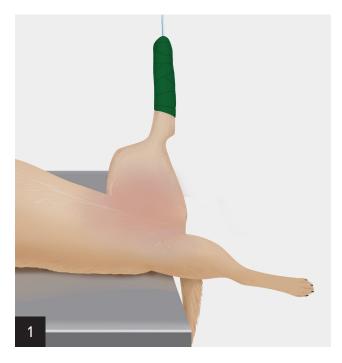
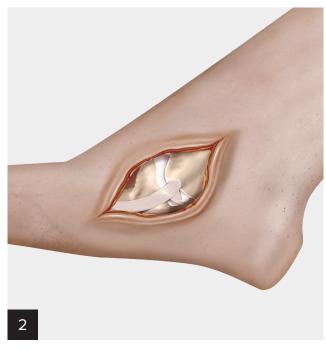
Canine Tarsus Stabilization

Surgical Technique





Place the patient in a dorsal recumbent position and administer general anesthesia. Perform a hanging limb technique with aseptic preparation and appropriate limb draping.



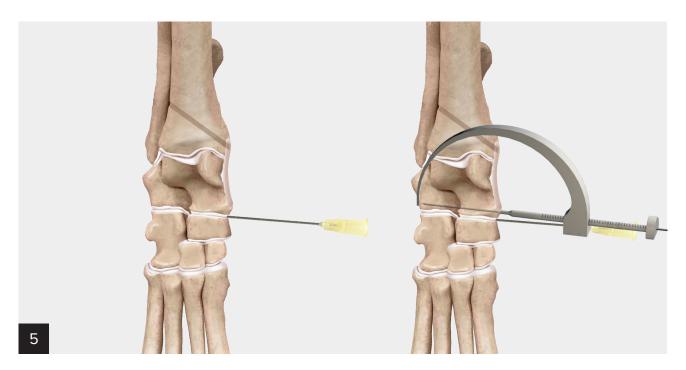
Make a medial incision beginning just proximal to the medial malleolus extending distally to the level of the proximal intertarsal joint. Inspect the medial structures of the tarsal joint. Identify the origin of the long part of the medial collateral ligament (MCL) on the medial malleolus of the tibia.



Using the aiming guide, place the 0.049 inch (1.2 mm) guidewire from the origin of the long part of the MCL in a proximal and slight cranial direction such that the it emerges on the lateral tibia just cranial to the fibula. Make a small incision on the lateral side where the guidewire tents the skin.

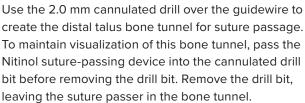


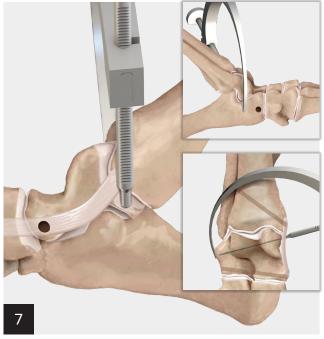
Use the 2.0 mm cannulated drill over the guidewire to create the tibial bone tunnel for suture passage.



As a surgical landmark, identify the talocentral tarsal joint on the medial side by either a palpation or by inserting a small needle into the joint space. Using the aiming guide, place a 0.049 inch (1.2 mm) guidewire starting at the medial aspect of the talar head oriented parallel to the talocentral tarsal joint in a slightly plantar direction to capture the calcaneus. The guidewire should emerge just plantar to the boney tubercle of the lateral portion of the distal calcaneus. Make a small incision where the guidewire tents the skin.



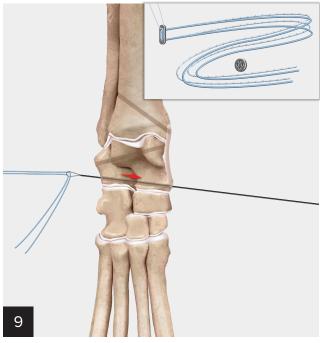




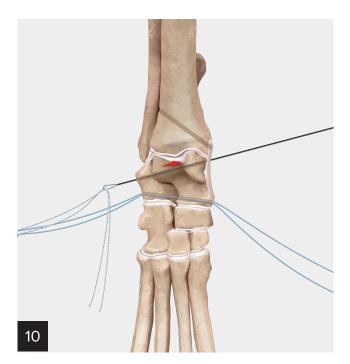
Identify the insertion of the short part of the MCL on the proximal talus. Using the aiming guide, place the 0.049 inch (1.2 mm) guidewire just off the articular cartilage from the insertion of the short part of the MCL in a distal and plantar orientation such that the guidewire emerges 3 mm to 5 mm proximal to the previously drilled tunnel on the lateral aspect of the calcaneus. Extend your incision from the previous bone tunnel to allow visualization of the guidewire.



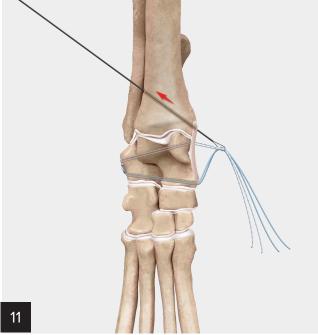
Use the 2.0 mm cannulated drill over the guidewire to create the proximal talus bone tunnel for suture passage. To maintain visualization of this bone tunnel, pass the Nitinol suture-passing device into the cannulated drill bit before removing the drill bit.



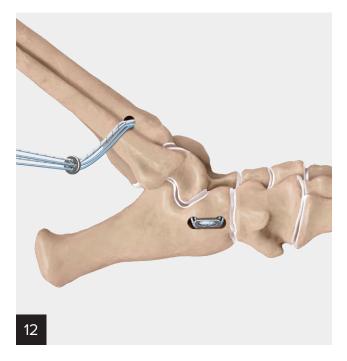
Remove the round 4-hole button from the Mini TightRope® implant. Retain it on the sterile field for future use. Pass both strands of the blue FiberWire® suture through the Nitinol suture passer in the lateral portion of the distal talar bone tunnel and shuttle the sutures through to the medial side.



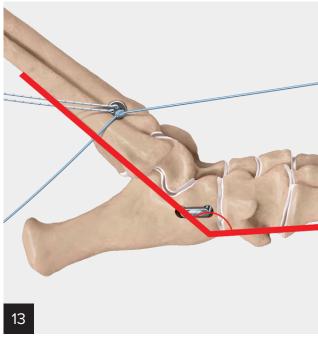
Pass the remaining blue and white striped suture through the Nitinol suture passer in the lateral portion of the proximal talar bone tunnel and shuttle the sutures through to the medial side. Ensure the oblong button is sitting on the bone of the lateral calcaneus with no soft tissue interposed.



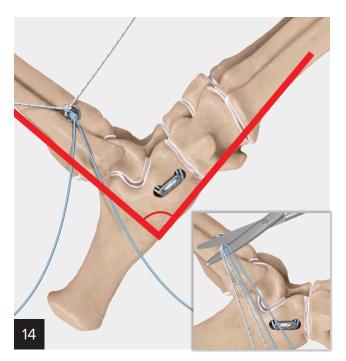
Place a Nitinol suture passer in the tibial tunnel. Thread all 4 sutures through the loop and pull the sutures through the medial portion of the bone tunnel to the lateral side.



Thread the 4 sutures back onto the 4-hole TightRope® button.



Reduce the tarsal joint into anatomic position. Place and hold the limb in normal standing angle. Tighten and tie the blue distal tunnel sutures first.



Place and hold the tarsal joint in moderate flexion – approximately 80° of flexion. Tighten and tie the blue and white striped proximal tunnel sutures. Cut excess suture.



Final fixation.

Ordering Information

Implant

Product Description	Item Number
Mini TightRope® Implant	VAR- 2801

Instruments

Product Description	Item Number
Aiming Guide	VAR- 2810
Cannulated Drill Bit, 2.0 mm	VAR- 8933-20C
Drill Guide, 2.0 mm/2.7 mm	AR- 8827D-02
Guidewire (K-wire), 0.049 in (1.2 mm)	VAR- 8920P
Suture Passing Wire, Nitinol, 8 in	VAR- 1255-08



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