OrthoLine™ Fracture Plates

Quick Facts

Straight Plates

Universal Hole: Accommodates cortical, standard locking, or variable-angle locking (VAL) screws (VAL screws are Ti only)

42 mm: Increased screw density leads to superior stiffness[1]

Compression Hole: Allows for interfragmentary compression

≥9 Holes: Lower screw density over the central plate allows for a hybrid design, increasing stiffness and strength

≤8 Holes: Central bridge enables fracture spanning; ideal for transverse or oblique fractures

Slide Hole: First screw placed here; allows slight adjustments to plate placement before securing the plate and enables minor compression

K-Wire Hole: Independent K-wire hole for fixation

Temporary Fixation: Screw hole that allows use of a bending plug with K-wire or BB-Tak to fix plate location

T-Plates

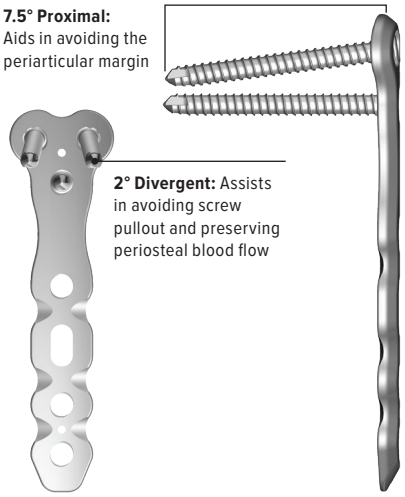
Compression Hole

3- and 2-Hole Design Options

Low Contact: Decreased plate profile on bottom of plate to decrease cortical contact and preserve periosteal blood flow

Bridge Design: Used for juxta-articular fractures; ideal for transverse or oblique fractures

7.5° Proximal: Aids in avoiding the periarticular margin



2° Divergent: Assists in avoiding screw pullout and preserving periosteal blood flow

4.0 mm Locking Screws

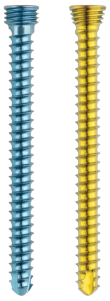
› Compatible with 3.5 mm plates, including TPLO plates

3.0 mm Cortical Screws

› Compatible with 2.4 mm plates

1.6 mm and 2.0 mm Screws

› Compatible with both 1.6 mm and 2.0 mm plates



Reference

1. Stoffel K, Dieter U, Stachowiak G, Gächter A, Kuster MS. Biomechanical testing of the LCP—how can stability in locked internal fixators be controlled? *Injury.* 2003;34(Suppl 2):B11-B19. doi:10.1016/j.injury.2003.09.021

Arthrex® Vet Systems

OrthoLine™ Fracture Plates

Quick Facts

Distal Humeral Fracture Plates

Anatomic Curve: Size-specific anatomic curve matches the humeral shaft shape, providing improved plate fit

Tapered Design: Facilitates plate insertion beneath soft tissue during humeral application

Placement: Ideal for distal humeral T-shaped, Y-shaped, supracondylar, or medial fractures, with application on the medial aspect of the bone

Proximal K-Wire Hole: Maintains plate position while securing the plate to the bone

3 Distal Screws: Increased screw density enhances fracture fixation; screws are made from matching material and are one size smaller than the plate

Fracture-Spanning Bridge: Increases support and stiffness across the fracture site

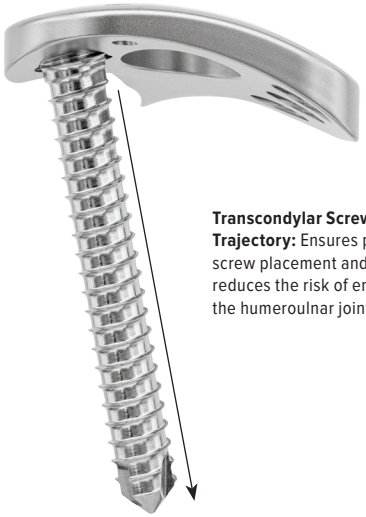
Epicondylar Relief Hole: Allows for a more anatomic fit

Transcondylar Screw Hole: Ensures ideal screw trajectory within the plate

Distal K-Wire Hole: Maintains plate position during fixation and follows the transcondylar screw trajectory

Transcondylar Screw

Incorporated within the plate to ensure ideal screw trajectory

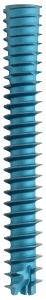


Transcondylar Screw Trajectory: Ensures proper screw placement and reduces the risk of entering the humeroulnar joint space

QuickFix Cannulated Screws

- Hexalobe drive
- Titanium alloy
- Partially threaded
- Cannulated design
- Fits through the transcondylar screw hole of the distal humeral plate; does not lock into the plate

Compression FT Screws



- Thinning thread pitch generates compressive force
- Outwardly tapered inner diameter produces bone compression

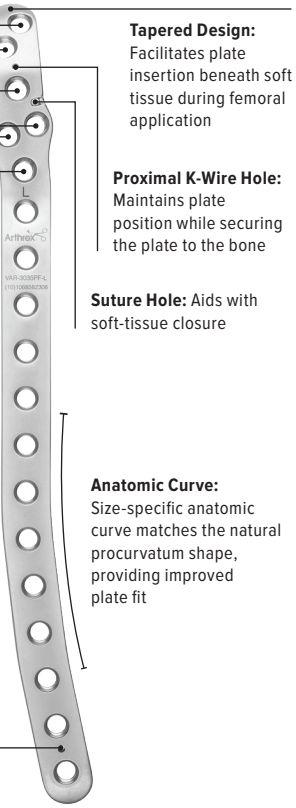
KreuLock™ Locking Compression Screws

- Fully threaded
- Variable-stepped pitch and locking head
- Designed to fit within the transcondylar screw hole of the distal humeral plate

OrthoLine™ Fracture Plates

Quick Facts

Proximal Femoral Fracture Plates



6 Proximal Screws: Increased screw density enhances fracture fixation, with trajectories designed to align centrally in the bone

Tapered Design: Facilitates plate insertion beneath soft tissue during femoral application

Proximal K-Wire Hole: Maintains plate position while securing the plate to the bone

Suture Hole: Aids with soft-tissue closure

Placement: Ideal for subtrochanteric proximal femoral fractures with a lateral placement

Anatomic Curve: Size-specific anatomic curve matches the natural procurvatum shape, providing improved plate fit

Distal K-Wire Hole: Maintains plate position during fixation

Distal Femoral Fracture Plates

Placement: Ideal for distal femoral fractures; using a lateral application, place caudally on the bone aligned with the fabella line

Tapered Design: Facilitates plate insertion beneath soft tissue during femoral application

Proximal K-Wire Hole: Maintains plate position while securing the plate to the bone

Anatomic Curve: Size-specific anatomic curve matches the natural procurvatum shape, providing improved plate fit

4 Distal Screws: Increased screw density enhances fracture fixation, with screw trajectories directed proximally and cranially

Suture Hole: Aids with soft-tissue closure and patellar support

Distal K-Wire Hole: Maintains plate position during fixation and follows the trajectory of the distal screws

Distal Femoral Osteotomy Plates

Placement: Ideal for distal femoral fractures; using a lateral or medial application, place caudally on the bone, aligned with the fabella line

Proximal K-Wire Hole: Maintains plate position during fixation

Fracture-Spanning Bridge: Increases support and stiffness across the fracture site

Suture Hole: Aids with soft-tissue closure and patellar support

3 Distal Screws: Increased screw density enhances fracture fixation, with trajectories oriented proximally and cranially

Tapered Design: Facilitates plate insertion beneath soft tissue during femoral application

Compression Hole: Allows for interfragmentary compression

Distal K-Wire Hole: Maintains plate position during fixation and follows the trajectory of the distal screws

OrthoLine™ Fracture Plates

Quick Facts

Distal Radial Fracture Plates

Anatomic Curve: Size-specific anatomic curve matches the radius, providing improved plate fit and avoiding the abductor pollicis longus

3 Distal Screws: Increased screw density enhances fracture fixation, with trajectories designed to align centrally in the bone

Fracture-Spanning Bridge: Increases support and stiffness across the fracture site

Distal K-Wire Hole: Maintains plate position during fixation and follows the transcondylar screw trajectory

Placement: Ideal for distal radial fractures, using a craniomedial or craniolateral application with the opposite plate

Tubular Shape: Provides additional strength

Compression Hole: Allows for interfragmentary compression

Proximal K-Wire Hole: Maintains plate position during fixation

Tapered Design: Facilitates plate insertion beneath soft tissue during application to the radius

Ilium Fracture Plates

Cranial K-Wire Hole: Maintains plate position during fixation

4 Cranial Screws: Divergent screws assist in avoiding screw pullout

Suture Hole: Aids with soft-tissue closure

Placement: Ideal for ilial fractures; application can be in a cranial or caudal position depending on the fracture pattern

3 Caudal Screw Cluster: Increased screw density enhances fracture fixation, with trajectories designed to align centrally in the bone

Caudal K-Wire Hole: Maintains plate position during fixation

Tapered Design: Facilitates plate insertion beneath soft tissue during application to the ilium

Medial Patellar Luxation TPLO Plates

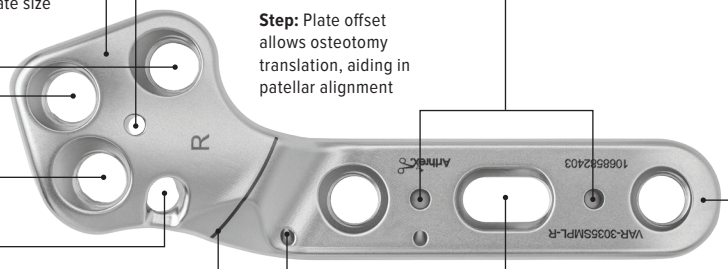
Angulation: Creates slight torsion, requires less osteotomy translation, and the torsion angle varies with plate size

Proximal K-Wire Hole: Maintains plate position during fixation

Distal K-Wire Hole: Maintains plate position during fixation

Step: Plate offset allows osteotomy translation, aiding in patellar alignment

Proximal Screws: Screw trajectories align centrally in the bone to avoid entering the joint



Tapered Design: Facilitates plate insertion beneath soft tissue during application to the tibia

Suture Hole: Aids with rotational stability

Laser Line: Represents the step location and provides visual guidance for the cut location on the proximal tibia

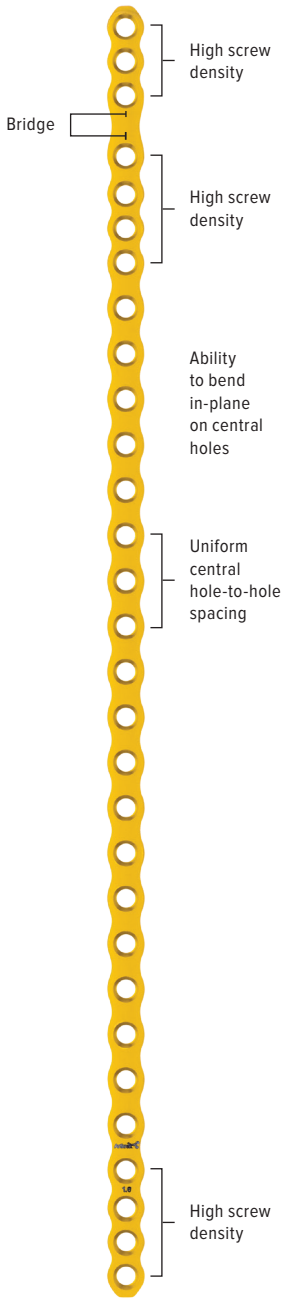
Suture Hole: Aids with soft-tissue closure

Compression Hole: Allows for interfragmentary compression

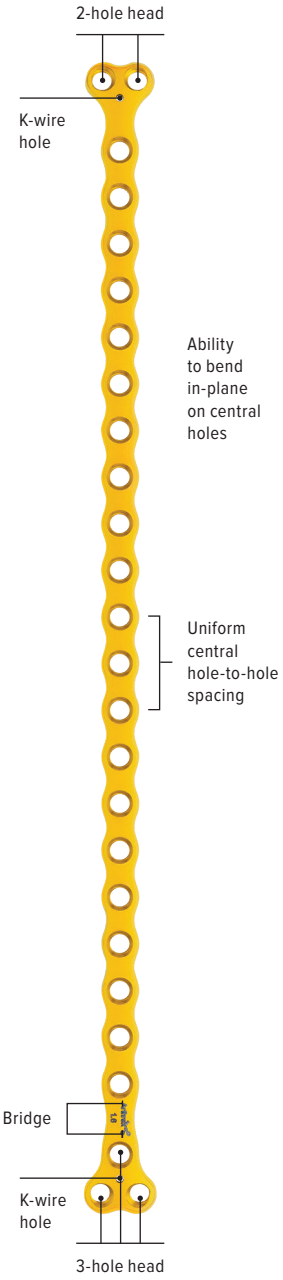
OrthoLine™ Cuttable Plates

Quick Facts

Cuttable Double Straight Plates



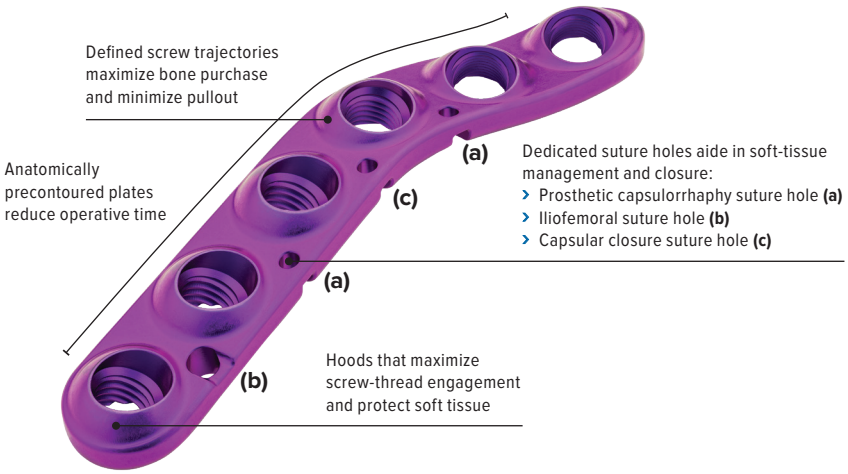
Cuttable Double T-Plates



OrthoLine™ Fracture Plates

Quick Facts

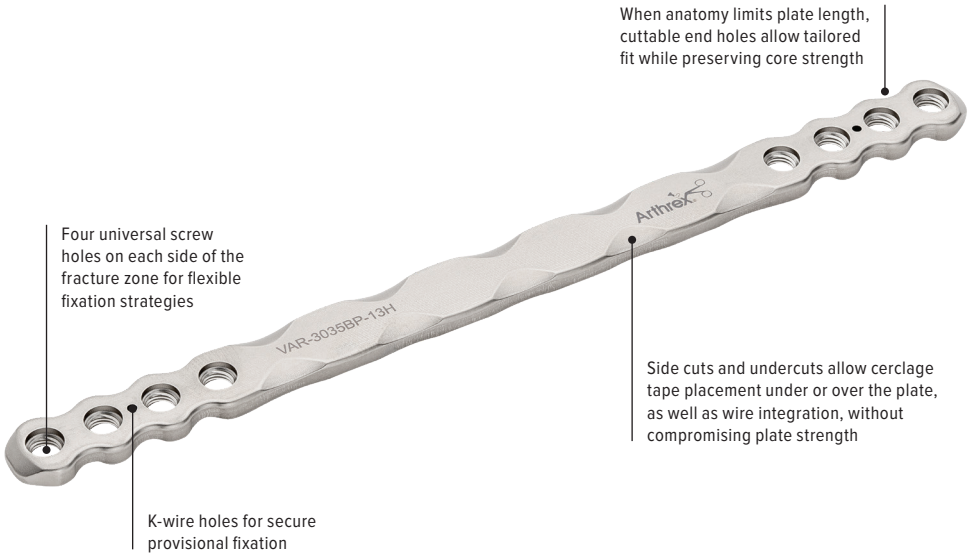
Acetabular Fracture Plates



Dedicated suture holes aide in soft-tissue management and closure:

- Prosthetic capsulorrhaphy suture hole **(a)**
- Iliofemoral suture hole **(b)**
- Capsular closure suture hole **(c)**

Bridge Plates



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