## SURGICAL TECHNIQUE

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Foundation to Innovation


## Clavicle Locking Plate \& Screw System

The One Surgical Clavicle Locking Plate \& Screw System offers multiple fixation options in a variety of configurations. The low profile plates are constructed of titanium alloy and are used with locking and non-locking screws, ranging in length from $10-30 \mathrm{~mm}$. The screws are available in 3.5 mm diameter for shaft placement and 2.7 mm diameter for distal placement.

## CLAVICLE LOCKING PLATE OPTIONS

| clavicle locking plate, MID SHAFT <br> 4 to 9 Hole Left and Right |  |
| :---: | :---: |
|  |  |

## 2.7 mm LOCKING SCREW

$10-30 \mathrm{~mm}$ ( 2 mm increments)

## 2.7 mm CORTICAL SCREW

Low Profile Head
10-30mm (2mm increments)

## 3.5 mm LOCKING SCREW

10-30mm (2mm increments)
3.5mm CORTICAL SCREW
$10-30 \mathrm{~mm}$ ( 2 mm increments)
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## 1

## FRACTURE REDUCTION

Reduce the fracture and stabilize with lag screws, bone clamps, and temporary fixation K-wires.

## 2

PLATE PLACEMENT \& POSITIONING
The Clavicle Locking Plate and Screw System offers four plate options.
Select and position the appropriate plate for the fracture.


MIDSHAFT PLATE
Superior placement for shaft fractures


DISTAL PLATE
Superior placement for distal fractures


Anterior placement for shaft or distal fractures


DISTAL HOOK PLATE
Superior placement for distal fractures

## 3

## SCREW INSERTION

Note: The fracture pattern will dictate the optimal screw placement. All screw holes can accept either locking or cortical screws. Shaft screws are 3.5 mm ; screws distal to the laser line on distal plates are 2.7 mm .

Drill using the appropriate drill bit and drill sleeve for the selected screw.

## 3.5 mm Screws

Cortical (White Instruments)

- 2.5 mm Drill Bit
- 2.5 mm Single Handle Drill Sleeve

Locking (Blue Instruments)

- 2.7 mm Drill Bit
- 2.7 mm Locking Drill Sleeve or 2.7 mm Single Handle Locking Drill Sleeve for insertion through Drill Guide Block


## 2.7mm Screws (Yellow Instruments)

Cortical

- 2.0 mm Drill Bit
- 2.0 mm Single Handle Drill Sleeve


## Locking

- 2.0 mm Drill Bit
- 2.0 mm Locking Drill Sleeve or 2.0 mm Single Handle Locking Drill Sleeve for insertion through Drill Guide Block

Use the 2.7/3.5/4.0mm Depth Gauge to determine appropriate screw length.

Note: The Depth Gauge reading will place the screw tip slightly beyond the bone in order to ensure fixation in the far cortex. For screw insertion without protrusion, use a screw one size smaller than the measured length.

Insert the appropriate screw using the 2.0mm Hex Screwdriver for 2.7 mm Screws or the $\mathbf{2 . 5} \mathbf{m m}$ Hex Screwdriver for 3.5 mm Screws.

Insert remaining screws as needed for the fracture.


## IMPLANT REMOVAL (IF NECESSARY)

Fully expose the plate and screws, including removing any bone or soft-tissue growth into the screw heads.
Using the corresponding Screwdriver, unlock all screws from the plate to prevent plate rotation during removal. Remove all screws fully from the construct.

Remove the plate from the bone using an elevator, osteotome, or forceps.

## Indications

## Small Locking Plate and Screw System:

The small locking plate and screw system is indicated for the clavicle, scapula, olecranon, humerus, radius, ulna, tibia, calcaneus, and fibula.

The One Surgical Screws (1.5mm and larger, solid) are intended to be used with the plate for internal bone fixation for bone fractures, fusions, osteotomies and non-unions in the foot, hand, wrist, clavicle, scapula, olecranon, humerus, radius, ulna, tibia, calcaneus, and fibula.

## Contraindications

- Do not use for surgeries other than those indicated.
- In case of material sensitivity, documented or suspected, appropriate tests should be performed for material suitability prior to implantation.
- Severe osteoporosis, compromised bone stock, insufficient or immature bone may not be suitable for use of this device.
- Any active or suspected latent infection, sepsis or marked local inflammation in or around the surgical area.
- Physical interference with other implants during implantation or use.
- Compromised vascularity, inadequate skin or neurovascular status.
- Patients who are unwilling or incapable of following postoperative care instructions.

Please refer to package insert for additional usage information.


SCREW/INSTRUMENT TRAY

