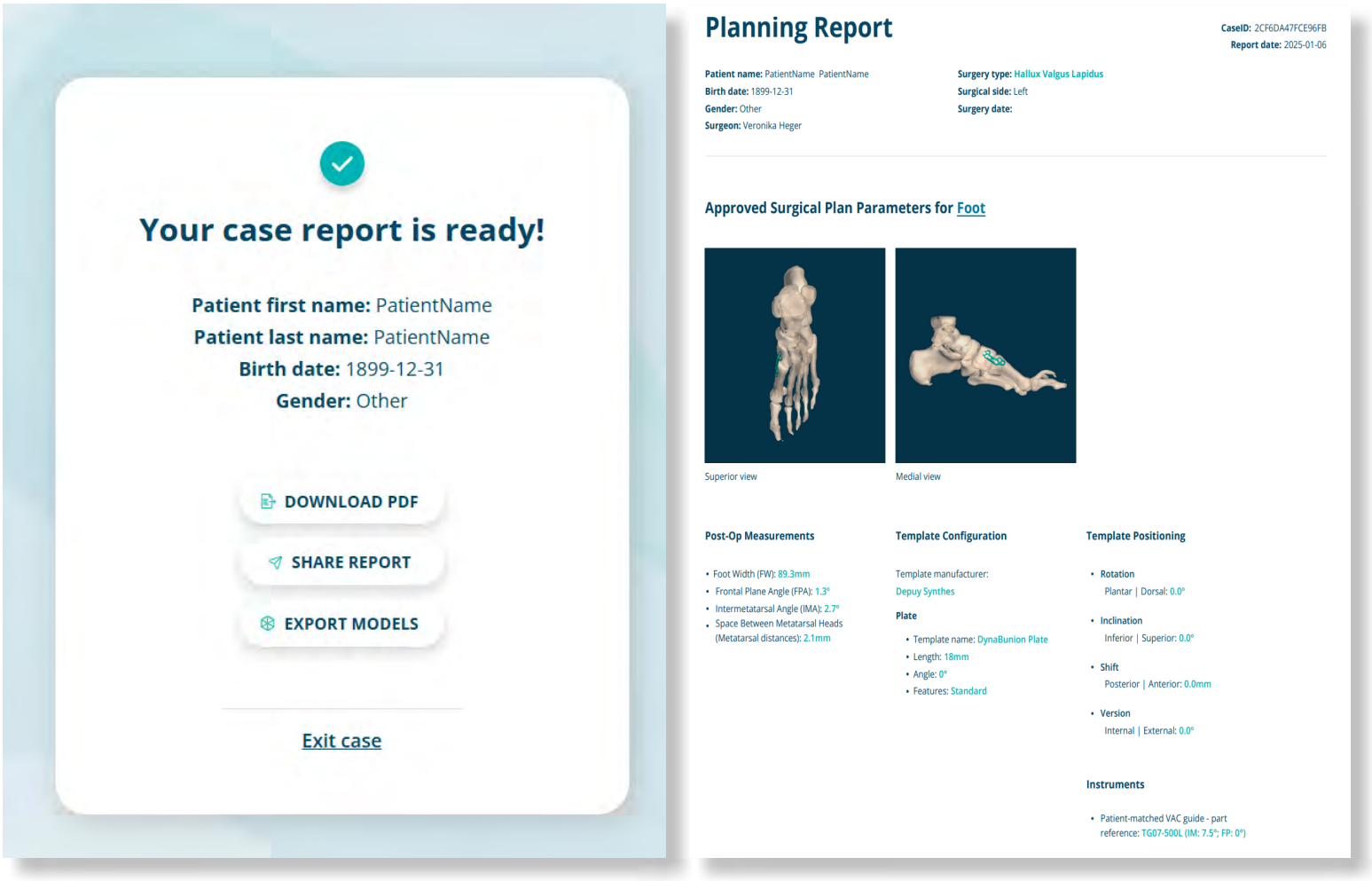


Plan Approval.

Surgical Technique

Export the Case

When the case is approved, the final report is emailed to the surgeon and the associated sales consultant accounts. The final report lists the pre-operative and virtual plan as well as the required VAC Guide Instrument Kit required for the surgery.



Final Report.

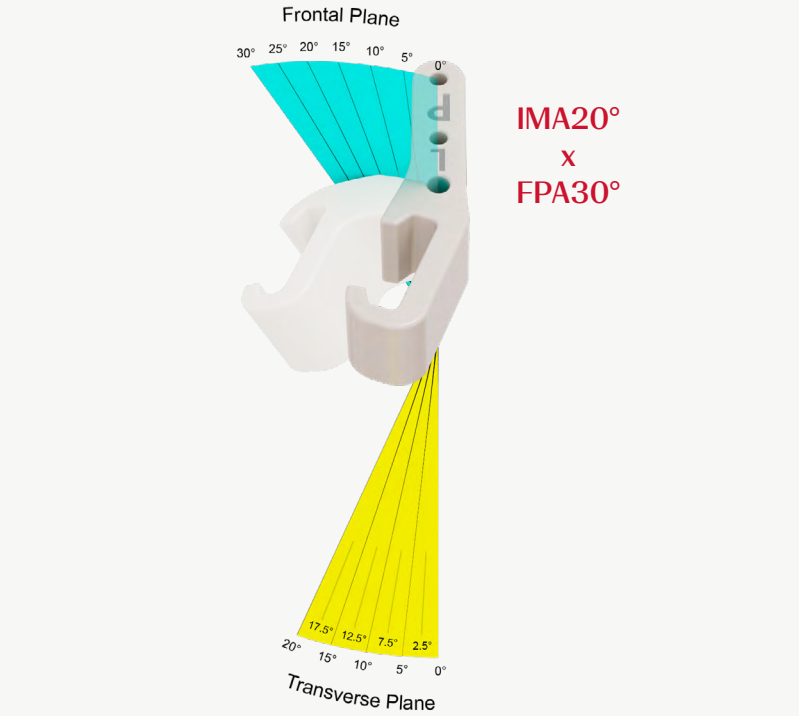
VIRTUGUIDE™ Software[1] - Postoperative Option

Postoperative or follow-up patient scans may be uploaded to the case within the software[1], enabling a direct visual comparison between preoperative and postoperative situation.

VAC Guide Kit

The following components need to be ordered for the surgery:

Instruments	
TGXX-XXXX	VIRTUGUIDE - VAC Guide Kit, sterile
7000-JRW4	VIRTUGUIDE - Joint Seeking Pin, sterile
7000-20K4	2.0mm K-wire, w/Trocar, L102mm, sterile (pack of 4)
7000-20K6	2.0mm K-wire, w/Trocar, L152mm, sterile (pack of 4)
7000-40SB	Sawblade, long, sterile



The VAC Guide has specific Frontal Plane and Transverse Plane Angles.

The VIRTUGUIDE - VAC Guide Kit, sterile is suggested by the software and approved by the surgeon.

Reusable instruments required for the surgery are available in the CrossRoads Modular Tray Sytem (CMTS).

Note

The VAC Guide Kit is designed for single patient use only and must never be reused.

Surgical Technique

Dorsomedial Incision

Create a dorsomedial incision that is approximately 20 degrees from direct dorsal and medial to the extensor hallucis longus.

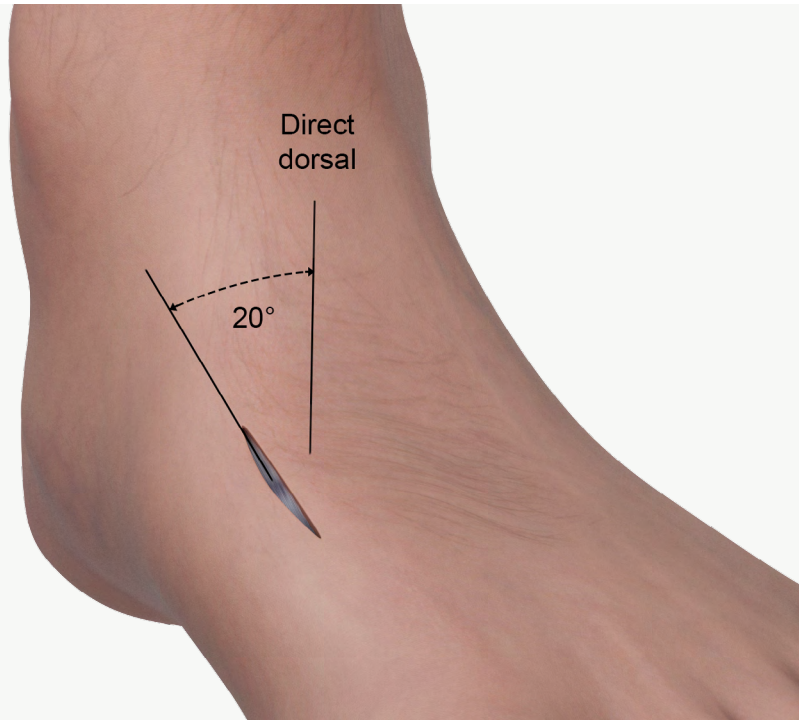
Note

The incision should be 3-4cm in length.

Retract the skin incision laterally. Create a small direct dorsal stab incision into the TMT joint capsule to expose access to the joint.

The size of this incision should be just large enough to fit the paddle of the Joint Seeking Pin Guide.

Do not expose and mobilize the entire joint capsule and do not place an osteotome into the joint. The joint space should still be tight.

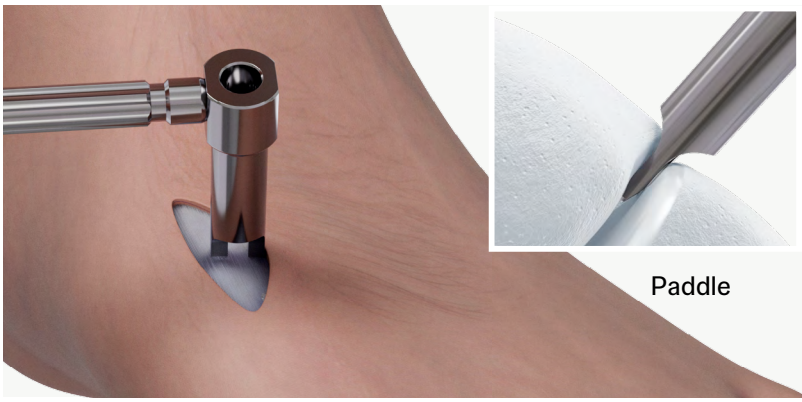


Dorsomedial incision.

Stab incision.

Placement of Patient Matched VAC Guide

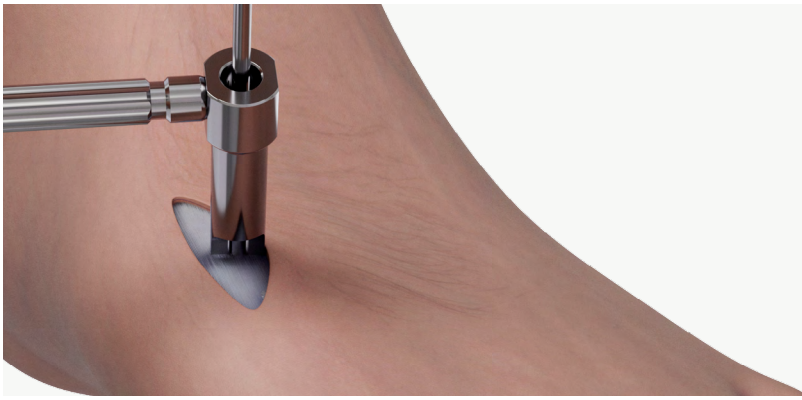
Instruments	
280297PKG	Universal Handle
380152PKG	VIRTUGUIDE - Joint Seeking Pin Guide
7000-JRW4	VIRTUGUIDE - Joint Seeking Pin, sterile



Place Joint Seeking Guide.

Attach Joint Seeking Pin Guide to Universal Handle. Place Joint Seeking Pin Guide into the TMT joint where the stab incision was made.

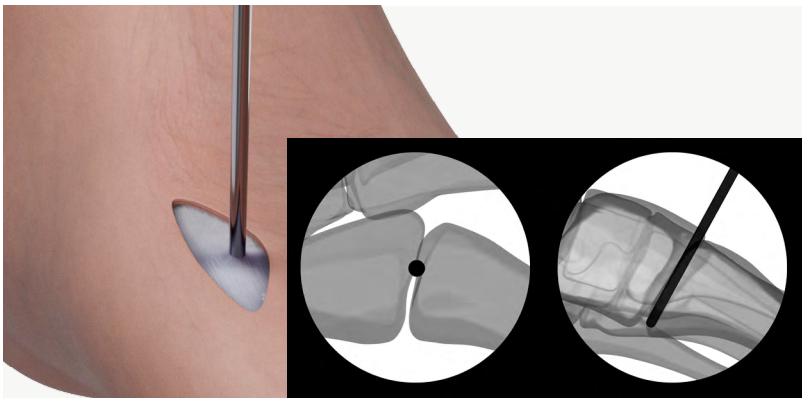
Place Joint Seeking Pin through the Guide and into the joint at a direct dorsal orientation until it is apposing the plantar cortex. The Joint Seeking Pin can be inserted either using the Wire Driver of the Power Tool or a Mallet.



Insert Joint Seeking Pin.

Note

Verify on AP and Lateral fluoroscopy that the Joint Seeking Pin is centered on the joint.



Verify position of Joint Seeking Pin.

Surgical Technique

Insert VAC-Guide

Instruments	
TGXX-XXXX	VIRTUGUIDE - VAC Guide , sterile
7000-20K4	2.0mm K-wire, w/Trokar, L102mm, sterile (pack of 4)
7000-20K6	2.0mm K-wire, w/Trokar, L152mm, sterile (pack of 4)

The VIRTUGUIDE - VAC Guide Kit, sterile is suggested by the software and approved by the surgeon.

Reusable instruments required for the surgery are available in the CrossRoads Modular Tray Sytem (CMTS).

Note

The VAC Guide Kit is designed for single patient use only and must never be reused.

Assemble distal Insert into the VAC Guide.

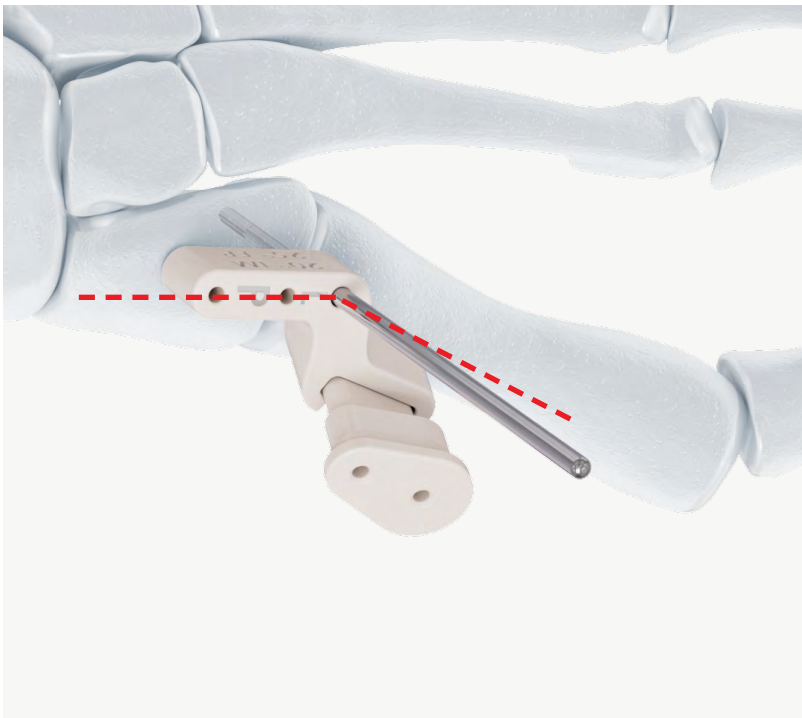
The thinner portion of the Insert should be protruding on the side that is marked “L” (L=left) or “R” (R=right) and “P” (P=proximal). The wider side of the Insert should be facing distally.

Slide the VAC Guide over the Joint Seeking Pin through the central hole until the Guide is in apposition with the foot. Pivot Guide around the Pin until the proximal portion of the Guide is central over the Cuneiform.

Note

Ensure the two proximal wire holes are not too close to the intercuneiform space as Wires may skive into the space during placement central in the Cuneiform.

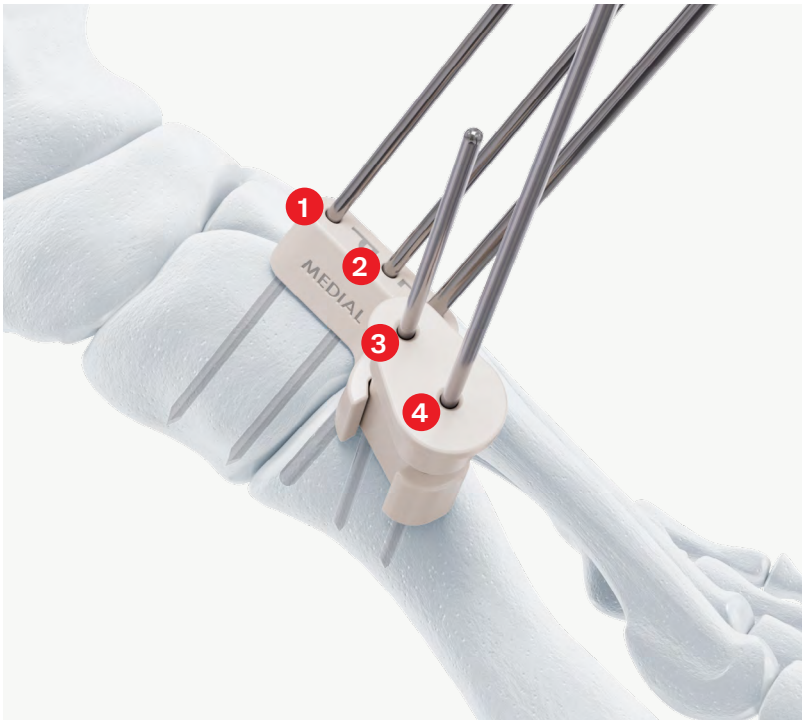
Assemble VAC Guide.



Position VAC Guide.

Insert Wires

In the Cuneiform, place a long 2.0mm Wire first proximally (1), then a short 2.0mm Wire distally (2). In the Metatarsal, place a short 2.0mm Wire proximally (3), then a long 2.0mm Wire distally (4).



Insert Wires.

Note

Ensure that the Wire trajectory is not altered by the adjacent Wires by using a combination of short and long Wires.

(!) Under fluoroscopy, ensure all four Wires have bicortical placement before proceeding.

Remove the distal Insert from the VAC Guide. Remove the Joint Seeking Pin and then the VAC Guide.

Remove Joint Seeking Pin and VAC Guide.

Surgical Technique

Bone Resections

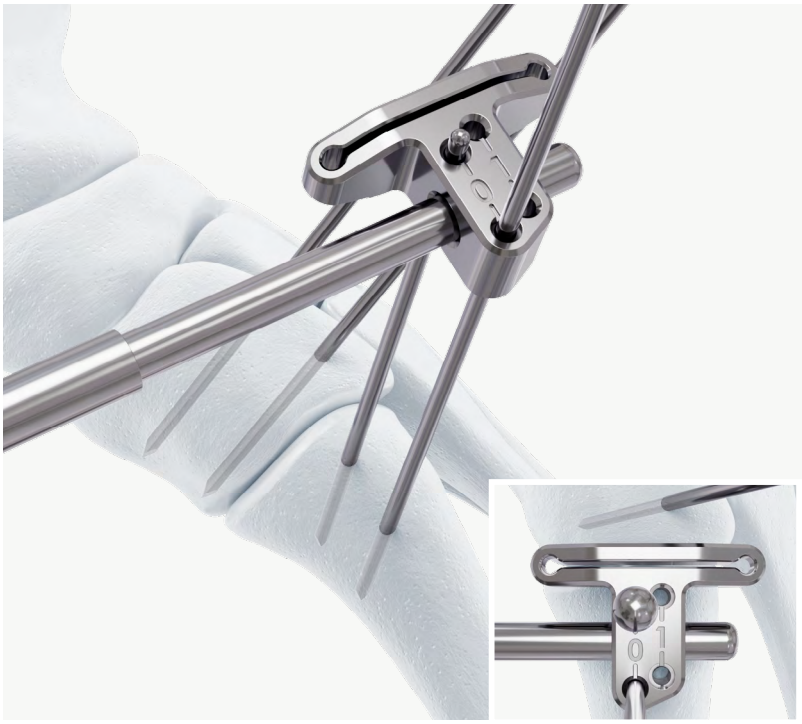
Instruments	
380000PKG	VIRTUGUIDE - Cut Guide
280297PKG	Universal Handle
7000-40SB	Sawblade, long, sterile

Dissect the joint capsule to expose the joint. The joint does not need to be mobilized.

Place the Cut Guide over the Metatarsal Wires through the holes marked “0”.

Note

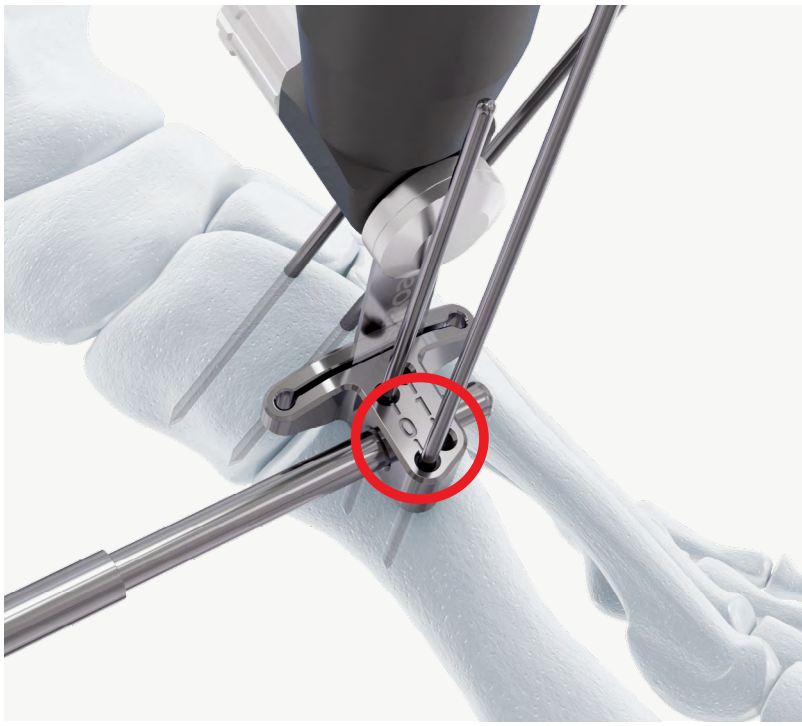
The 0 Cut Guide position will remove between 0.9-2.1mm of Metatarsal and Cuneiform bone depending on the amount of distraction.



Cut Guide placement on Metatarsal.

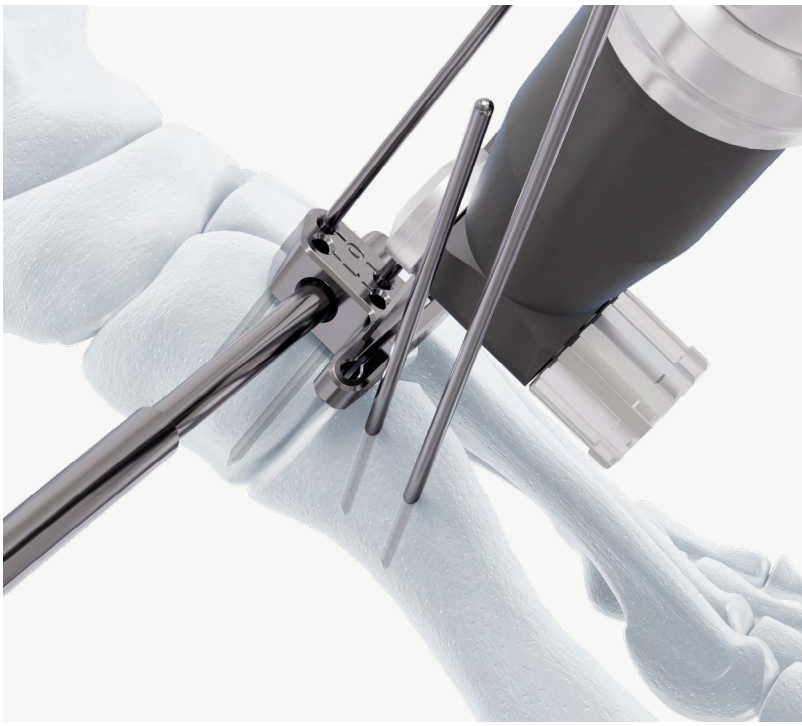
Pass the Sawblade through the Cut Guide and resect the bone of the Metatarsal.

The blunt end of the Universal Handle can be placed through the hole on the Cut Guide. This will aid in maintaining Cut Guide position regardless of saw vibrations.



Cut Metatarsal.

Then, apply the Cut Guide on the proximal Wires and resect the bone of the Cuneiform.
The blunt end of the Universal Handle can be placed through the hole on the Cut Guide. This will aid in maintaining Cut Guide position regardless of saw vibrations.
Keep all Wires fixated.



Cut Cuneiform bone.

If not enough bone was resected, the “re-cut” slot marked “1” can be utilized to make an additional cut on either joint surface.

Note

Ensure position and angulation of Sawblade to avoid cutting of 2nd Metatarsal.

Note

The “1” Cut Guide position will remove additional 1.5mm of bone.

Additional cut if needed.

* If no distal soft-tissue release is already been performed.

Surgical Technique

Joint Preparation

Instruments	
280268PKG	Hintermann Retractor

Place the Hintermann Retractor over the central Wires to distract the joint.

Remove bony wafers created during bone resections.

Distract bones.

Fenestrate joint surfaces with preferred technique and evaluate the clinical need for additional soft-tissue releases prior to proceeding.

Note

- 2.0mm and 2.5mm Drill Bits are available to be used for fenestration.
- Multiple biologics options are available.

Fenestrate joint surfaces.

Re-align and Compress with the RAC Block

Alignment

Instruments

380002LR-NSPKG RAC BLOCK 0 - 0° UNIVERSAL

Apply pressure to the medial aspect of the first Metatarsal squeezing towards the 2nd Metatarsal to allow ease of placement of the RAC Block (see arrow in top picture).

Starting with 0 RAC Block 0°, align the four dorsal holes of Block over the four dorsal Wires. Slide down RAC Block over all 4 Wires to compress joint space and generation correction and alignment. Apply plantar counter-pressure (see arrow in below picture) during RAC Block placement to avoid any undesired plantar translation of the metatarsal.

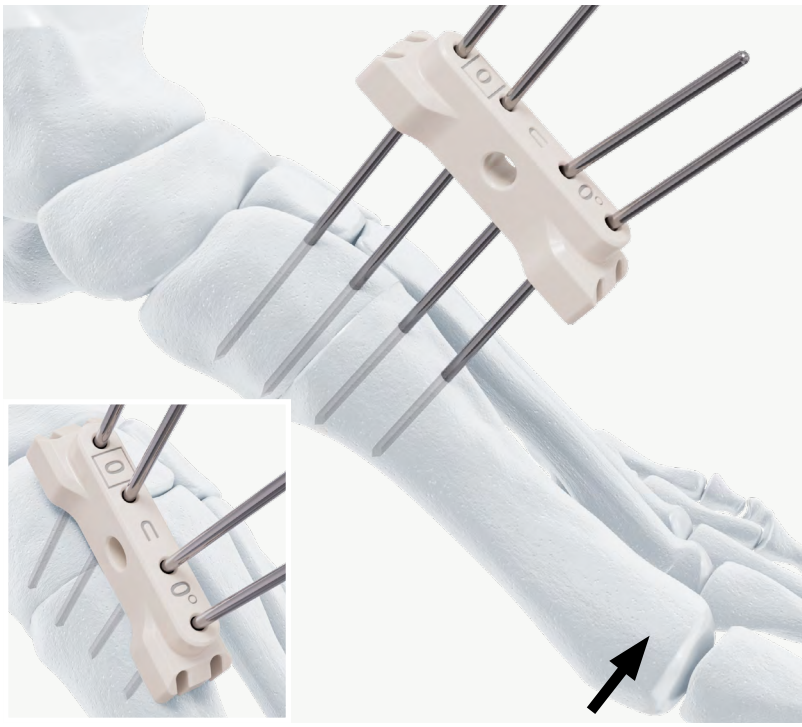
(!) Verify desired correction has been achieved by assessing Intermetatarsal and Frontal Plane angles under fluoroscopy.

Note

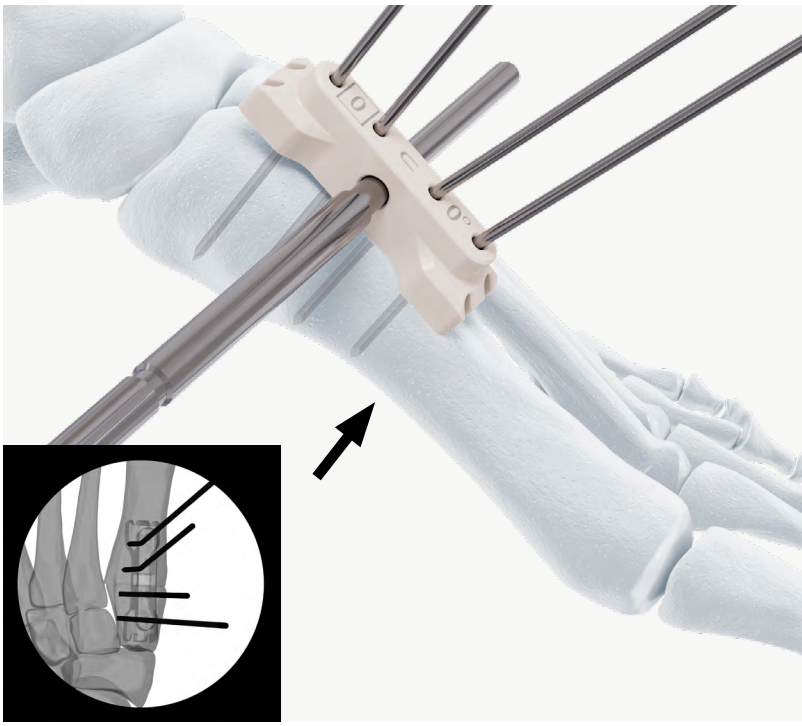
The Universal Handle can be slid through the RAC Block to aid in generating additional leverage.

Sesamoid Alignment[2]

In the event that the Sesamoid complex demonstrates persistent subluxation following Frontal Plane Angle correction and Intermetatarsal Angle reduction, there are soft-tissue contractures that could require intervention. These contractures are most likely contractures of the lateral Capsule or lateral Sesamoidal Ligaments.



Slide RAC Block over Wires.



Apply plantar counter-pressure.

Surgical Technique

Left	Right	RAC Block
380003L-NSPKG	380003R-NSPKG	0 with 5°
380004L-NSPKG	380004R-NSPKG	0 with 10°

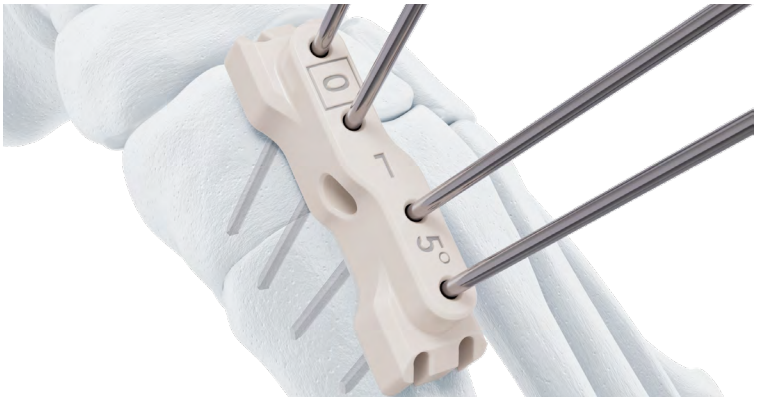
If additional rotation in the Frontal plane is desired, use RAC Block - 5° or - 10° to generate 5 or 10 degrees of additional rotation.

(!) Verify desired correction has been achieved by assessing Intermetatarsal and Frontal Plane angles under fluoroscopy.

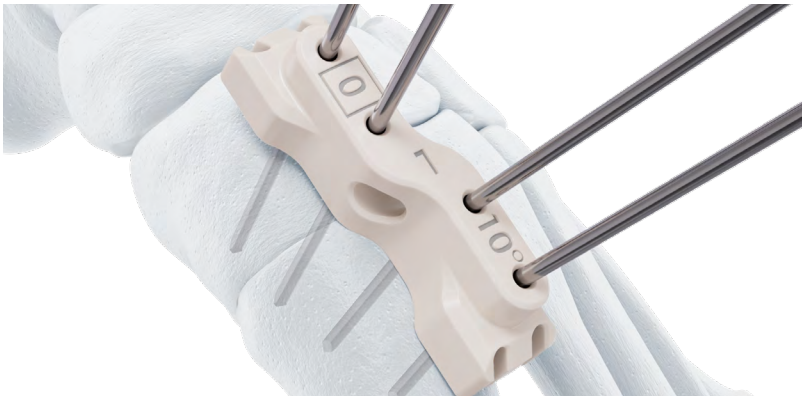
If sagittal translation is desired, carefully translate and hold metatarsal plantarly while finalizing placement of RAC Block.

Note

Ensure proper alignment in the sagittal plane to ensure functional stability.



RAC Block - Angle 5°.



RAC Block - Angle 10°.

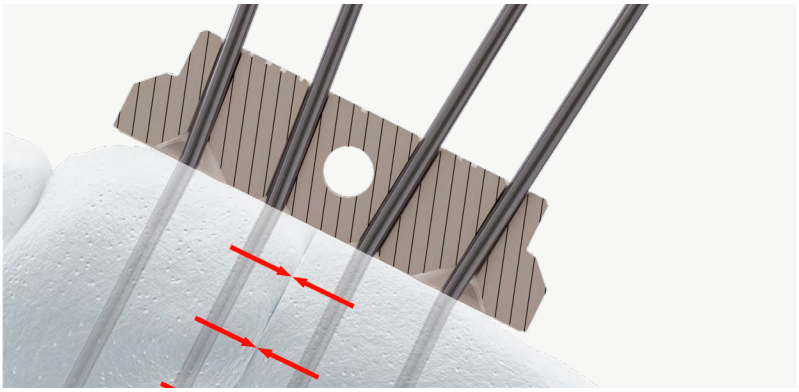
RAC Block - Angle 5°.

RAC Block - Angle 10°.

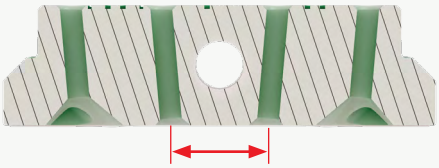
Compression

(!) Verify if desired compression is achieved under AP and lateral fluoroscopy by verifying apposition of joint surfaces.

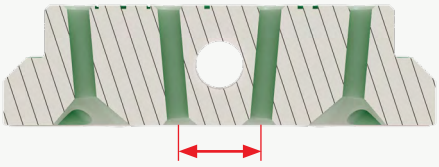
If additional compression is needed, remove 0 - RAC Block (Standard) and replace with a 1 - RAC or 2 - RAC Block for greater compression until apposition is achieved.



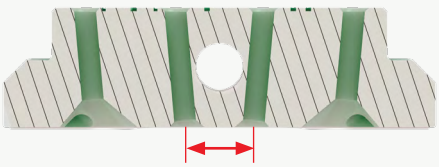
RAC Block - Compression.



0 - RAC Block.



1 - RAC Block.

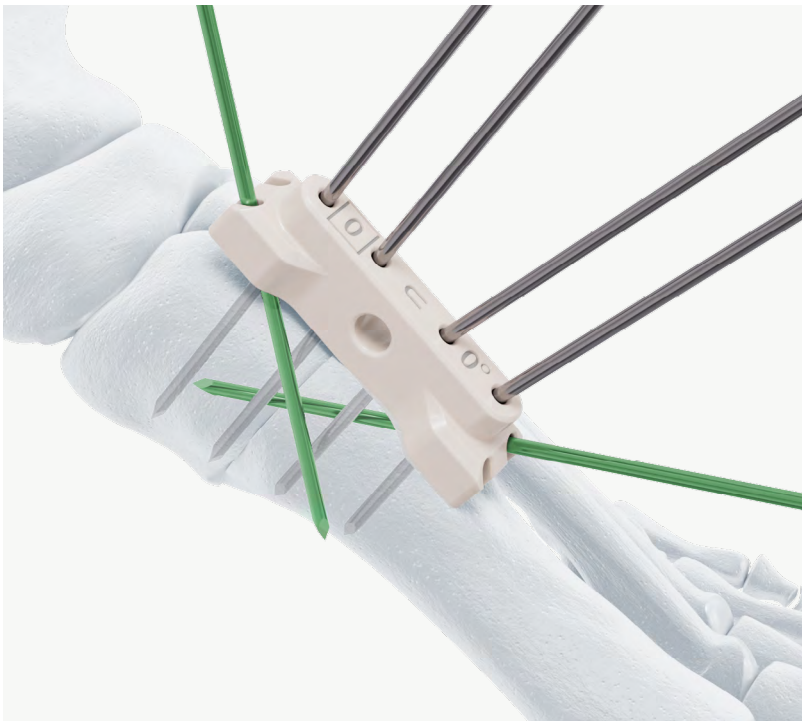


2 - RAC Block.

Universal	Left	Right	RAC Block
380005LR-NSPKG			1 with 0°
	380006L-NSPKG	380006R-NSPKG	1 with 5°
	380007L-NSPKG	380007R-NSPKG	1 with 10°
38000BLR-NSPKG			2 with 0°
	380009L-NSPKG	380009R-NSPKG	2 with 5°
	380010L-NSPKG	3800I0R-NSPKG	2 with 10°

Surgical Technique

The RAC Block allows the placement of two optional oblique Wires through the RAC Block to maintain alignment of the bone so that the RAC Block and the other four Wires can be removed to avoid interference with the implant if necessary.



Oblique Wire placement if necessary.

Additional Intermetatarsal Angle Correction (Optional)

Instruments	
280299PKG	DYNABUNION IM Radiolucent Reducer Wire Template
280286PKG	Wire Guide
280299PKG	CORA Joystick

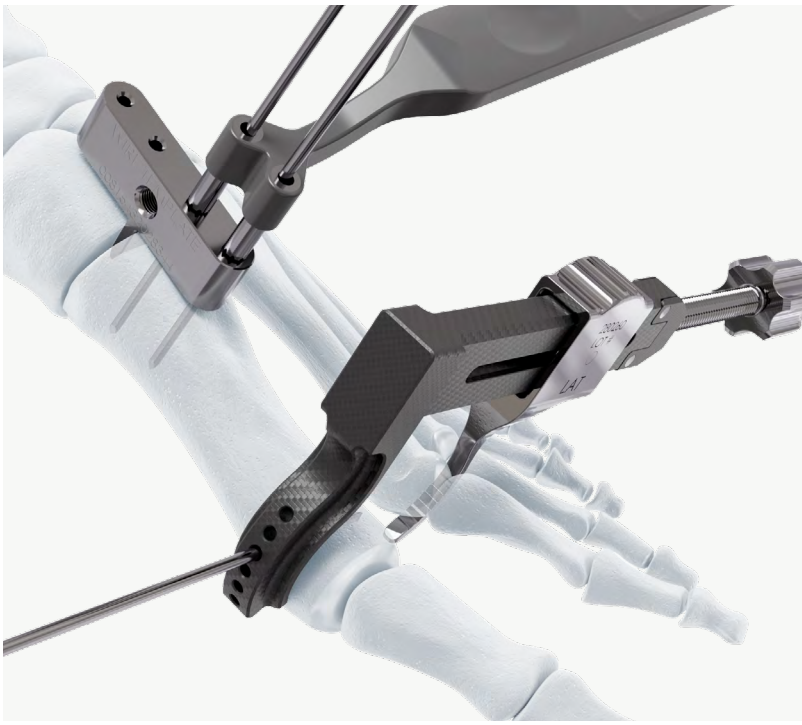
If the correction needs further adjustment, manual correction can be made. Remove RAC Block and Wires located in the Cuneiform. Slide the Wire Guide over the two Metatarsal Wires. Insert the Joystick Handle over the Metatarsal Wires.

Make a small incision between the necks of the 2nd and 3rd Metatarsal* and insert the DynaBunion IM Radiolucent Reducer. Tighten the knob clockwise until the medial arm of the Reducer is secure on the 1st Metatarsal head. Do not close down the Intermetatarsal angle yet.
Utilize the Joystick Handle to generate frontal plane correction by rotating the Sesamoids into proper alignment. While holding this corrected position, insert a short 2.0mm Wire through one of the holes on the medial arm of the Reducer into the first Metatarsal head. Turn the knob of the Reducer until desired Intermetatarsal angle is reached.

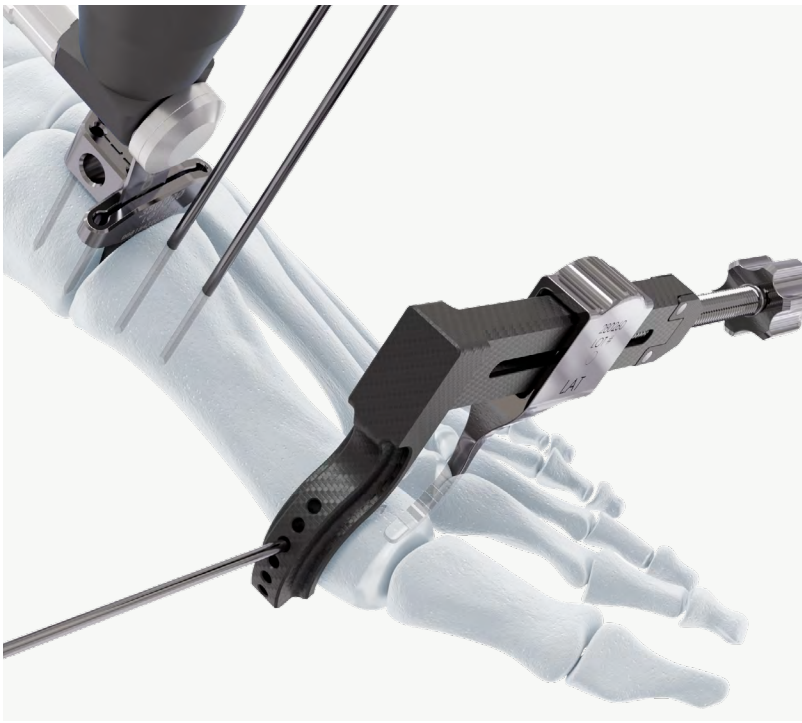
Insert the Cuneiform Wires through the holes of the Wire Guide. Remove the Wire Guide completely. Slide the VIRTUGUIDE Cut Guide over the Cuneiform Wires. Perform an additional bone resection on the Cuneiform.

Continue with the procedure by removing the Cut Guide and placing the RAC Block.

* If no distal soft-tissue release is already been performed.



Place Wire Guide, Joystick Handle and Reducer.



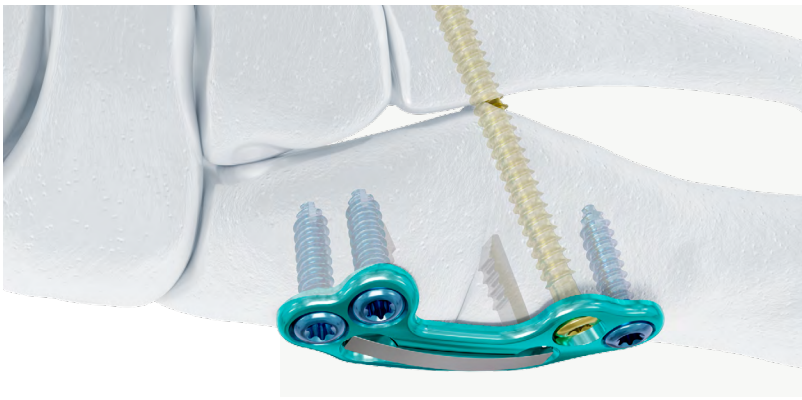
Additional bone resection on Cuneiform.

Surgical Technique

Fixation with Implant*

The VIRTUGUIDE™ Instruments are compatible with a range of J&JMedTech Lapidus fixation options.
See instructions for use (IFU) or Surgical Technique Guide (STG) for indications of each implant system.

STG and IFU are available as PDF files at: jnjmedtech.com or crextremity.com/labeling



DynaBunion Lapidus Staple Compression Plate with Anti-Drift Bolt.

Lapidus Staple Compression Plate.

TriLEAP™ Lapidus Plate.

Continous Compression Implant.

* Implants are not part of the VIRTUGUIDE™ System.

Product Information

Disposable Instruments

single used, sterile packaged

TGXX-XXXX	VIRTUGUIDE - Patient Matched VAC Guide, sterile	
7000-20K4	2.0mm K-Wires, w/Trocar, L 102 mm, sterile (pack of 4)	
7000-20K6	2.0mm K-Wires, w/Trocar, L 152 mm, sterile (pack of 4)	
7000-JRW4	VIRTUGUIDE - Joint Seeking Pin, sterile	
7000-40SB	Sawblade, long, sterile	

The VIRTUGUIDE - VAC Guide Kit, sterile is recommended by the software and approved by the surgeon.

Product Information

VAC Guide Instrument Kits, sterile

Left Foot		Frontal Plane Angle						
		0	5	10	15	20	25	30
IM Angle	5°	TG00-500L	TG00-505L	TG00-510L	TG00-515L	TG00-520L	TG00-525L	TG00-530L
	7.5°	TG07-500L	TG07-505L	TG00-510L	TG00-515L	TG00-520L	TG00-525L	TG00-530L
	10°	TG01-000L	TG01-005L	TG01-010L	TG01-015L	TG01-020L	TG01-025L	TG01-030L
	12.5°	TG12-500L	TG12-505L	TG12-510L	TG12-515L	TG12-520L	TG12-525L	TG12-530L
	15°	TG01-500L	TG01-505L	TG01-510L	TG01-515L	TG01-520L	TG01-525L	TG01-530L
	17.5°	TG17-500L	TG17-505L	TG17-510L	TG17-515L	TG17-520L	TG17-525L	TG17-530L
	20°	TG02-000L	TG02-005L	TG02-010L	TG02-015L	TG02-020L	TG02-025L	TG02-030L
	22.5°	TG22-500L	TG22-505L	TG22-510L	TG22-515L	TG22-520L	TG22-525L	TG22-530L
	25°	TG02-500L	TG02-505L	TG02-510L	TG02-515L	TG02-520L	TG02-525L	TG02-530L
	27.5°	TG27-500L	TG27-505L	TG27-510L	TG27-515L	TG27-520L	TG27-525L	TG27-530L

Right Foot		Frontal Plane Angle						
		0	5	10	15	20	25	30
IM Angle	5°	TG00-500R	TG00-505R	TG00-510R	TG00-515R	TG00-520R	TG00-525R	TG00-530R
	7.5°	TG07-500R	TG07-505R	TG00-510R	TG00-515R	TG00-520R	TG00-525R	TG00-530R
	10°	TG01-000R	TG01-005R	TG01-010R	TG01-015R	TG01-020R	TG01-025R	TG01-030R
	12.5°	TG12-500R	TG12-505R	TG12-510R	TG12-515R	TG12-520R	TG12-525R	TG12-530R
	15°	TG01-500R	TG01-505R	TG01-510R	TG01-515R	TG01-520R	TG01-525R	TG01-530R
	17.5°	TG17-500R	TG17-505R	TG17-510R	TG17-515R	TG17-520R	TG17-525R	TG17-530R
	20°	TG02-000R	TG02-005R	TG02-010R	TG02-015R	TG02-020R	TG02-025R	TG02-030R
	22.5°	TG22-500R	TG22-505R	TG22-510R	TG22-515R	TG22-520R	TG22-525R	TG22-530R
	25°	TG02-500R	TG02-505R	TG02-510R	TG02-515R	TG02-520R	TG02-525R	TG02-530R
	27.5°	TG27-500R	TG27-505R	TG27-510R	TG27-515R	TG27-520R	TG27-525R	TG27-530R

Reusable Instruments

Included in CrossRoads Modular Tray System (CMTS).

For further details on the CMTS set please refer to the IFU (LA1955) at crextremity.com

1600-CRCM 1600-LMCM	CrossRoads Comprehensive Set CrossRoads Lapidus and Midfoot Procedure Set
380002LR-NSPKG 380005LR-NSPKG 380008LR-NSPKG	0 RAC Block 0° Universal 1 RAC Block 0° Universal 2 RAC Block 0° Universal
380003R/L-NSPKG 380006R/L-NSPKG 380009R/L-NSPKG	0 RAC Block 5° Right or Left 1 RAC Block 5° Right or Left 2 RAC Block 5° Right or Left
380004R/L-NSPKG 380007R/L-NSPKG 380010R/L-NSPKG	0 RAC Block 10° Right or Left 1 RAC Block 10° Right or Left 2 RAC Block 10° Right or Left
380000PKG	VIRTUGUIDE - Cut Guide
280297PKG	Universal Handle
380152PKG	VIRTUGUIDE - Joint Seeking Pin Guide

Product Information

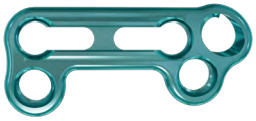
280268PKG	Hintermann Distractor	
280299PKG	Dynabunion IM Radiolucent Reducer	
280286PKG	Wire Template	
280299PKG	CORA Joystick	

Implants

Implants are not part of the VIRTUGUIDE™ System.

DynaBunion™ SCP Plates, SCP LC and SCP LZ Plates

The implants displayed are not components of the VIRTUGUIDE™ system. They represent potential implant options for Lapidus fixation. Please consult the relevant Instruction for Use and Surgical Technique Guide.

7108-DSTR	DynaBunion™ Staple Compression Plate, Standard, Right	
7108-DSTL	DynaBunion™ Staple Compression Plate, Standard, Left	
7108-DSHR	DynaBunion™ Staple Compression Plate, Short, Right	
7108-DSHL	DynaBunion™ Staple Compression Plate, Short, Left	
7100-LC18-A	Staple Compression Plate, LC, Alpha	
7100-LC18-B	Staple Compression Plate, LC, Beta	
7100-LZ18-A	Staple Compression Plate, LZ, Alpha	
7100-LZ18-B	Staple Compression Plate, LZ, Beta	

Product Information

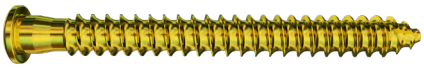
(DynaBunion™ SCP Plates and SCP LC / - LZ Plates continued)

Screws

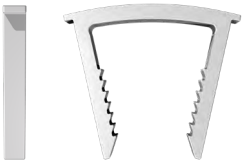
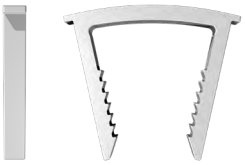
15PL-3010 - 15PL-3030	3.0 mm Polyaxial Locking Screws 10-30 (2mm increments)	
15PL-3510 - 15PL-3530	3.5 mm Polyaxial Locking Screws 10-30 (2mm increments)	
15NL-3010 - 15NL-3030	3.0 mm Non-Locking Screws 10-30 (2mm increments)	
1500-3510 - 1500-3550	3.5 mm Non-Locking Screws 10-50 (2mm increments)	

Anti-Drift Bolt™

(For use with DynaBunion™ SCP)

15LP-3528- 15LP-3546	3.5 mm Non-Locking Screws 28-46 (2mm increments)	

Nitinol Options for use with Staple Compression Plates

Part Nr	Bridge	Legs	Description	
7118-1818	18	18	HIMAX™ for use with Standard Plate	
7118-1414	18	14	HIMAX™ for use with Standard Plate	
7118-1814	18	18x14	HIMAX™ for use with Standard Plate	
7118-1818-C	18	18	HIMAX™ C for use with LC and LZ Plate	
7118-1414-C	18	14	HIMAX™ C for use with LC and LZ Plate	
7118-1814-C	18	18x14	HIMAX™ C for use with LC and LZ Plate	

Product Information

TriLEAP™ Lapidus Plates

04.900.027	Lapidus Step Plate, Short
04.900.029	Lapidus Step Plate, Long

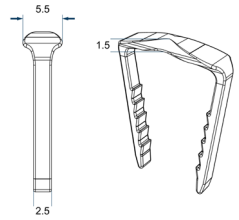
04.900.021	Lapidus Step Plate, Step Size 0, LF
04.900.022	Lapidus Step Plate, Step Size 0, RT
04.900.023	Lapidus Step Plate, Step Size 2, LF
04.900.024	Lapidus Step Plate, Step Size 2, RT
04.900.025	Lapidus Step Plate, Step Size 4, LF
04.900.026	Lapidus Step Plate, Step Size 4, RTt

04.909.010-060	3.5 mm VA Locking Screws 10-60 (2mm increments)

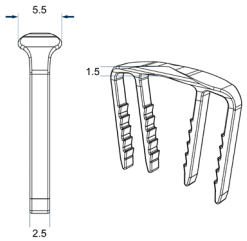
04.909.010-060	3.5 mm Cortex Screws 10-60 (2mm increments)

BME ELITE™ Implant

2-Leg Configuration



4-Leg Configuration

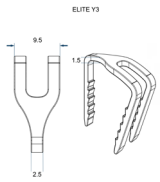


Implant Kit	Bridge*	Legs*	No. of Legs
EL-1515S2	15	15	2
EL-1815S2	18	15	2
EL-1818S2	18	18	2
EL-2015S2	20	15	2
EL-2020S2	20	20	2
EL-2520S2	25	20	2
EL-2520S4	25	20	4
EL-3020S4	30	20	4

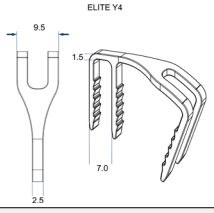
*Sizes in millimeters.
†Leg Configuration for 3 and 4 Leg Implants are the same.
Drill Kit: DK-300
Template Kit: EL-DTS

BME ELITE™ Y Implant

3-Leg Configuration



4-Leg Configuration



Implant Kit	Bridge*	Legs*	No. of Legs
EL-201507Y3	20	15	3
EL-202007Y3	20	20	3
EL-251507Y4	25	15	4
EL-252007Y4	25	20	4
EL-301507Y4	30	15	4
EL-302007Y4	30	20	4

Degree of curvature of BME ELITE Y Implants in the closed position is 20°.
Sizes in millimeters.
Drill / Drill Guide Kits: EL-DTY

Product Information

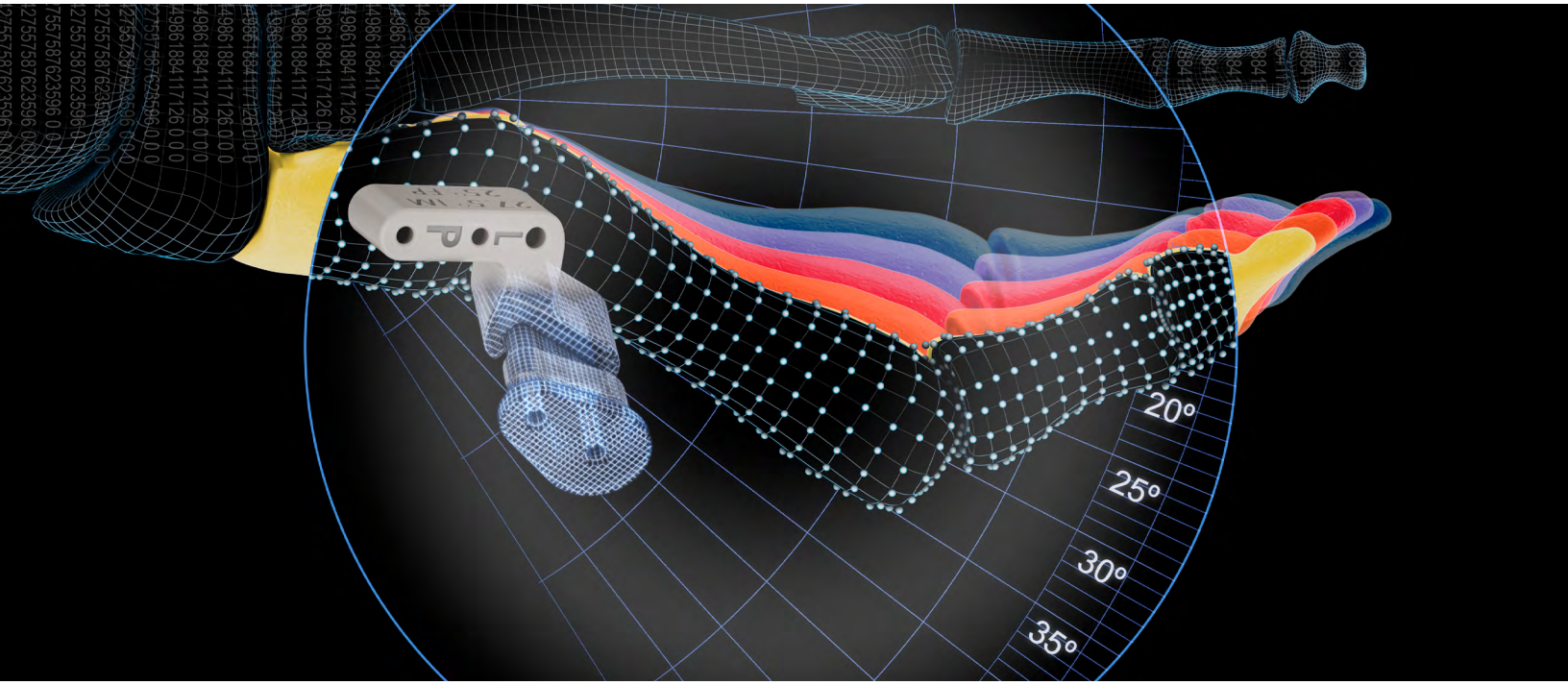
Cannulated Compression Headless Screws

Diameter	Color	Short Thread		Long Thread		
2.0mm		10–40mm*	04.333.010 - 04.333.040	20–40mm*	04.334.020 - 04.334.040	Short Thread: approx. 25% Total Length or 4mm Long Thread: approx. 40% Total Length
2.5mm		10–40mm*	04.333.110 - 04.333.140	20–54mm*	04.334.120 - 04.334.154	Short Thread: approx. 25% Total Length or 4mm Long Thread: approx. 40% Total Length
3.0mm		10–54mm*	04.333.210 - 04.333.254	20–54mm*	04.334.220 - 04.334.254	Short Thread: approx. 25% Total Length or 4mm Long Thread: approx. 40% Total Length
3.5mm		14–60mm* 65-75mm**	04.333.314 - 04.333.375	24–60mm* 65-75mm**	04.334.324 - 04.334.375	Short Thread: approx. 25% Total Length or 4mm Long Thread: approx. 40% Total Length
4.0mm		14–60mm* 65-75mm**	04.333.414 - 04.333.475	24–60mm* 65-75mm**	04.334.424 - 04.334.475	Short Thread: approx. 25% Total Length or 5mm Long Thread: approx. 40% Total Length
4.5mm		20–50mm* 55–110mm**	04.333.520 - 04.333.502	30–50mm* 55–110mm**	04.334.530 - 04.334.502	Short Thread: approx. 25% Total Length or 8mm Long Thread: approx. 40% Total Length
5.5mm		20–50mm* 55–125mm**	04.333.620 - 04.333.605	30–50mm* 55–125mm**	04.334.630 - 04.334.605	Short Thread: approx. 25% Total Length or 8mm Long Thread: approx. 40% Total Length
6.5mm		30–150mm**	04.333.730 - 04.333.710	45–150mm**	04.334.745 - 04.334.710	Short Thread: 16mm Long Thread: 32mm
7.5mm		30–150mm**	04.333.830 - 04.333.810	45–150mm**	04.334.845 - 04.334.810	Short Thread: 16mm Long Thread: 32mm

* 2mm increments
** 5mm increments

VIRTUGUIDE™ SYSTEM

AI-Powered Patient Matched Lapidus Correction



1. The VIRTUGUIDE Pre-operative Planning Software, powered by PeekMed® is developed and owned by Peek Health, S.A. Refer to help.peekmed.com for user manuals, FAQ's, or any support required on the Software.
2. J&JMedtech thanks Dr. Michael Campbell, MD for his valuable inputs for the creation of the section "Sesamoid Alignment". This content represents Dr. Michael Campbell conclusions based on his practice and clinical experience.

This document alone does not provide sufficient background for direct use of VIRTUGUIDE™ system products. Instruction by a surgeon experienced in handling these products is highly recommended, including course work with hands on supervised practice.

Please refer to the package insert(s) or other labeling associated with the devices identified in this Surgical Technique Guide for additional information. Please also refer to the instructions for use for a complete list of, indications, contraindications, warnings and precautions.
CAUTION: Federal Law restricts these devices to sale by or on the order of a physician. Some devices listed in this surgical technique may not have been licensed in accordance with Canadian law and may not be for sale in Canada. Please contact your sales consultant for items approved for sale in Canada. Not all products may currently be available in all markets. Please refer to the instruction for use for a complete list of indications, contraindications, warnings and precautions.
The PeekMed® User Manual is available at: https://help.peekmed.com/user-manual

All surgical technique are available as PDF files at: jnjmedtech.com

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