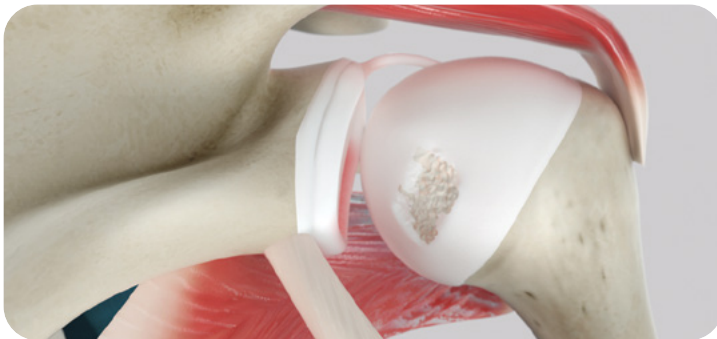


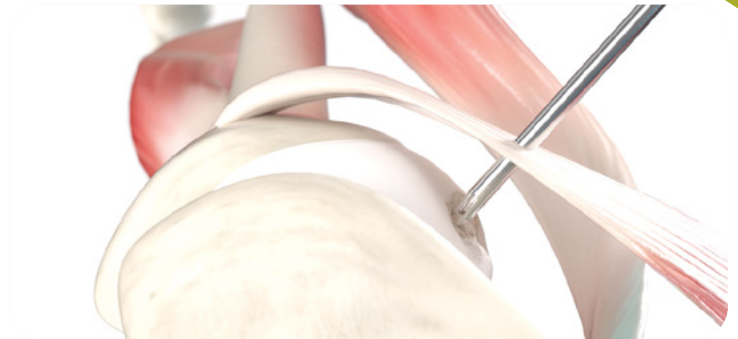
Shoulder Reference Guide

Step-by-step guide

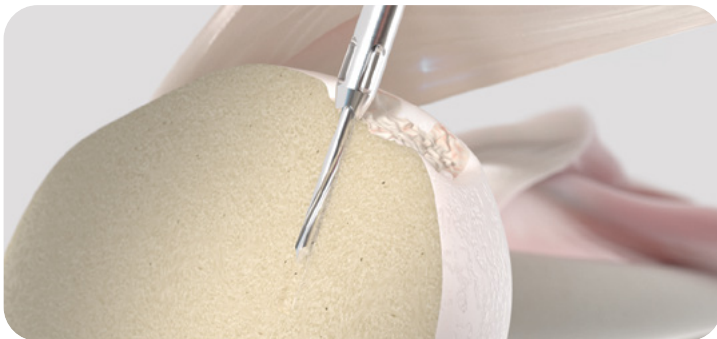
Remplissage Anchor Placement



1. Through a posterior viewing portal, visualise the Hill-Sachs defect and expose the bone at the desired insertion location for the two anchors. Attach the appropriate drill bit to a standard orthopedic drill.



2. Introduce the sharp tip obturator and straight guide through the soft tissue and position against the bone surface at the desired anchor location.



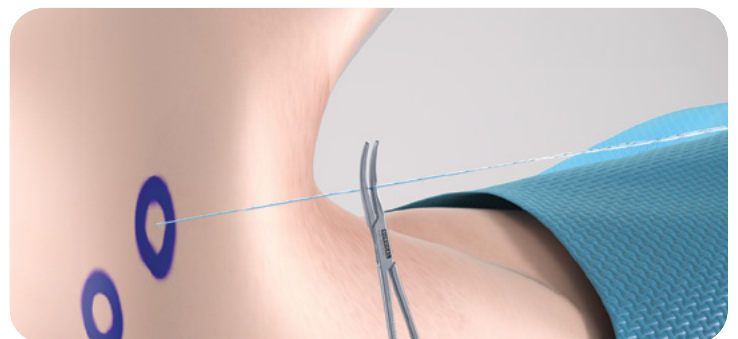
3. Drill the anchor tunnel by placing the drill into the guide and advancing until it bottoms out inside the guide. Confirm tunnel is free of debris before proceeding to next step. **CAUTION:** Do not use the drill without the drill guide as the bone surface can be damaged.



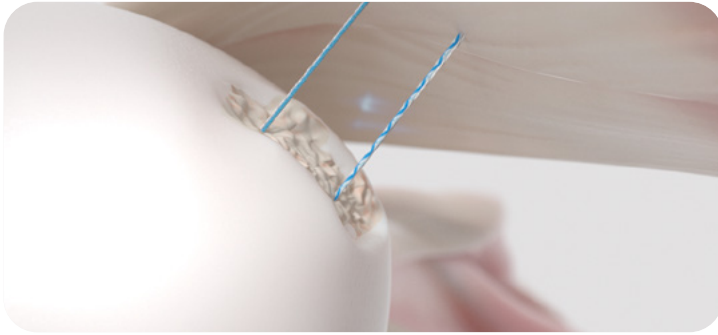
4. Remove the drill and insert the implant through the drill guide into the bone hole. Be sure that the implant inserter is fully engaged with the drill guide throughout the deployment of the anchor.



5. Rotate the activation knob on the proximal end of the inserter clockwise. Rotate the knob until a hard stop is reached and the suture cleat is fully exposed.

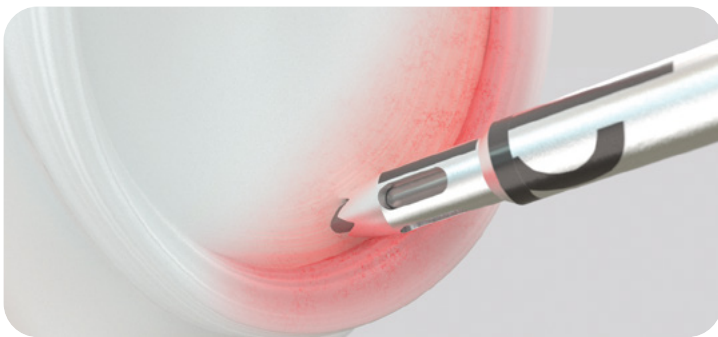


6. Release the sutures from the cleat and remove the inserter and drill guide. **NOTE:** There will be one blue repair suture strand and two black and white co-braid transfer suture strands (one with a looped end and one straight end). Snap all sutures into a hemostat prior to inserting the next anchor.

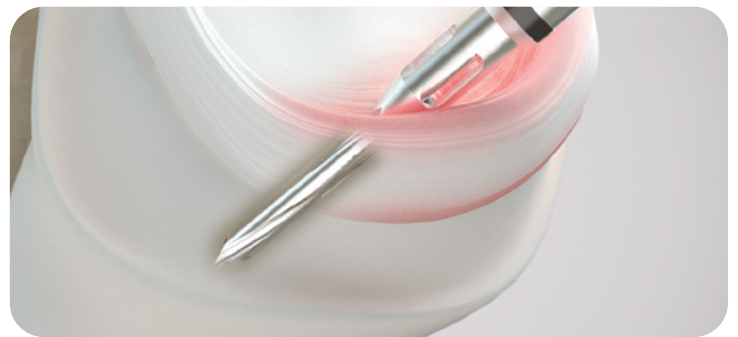


7. Introduce the guide and sharp tip obturator through a different section of the soft tissue and position against the bone surface at the desired anchor location. **NOTE:** space the two anchors and soft tissue punctures far enough apart to allow for an appropriate tissue bridge to fill the Hill-Sachs defect. Repeat steps 3-6 for the second anchor.

Bankart Repair



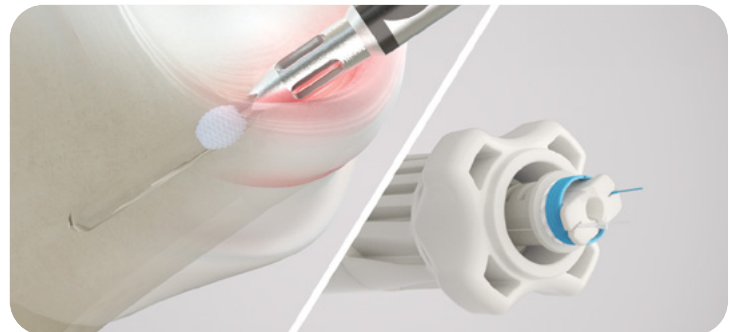
8. Position the tip of the drill guide against the bone surface at the desired position. If using the curved guide, the crescent laser mark indicates the direction of the curve, while the vertical laser mark helps project the trajectory of the drill bit.



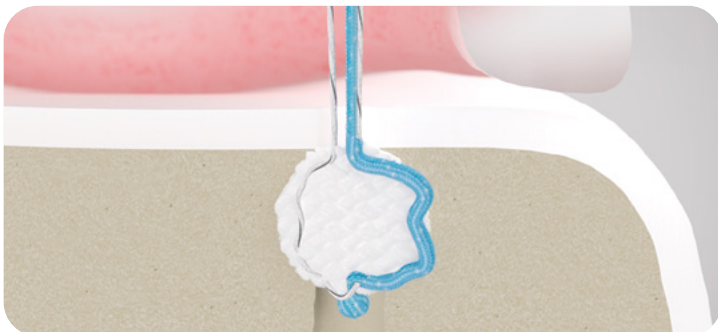
9. Drill the anchor tunnel by placing the drill into the guide and advancing until it bottoms out inside the guide. Confirm tunnel is free of debris before proceeding to next step. **CAUTION:** Do not use the drill without the drill guide as the bone surface can be damaged.



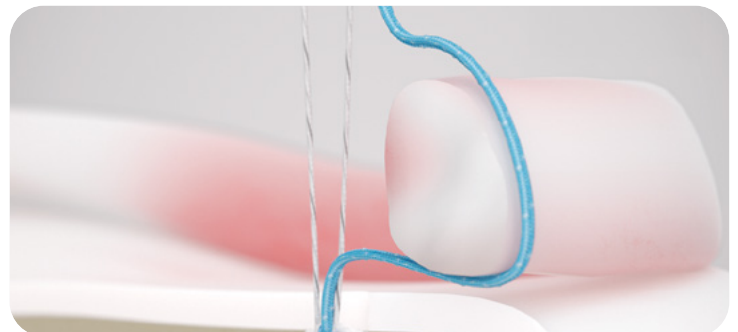
10. Remove the drill and insert the implant through the drill guide into the bone hole. Be sure that the implant inserter is fully engaged with the drill guide throughout the deployment of the anchor.



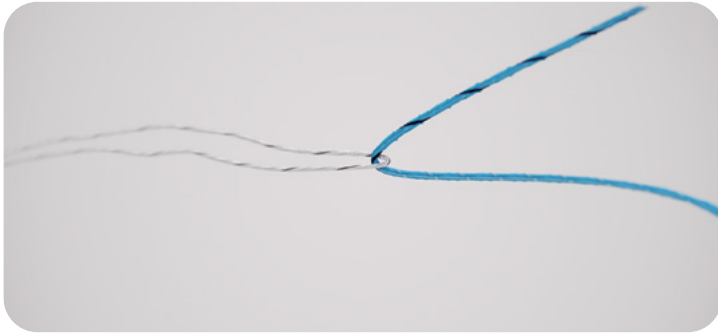
11. Rotate the activation knob on the proximal end of the inserter clockwise. Rotate the knob until a hard stop is reached and the suture cleat is fully exposed.



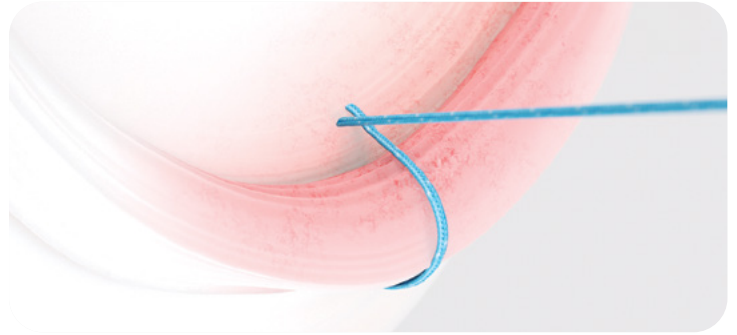
12. Release the sutures from the cleat and remove the inserter and drill guide. **NOTE:** There will be one blue repair suture strand and two black and white co-braid transfer suture strands (one with a looped end and one straight end).



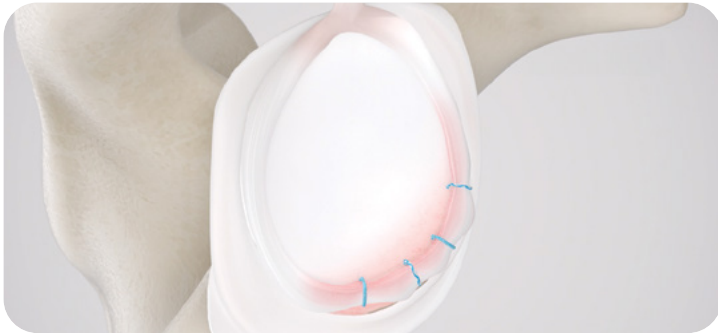
13. Using a suture passer, pass the repair suture through the labrum and capsule. **CAUTION:** To avoid tissue bridges, ensure all three sutures are coming out of the same cannula prior to proceeding to the next step.



- 14.** Pass the repair suture strand through the looped end of the transfer suture until just before the black suture marking disappears. Pull on the non-looped end of the transfer suture to shuttle the repair suture through the implant. **NOTE:** The transfer suture will disengage from the implant and can be discarded.

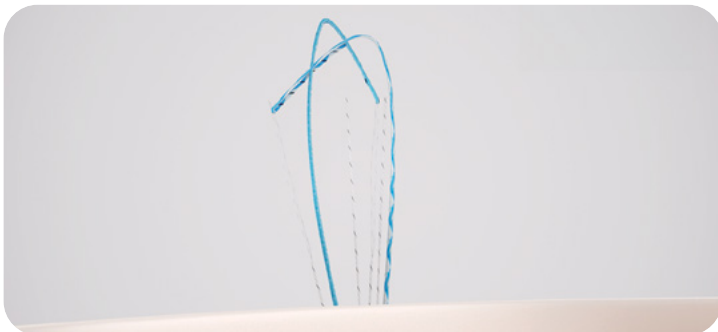


- 15.** Pull on the repair suture strand to tension the repair. Once final tension is achieved, cut the suture tail.

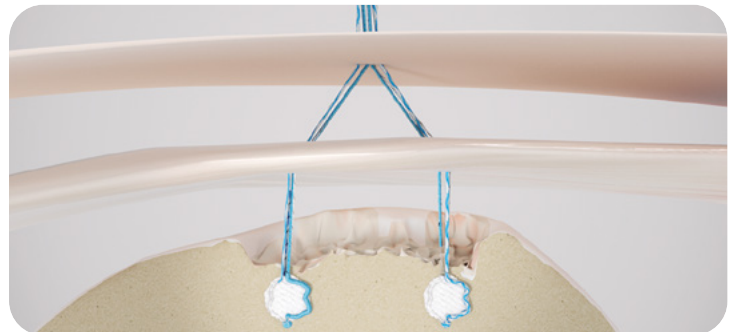


- 16.** Repeat Steps 8–15 for subsequent anchors. Return to the posterior aspect of the patient to complete the Remplissage.

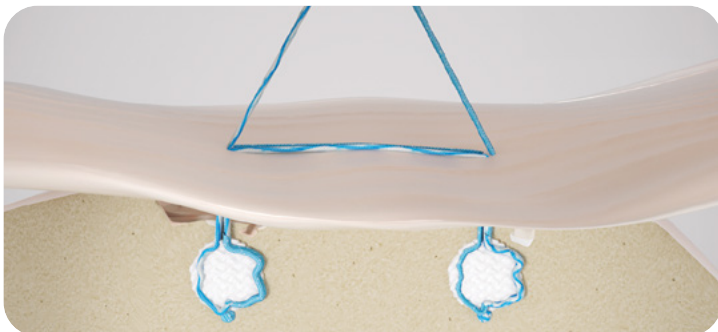
Remplissage Completion



- 17.** Uncleat the sutures from both hemostats. Take the repair suture strands from each anchor and feed them into the opposing anchors' looped transfer suture.



- 18.** Pull on the non-looped end of the transfer sutures to shuttle the repair sutures through both of the implants. **NOTE:** The transfer sutures will completely disengage from the implants and can be discarded.



- 19.** Pull on the two remaining suture strands to tension the repair and pull the posterior soft tissue into the Hill Sachs lesion.

Ordering information

Q-FIX° KNOTLESS All-Suture Anchors	
Reference #	Description
72205884	Q-FIX KNOTLESS All-Suture Anchor, 1.8mm, with one MINITAPE° suture, blue
72205885	Q-FIX KNOTLESS All-Suture Anchor, 1.8mm, with one MINITAPE suture, co-braid blue
72205882	Q-FIX KNOTLESS All-Suture Anchor, 1.8mm, with one ULTRABRAID° suture, blue
72205883	Q-FIX KNOTLESS All-Suture Anchor, 1.8mm, with one ULTRABRAID suture, cobraid-blue
Q-FIX Disposable Kits	
Reference #	Description
25-1810	Q-FIX All-Suture Anchor Disposable Kit, 1.8mm, includes drill, fish mouth tip drill guide and sharp obturator

Q-FIX Reusable Accessories	
Reference #	Description
72290032	Q-FIX All-Suture Anchor Drill Guide, fish mouth tip, 1.8mm, nonsterile, reusable
72290120	Q-FIX All-Suture Anchor Curved Drill Guide, crown tip, 1.8mm, nonsterile, reusable
72290033	Q-FIX All-Suture Anchor Obturator, 1.8mm, nonsterile, reusable
Q-FIX Disposable Accessories	
Reference #	Description
72290118	Q-FIX All-Suture Anchor Flexible Drill, 1.8mm, sterile, disposable