

LEGION° Tibia Resection Complex Primary – using LEGION Revision Instruments¹ Revision Intramedullary Technique



Open up the tibia canal with the 9.5mm intramedullary drill.



Ream the tibia canal until cortical contact is achieved using progressively larger diameter reamers to the desired final stem depth.

Assemble the Tibial IM Alignment Guide – ensuring to place the correct handed tibia cutting block to the "0" position on the IM Alignment guide rod.





Attach the 1mm stylus to the slot capture of the tibia cutting block and set the inferior/superior position by registering on the least affected side of the tibia. (Usually it will be the Lateral side as most often defects occur on the medial side)



Once you have set the height using the 1mm stylus, tighten the IM Collet into a locked position.



Remove the 1mm stylus.



Loosen the gold knob of the Tibia Cutting Block and lower the knob two holes down. The 10mm laser etched reference line should appear just above the Tibia Cutting Block.



Resect the tibia.

- a. Note: It appears a lot of tibia will be taken off based on the anterior view. (Figure 8a and 8b
- b. This large resection is to be expected because:
 - i. a 1mm cut was registered with the stylus on the least affected side.
 - ii. Next, moving the cutting block down an extra 10mm, created an 11mm cut.
 - iii. This is needed as a primary tibia cut is 9mm, then add in the extra 3mm of tibia base thickness on a LEGION Revision Tibia, so a final cut of 12mm is necessary. Based on the above technique, 11mm has been resected.



Figure 8a



Figure 8b



Proceed with normal LEGION Revision Tibia technique from here.

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