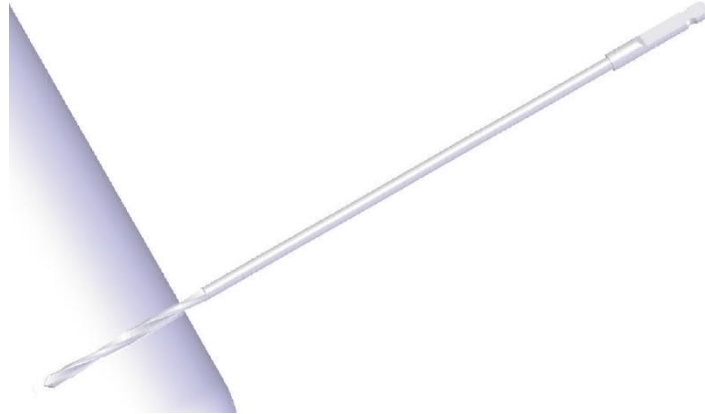
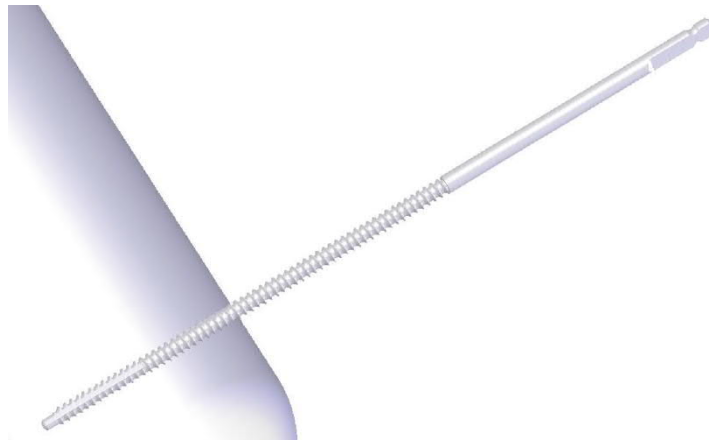


Surgical Technique for ActivaScrew™

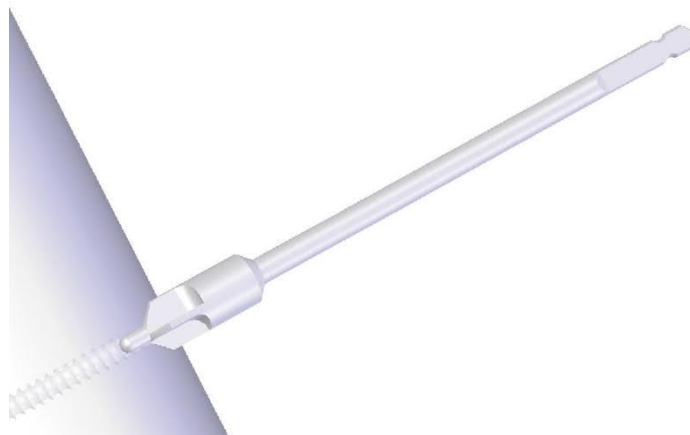
- Select the appropriate ActivaScrew™ for the indication.
- Drill a screw channel through the fracture plane using appropriate drill bit. Use irrigation.



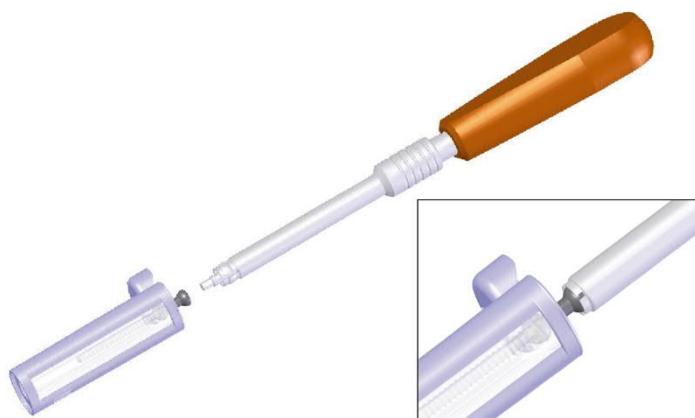
- Tap the screw hole manually to a sufficient depth using the appropriate AO compatible bone tap corresponding to the screw diameter.



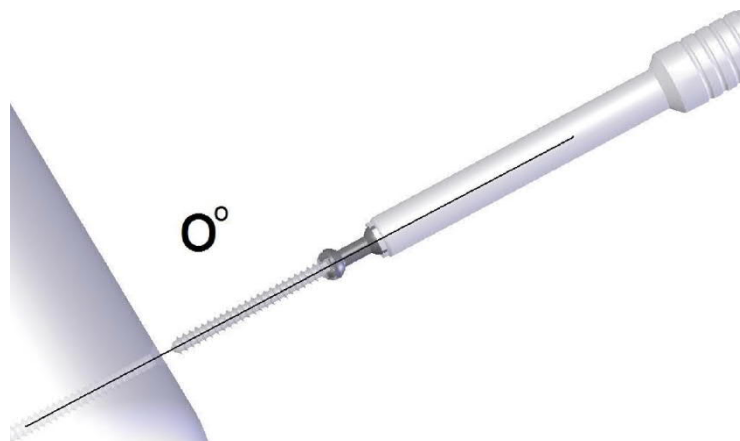
- Countersink (optional). In case the head of ActivaScrew™ is to remain because of using LAG screws (partially threaded) or of surgeon's preference (fully threaded), use the appropriate countersink. This is in order to make space for the screw head and to avoid soft tissue irritation from the protruding screw head.



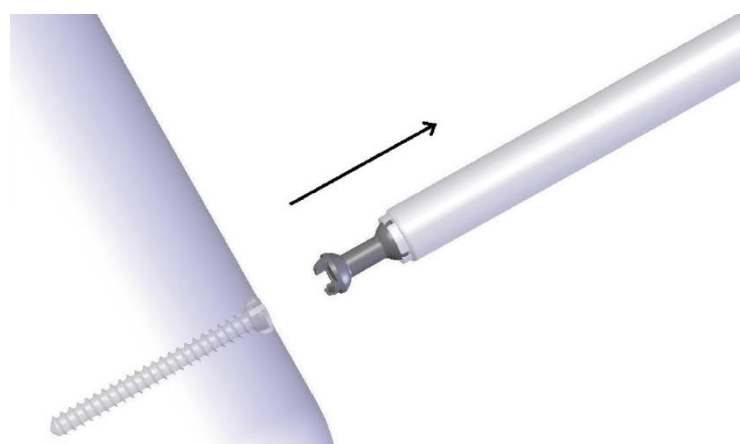
- Irrigate the prepared hole prior to screw insertion to flush out bone debris.
- Open ActivaScrew™ HOLDER cap.
- Pick up the screw out of the ActivaScrew™ HOLDER by using the appropriate AO-compatible screwdriver.



- Hold the screwdriver and the screw parallel to the long axis of the drill hole and insert the screw fully into the drill hole. NOTE: When the reduction is good and drilling and tapping are done properly, the insertion should be easy with two finger technique. In case the friction increases too much during insertion, the screw must be removed, and the hole must be rinsed and/or carefully retapped.



- After the screw is fully inserted, detach the INSERTION ADAPTER from the screw and discard the INSERTION ADAPTER after use.



- In cases where the screw head is not needed (e.g. syndesmosis screw), cut the screw along the bone or plate surface after insertion, to avoid soft tissue irritation from the protruding screw head. Scissors, and an oscillating saw or a hot wire can be used to cut the ActivaScrew™.

IMPORTANT: DO NOT cut the head of a LAG screw.