

LINVATEC
SRS

SHOULDER RESTORATION SYSTEM

Simple | Secure | Versatile



Presto™ Suture Anchor

Soft tissue to bone repairs including but not limited to:

- SLAP (Superior Labrum, Anterior to Posterior)
- Bankhart (Anterior, Inferior, Labrum)
- Reverse Bankhart (Posterior, Inferior, Labrum)
- Hip Labral Repair

Simple | Secure | Versatile

Portal Establishment:

Establish three portals. 1) The Posterior Mid-Glenoid Portal - located in the mid-point of the posterior capsule, 2cm lateral to the glenoid 2) The Anterior Superior Portal – located in the rotator interval area just anterior to the biceps tendon 3) The Anterior Mid Glenoid Portal – located 2cm inferior and 1cm medial to the Anterior Superior Portal. The AS Portal is used for viewing with the scope while preparing the glenoid neck, drilling the pilot holes and inserting the anchors.

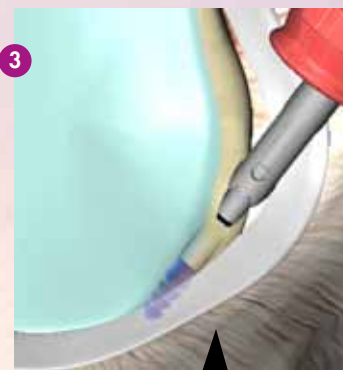
The following technique was developed and is described by Stephen J. Snyder, MD, Southern California Orthopedic Institute, Van Nuys, CA



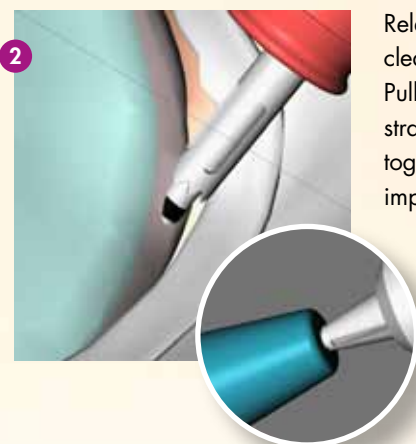
With the scope in the anterior superior portal and the operating instruments in the Anterior Mid Glenoid portal, 7mm Blue Dry-Doc™ Can-nula, the frayed cartilage edge and torn labrum are carefully debrided. The Lib-erator™ elevator is used to elevate the capsule and labrum from the glenoid neck to the 6 o'clock position. The small bur is used to lightly decorticate the glenoid neck. The Bio-Instabil-ity Drill Guide is inserted via the anterior mid glenoid Dry-Doc® Cannula and is stopped 1-2mm from the articular surface at the 5:30 position.



Prior to insertion of the Presto implant, the vertical laser marks should be aligned with the an-terior inferior capsule, en-suring that the implant 's eyelet faces the anterior tissues. Pass the Presto™ implant through the Drill Guide and into the hole. Use a mallet to advance the implant until the distal depth mark on the driver is below the surface of the bone.



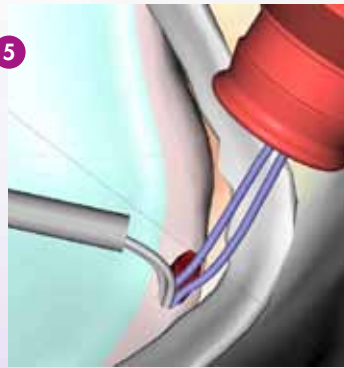
A 2.1mm Bio-Instability Twist Drill Bit is passed through the Drill Guide and into the joint space. The drill is advanced into the bone 3mm posterior from the anterior edge of the glenoid un-til the distal depth mark passes below the bone surface and the proximal depth stop makes contact with the drill guide. The 2.1mm Bio-Instability Bone Punch may also be used for this step if the bone is not extremely hard.



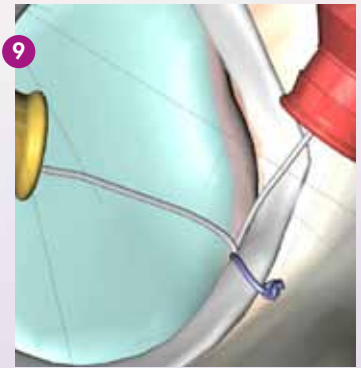
Release the suture from the driver cleats before removing the driver. Pull the implant driver back, as straight as possible, to avoid any toggling or adverse change in implant position.



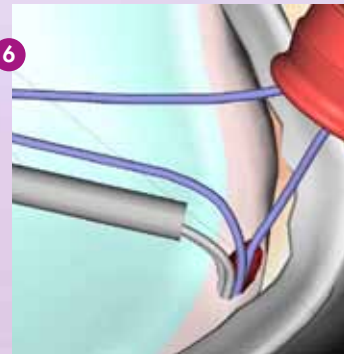
With a crochet hook, retrieve the two sutures exiting from the glenoid side of the implant eyelet. Pull them into the anterior mid-glenoid 5mm Green Dry-Doc[®] cannula. Utilizing a switching stick, store the sutures outside the Dry-Doc[®] Cannula. Pull the remaining two suture limbs (exiting the anchor eyelet closest to the labrum) into the same Anterior Mid-Glenoid Dry-Doc[®] Cannula.



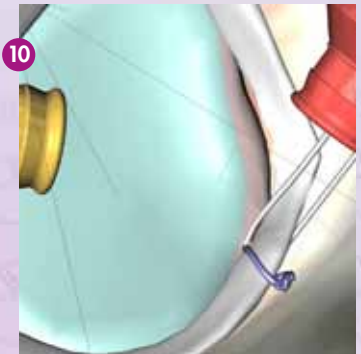
Remove the Suture Saver[™] sheath from both ends of the superior suture located in the Posterior Mid-Glenoid Portal, leaving both sutures in the Posterior Mid-Glenoid Dry-Doc[®] Cannula. Using a crochet hook through the Anterior Mid-Glenoid Dry-Doc[®] Cannula, retrieve the most posterior of the suture limbs, bringing it over the glenoid and out the Anterior Mid-Glenoid Dry-Doc[®] Cannula.



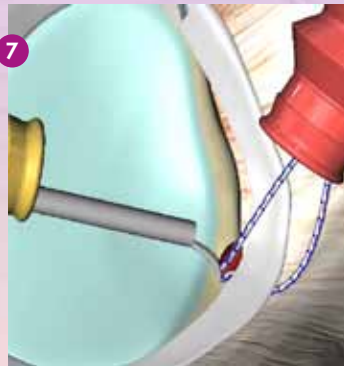
Pass a Spectrum[®] Crescent hook through the ASC and direct it to pass through the center of the superior side of the biceps tendon and "under" the superior labrum. Send the Super Shuttle[®] through the needle and retrieve it into the AMGC using a grasping clamp. Load both sutures in the cannula into the Shuttle and carry them back under the labrum and into the ASC.



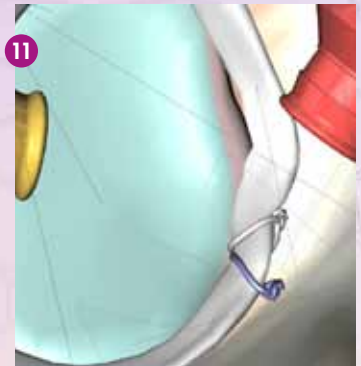
Using a 45 or 60 degree Spectrum[®] Hook loaded with a Super Shuttle[®] through the Anterior Mid-Glenoid Dry-Doc Cannula, pass the most anterior limb of the superior suture under the labrum, through the capsule and out the Anterior Mid-Glenoid Dry-Doc, making sure to stay superior to the Presto[™] anchor.



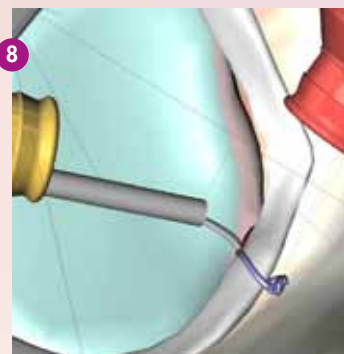
Using a crochet hook, retrieve the strand of the inferior suture exiting the Presto[™] closest to the capsule (the anterior-most limb) bringing it into the posterior mid-glenoid cannula in preparation for shuttling.



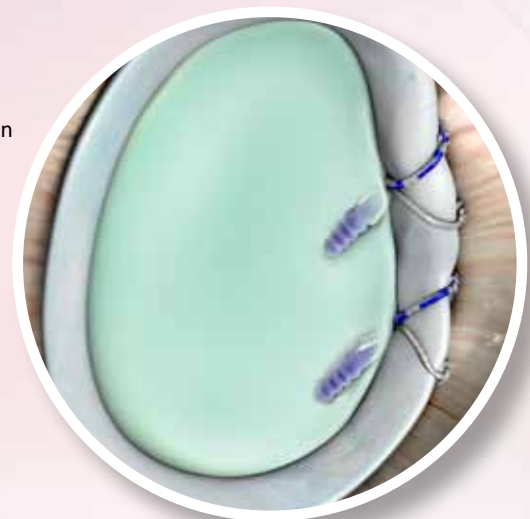
Test the mobility of the sutures by pulling them back and forth through the implant eyelet. Tie the sutures together using the capsule side suture as the post, thereby positioning the knot away from the glenoid.



Test the sutures for mobility through the eyelet by pulling back and forth. Tie the sutures together using a knot pusher. Ensure that the capsule side suture is used for the post strand thus positioning the knot away from the glenoid. For sutures that slide easily, use a SMC or other sliding knot. For static sutures, use a Revo knot.

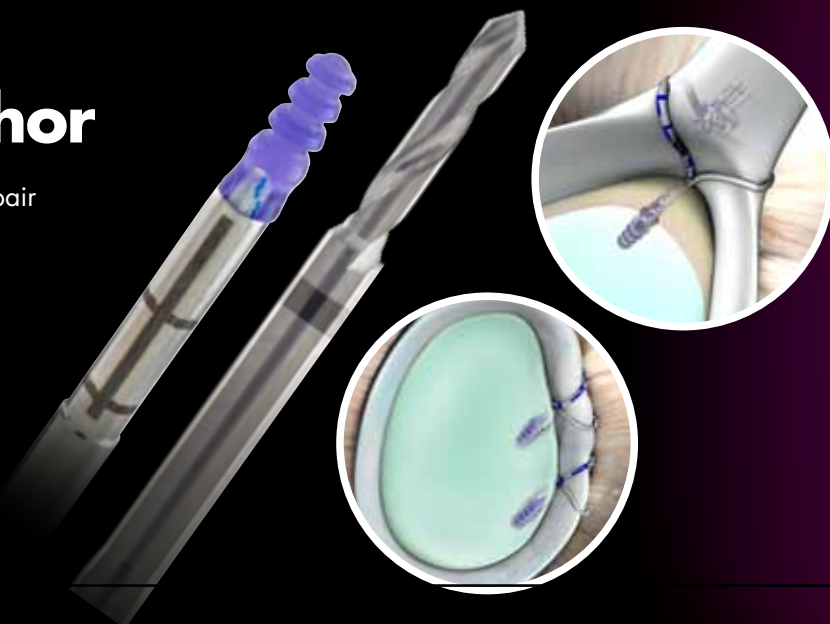


To further secure an avulsed labrum, insert the necessary number of Presto[™] implants in an inferior-to-superior fashion.



Presto™ Suture Anchor

Clinical use: Shoulder Instability or Hip Labral Repair
 Features: Press-in anchor with press fit fixation
 Pull-out: 194 N
 Diameter: 2.9mm
 Length: 10.75mm
 Material: 100% PLA
 Sutures: 1 and 2
 Technique: Drill pilot hole and mallet into place



FEATURES AND BENEFITS

Features	Benefits
Press Fit Style	Streamlines insertion, eliminates the need for a tap, faster procedural times
100% Poly Lactic Acid	Absorbable, Easily Revisable, Radiolucent,
Purple Color	Highly Visible in the Joint
2.9mm Diameter	Optimal small design saves glenoid real estate
Double Loaded Option	Permits additional stitches with fewer anchors; enables surgeons to utilize the "stitch of Burns" (stitches around both sides of the biceps)
Utilizes Bio Mini™ Drill Guides	Familiar platform, Less instrumentation, Saves money
Indications	Indicated for soft tissue to bone repairs
Pre-threaded with two different color strands (white & white with a blue stripe) of #2 Hi-Fi® High Strength Suture	Allows for differentiation between sutures and creates stronger suture constructs.
Pre-loaded on an arthroscopic disposable inserter	Reduces OR procedure time

ORDERING INFORMATION

Presto™ Anchor

C6271H Single Loaded Presto™ Anchor
 C6272H Double Loaded Presto™ Anchor
 C6179 Instability Twist Drill Bit

Bio-Instability Instrumentation for Presto™

C6171 Bio-Instability Drill Guide, Fishmouth
 C6172 Bio-Instability Drill Guide, Fishmouth
 C6173 Blunt Obturator
 C6174 Sharp Trocar
 C6176 Bio-instability Bone Punch, 2.1 mm
 C6178 Bio-instability Sterilization tray
 C6179 Bio-instability twist drill bit, 2.1 mm

Visit SRS.Linvatec.com today to learn more.

CONMED CORPORATION PRODUCT AREAS:

ARTHROSCOPY • ELECTROSURGERY • ENDOSCOPY • ENDOSURGERY • GASTROENTEROLOGY • INTEGRATED SYSTEMS • PATIENT CARE • POWERED INSTRUMENTS • PULMONOLOGY



11311 Concept Boulevard
 Largo, FL 33773-4908
 (727) 392-6464
 Customer Service: 1-800-237-0169
 FAX: (727) 399-5256
 International FAX: +1 (727) 397-4540
 email: customer_service@linvatec.com
www.linvatec.com



This product contains Dyneema® Purity. Dyneema® Purity is a registered trademark of Royal DSM N.V.