stryker

Evolve Triad Fixation System

Operative technique



Evolve Triad Fixation System

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Design team:

John T. Capo, MD Graham King, MD MSc FRCSC David Ring, MD, PhD Virak Tan, MD This publication sets forth detailed recommended procedures for using Stryker devices and instruments. It offers guidance that you should heed, but, as with any such technical guide, each surgeon must consider the particular needs of each patient and make appropriate adjustments when and as required.

Important

- The patient should be advised that the device cannot and does not replicate a normal healthy bone, that the device can break or become damaged as a result of strenuous activity or trauma and that the device has a finite expected service life.
- Removal or revision of the device may be required sometime in the future.
- Cleaning and sterilization information is provided in the applicable instructions for use.
- Non-sterile devices, including implants and instruments, must be cleaned and sterilized prior to use, in accordance with validated methods.
- Devices that are able to be disassembled should be disassembled prior to point-of-use processing. Additionally, devices with movable components that do not facilitate disassembly should be manually articulated during the point-of-use processing step in order to evacuate additional soils.

- Please remember that the compatibility of different product systems has not been tested unless specified otherwise in the product labeling.
- Consult Instructions for Use (https://ifu.wright.com) for a complete list of potential adverse effects and adverse events, contraindications, warnings and precautions.
- The surgeon must advise patients of surgical risks, and make them aware of adverse effects and alternative treatments.
- An implant whose packaging is open or damaged or whose expiration date has passed must not be used. Every precaution must be taken to ensure sterility when opening the packaging of the implant and during implantation.

Indications and contraindications

Indications

Stryker's Evolve Triad Fixation System is intended for fixation of fractures, osteotomies and non-unions of the olecranon, radius and ulna.

The Ortholoc Mini Polyaxial Locking Screws are intended for use with Stryker's plates manufactured from implant grade stainless steel that accept Ortholoc Mini Polyaxial Locking Screws.

The Evolve Triad Bone Screws are indicated for use in bone reconstruction, osteotomy, arthrodesis, joint fusion, fracture repair, and fracture fixation of bones appropriate for the size of the device, including the scapula, long bones (ulna, radius and humerus) and small bones (metacarpals, metatarsals, and phalanges).

Contraindications

- Infection
- Physiologically or psychologically inadequate patient
- Inadequate skin, bone, or neurovascular status
- Irreparable tendon system
- Possibility for conservative treatment
- Growing patients with open epiphyses
- Patients with high levels of activity

Product information

Elbow fracture dislocations that involve a radial head fracture and a coronoid fracture are very challenging to manage. So much so that they are commonly referred to as the "Terrible Triad of the Elbow".¹ The Evolve Triad System is designed to address fixation of the fractures commonly associated with this injury.

Radial head and neck plates

- Polished stainless steel material
- Screw trajectories allow for fixation of multiple fragments
- Ortholoc Mini Polyaxial locking design allows for off axis placement of locking screws up to 10 degrees
- Round holes compatible with locking or non-locking screws
 - o 2.0mm Ortholoc Mini Polyaxial locking screws
 - o 2.0mm Evolve Triad non-locking bone screws

Coronoid plates

- Three sizes available for multiple fracture types
- Accept 2.0mm Evolve Triad non-locking bone screwsLow profile

Bone screws (for use outside the plate)

- 1.5mm Evolve Triad bone screws
- 2.0mm Evolve Triad non-locking bone screws
- 2.5mm Evolve Triad cannulated screws (fully threaded)



Radial head and neck plates



Coronoid plates

Device description

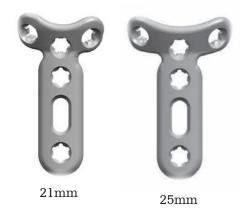
Implant selection – plates

There are four different sizes of the Evolve Triad Radial Head Plates. Their sizes correspond with the most commonly used Evolve Modular Radial Head diameters. In addition to the radial head plates, there are two sizes of radial neck plates. The surgeon should select the plate which most appropriately suits the fracture type and most appropriately fits the diameter of the radial head and neck. The radial head and radial neck plates feature polyaxial locking screw holes as well as oval holes that may be used to apply manual compression.

Radial head plates



Radial neck plates

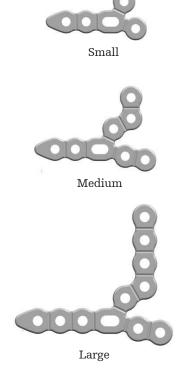


The coronoid plates are available in small, medium and large sizes and are not left or right specific. Due to the variable size and shape of the coronoid, they may need to be cut to size and will require contouring to wrap around and buttress the coronoid. Select the size that most appropriately addresses the size of the fracture. To allow for variable screw positioning and to assist with their role as a buttress plate, the coronoid plates feature non-locking screw holes only.

Implant selection – screws

Select the appropriate compatible screw for use with the plate that is chosen.

	Ortholoc Mini screw 2.0mm polaxial locking	Evolve Triad 2.0mm non-locking bone screw
Radial head and neck plates	Х	Х
Round holes	Х	Х
Oval holes		Х
Coronoid plates		Х



Coronoid plates

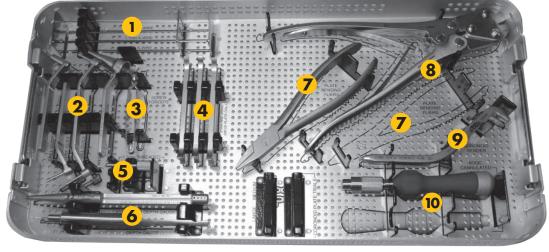
Fractures that do not require a plate may be fixed using an Evolve Triad bone screw.

Dia. (mm)	Description	Type length	Thread	Available (mm)	Lengths (mm)	Pre-drill	Driver code	Color
2.5mm	Evolve Triad 2.5mm cannulated bone screw		Bone/ cannulated	Fully threaded	10-50 - 2mm increment	2.0	Star-8	
2.0mm	Ortholoc Mini screw polyaxial locking	1	Plate/ locking	Fully threaded	10-30 - 2mm increment 35,40	1.3	Star-7	
2.0mm	Evolve Triad non-locking bone screw		Plate/ bone	Fully threaded	10-30 (2mm incr), 35,40	1.3	Star-7	
1.5mm	Evolve Triad 1.5mm bone screw	1	Bone	Fully threaded	10-28 (2mm incr)	1.1	Star-6	

Color coding system

The Evolve Triad System features an instrument color coding system to increase O.R. efficiency. After choosing the appropriate screw, note its color code in the screw caddy. Select the drill and drill guide with the corresponding color coded markings. A black color code on an instrument indicates the instrument is used for lag screw fixation.

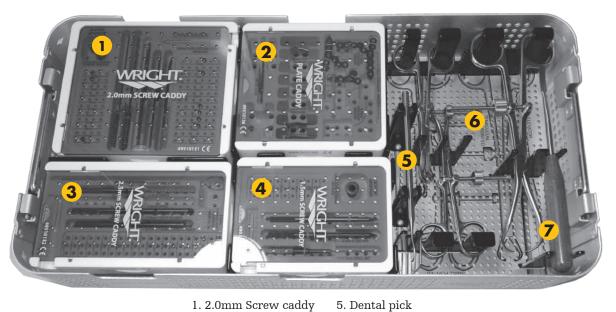
Device description



Evolve triad instrument tray

- 1. K-wires
- 2. Drill and k-wire guides
- 3. Screw forceps
- 4. In situ sizers
- 5. Threaded drill guides
- 6. Depth gauges
- 7. Bending pliers
- 8. Plate cutters
- 9. Coronoid bender 10. Driver handles

General instruments and implant caddy tray



1. 2.0mm Screw caddy

4. 1.5mm Screw Caddy

- 2. Plate caddy 3. 2.5mm Screw caddy
- 6. Tenaculums
- 7. Periosteal elevator

1.5mm Caddy

- 1. Screw gripper
- 2. 1.5mm Screws
- 3. Countersink
- 4. Star-6 driver 5. 1.1mm Drill

2.0mm Caddy



- 1. Screw gripper
- 2. 2.0mm Locking screws
- 3. 2.0mm Non-locking screws
- 4. 1.3mm Drill (standard)
- 5. 2.0mm Drill (overdrill)
- $6. \ Countersink \ for \ 2.0 \ mm \ screws$
- 7. Star-7 straight driver
- 8. Star-7 self retaining driver

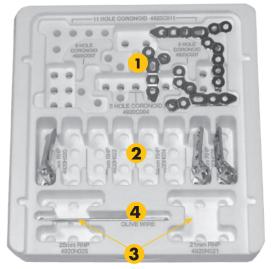
2.5mm Caddy



1. Cleaning stylet

- 2. 2.0mm Drill
- 3. 2.5mm Drill
- 4. Countersink for 2.5mm screws
- 5. Star-8 driver
- 6. 2.5mm screws

Plate caddy



- 1. Coronoid plates
- 2. Radial head plates
- 3. Radial neck plates
- 4. Olive wire

Radial head and neck plates

Patient preparation

Skin incision

With the patient in either the supine or lateral decubitus position, make a posterior midline longitudinal skin incision just lateral to the tip of the olecranon. Elevate a full thickness lateral flap (fasciocutaneous) on the deep fascia to protect the cutaneous nerves. The posterior midline incision permits access to the medial side of the elbow if repair of the medial collateral ligament is necessary to restore elbow stability. In patients with isolated injuries to the radial head, a traditional lateral skin incision may be employed.

Direct lateral dissection

Pronate the forearm to move the posterior interosseous nerve more distal and medial during the surgical approach. Split the common extensor tendon longitudinally at the mid-aspect of the radial head and divide the underlying radial collateral and annular ligaments. Keep the dissection anterior to the lateral ulnar collateral ligament to prevent the development of posterolateral rotatory instability. If additional exposure is needed, elevate the humeral origin of the radial collateral ligament and the overlying extensor muscles anteriorly off the lateral epicondyle and lateral supracondylar ridge. In the unusual circumstance where further exposure is required, consider releasing the posterior component of the lateral collateral ligament (including the lateral ulnar collateral ligament). However, careful ligament repair is required at the end of the procedure in order to restore the varus and posterolateral rotatory stability of the elbow. In many circumstances, the radial head is easily visualized after opening the subcutaneous tissue due to avulsion of the lateral collateral ligament and common extensor muscles from the lateral epicondyle during the injury.



Figure 1

Evolve sizing dish 24981005

Sizing

The Evolve Triad Radial head plate sizes correspond with the most commonly used Evolve Modular Radial Head diameters. The appropriately sized plate will conform closely to the underlying bone of the reconstructed radial head. In addition to the radial head plates there are two sizes of radial neck plates. The surgeon should select the plate which best suits the fracture.

Large, free fragments of the radial head may be removed from the surgical site and used to determine the correct plate size by matching the head's radius of curvature with the sizing tray. | Figure 1

Alternatively, the plate size may be determined with the in situ sizers. \mid Figure 2

Reduction and plate positioning

In most cases, the precontoured plate will not need to be bent. If necessary, fine adjustments in one direction only may be performed with plier benders. | **Figure 3**

Provisional fixation of the fragments are performed with k-wires included in the system. The Evolve Triad plate may be applied directly to the radius and provisionally fixed with an Olive Wire. | **Figure 4**

The plate should be carefully positioned so it does not impinge with the Proximal Radial Ulnar Joint (PRUJ) during forearm rotation. This so called "safe zone" is directly lateral with the forearm maintained in neutral rotation. The non-articular portion is more rounded and has thin or absent articular cartilage while the articulation with the ulna is flattened with thick cartilage.

If the fragments cannot be reduced in situ in a stable fashion, they may be removed and reassembled on the back table using the sizing tray, k-wires and Evolve Triad plate. Following "screw placement" on page 12, the entire plate/bone assembly may then be transferred to the surgical site for fixation to the radial neck.



Figure 2

49510140

RHP In situ sizer - 20, 22mm 49510138 RHP In situ sizer - 24, 26mm 49510139 RNP In situ sizer - 21, 25mm



Plate bending pliers 49510135



Figure 4 Temp fixation Pin 1.1mm DC4212

Evolve Triad Fixation System | Operative technique

Surgical technique

Screw preparation

The screw holes of the radial plates are designed to receive 2.0mm screws. The round holes can receive either 2.0mm Ortholoc Mini Polyaxial Locking Screws or 2.0mm Evolve Triad Non-Locking Bone Screws. The oval holes are used to allow for final adjustment of the plate position and are designed for non-locking screws only.

To use on-axis locking screws, the threaded locking drill guides should be used. | Figure 5

Screw the threaded guide into the desired hole. Using the 1.3mm drill, drill up to the opposing cortex. Care should be taken to avoid perforating the PRUJ.

To prepare for off axis locking or non-locking screws, the variable angle drill guide is used. With locking screws, care should be taken to avoid placing the screw more than 10 degrees off axis. The polyaxial drill guide may be used to constrain angling within this axis. Remove the guides and measure for the length of the screw using the depth gauge. | Figure 6

Screw placement

Screws are delivered to the operative site using the selfretaining Star-7 driver. To pick up the screws, the driver is pressed firmly into the screw head while the screw is still in the caddy.

Alternatively, the screws may be picked up with the aid of the screw gripper. Screw length is verified with the gauge on the screw caddy. The plate should be securely attached to the radial head using as many 2.0mm screws as necessary.

If the plate and radial head fragments have been assembled ex vivo, the entire assembly is placed back in the surgical site and approximated to the shaft of the radius.

Locking screws should be tightened by hand until they lock firmly into the plate. | Figure 7

By placing the first screw in the oval hole, the position of the plate on the radial neck and head can be adjusted for manual compression across the radial neck fracture line before final screw placement. The remainder of the screws are then placed as described above.

Fluoroscopy is used to confirm final fracture reduction and to check hardware position. The elbow is taken through a full range of motion to ensure that there is no impingement or impedance of motion.



Figure 5

1.3mm Drill guide – threaded 49510105

Drill bit 1.3mm 49510111

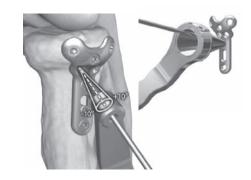


Figure 6

1.3 / 2.0 Bone drill guide 49510106

Polyaxial drill guide 1.3mm 49510110



Figure 7

Star-7 self retaining driver 49510102



Star-7 straight driver 49510101 Screw gripper 2.0mm 49510103

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Screw gauge (located in screw caddies)

Closure - postoperative

The wound is irrigated before closure. The radial collateral and annular ligaments and the common extensor origin split are carefully sutured. The competence of the Lateral Ulnar Collateral Ligament (LUCL) should be assessed and repaired if compromised by injury or the surgical approach. This can be accomplished with heavy sutures, drill holes or suture anchors. The skin is closed in layers. Mobilization and post-operative exercise is up to the discretion of the patient's surgeon and/or therapist. As a general guide, postoperatively, the arm is started on early range of motion under the guidance of a trained therapist (if not precluded by other injuries of the elbow).

Coronoid plate

Patient preparation

The patient is supine with the arm on an arm table to facilitate a medial approach to the elbow. Fixation can also be achieved with the patient in the lateral decubitus position or with the arm over the chest when managing associated injuries.

A posterior incision is employed and a full thickness medial flap is elevated on the deep fascia with care taken to protect branches of the medial cutaneous nerve of the forearm. Alternatively a direct medial approach can be employed, but crossing cutaneous nerves need to be carefully identified and protected.

The ulnar nerve can be left in place, an in situ release performed or an anterior transposition can be considered depending on the presence of any preoperative symptoms and the surgical approach planned. The coronoid is approached by elevating the flexor pronator mass off the medial epicondyle working through the floor of the ulnar nerve. Leave a cuff of tissue on the medial epicondyle to facilitate reattachment of the flexor-pronator mass. Use caution when approaching the sublime tubercle as the medial collateral ligament is still typically attached to this structure and should be preserved. Beginning the dissection distally and working proximally facilitates determining the correct layer. A portion of the brachialis attachment may need to be released to facilitate coronoid reduction and fixation.

Sizing

The coronoid plates come in three sizes and are not left/ right specific.

Select a plate based on the size and configuration of the fracture. The plates utilize 2.0mm Evolve Triad Non-Locking Bone Screws.

Reduction and plate positioning

Reduce the fracture and use k-wires to provisionally hold the fragments. Contour and position the plate to capture and buttress the fracture fragment(s). This may be done prior to implantation using the plier benders.

The coronoid specific in situ plate bender is useful to fine tune the contouring of the plate once preliminary screw fixation has been achieved. The "limbs" of the plate may be reduced by trimming the plate as needed using the plate cutter. | **Figure 8**



Figure 8 Coronoid bender 49510134

Plate and screw placement

Drill using the 1.3 mm drill and the variable angle drill guide. Measure for the correct depth using the depth gauge and insert the appropriately sized screws. | **Figure 9** Once implantation of the plate is complete, check positioning of the plate and screws with an image intensifier.

Closure - postoperative

Reattach the flexor pronator mass by suturing it to the cuff of tissue remaining on the medial epicondyle. The ulnar nerve can be left in situ or transposed anteriorly as indicated. Close in the usual manner.

Mobilization and post-operative exercise is up to the discretion of the patient's surgeon and/or therapist. As a general guide, the rehabilitation following plate fixation of coronoid fractures depends on the stability of the fixation and the associated injuries. In most coronoid fractures the lateral collateral ligament is torn and requires repair. Typically the elbow is evaluated for stability after fracture fixation and ligament repair and early active motion is commenced within a safe zone after immobilization for a few days post-operatively.

Evolve Triad 2.5mm cannulated bone screws

K-wire placement

The 0.9mm k-wire is advanced across the fracture, fusion or osteotomy site to the desired depth using the k-wire guide. Verify the desired positioning of the wire fluoroscopically.

Drilling

Slide the appropriate cannulated drill bit over the k-wire. Under power, drill to the desired screw depth. | Figure 10

Countersinking

The countersink should be used to ensure complete seating of the screw. Load the appropriate countersink onto the cannulated AO driver handle and turn the countersink in a clockwise motion to penetrate the cortex of the bone. | **Figure 11**



Figure 9

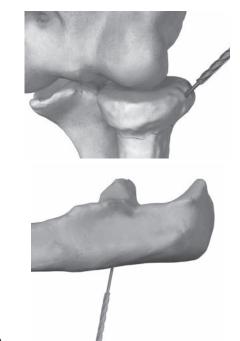


Figure 10

K-wire 0.9 X150mm DSDS1009 K-wire guide -0.9mm 49510115

Drill bit 2.0mm 49510143



Figure 11 Countersink for 2.5mm screws 49510114

Screw length determination

After countersinking, measure screw length by using the cannulated depth gauge. Slide the tip of the cannulated depth gauge over the k-wire and down to the surface of the bone, ensuring that the gauge is seated flush to the bone. | **Figure 12** The gauge measurement indicates the depth from the surface of the bone (after countersinking) to the tip of the k- wire.

Screw placement

Load the Star-8 driver into the cannulated AO driver handle. Place the screw over the k-wire and use the driver to advance the screw into the bone, until the head is completely countersunk within the bone. | **Figure 13** Depending on the stability of the first screw, procedure type, and patient related factors, multiple screws may be used for additional fixation.

Remove the k-wire and perform surgical closure.

Evolve Triad 1.5mm and 2.0mm bone screws (outside plate)

In addition to the cannulated screws, 1.5mm or 2.0mm bone screws may be used to capture fragments without the use of a plate.

Drilling

Using the proper diameter drill guide and drill bit, drill to the desired depth under power.

Screw length determination

Measure screw length by using the depth gauge. The gauge measurement indicates the depth from the surface of the bone to the tip of the gauge; adjust accordingly for countersinking or lagging. | Figure 14

Countersinking

To ensure complete seating of the screw, the countersink may be used. Load the appropriate color coded countersink onto the driver handle, and turn the countersink in a clockwise motion to penetrate the cortex of the bone.

Screw placement

Use the driver to advance the screw into the bone, until the head is completely countersunk within the bone. Depending on the stability of the first screw, procedure type, and patient related factors, multiple screws may be used for additional fixation. | **Figure 15**

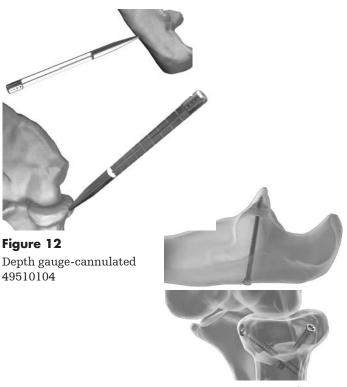
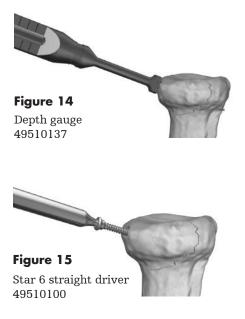


Figure 13

Explant information

At times, the surgeon believes it is medically necessary to remove implanted plates and screws. To remove screws, note the diameter of the screw to be removed. Locate the appropriate driver in the table on page 7. Remove screws by inserting the matching driver into the screw head and turning counter clockwise.



Ordering information 4951KIT1/A

Evolve Triad instrument tray

Catalog No.	Description
49510128	Evolve Triad inner tray 2 - instruments
49510135	Evolve Triad plate bending pliers
49510120	Evolve Triad plate cutter
49510138	Evolve Triad in situ sizer - 20,22mm RHP
49510139	Evolve Triad in situ sizer - 22,24mm RHP
49510140	Evolve Triad in situ sizer - 21,25mm RNP
49510105	Evolve Triad 1.3mm DRL guide - threaded
49510106	Evolve Triad 1.3 / 2.0 - bone drill guide
49510104	Evolve Triad depth gauge
49510107	Evolve Triad AOQC cannulated handle
49510110	Evolve Triad polyaxial drill guide 1.3mm
49510056	Screw forceps evolve eps
49510137	Evolve Triad depth gauge cannulated
49510115	Evolve Triad k-wire guide -0.9mm
49510134	Evolve Triad coronoid bender
49510109	Evolve Triad 1.1mm drill guide
DSDS1009	K-wire 0.9 x 150mm blunt/trocar
DSDS1011	K-wire 1.1 x 150mm blunt/trocar
44112008	Single trocar wire 1.6x150mm

General instruments and implant caddy tray

Catalog No.	Description
49510127	Evolve Triad inner tray 1 - implant caddies
49510058	Tenaculum small pointed
49510057	Tenaculum small serrated
49510059	Tenaculum medium pointed
520200008	Bone fragment pick elevator
5362000004	Plate and screw caddies (see next page)

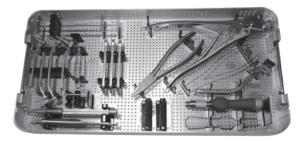




Plate caddy

Catalog No.	Description
49510136	Evolve Triad plate caddy
4920H020	Evolve Triad 20mm radial head plate
4920H022	Evolve Triad 22mm radial head plate
4920H024	Evolve Triad 24mm radial head plate
4920H026	Evolve Triad 26mm radial head plate
4920N021	Evolve Triad 21mm radial neck plate
4920N025	Evolve Triad 25mm radial neck plate
4920C004	Evolve Triad coronoid buttress plate sm
4920C007	Evolve Triad coronoid buttress plate med
4920C011	Evolve Triad coronoid buttress plate lg
DC4212	Temp fixation pin 1.1mm



1.5mm screw caddy

Catalog No.	Description
49510130	Evolve Triad 1.5mm screw caddy
4941510N	Evolve Triad screw 1.5x10mm
4941512N	Evolve Triad screw 1.5x12mm
4941514N	Evolve Triad screw 1.5x14mm
4941516N	Evolve Triad screw 1.5x16mm
4941518N	Evolve Triad screw 1.5x18mm
4941520N	Evolve Triad screw 1.5x20mm
4941522N	Evolve Triad screw 1.5x22mm
4941524N	Evolve Triad screw 1.5x24mm
4941526N	Evolve Triad screw 1.5x26mm
4941528N	Evolve Triad screw 1.5x28mm
49510121	Evolve Triad countersink for 1.5mm screws
49510122	Evolve Triad gripper 1.5mm screw
49510100	Evolve Triad star 6 straight driver
49510108	Evolve Triad drill bit 1.1mm



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2.0mm screw caddy

Catalog No.	Description
49510131	Evolve Triad 2.0mm screw caddy
4942010L	Ortholoc Mini screw 2.0x10mm
4942012L	Ortholoc Mini screw 2.0x12mm
4942014L	Ortholoc Mini screw 2.0x14mm
4942016L	Ortholoc Mini screw 2.0x16mm
4942018L	Ortholoc Mini screw 2.0x18mm
4942020L	Ortholoc Mini screw 2.0x20mm
4942022L	Ortholoc Mini screw 2.0x22mm
4942024L	Ortholoc Mini screw 2.0x24mm
4942026L	Ortholoc Mini screw 2.0x26mm
4942028L	Ortholoc Mini screw 2.0x28mm
4942030L	Ortholoc Mini screw 2.0x30mm
4942010N	Evolve Triad screw 2.0x10mm
4942012N	Evolve Triad screw 2.0x12mm
4942014N	Evolve Triad screw 2.0x14mm
4942016N	Evolve Triad screw 2.0x16mm
4942018N	Evolve Triad screw 2.0x18mm
4942020N	Evolve Triad screw 2.0x20mm
4942022N	Evolve Triad screw 2.0x22mm
4942024N	Evolve Triad screw 2.0x24mm
4942026N	Evolve Triad screw 2.0x26mm
4942028N	Evolve Triad screw 2.0x28mm
4942030N	Evolve Triad screw 2.0x30mm
4942035N	Evolve Triad screw 2.0x35mm
4942040N	Evolve Triad screw 2.0x40mm
49510103	Evolve Triad gripper 2.0mm
49510145	Evolve Triad countersink
49510101	Evolve Triad star 7 straight driver
49510102	Evolve Triad star 7 self retaining driver
49510111	Evolve Triad drill bit 1.3mm
49510112	2.0mm Drill bit



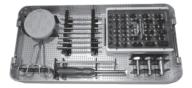
2.5mm screw caddy

Catalog No.	Description
49510132	Evolve Triad 2.5mm screw caddy
4942510CH	Evolve Triad cannulated screw 2.5x10mm (fully threaded)
4942512CH	Evolve Triad cannulated screw 2.5x12mm (fully threaded)
4942514CH	Evolve Triad cannulated screw 2.5x14mm (fully threaded)
4942516CH	Evolve Triad cannulated screw 2.5x16mm (fully threaded)
4942518CH	Evolve Triad cannulated screw 2.5x18mm (fully threaded)
4942520CH	Evolve Triad cannulated screw 2.5x20mm (fully threaded)
4942522CH	Evolve Triad cannulated screw 2.5x22mm (fully threaded)
4942524CH	Evolve Triad cannulated screw 2.5x24mm (fully threaded)
4942526CH	Evolve Triad cannulated screw 2.5x26mm (fully threaded)
4942528CH	Evolve Triad cannulated screw 2.5x28mm (fully threaded)
4942530CH	Evolve Triad cannulated screw 2.5x30mm (fully threaded)
4942532CH	Evolve Triad cannulated screw 2.5x32mm (fully threaded)
4942534CH	Evolve Triad cannulated screw 2.5x34mm (fully threaded)
4942536CH	Evolve Triad cannulated screw 2.5x36mm (fully threaded)
4942538CH	Evolve Triad cannulated screw 2.5x38mm (fully threaded)
4942540CH	Evolve Triad cannulated screw 2.5x40mm (fully threaded)
4942542CH	Evolve Triad cannulated screw 2.5x42mm (fully threaded)
4942544CH	Evolve Triad cannulated screw 2.5x44mm (fully threaded)
4942546CH	Evolve Triad cannulated screw 2.5x46mm (fully threaded)
4942548CH	Evolve Triad cannulated screw2.5x48mm (fully threaded)
4942550CH	Evolve Triad cannulated screw2.5x50mm (fully threaded)
49510114	Evolve Triad countersink for 2.5mm screws
DSDS0001	Cleaning stylet 0.9mm
49510144	Evolve Triad star 8 cannulated driver
49510143	Evolve Triad drill bit 2.0mm



Ordering information

In addition to the Instruments for the Evolve Triad System, we have included instrumentation from the EVOLVE Proline Radial Head Replacement System.



Instruments from Evolve Proline Radial Head Replacement System

Catalog No.	Description		Catalog No.
9510126	Evolve Triad radial hd tray		2499H228
981001	Evolve Proline trial head handle		2499H418
24981002	Evolve Proline trial stem handle		2499H420
24981003	Evolve Proline neck planer		2499H422
24981005	Evolve Proline sizing /assem dish		2499H424
24981007	Evolve Proline impactor 4.5/5.5mm	2	499H426
24981008	Evolve Proline impactor 6.5/7.5mm	2499H42	8
4981009	Evolve Proline impactor 8.5/9.5mm	2499S045	;
24987100	Evolve Proline stem starter awl	2499S055	
24987145	Evolve Proline stem broach 4.5mm	2499S065	
24987155	Evolve Proline stem broach 5.5mm	2499S075	
24987165	Evolve Proline stem broach 6.5mm	2499S085	
24987175	Evolve Proline stem broach 7.5mm	2499S095	
24987185	Evolve Proline stem broach 8.5mm	2499S245	
24987195	Evolve Proline stem broach 9.5mm	2499S255	
24987105	Evolve Proline stem broach 10.5mm	2499S265	
2499H018	Evolve Proline trial head 18mm	2499S275	
2499H020	Evolve Proline trial head 20mm	2499S285	-
2499H022	Evolve Proline trial head 22mm	2499S295	
2499H024	Evolve Proline trial head 24mm	2499S445	
2499H026	Evolve Proline trial head 26mm	2499S455	
2499H028	Evolve Proline trial head 28mm	2499S465	
2499H218	Evolve Proline trial head 18mm +2	2499S475	
2499H220	Evolve Proline trial head 20mm +2	24995485	
2499H222	Evolve Proline trial head 22mm +2	2499S495	
2499H224	Evolve Proline trial head 24mm +2		
2499H226	Evolve Proline trial head 26mm +2		

Sterile implants for the radial head are available in 2499KITA. Consult EVOLVE Radial Head Arthroplasty surgical technique (SO317-1106).

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