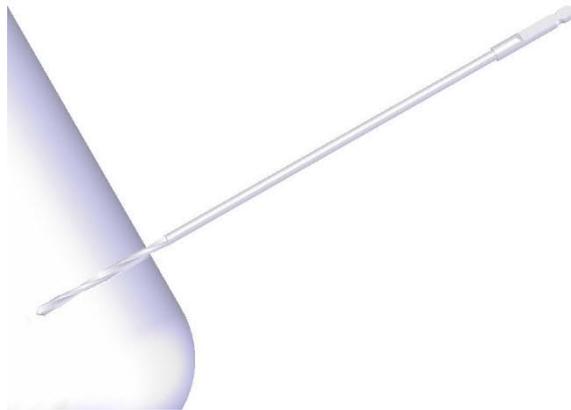
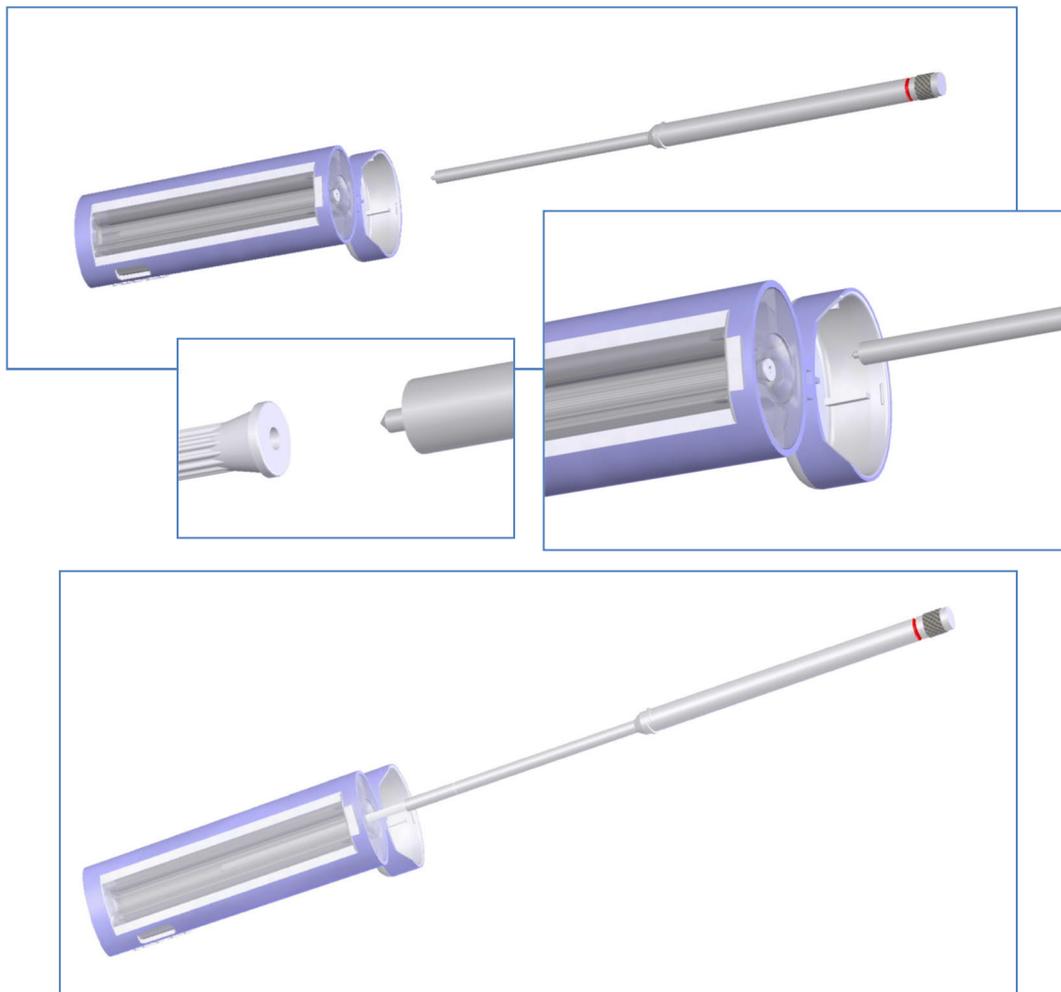


Surgical Technique for ActivaNail™

- Select the appropriate ActivaNail™ for the indication.
- Drill a hole which corresponds to the nail diameter through the fracture/osteotomy plane using corresponding Biorettec Drill Bit/K-wire. Make sure that drilled hole is sufficiently deep to avoid the protruding of nail head. Multiple reaming with the drill bit/K-wire should be avoided.
 - In the 1.5 mm ActivaNail™ insertion, drill a hole with 1.5 mm K-wire (B-IP-1502), for cancellous or osteoporotic bone and with 1.6 mm (B-IP-1501) for cortical bone.



- Open ActivaNail™ HOLDER cap.
- Pick up the nail by pushing the 3.2 mm ActivaPin™ APPLICATOR PISTON / ARTHROSCOPIC PISTON distal head into the ActivaNail™ HOLDER until it is attached to the nail.



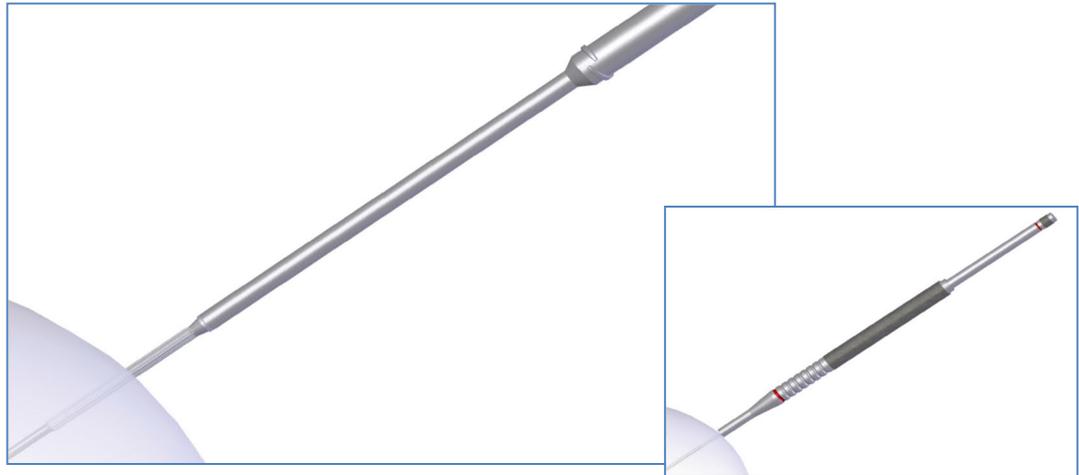
- Slide the attached nail and piston inside the ActivaPin™ Applicator SLEEVE through the twist lock by twisting the PISTON clockwise.



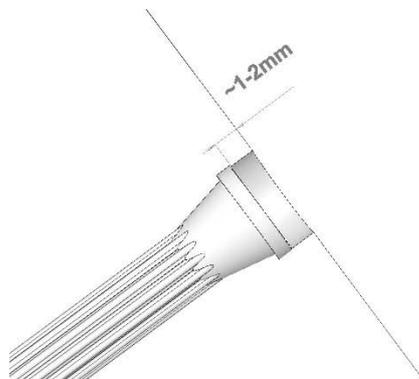
- Introduce the nail into the hole by sliding the PISTON.



- During insertion of the nail, hold the applicator and the nail parallel to the long axis of the drill hole so that it slides easily into the drill hole and damaging of the nail head is avoided. Insert the nail by lightly tapping the PISTON with a mallet.



- Tap the PISTON until entire nail is forced fully into the drill hole. The ActivaPin™ applicator is designed so that it sinks the nail 1-2 mm when the piston is tapped to the end of the sleeve. This prevents the head of the nail protruding, which could cause soft tissue irritation. In order to remove the applicator from the nail, rotate and pull the PISTON from the proximal end. DO NOT bend the applicator.



- After insertion, if the nail is too long, scissors, and an oscillating saw, or a hot wire can be used to cut the ActivaNail™. In such a case, the proximal end of the nail must be pushed 1-2 mm below the cortical surface or smoothed at least to the cortical level, to avoid soft tissue irritation.
- Two or more implant fixations can be applied if necessary (depending on the nature and size of the fracture). In such a case, it is recommended that, for the best results nails are inserted at the divergent angles to one another rather than parallel.