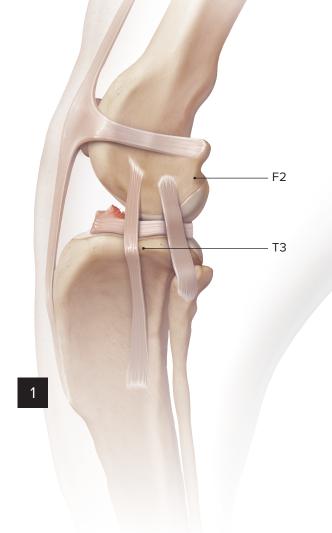
# SwiveLock® Anchor System The Knotless Surgical Technique for CCL Reconstruction



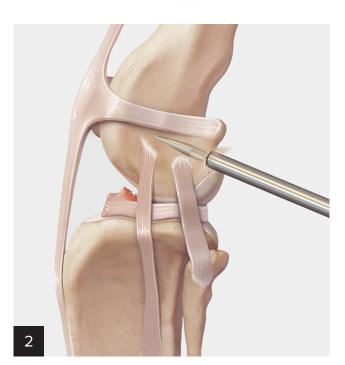


# SwiveLock® Anchor System

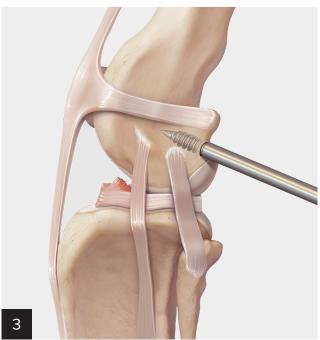
To begin, position the patient in lateral or dorsal recumbency under general anesthetic. A hanging limb technique with aseptic preparation and appropriate draping should be performed.

Using a lateral parapatellar approach with arthrotomy, perform a thorough exploration of the internal structures of the joint. Pathologic ligament and meniscus should be treated appropriately. Using standard technique, lavage the joint and close the joint capsule incision.

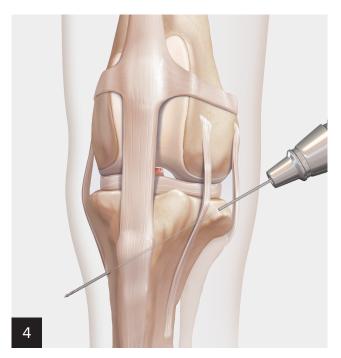
Illustration of a simulated joint specimen shows the isometric sites for suture anchorage in the femur and tibia. In the femur, the isometric position is located caudally below the level of the distal pole of the fabella (F2). In the tibia,the isometric site is located 2 mm to 4 mm caudal to the bony protuberance, that forms the caudal wall of the sulcus for the long digital extensor (LDE) tendon.



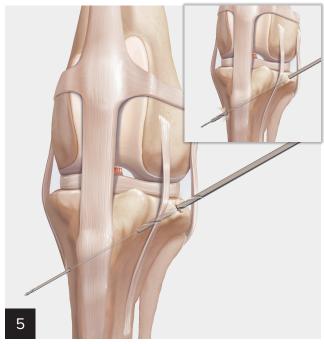
Drill with the spade tip drill at the F2 site. Advance the drill until the drill "bottoms out." Drill at an angle towards the center of the trochlear groove to ensure the drill will not "blow out" the back of the femoral condyle.



Use the tap to thread the socket created with the spade tip drill. Advance the tap until the black laser line is flush with the surrounding bone.



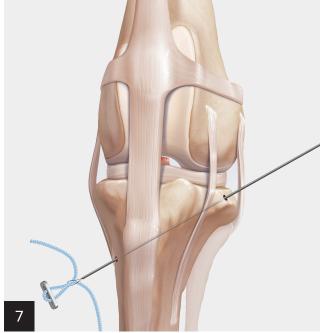
Locate the T3 site by palpating the bony protuberance that forms the caudal wall of the sulcus for the LDE tendon. The T3 site is located at the peak of the LDE groove just caudal to the LDE. Drill a tunnel with a 0.045 in guidewire, the guidewire will pass beneath the sulcus and exit the caudomedial cortex of the proximal tibia.



Place a 2.5 mm cannulated drill over the guidewire and drill over it. Remove the guidewire, leaving the drill in place. Note: 2.0 mm cannulated drill for 3.5 mm SwiveLock® anchor.



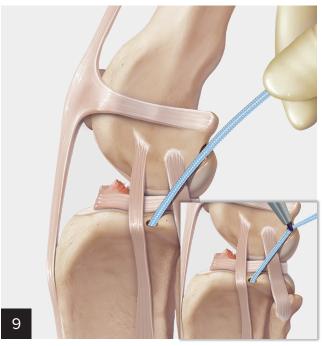
Pass the Nitinol suture-passing wire into the cannulation of the drill, looped end first. Advance the wire through the cannulation of the drill until it just exits the tip of the drill. Remove the drill bit, but leave the passing wire in place.



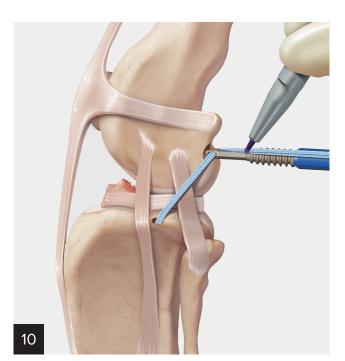
Load the 3.5 mm suture button onto the FiberTape® suture and advance it down to the middle of the suture. Take the tails of the FiberTape suture and pass up to 1 inch of suture into the loop of the Nitinol suture-passing wire.



Pull the suture through the tunnel and tighten to ensure the button is taut against the bone. Note: It is important to ensure no soft tissue is between the button and the bone.



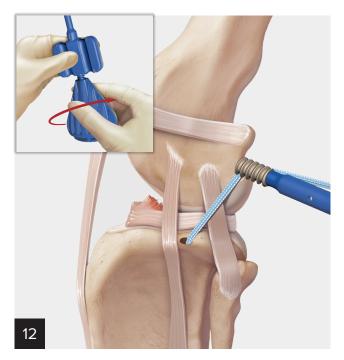
Pull both limbs of the FiberTape® suture taut and lay over the predrilled hole in the femur. With a marking pen, indicate the location of the center of the hole on the FiberTape suture (inset).



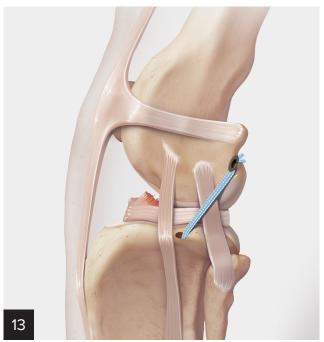
Slide the anchor eyelet over the mark created in Step 9. Pull both limbs of FiberTape suture up the shaft of the SwiveLock® anchor and mark the location of the laser line on the suture.



Move the eyelet to the mark on the FiberTape suture created in Step 10 and advance the anchor and suture into the F2 socket. If necessary, use a mallet to advance the eyelet into the socket until the lip of the anchor is at the entrance of the femoral hole.



Advance the anchor by holding the square part of the inserter to move the handle clockwise until the anchor is a quarter way into the socket. Check for joint stability. If unstable, remove the anchor by turning the knob counterclockwise. Tension can be increased or decreased by repositioning the eyelet on the suture, either left or right of the marking on the suture.

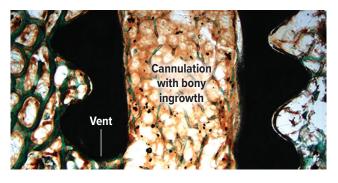


If the joint is secure, advance the anchor fully into the socket. Unwind the #2 suture around the handle of the inserter and pull the driver out of the anchor. Cut the excess suture flush at the anchor. Remove the #2 suture by pulling on one strand.

# Knotless SwiveLock® Anchors and FiberTape® Sutures

Knotless SwiveLock anchors and FiberTape sutures provide our strongest and lowest profile constructs:

- Strong, knotless constructs
- Polyetheretherketone (PEEK) anchor material
  - PEEK is an inert, nonabsorbable, thermoplastic material
- Vented anchor bodies
  - Promotes bone marrow flow and allow for bony ingrowth
  - Canine pilot study shows evidence of bony ingrowth at 8 weeks<sup>1</sup>
- FiberTape suture
  - High strength
  - More resistant to tissue cut-through than round sutures<sup>2</sup>
  - Large footprint



Cross section of a vented biocomposite SwiveLock anchor 8 weeks after implantation in a canine model showing bony ingrowth in the vents and center cannulation.<sup>1</sup>



PEEK SwiveLock Anchor, 5.5 mm AR-2323PSLC

Spade Tip Drill for 5.5 mm SwiveLock Anchor VAR-**1927D** 

Tap for 5.5 mm SwiveLock Anchor VAR-1927CTB

- 1. Arthrex, Inc. LA0218A. Naples, FL; 2010.
- 2. Arthrex, Inc. LA1-00031-EN\_A. Naples, FL; 2015.

# Ordering Information

### PEEK 3.5 mm Knotless SwiveLock® Kit (VAR-2325PSLK)

Product Description	Item Number
PEEK SwiveLock Anchor, 3.5 mm × 14.8 mm, closed eyelet, qty. 5	AR- <b>2325PSLC</b>
FiberTape® Suture, 2 mm, 36 in (blue), qty. 6	AR- <b>7237</b>
Suture Button, 3.5 mm × 11 mm, qty. 5	AR- <b>8920</b>

### PEEK 4.75 mm Knotless SwiveLock Kit (VAR-2324PSLK)

Product Description	Item Number
PEEK SwiveLock Anchor, 4.75 mm × 19.1 mm, closed eyelet, qty. 5	AR- <b>2324PSLC</b>
FiberTape Suture, 2 mm, 36 in (blue), qty. 6	AR- <b>7237</b>
Suture Button, 3.5 mm × 11 mm, qty. 5	AR- <b>8920</b>

## PEEK 5.5 mm Knotless SwiveLock Kit (VAR-2323PSLK)

Product Description	Item Number
PEEK SwiveLock Anchor, 5.5 mm × 19.1 mm, closed eyelet, qty. 5	AR- <b>2323PSLC</b>
FiberTape Suture, 2 mm, 36 in (blue), qty. 6	AR- <b>7237</b>
Suture Button, 3.5 mm × 11 mm, qty. 5	AR- <b>8920</b>

### Instruments

Product Description	Item Number
Tap for 4.75 mm SwiveLock Anchor	VAR- <b>2324PTB</b>
Tap for 5.5 mm SwiveLock Anchor	VAR- <b>1927CTB</b>
Tap for 3.5 mm SwiveLock Anchor	VAR- <b>1678-03</b>
Drill for 3.5 mm SwiveLock Anchor	VAR- <b>1678-05</b>
Spade Tip Drill for 4.75 mm and 5.5 mm SwiveLock Anchors	VAR- <b>1927D</b>
Cannulated Drill, 2.0 mm	VAR- <b>8933-20C</b>
Cannulated Drill, 2.5 mm	VAR- <b>8737-09</b>
Drill Guide/Tissue Protector for 3.5 mm SwiveLock Anchors	VAR- <b>1678-01</b>
Guidewire, 0.045 in, qty. 6	VAR- <b>8933K</b>
Suture Passing Wire, Nitinol, 8"	VAR- <b>1255-08</b>
Small Joint FiberWire® Scissors	VAR- <b>11797</b>



This is not veterinary advice and Arthrex recommends that veterinarians be trained in the use of any particular product before using it in surgery. A veterinarian must always rely on their own professional clinical judgment when deciding whether to use a particular product. A veterinarian must always refer to the package insert, product label, and/or directions for use before using any Arthrex product. Products may not be available in all markets because product availability is subject to the regulatory or veterinary practices in individual markets. Postoperative management is patient-specific and dependent on the treating professional's assessment. Individual results will vary and not all patients Individual results will vary and not all patients Individual results will vary and not all patients your Arthrex representative if you have questions about availability of products in your area.