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**Manson et al.**(10) **Pub. No.: US 2025/0261975 A1**(43) **Pub. Date: Aug. 21, 2025**(54) **BIPLANAR FORCEPS REDUCERS AND METHODS OF USE****Publication Classification**

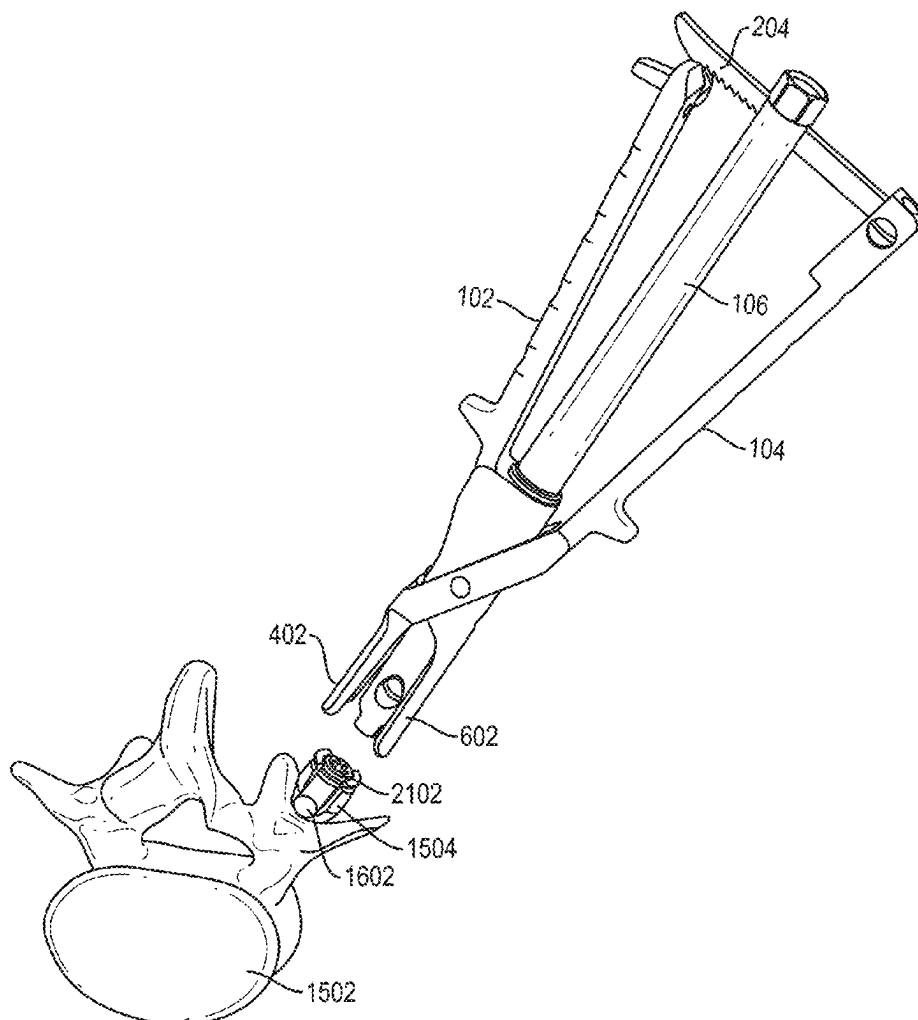
- (51) **Int. Cl.**  
**A61B 17/70** (2006.01)
- (52) **U.S. Cl.**  
**CPC** ..... **A61B 17/7086** (2013.01)

(71) Applicant: **Medos International Sàrl**, Le Locle (CH)(72) Inventors: **Alec Manson**, Boston, MA (US); **Chris Mickiewicz**, Bridgewater, MA (US); **Kevin Yeamans**, Providence, RI (US); **Michael Sorrenti**, Middleboro, MA (US); **Randy Betz, JR.**, Wilmington, DE (US); **Eric Biester**, Barrington, RI (US)(21) Appl. No.: **19/203,857**(22) Filed: **May 9, 2025****Related U.S. Application Data**

- (63) Continuation of application No. 17/522,164, filed on Nov. 9, 2021, now Pat. No. 12,318,121.
- (60) Provisional application No. 63/111,606, filed on Nov. 9, 2020.

(57) **ABSTRACT**

Biplanar forceps reducer instruments and methods are disclosed herein. The instruments disclosed herein can engage an implant, such as a bone anchor receiver head, and reduce or move a spinal fixation element, such as a rod, in two planes to move the rod into a channel formed in the receiver head. Further, the biplanar forceps reducer instruments disclosed herein can allow for introduction and tightening of a set screw using an inserter that can pass through a cannulated tube of the reducer. The low profile and biplanar reduction functionality can allow a single type of reducer instrument to couple with each bone anchor along a spinal fixation construct and remain in position until the construct is secured in position.



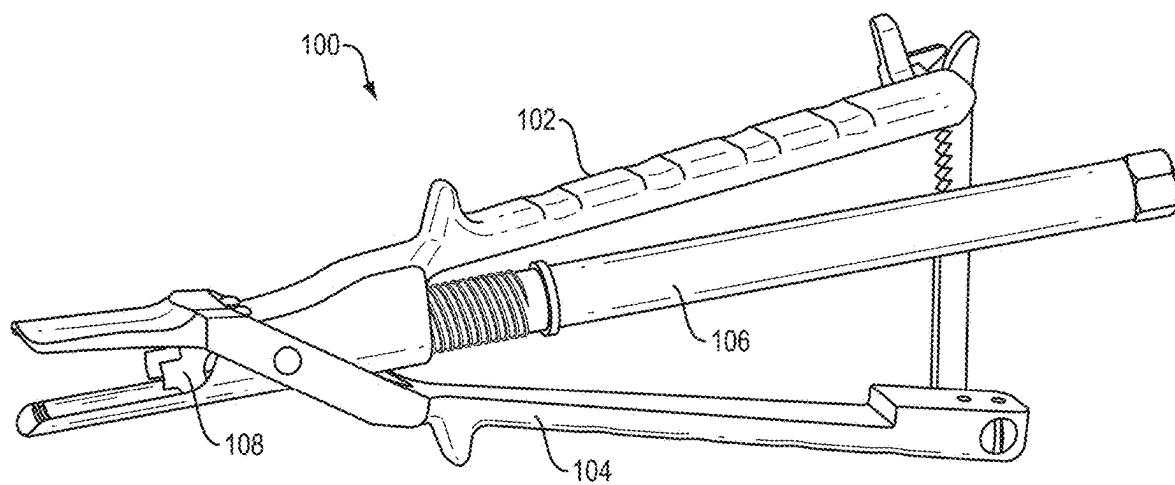


FIG. 1A

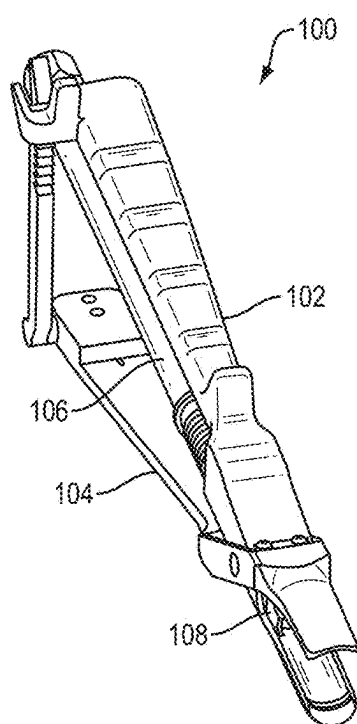


FIG. 1B

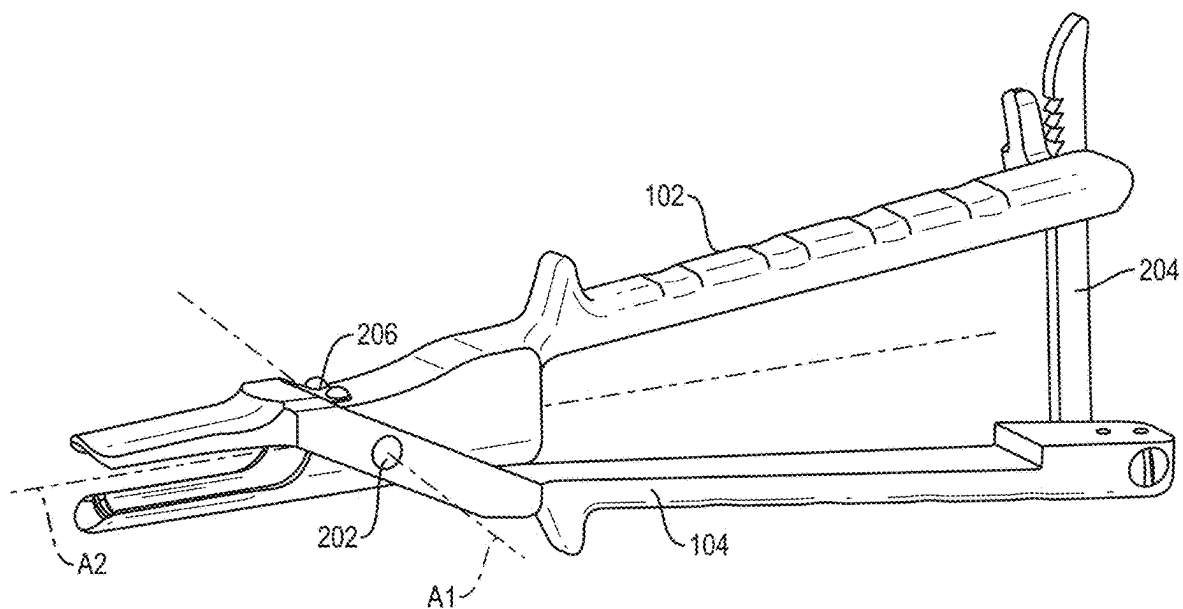


FIG. 2

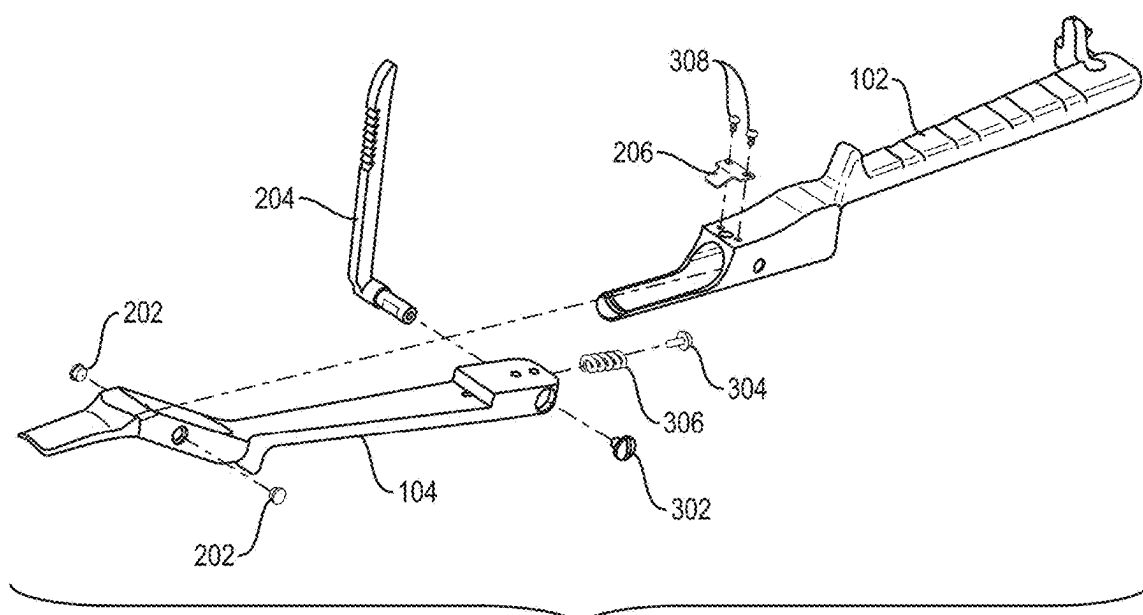


FIG. 3

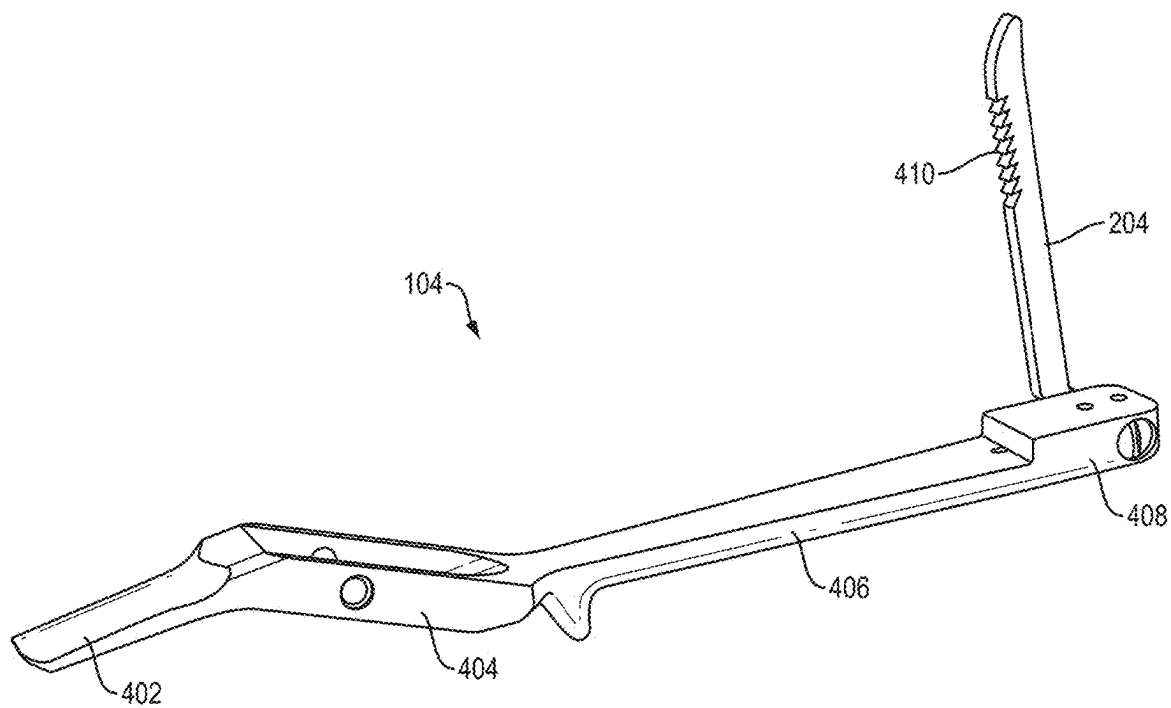


FIG. 4A

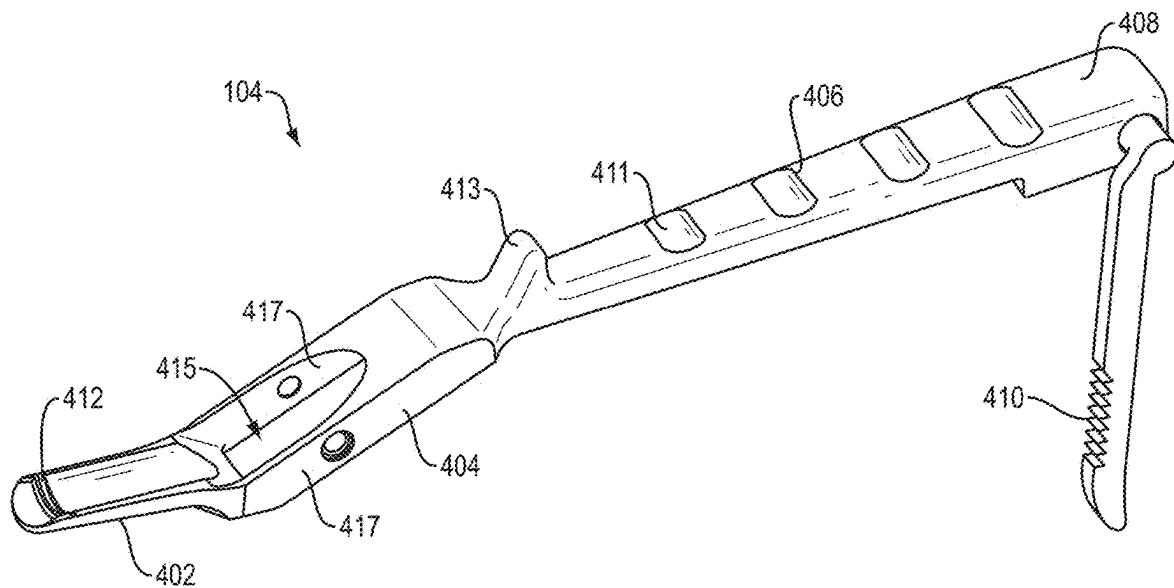


FIG. 4B

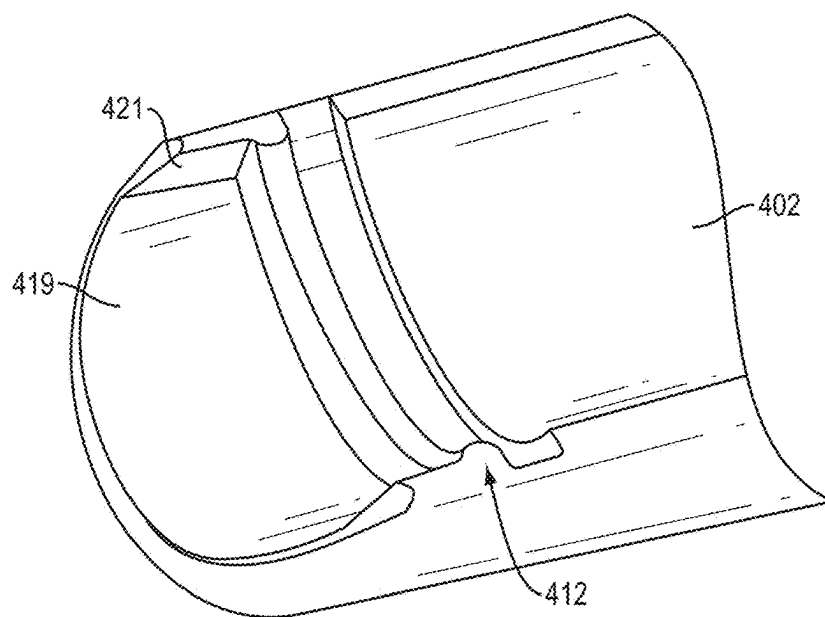


FIG. 4C

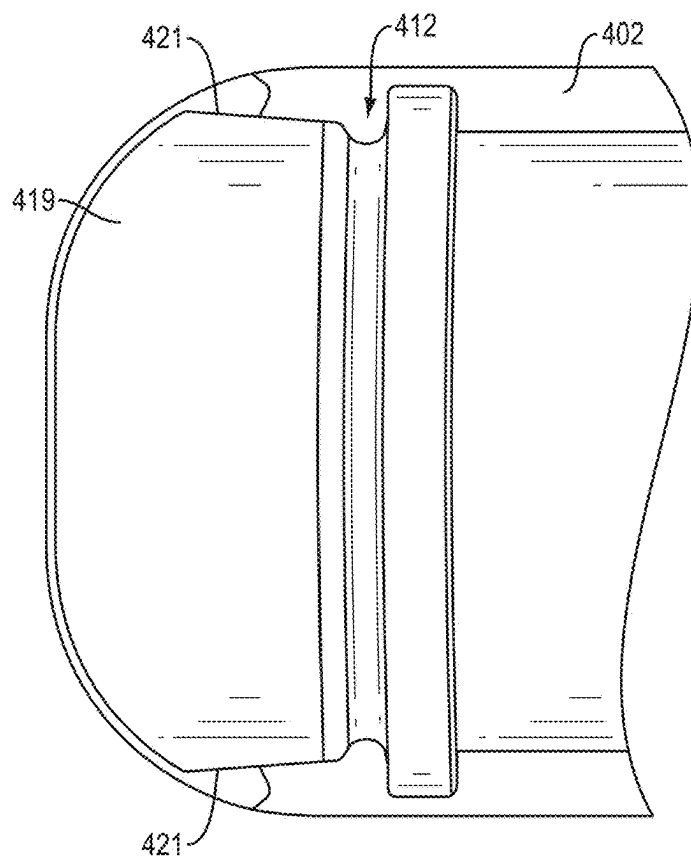


FIG. 4D

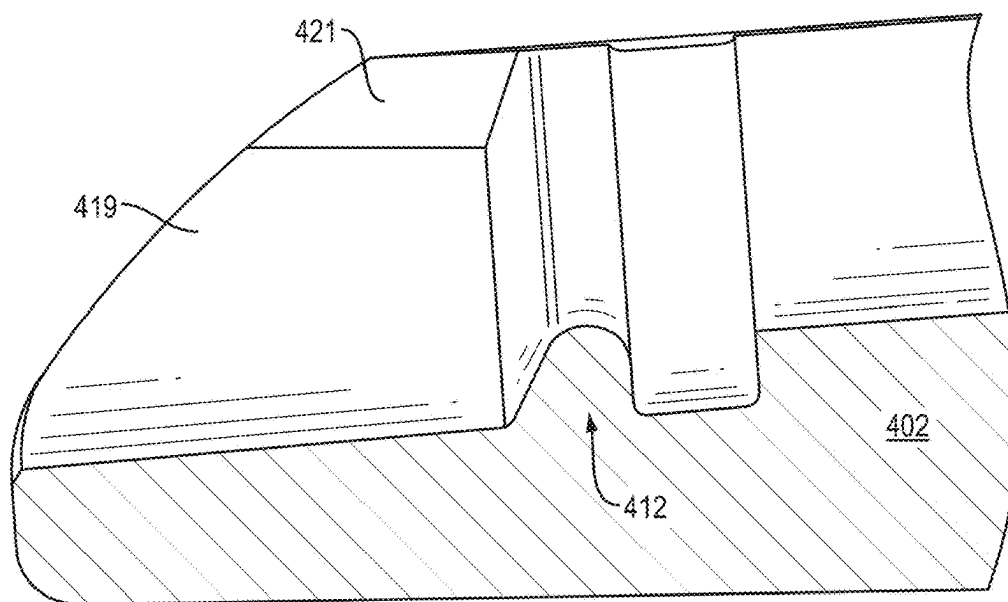


FIG. 4E

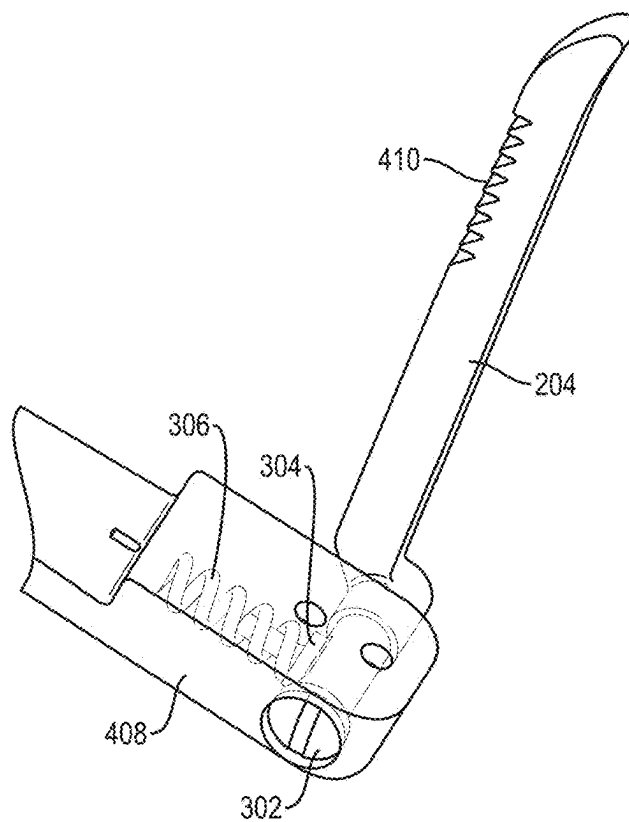
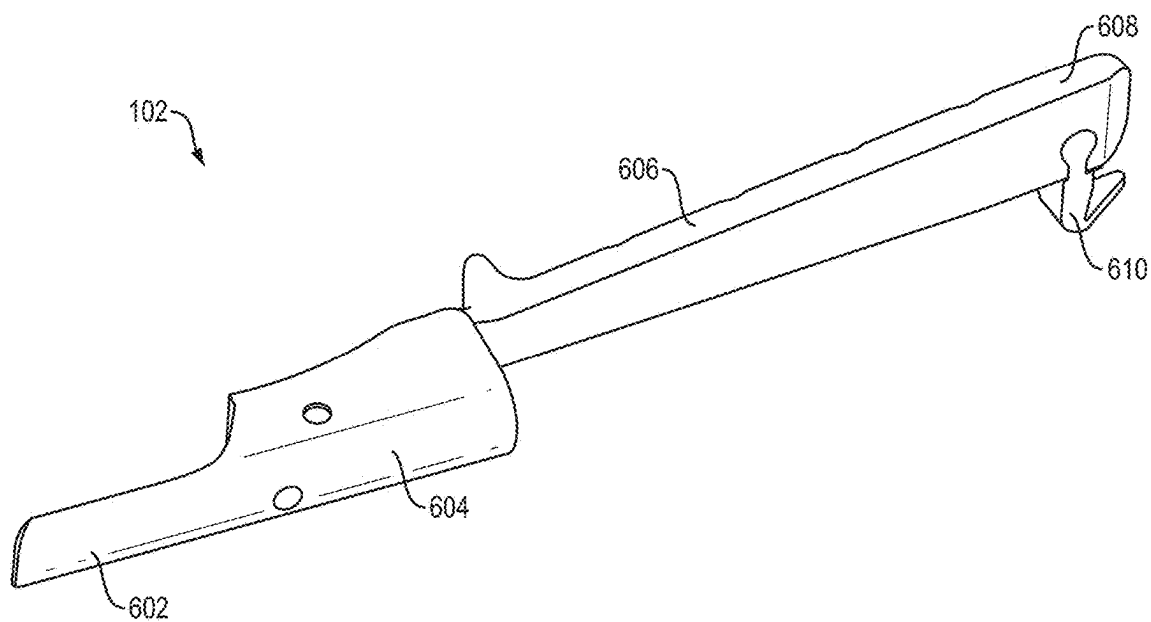
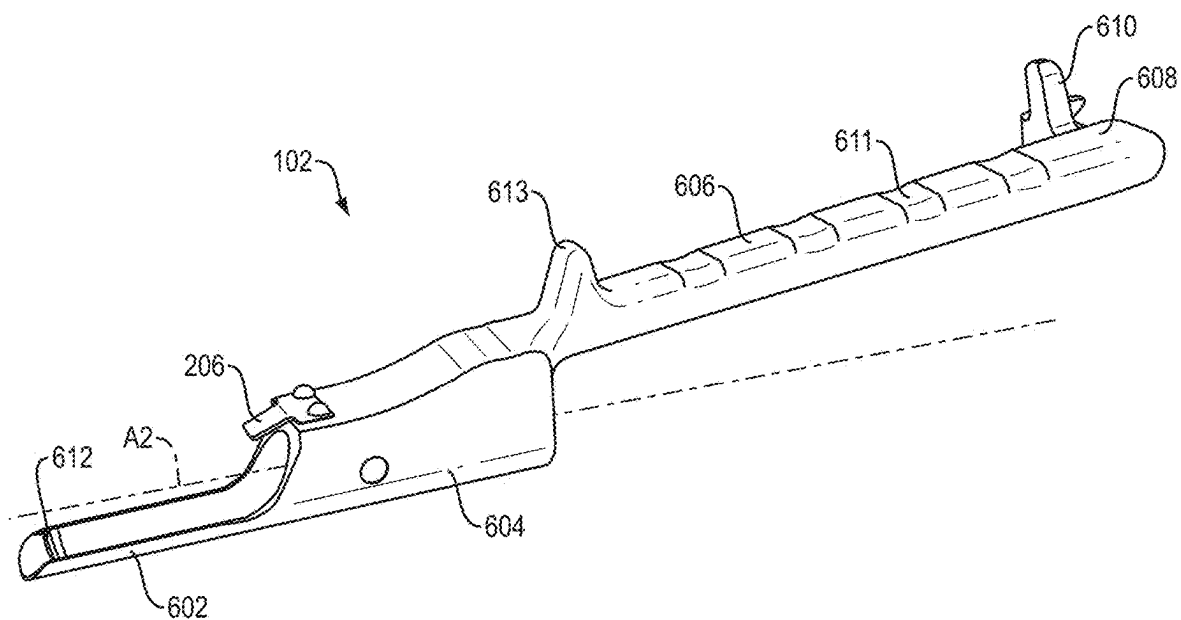


FIG. 5



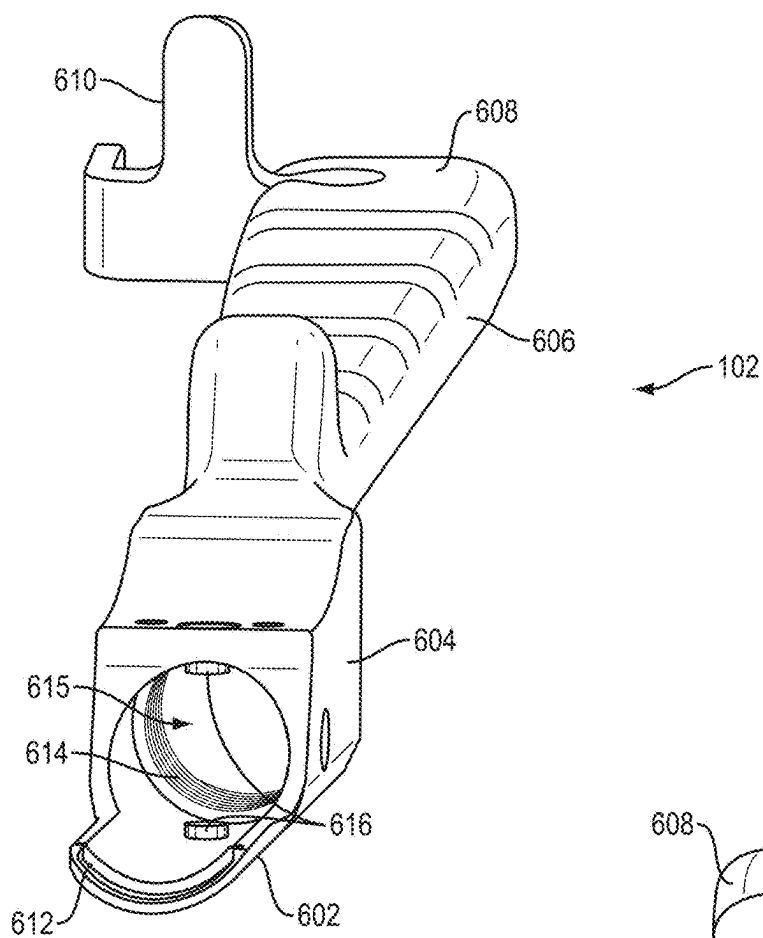


FIG. 6C

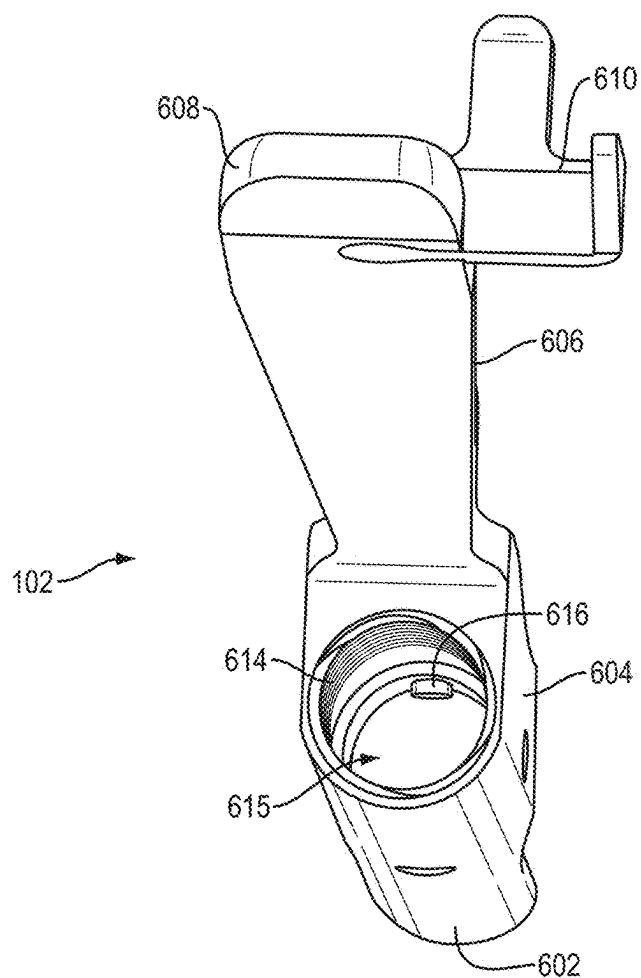


FIG. 6D



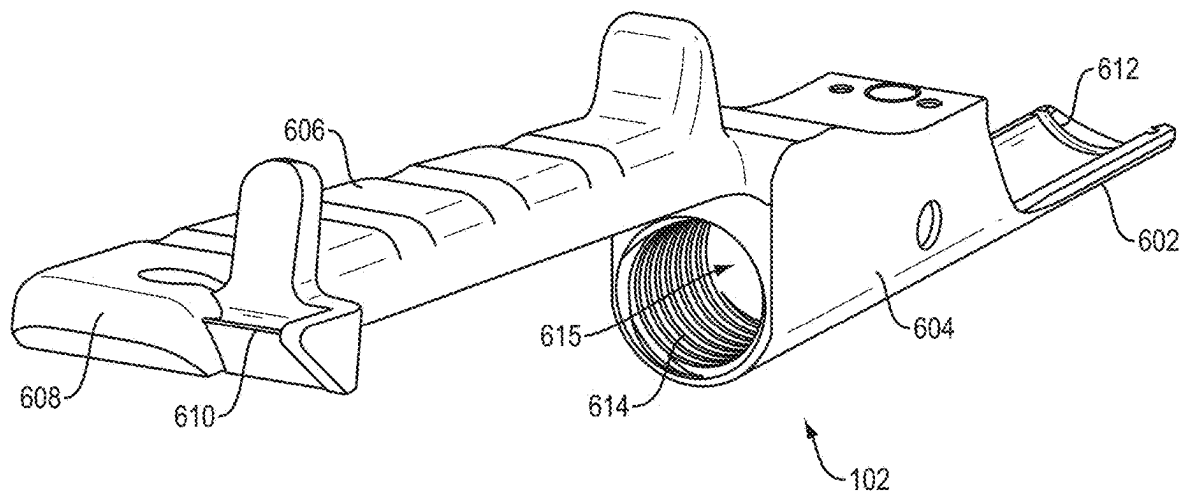


FIG. 6E

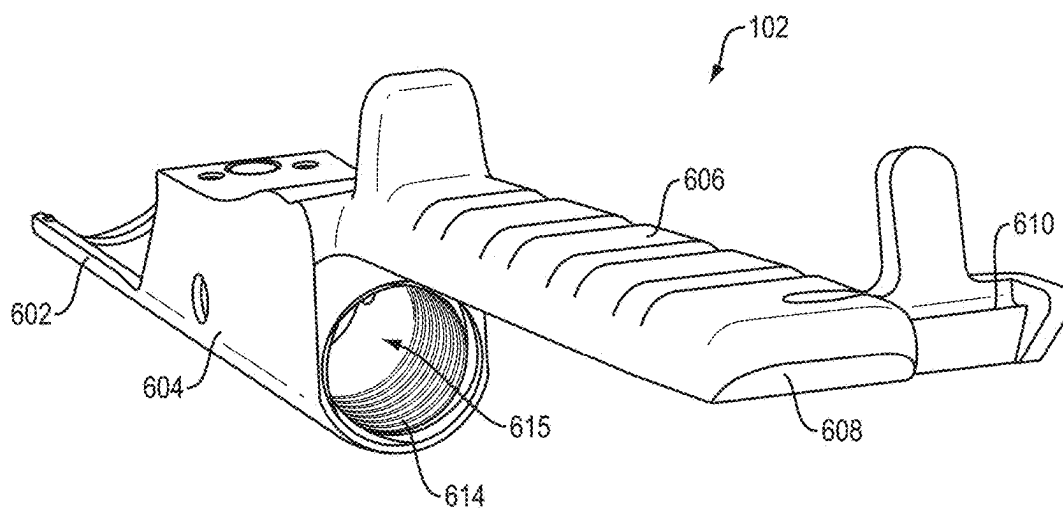


FIG. 6F

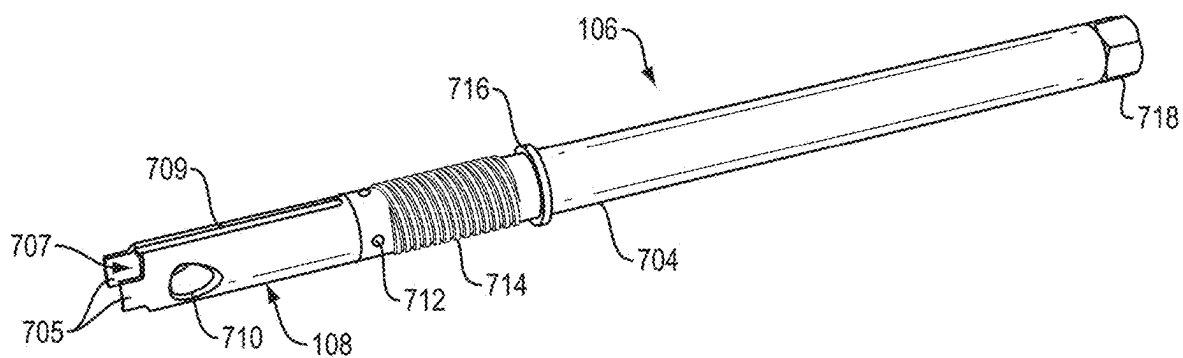


FIG. 7

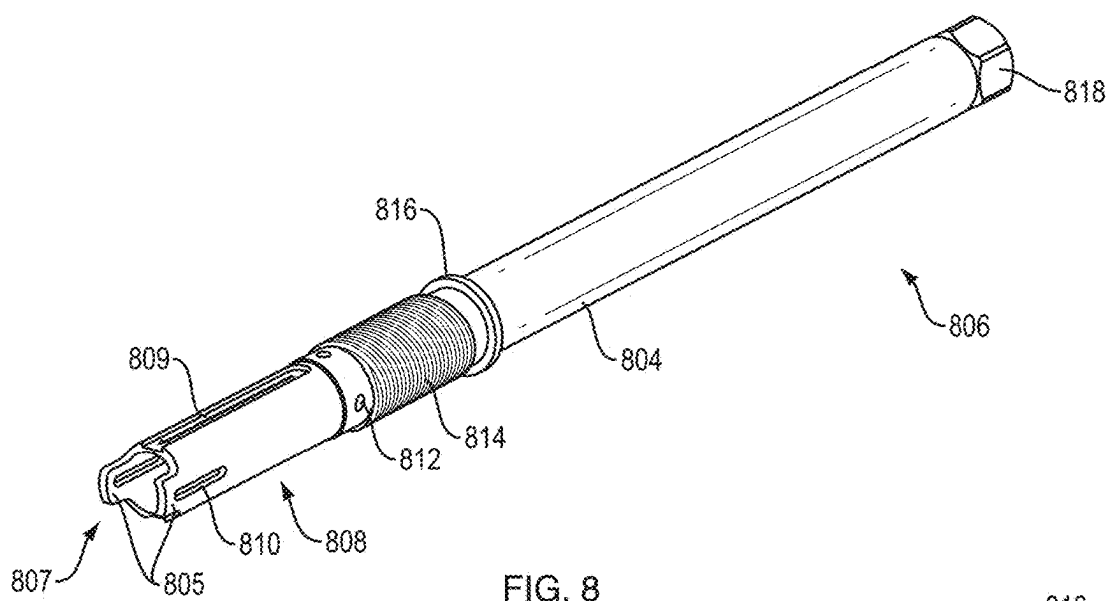


FIG. 8

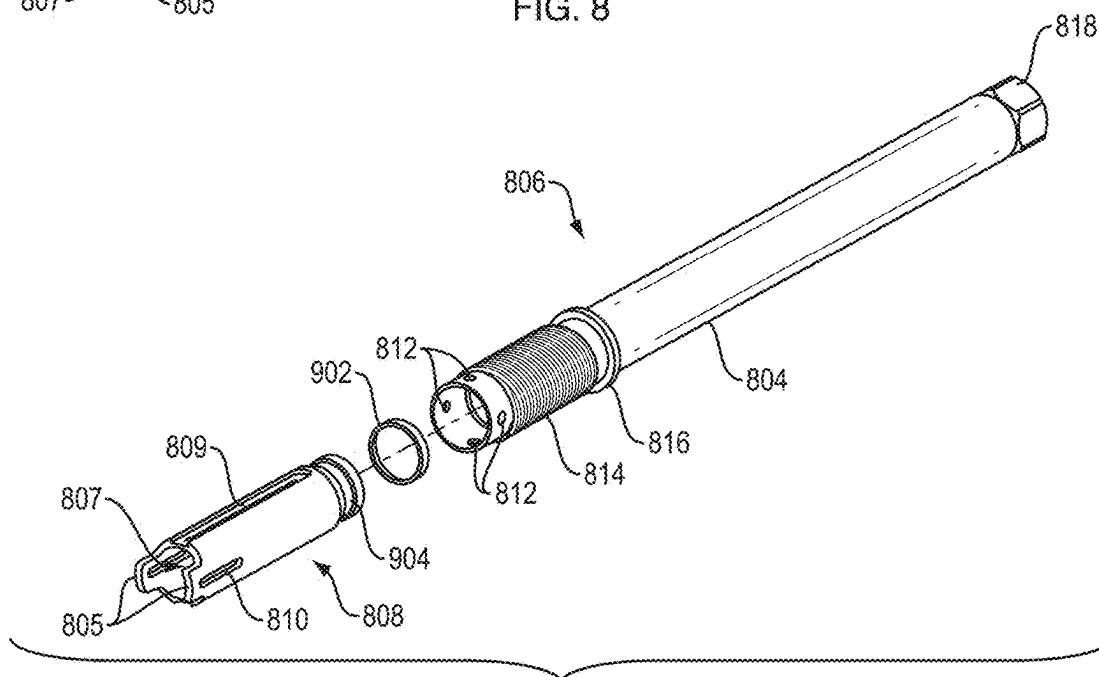
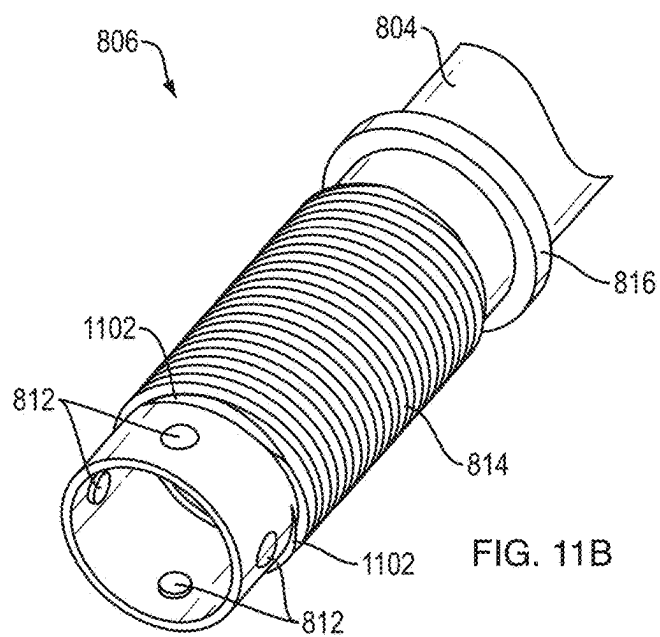
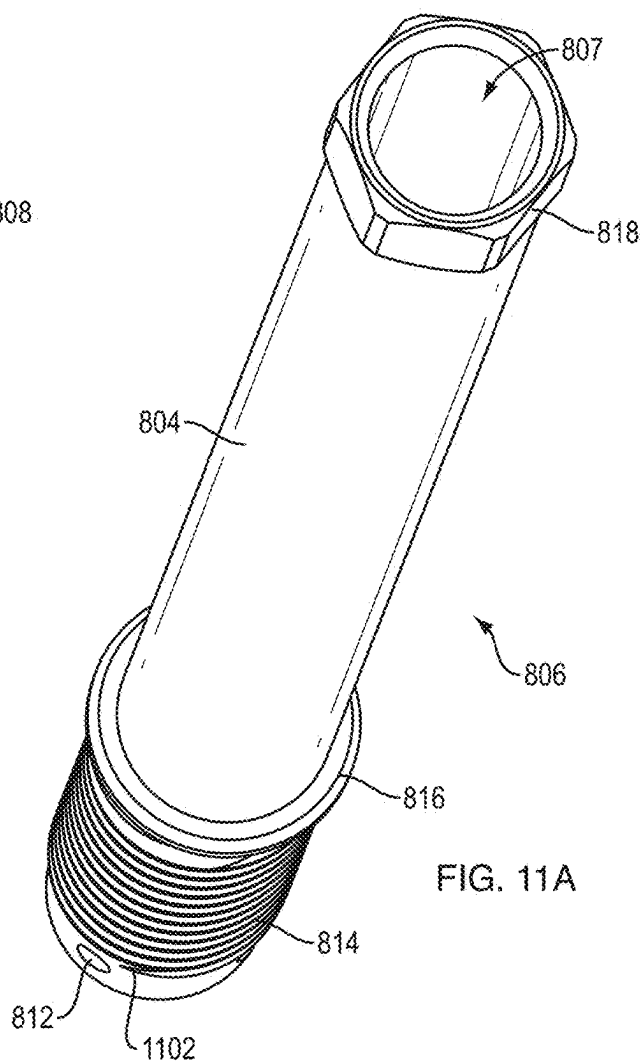
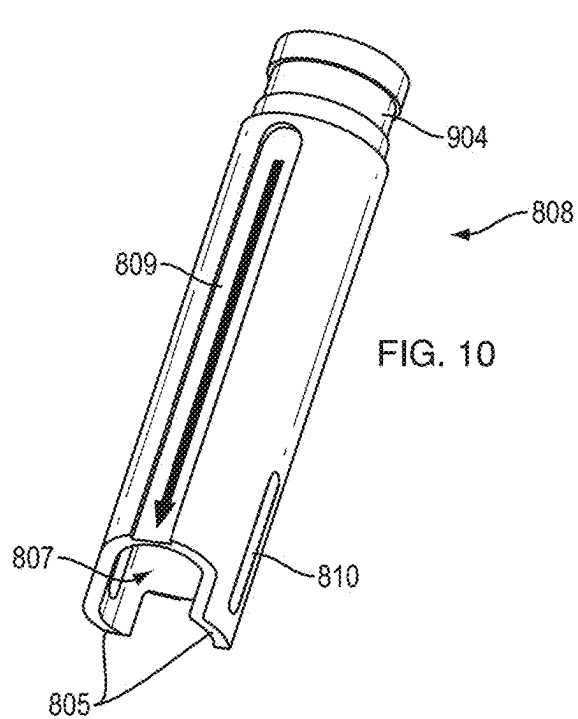


FIG. 9



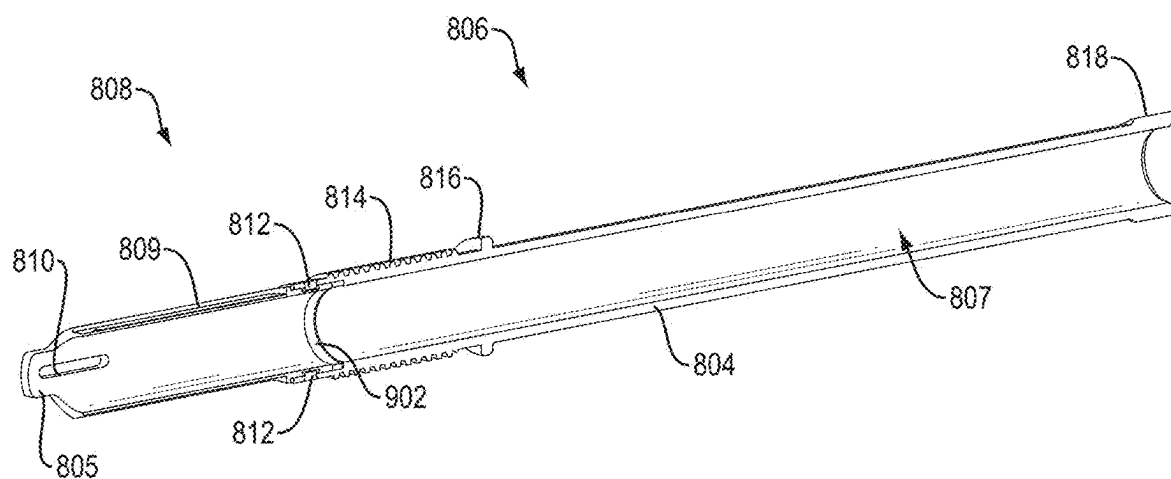


FIG. 12A

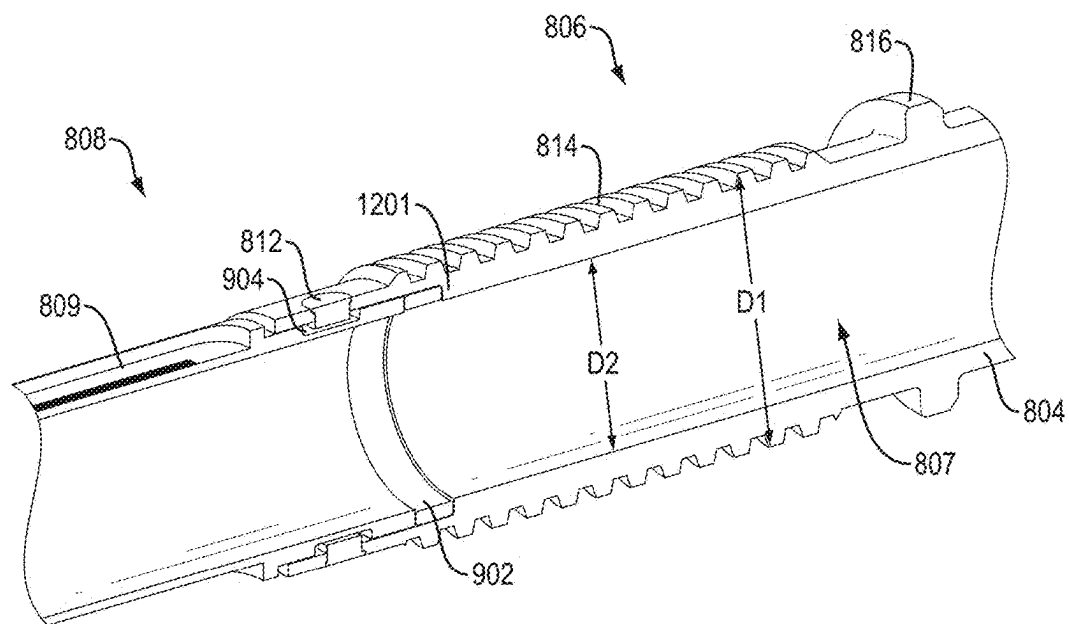


FIG. 12B

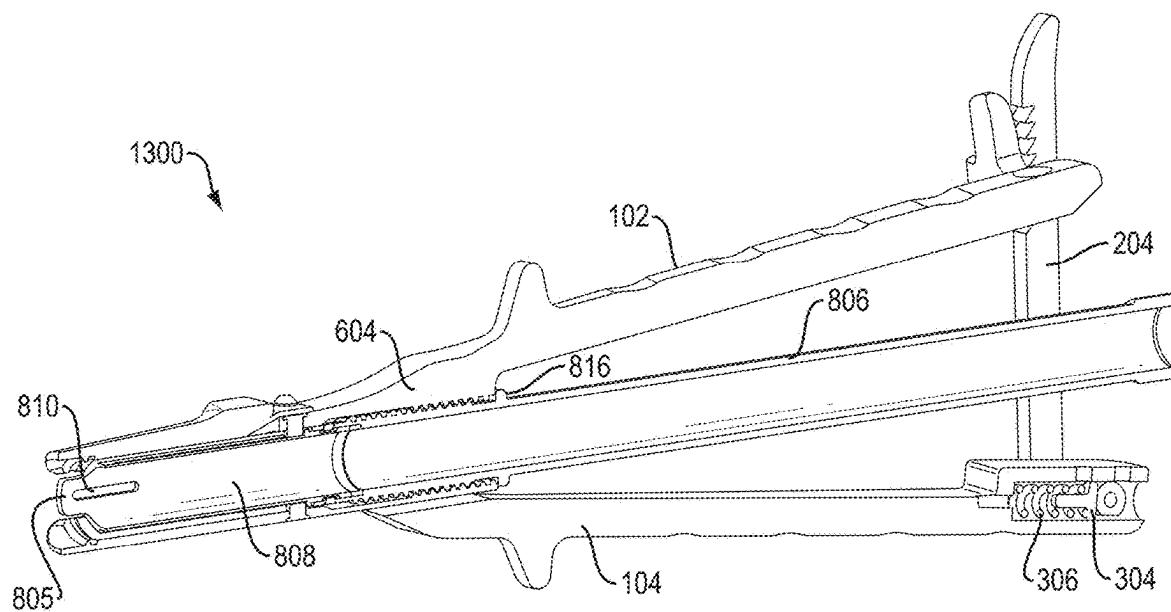


FIG. 13

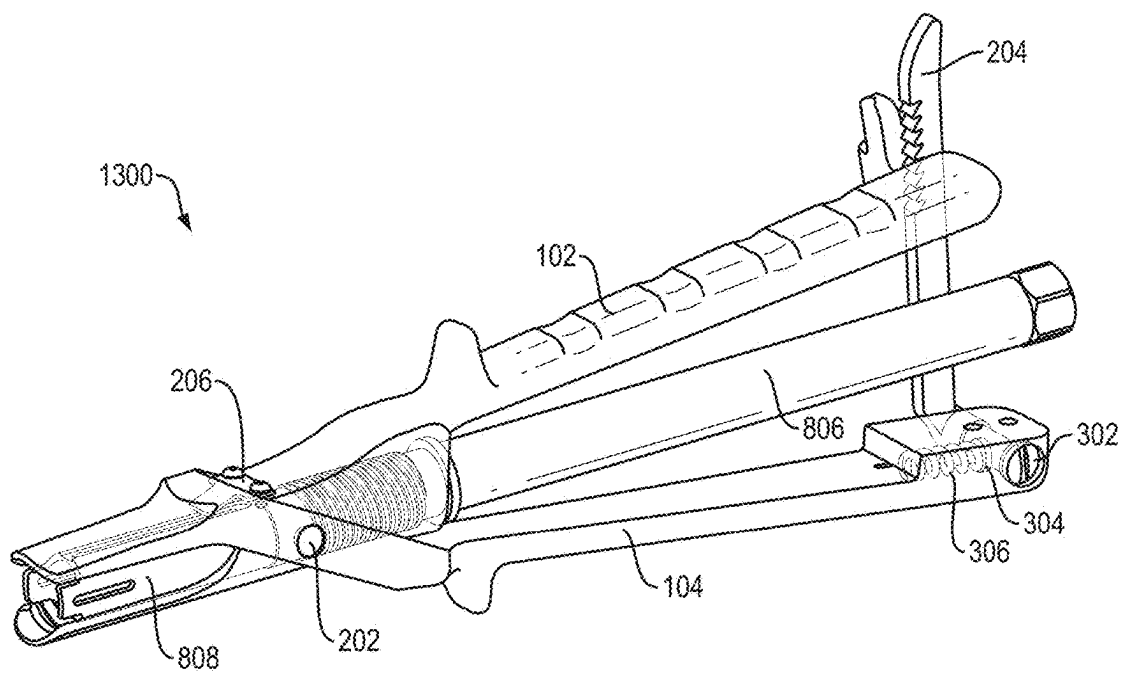


FIG. 14

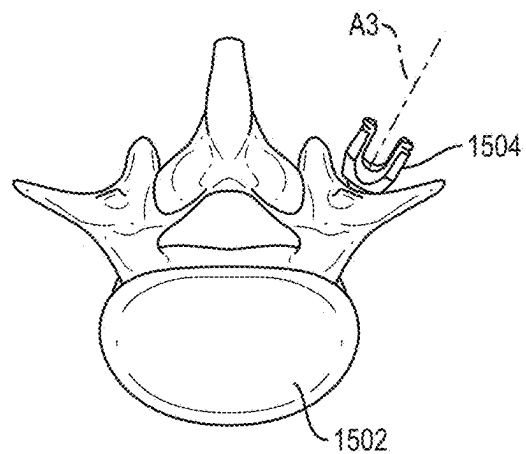


FIG. 15

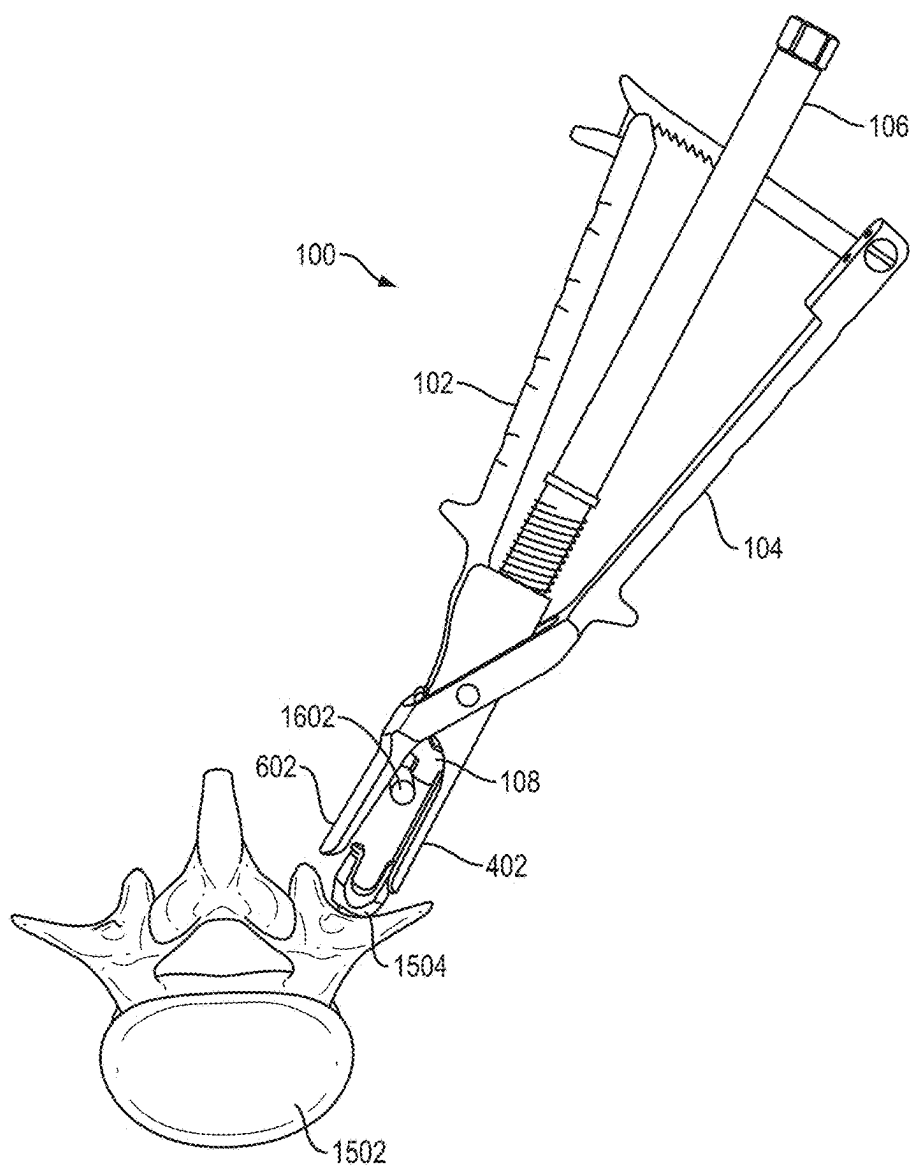


FIG. 16

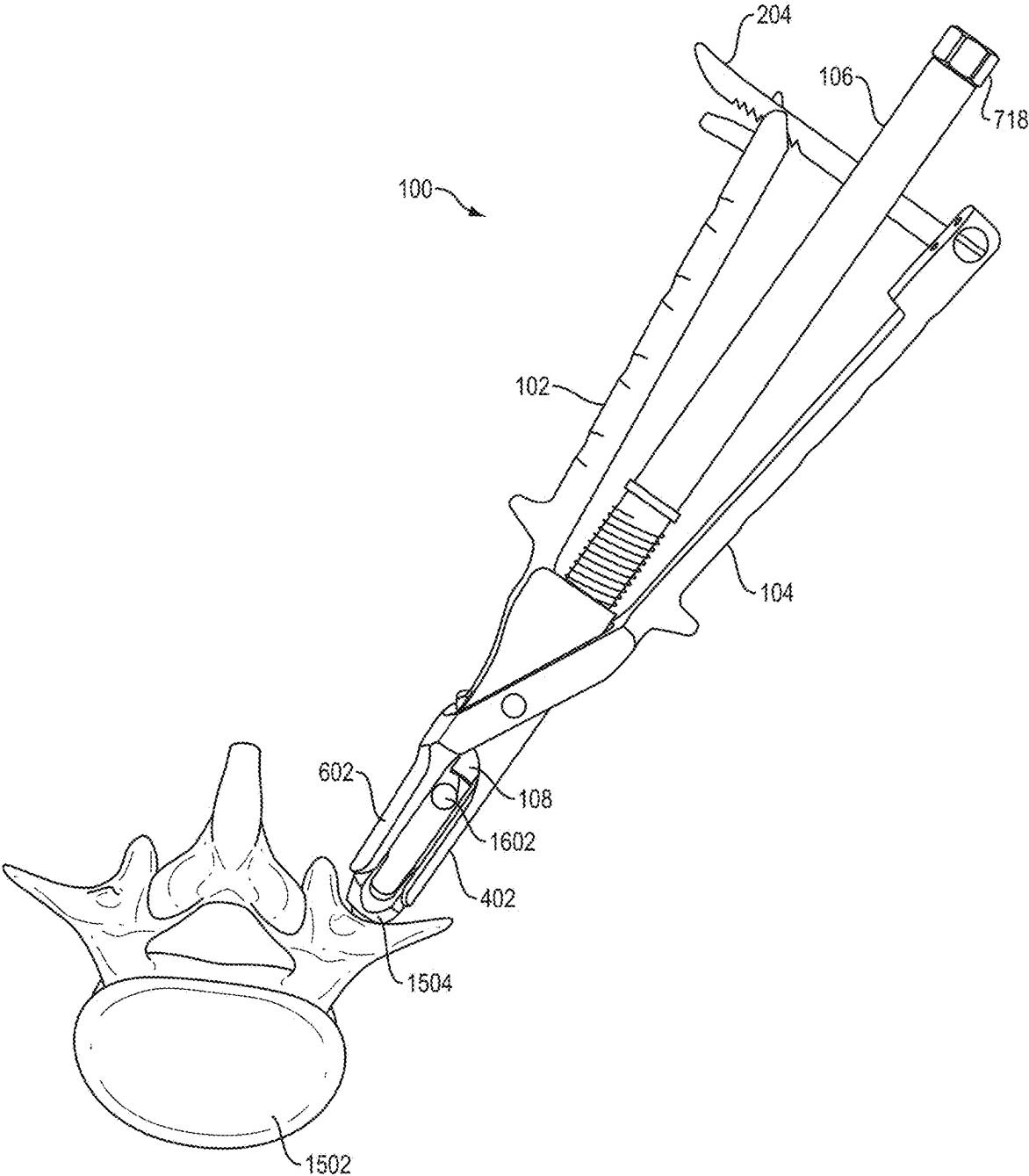


FIG. 17

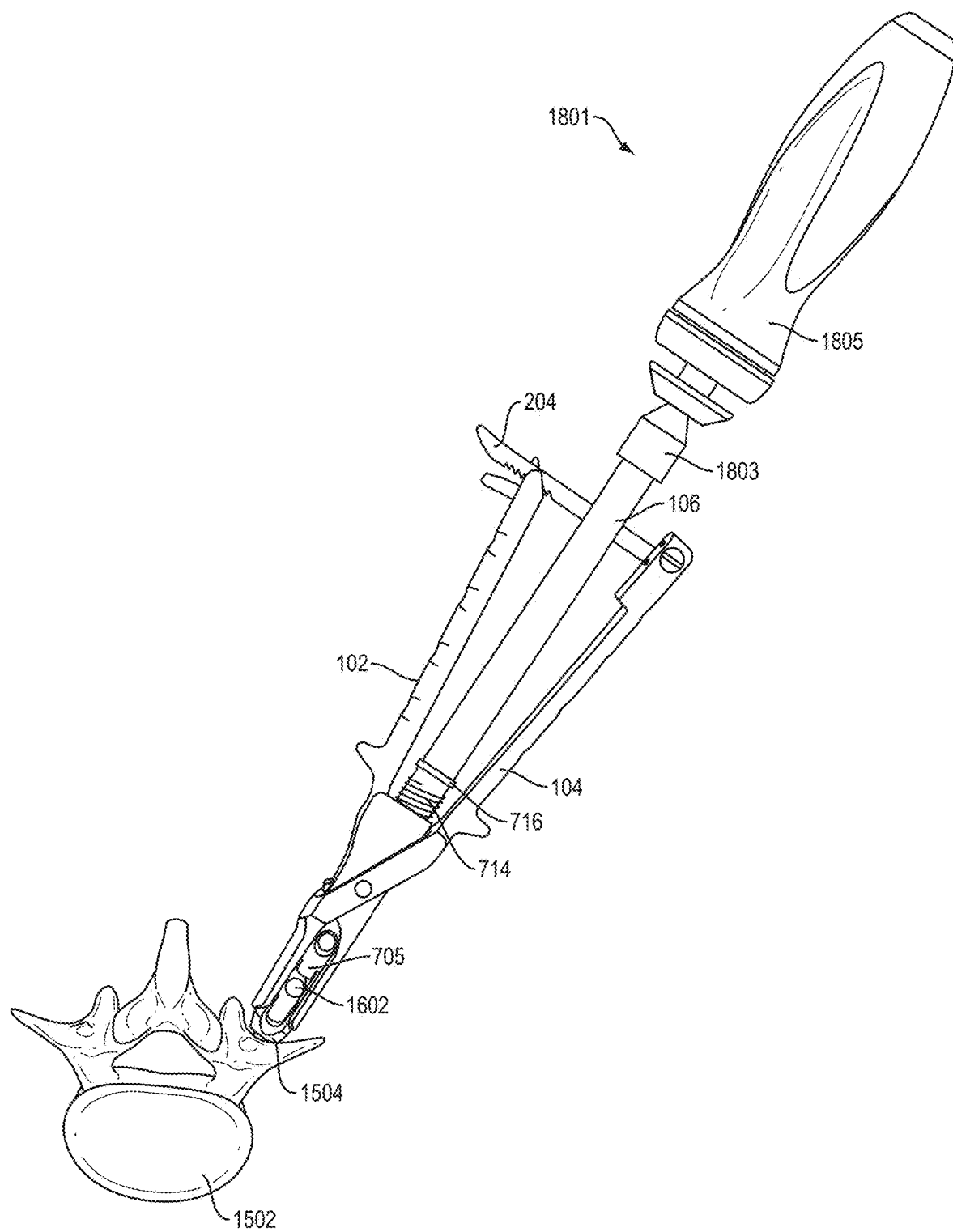


FIG. 18



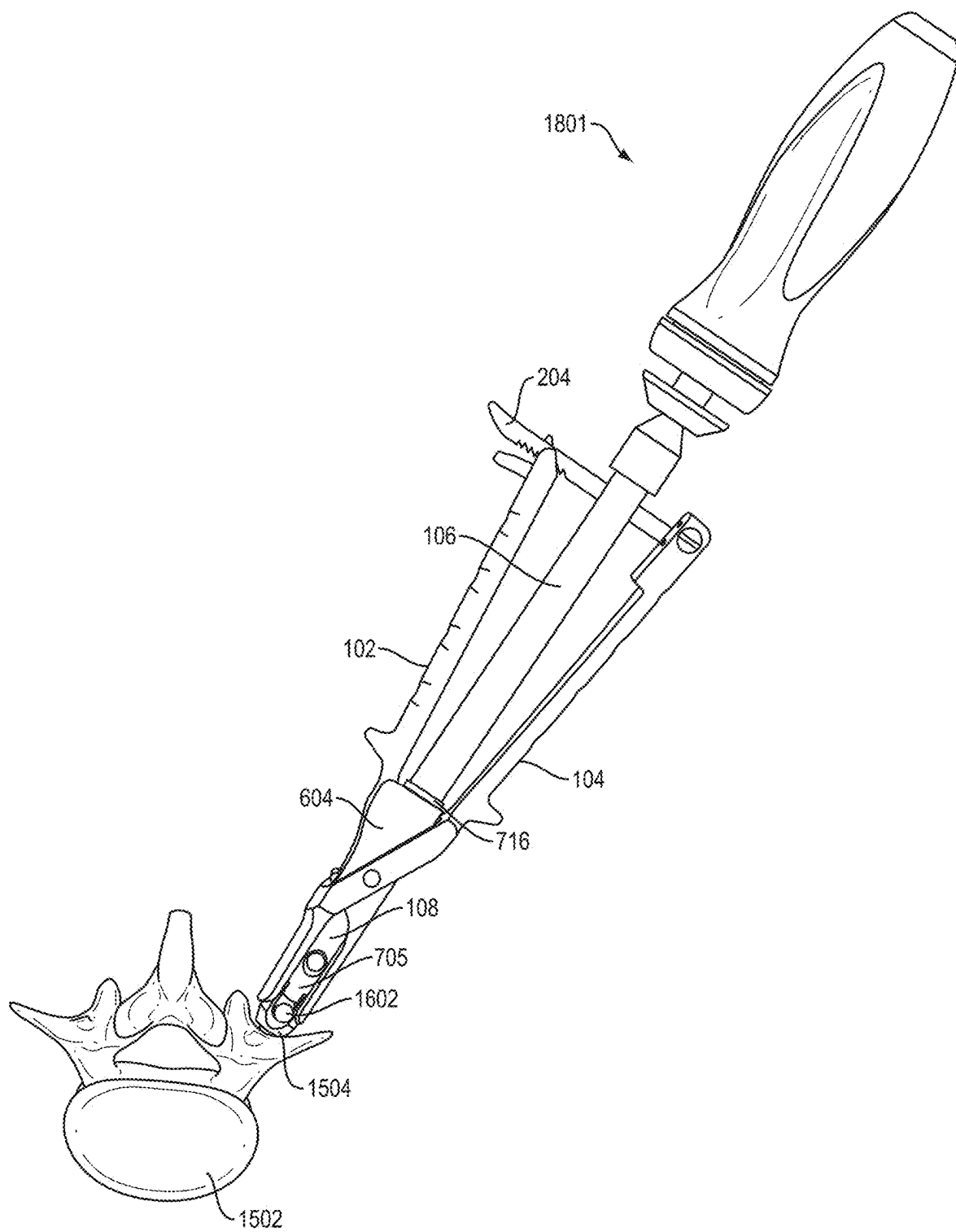


FIG. 19

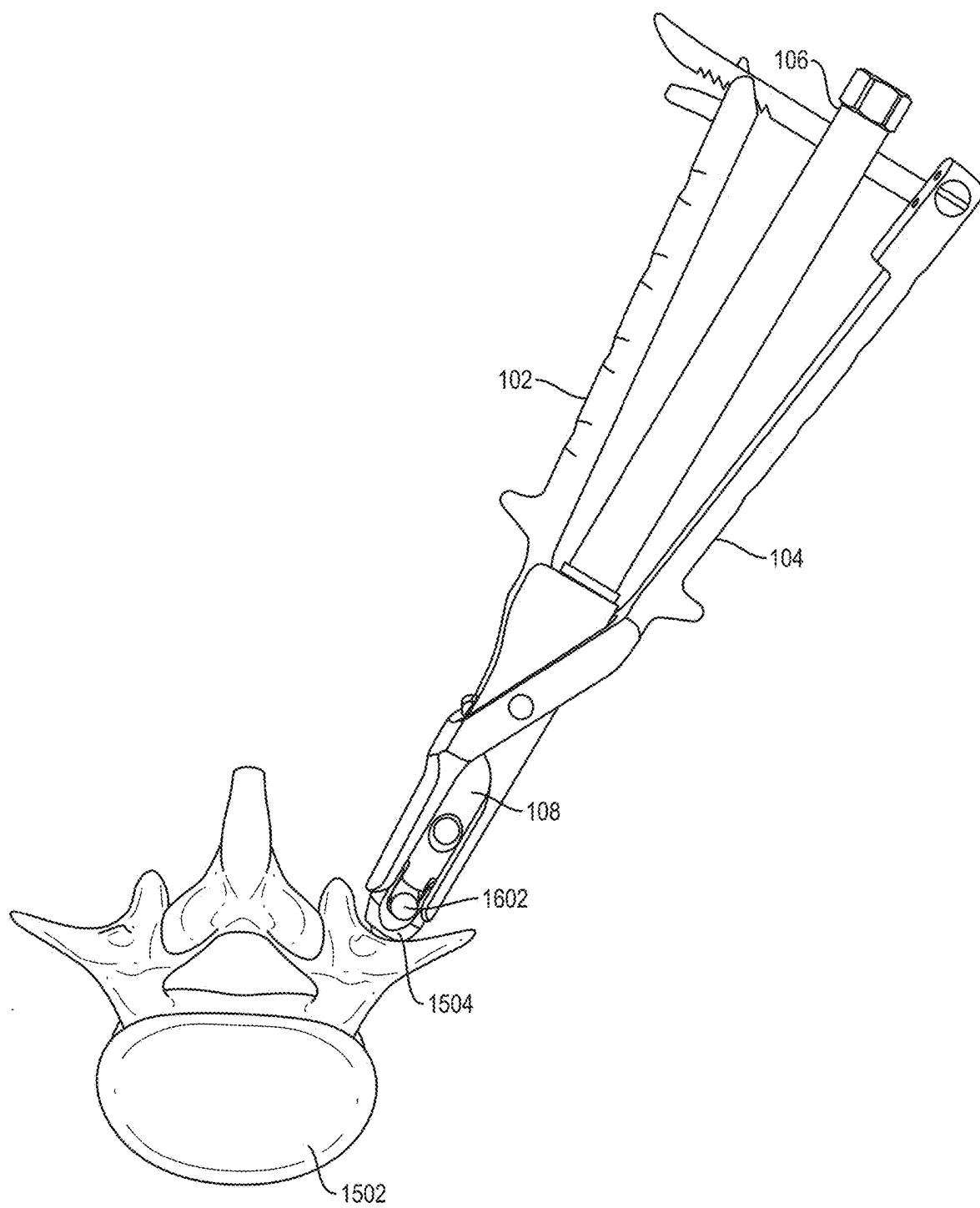


FIG. 20

18/47

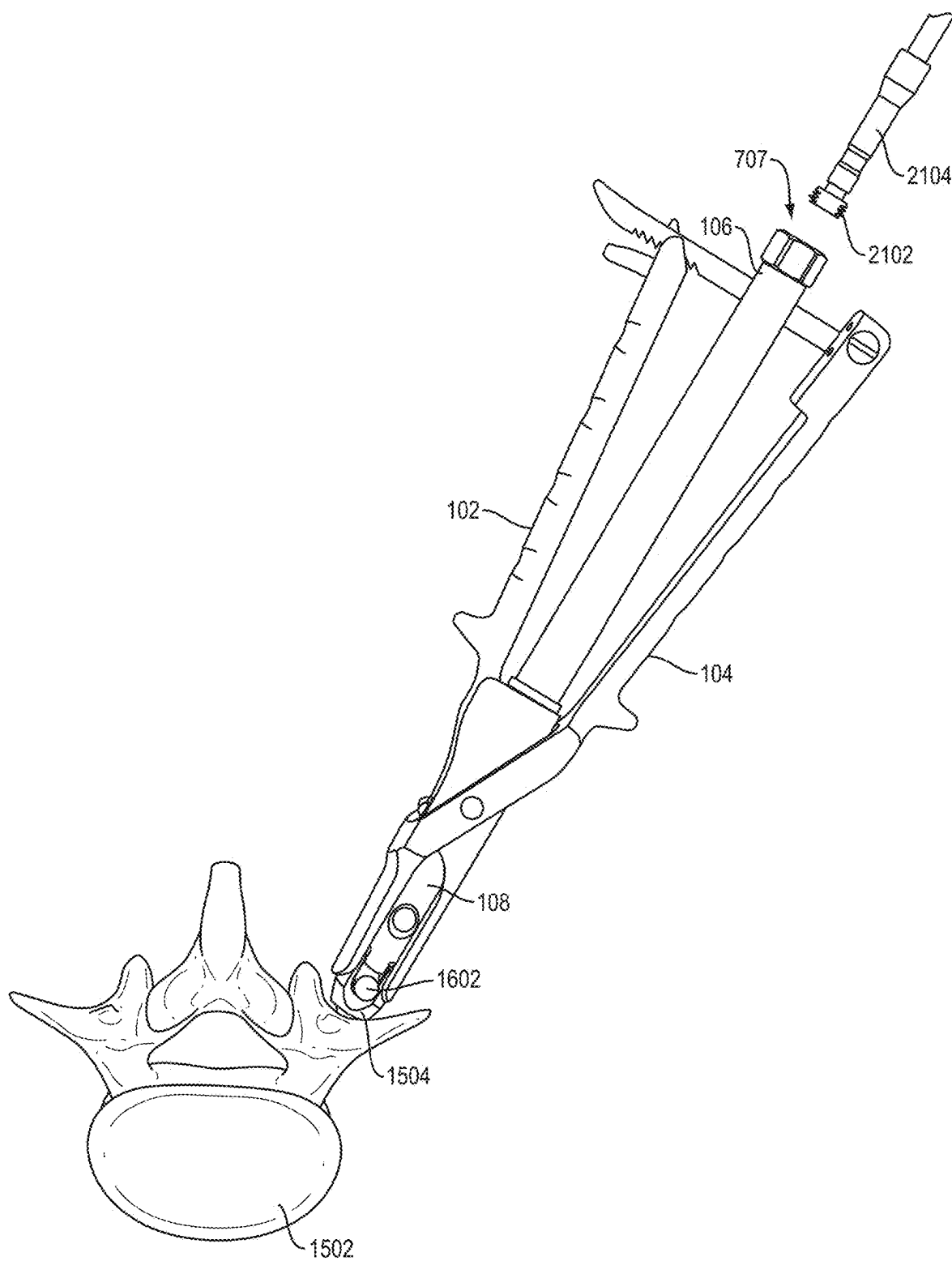


FIG. 21

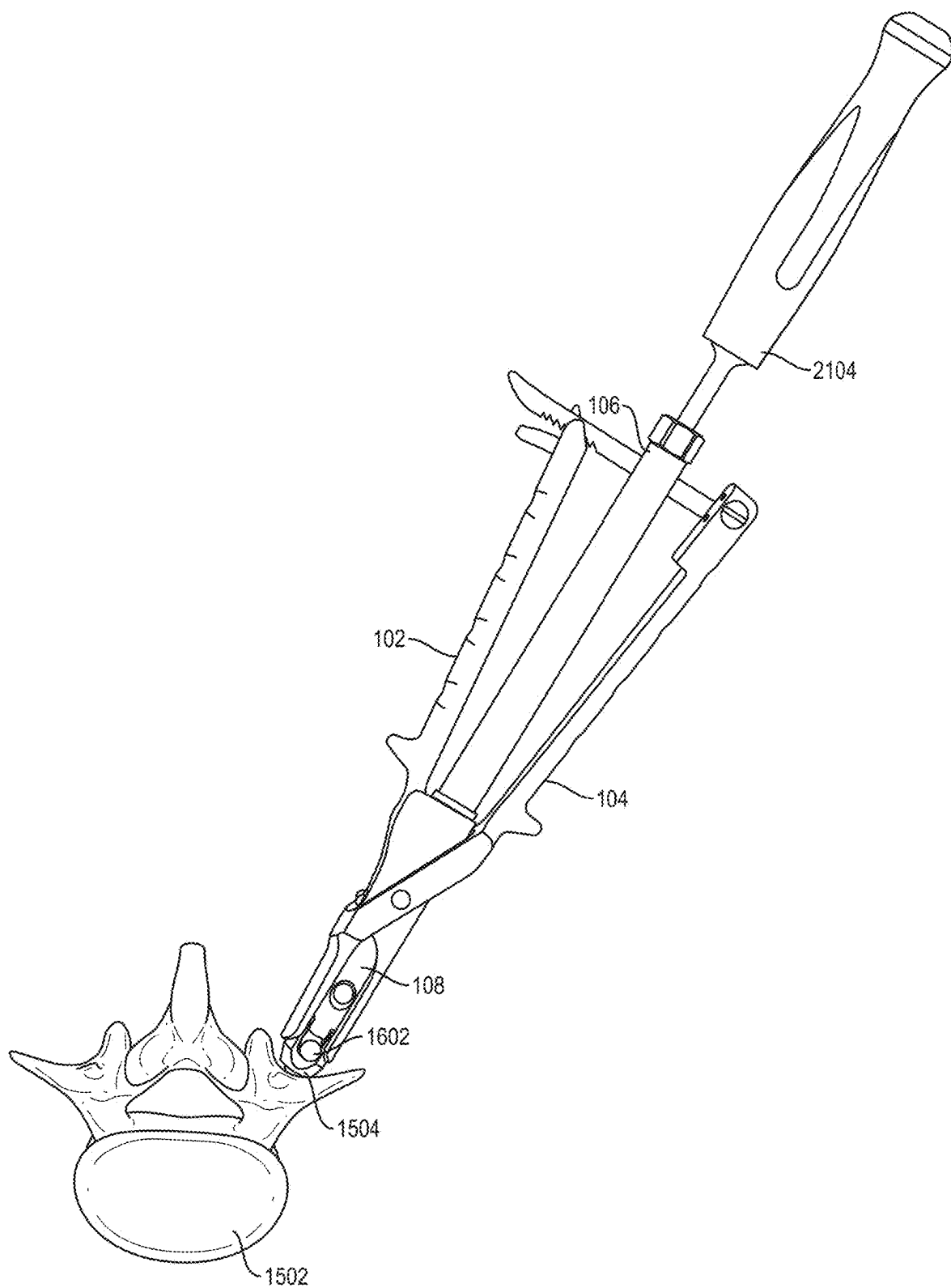
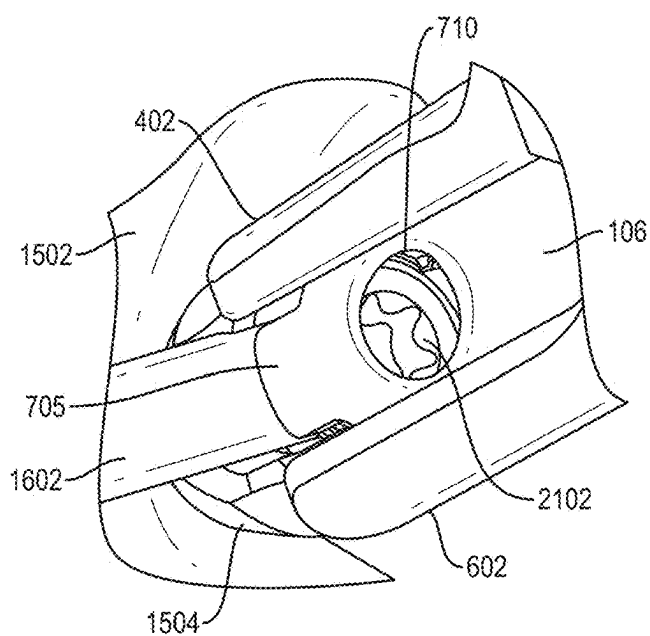
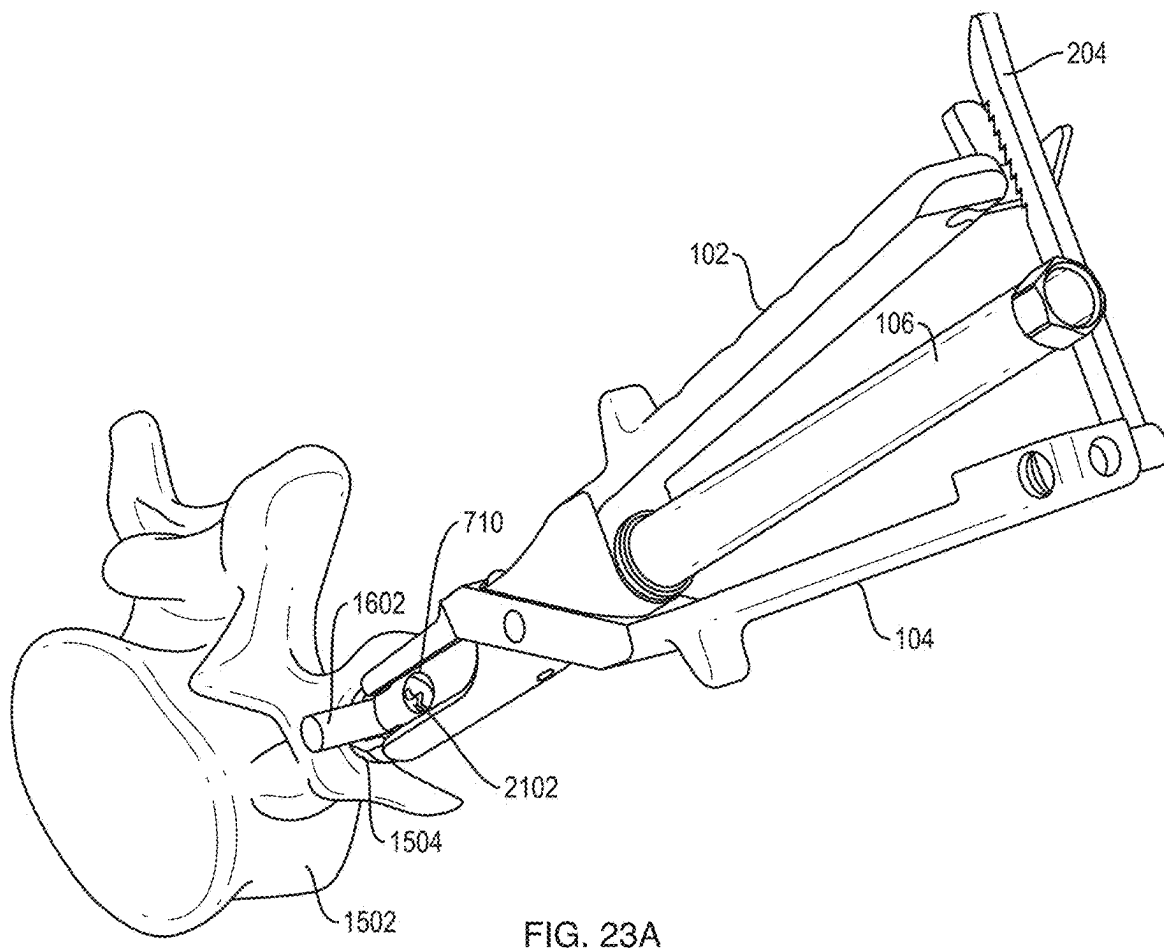


FIG. 22



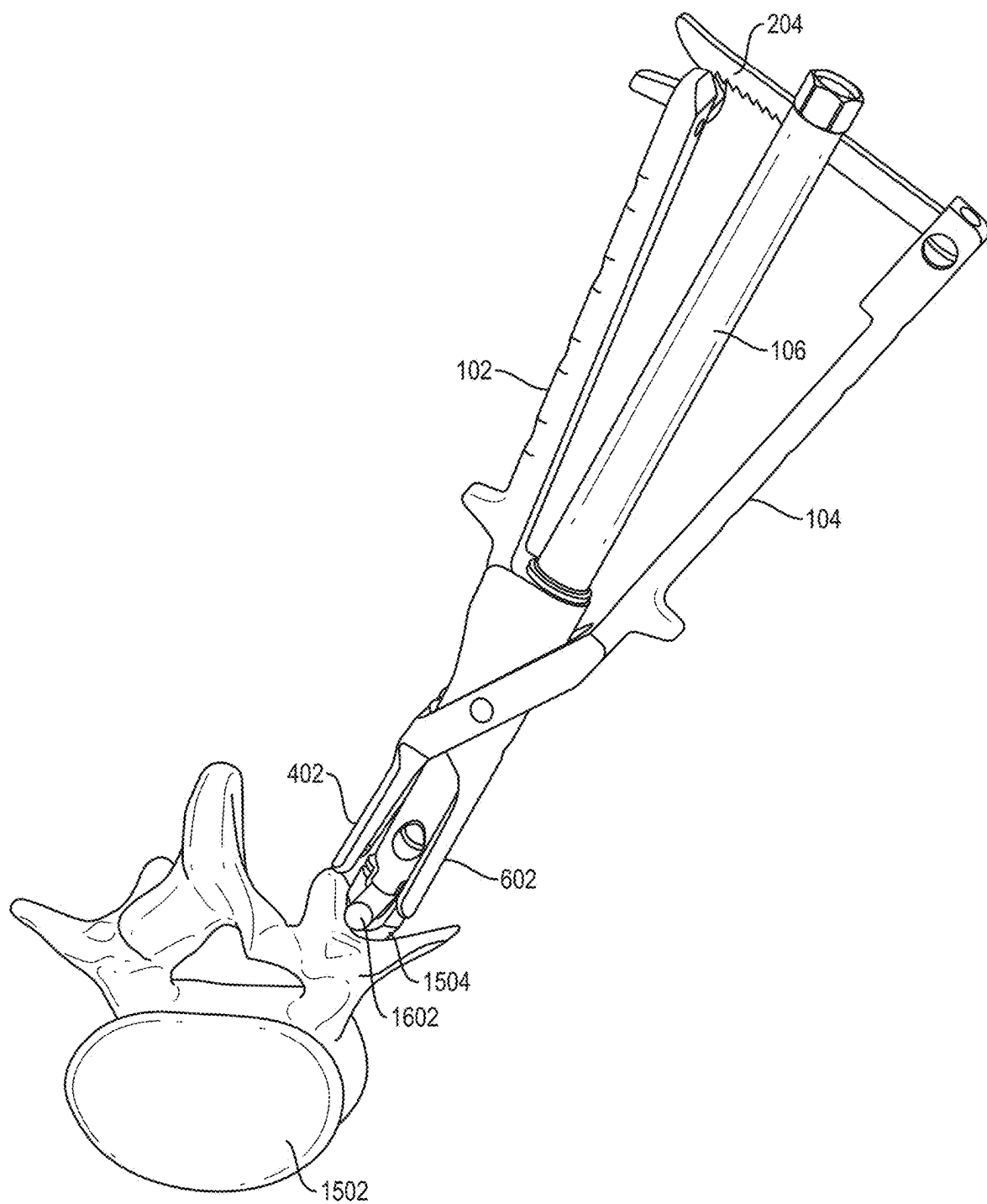


FIG. 24

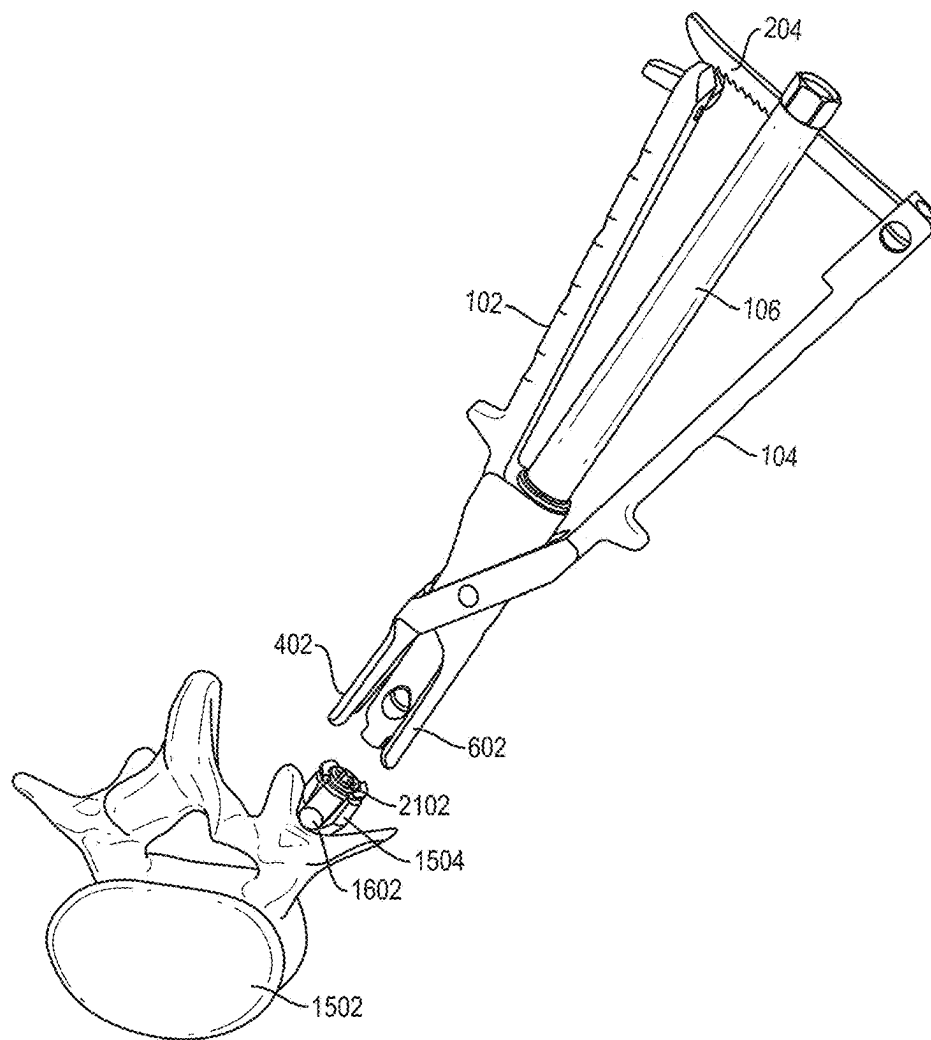


FIG. 25

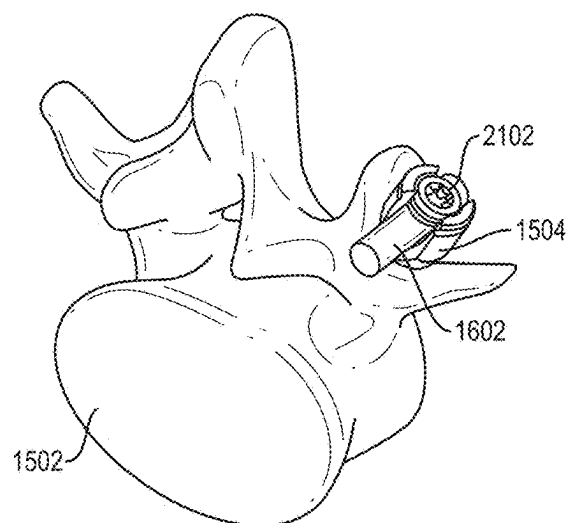


FIG. 26

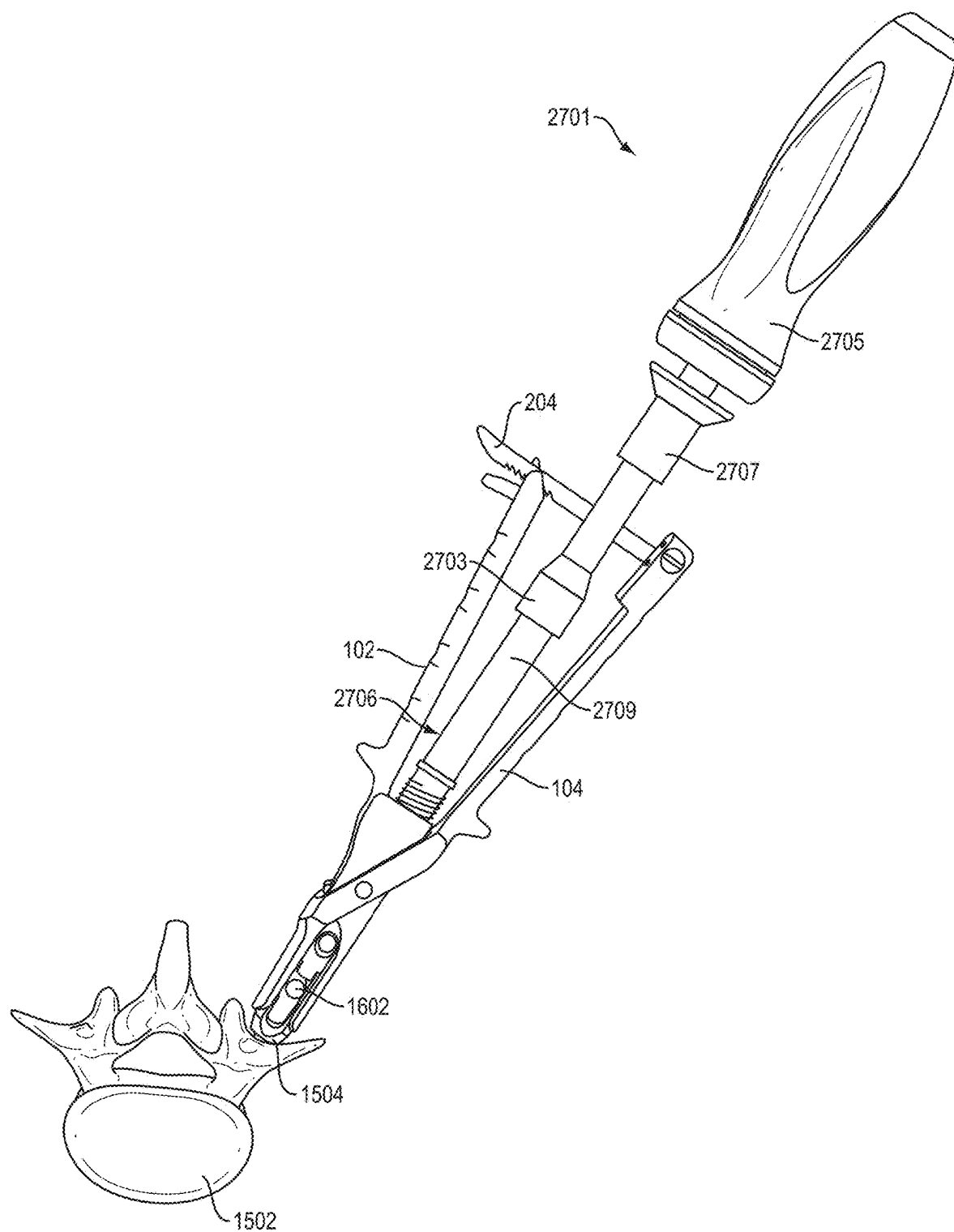


FIG. 27A



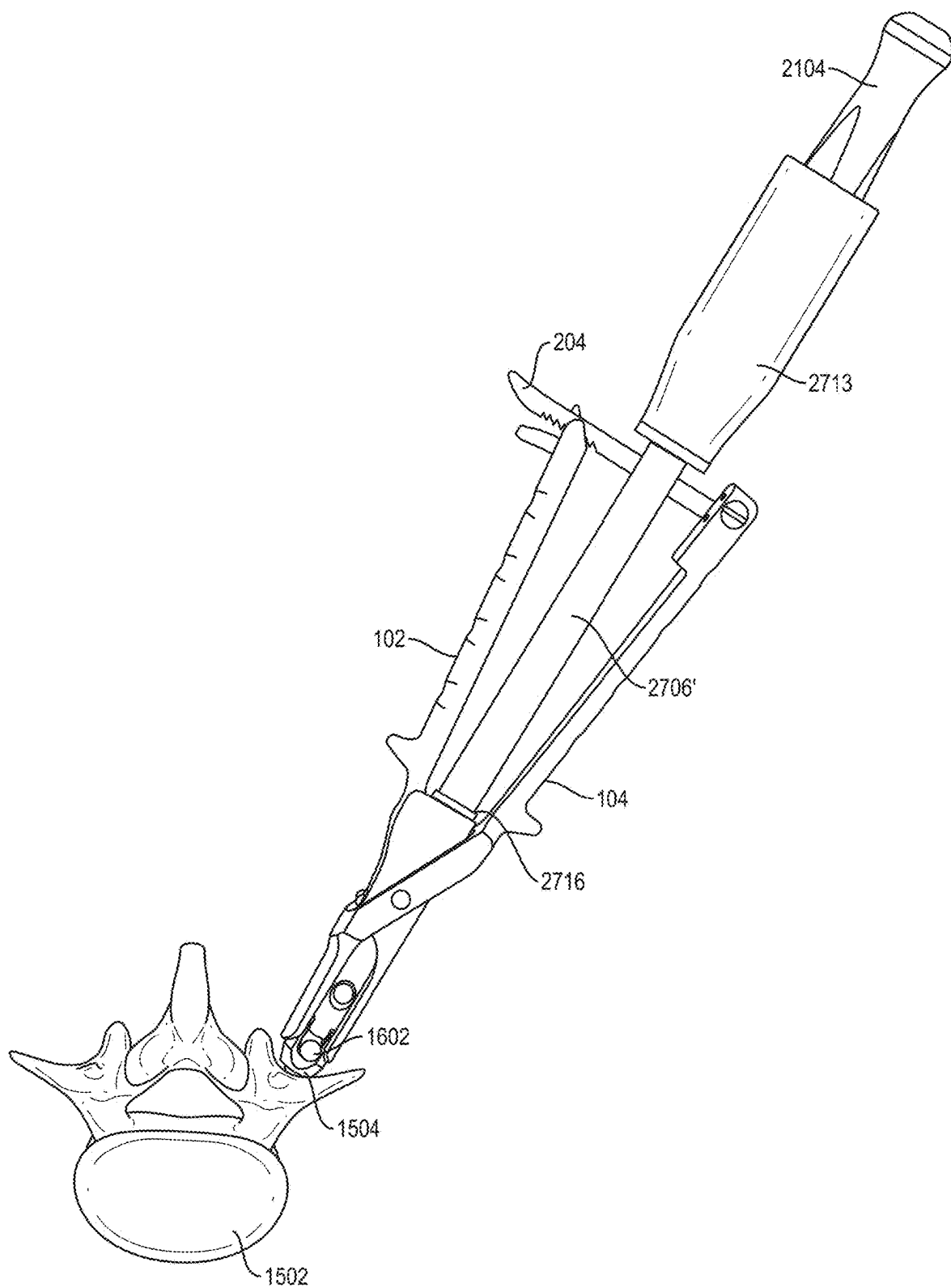


FIG. 27B

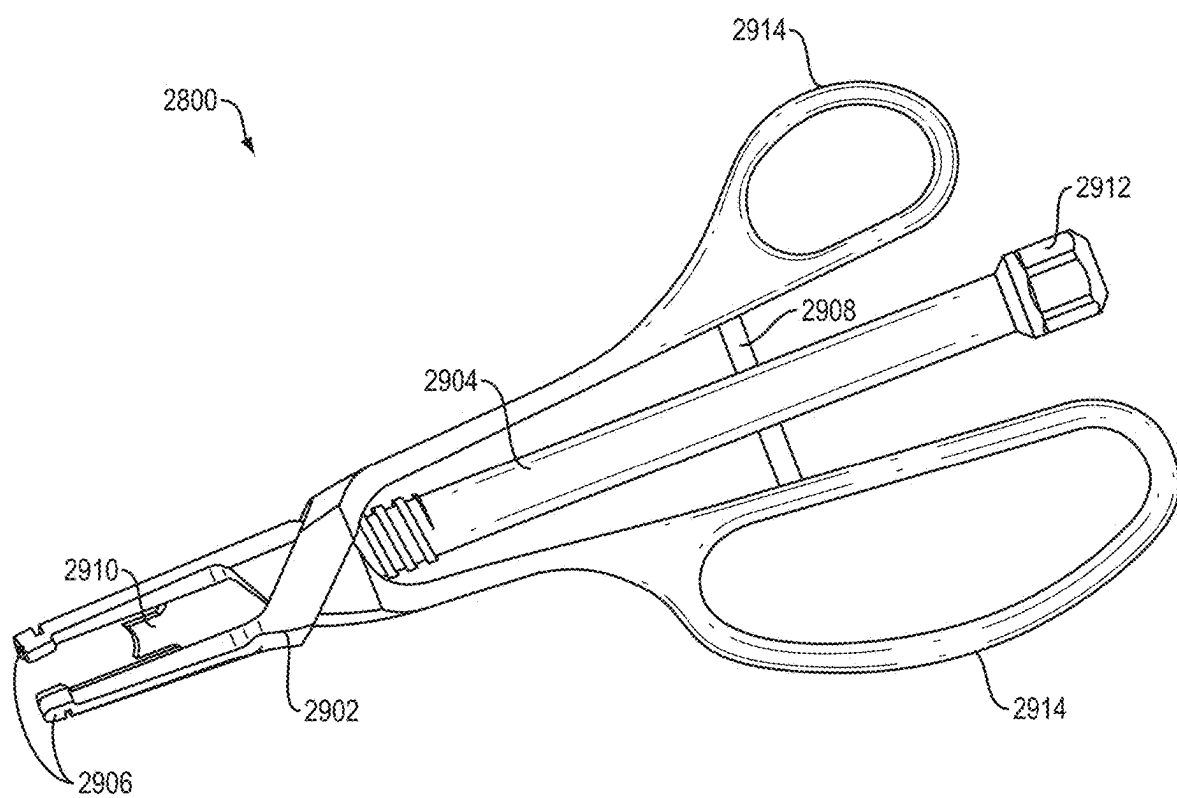
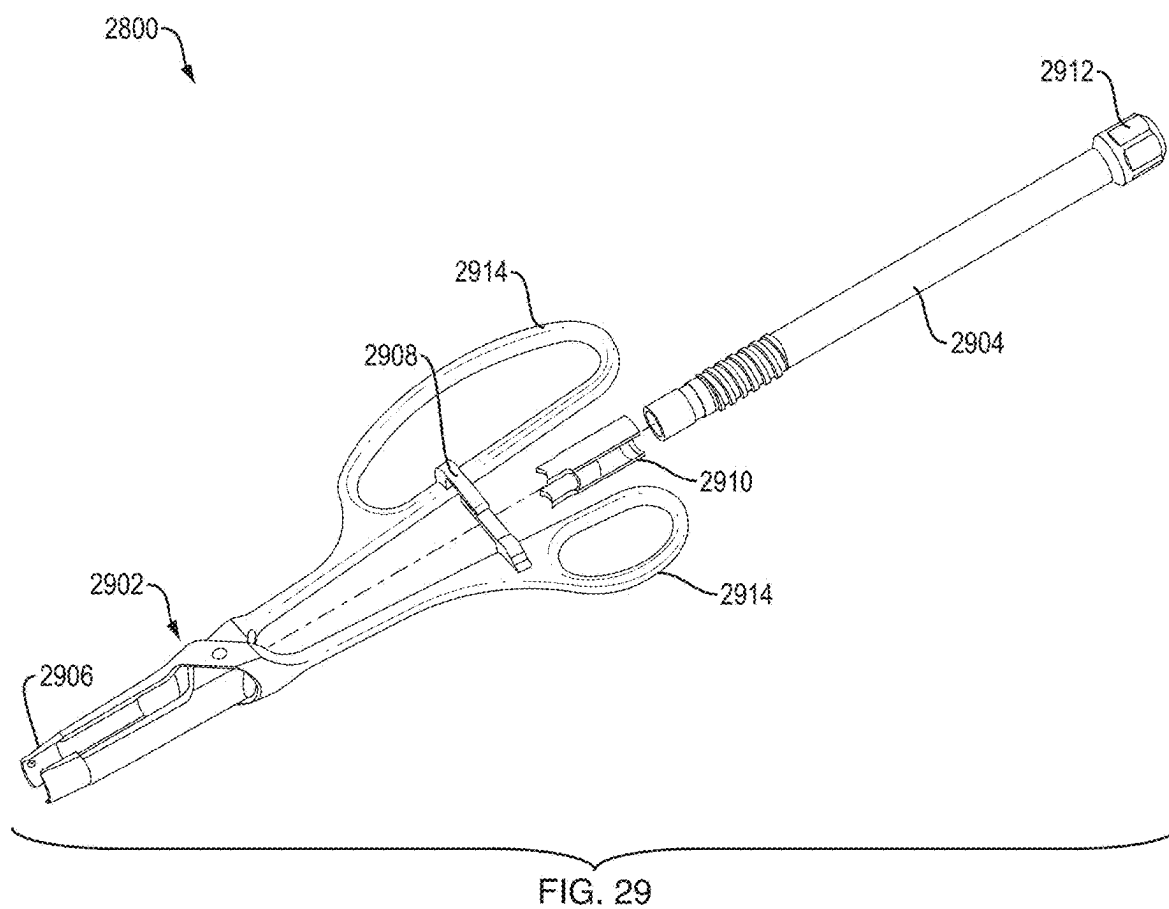


FIG. 28



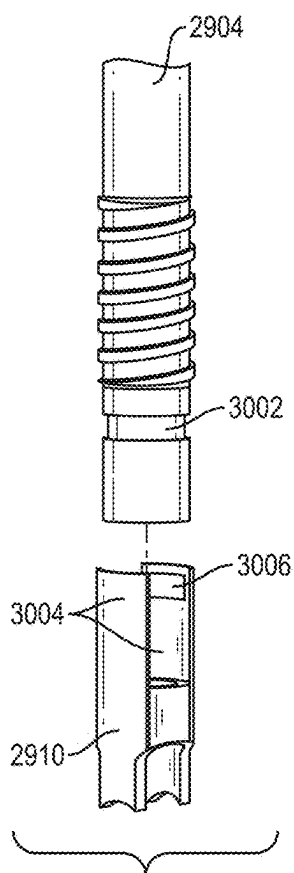


FIG. 30

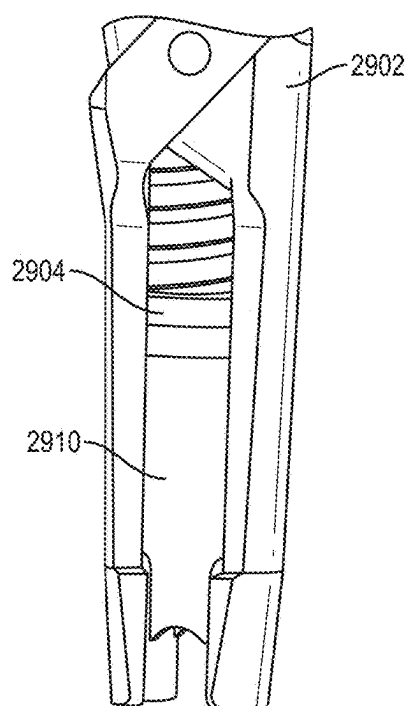


FIG. 31

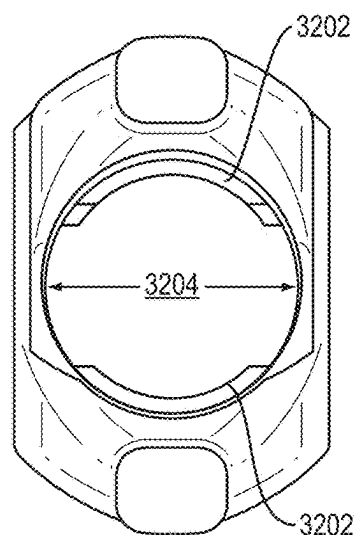


FIG. 32

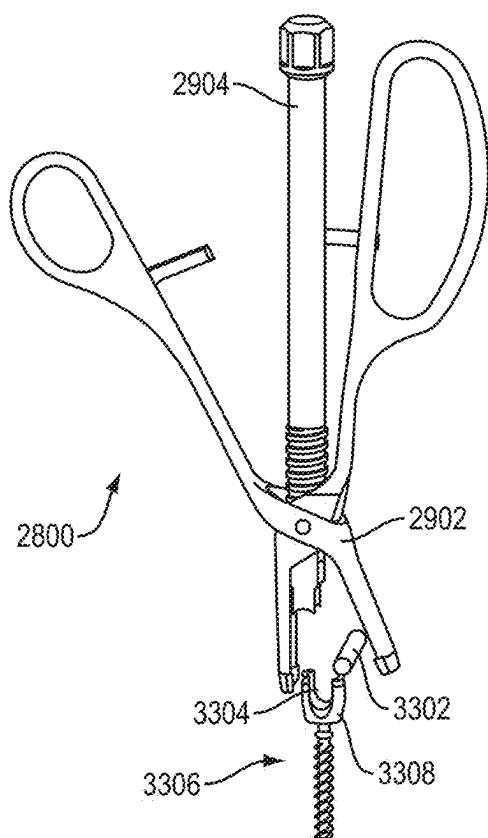


FIG. 33

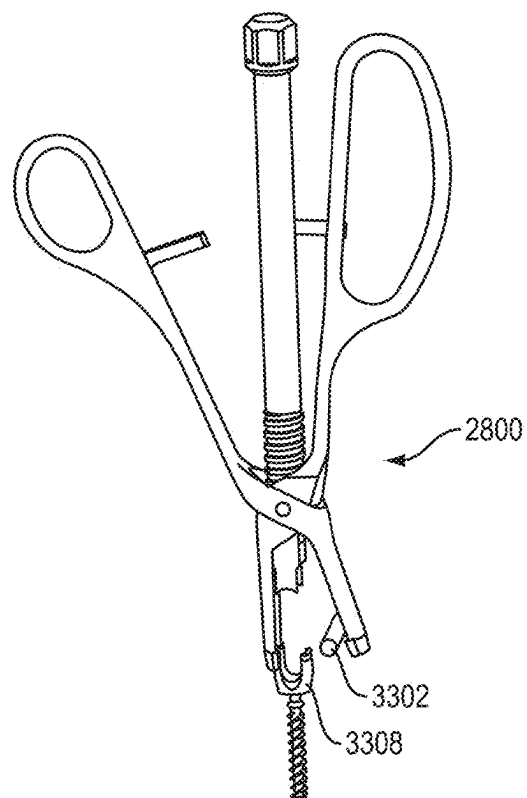


FIG. 34

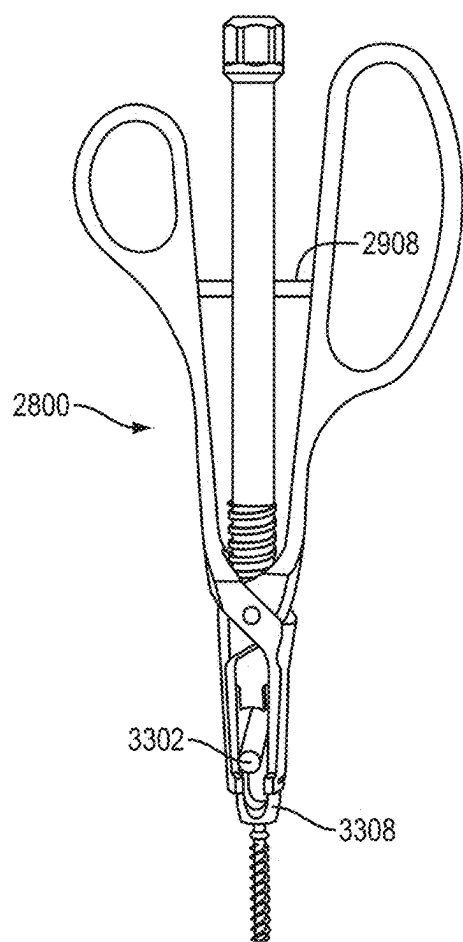


FIG. 35

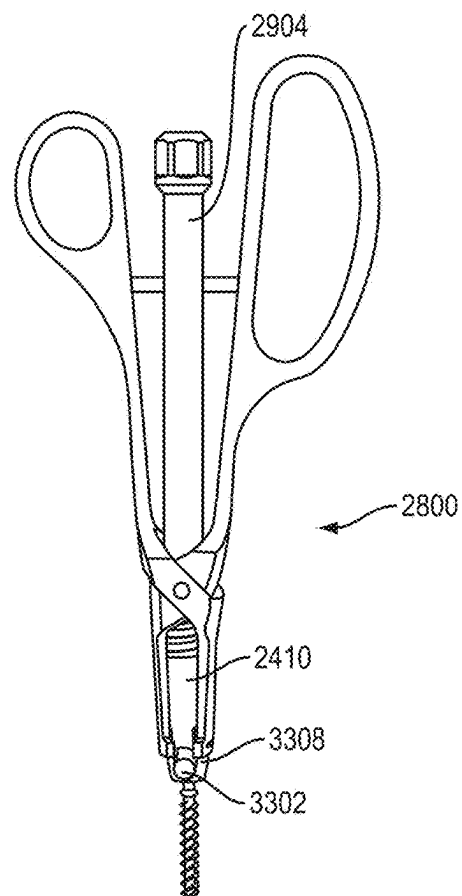


FIG. 36

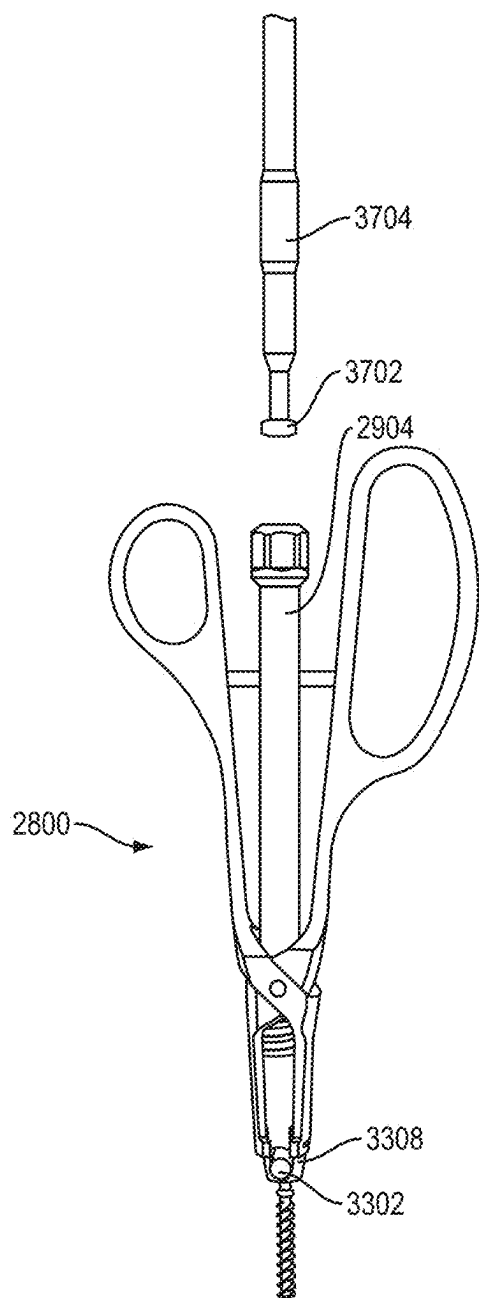


FIG. 37

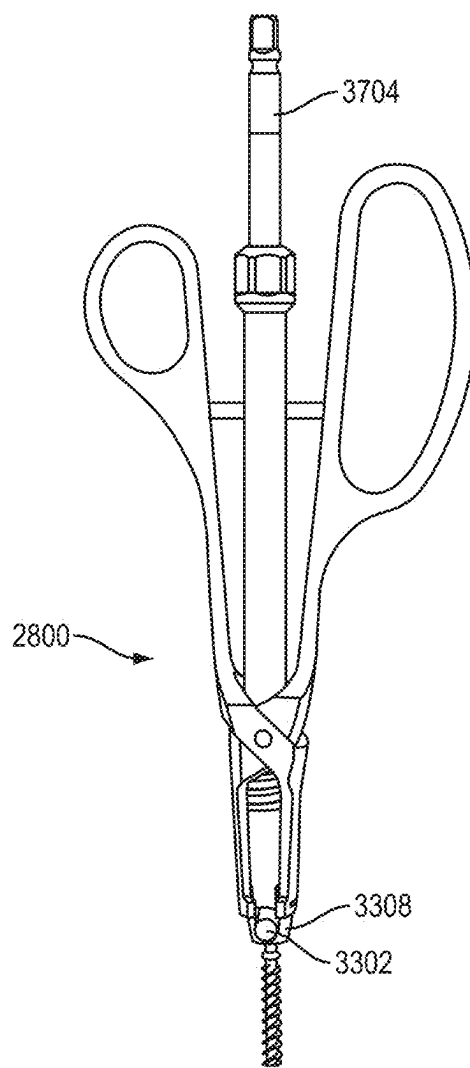


FIG. 38

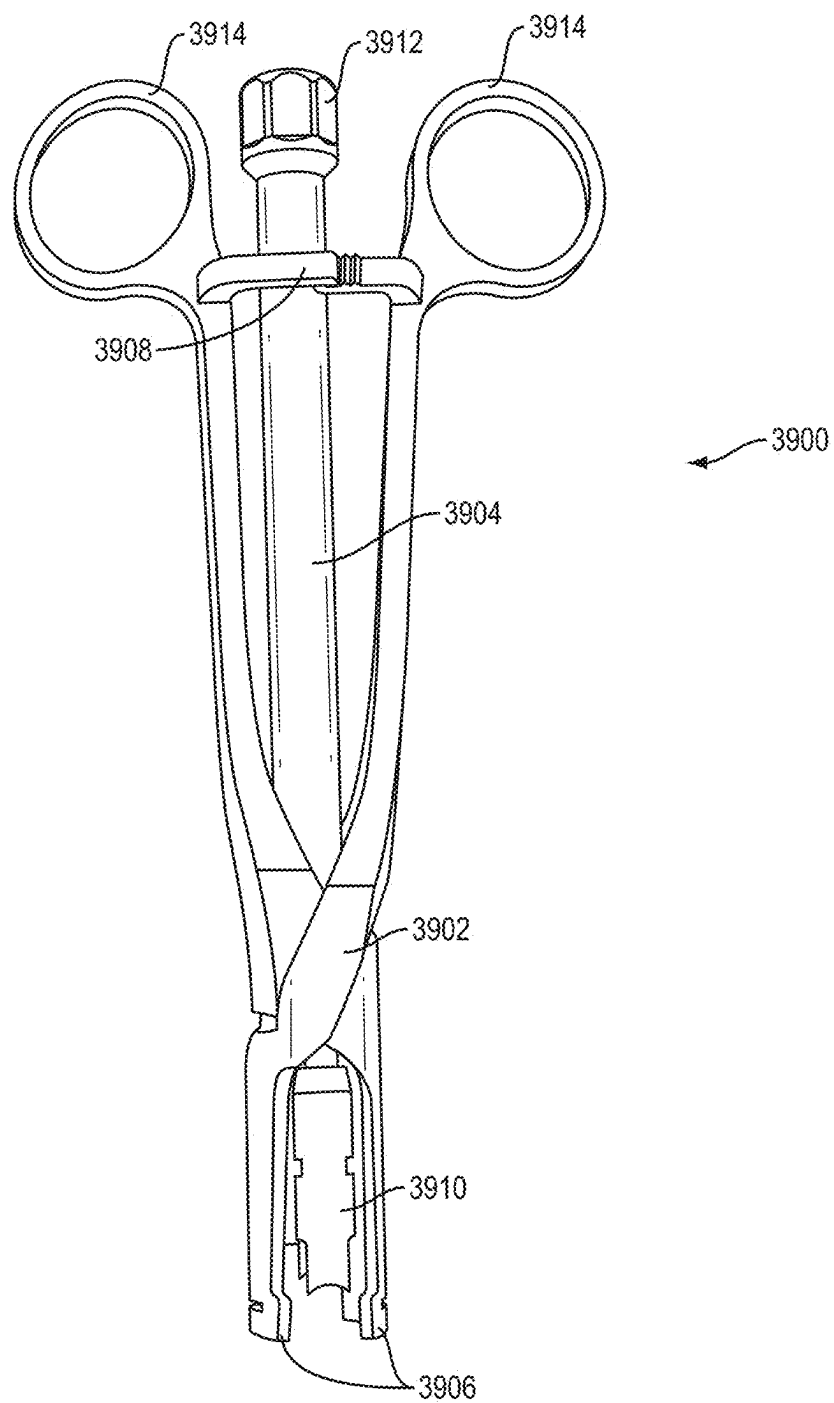


FIG. 39



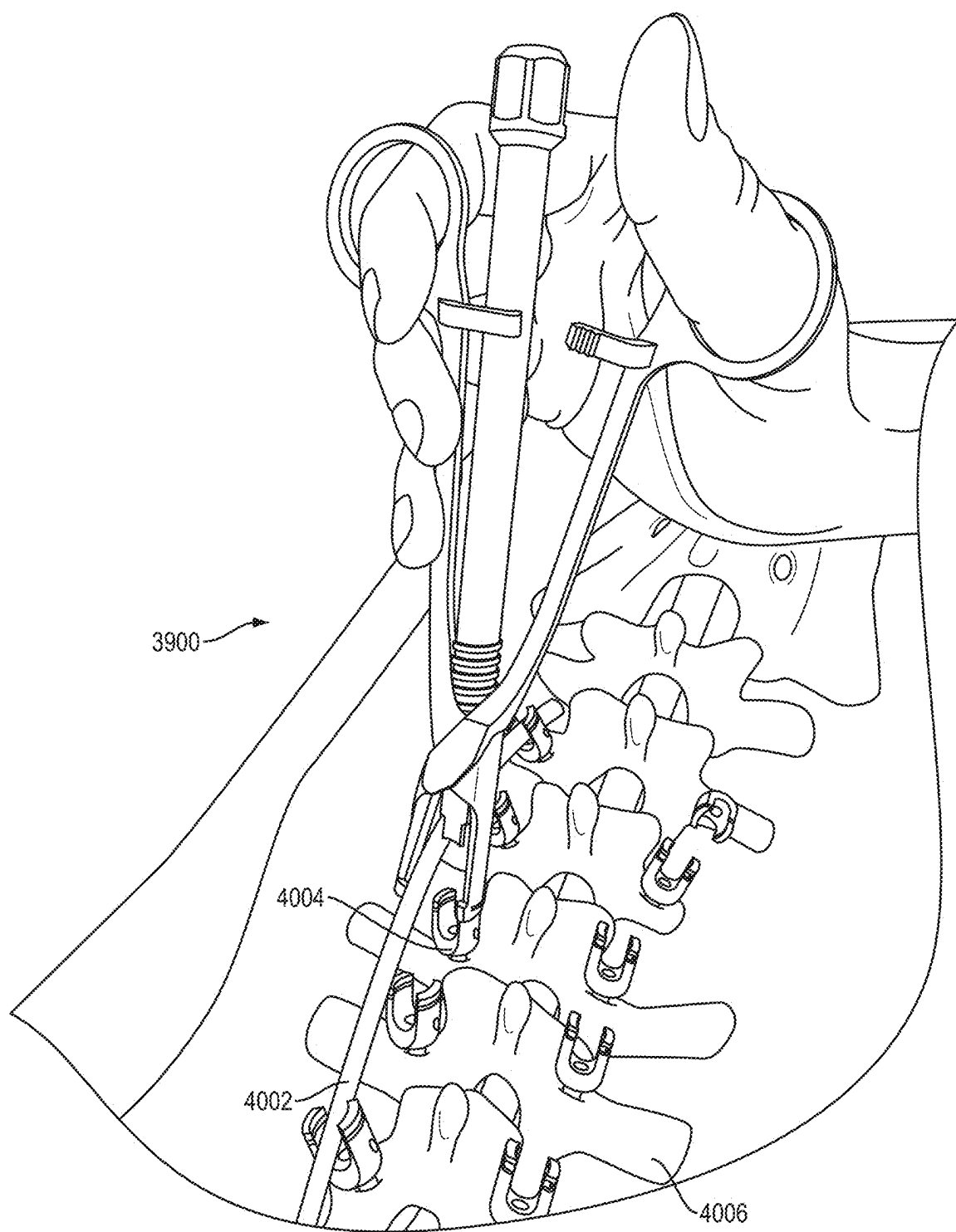


FIG. 40

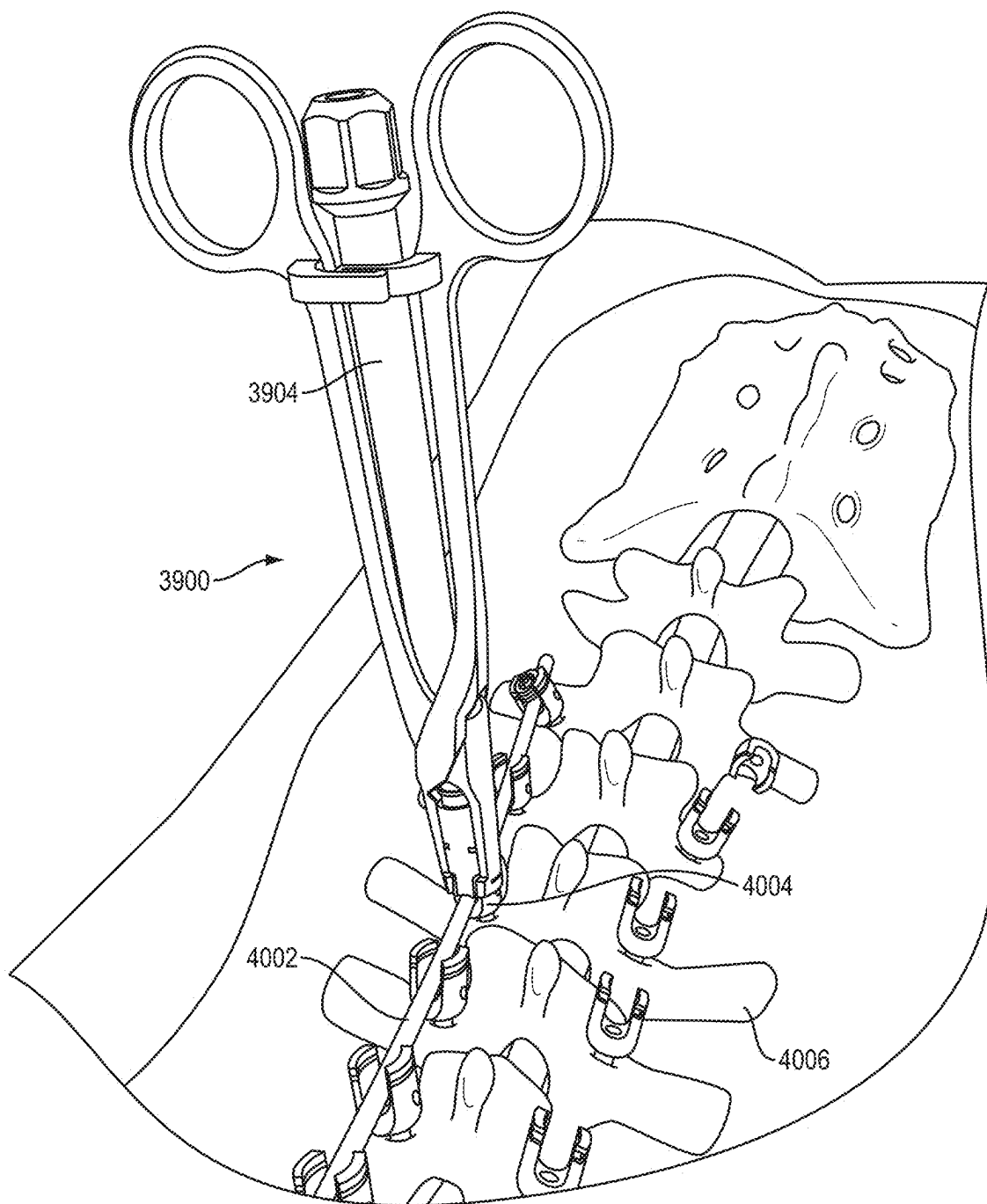


FIG. 41

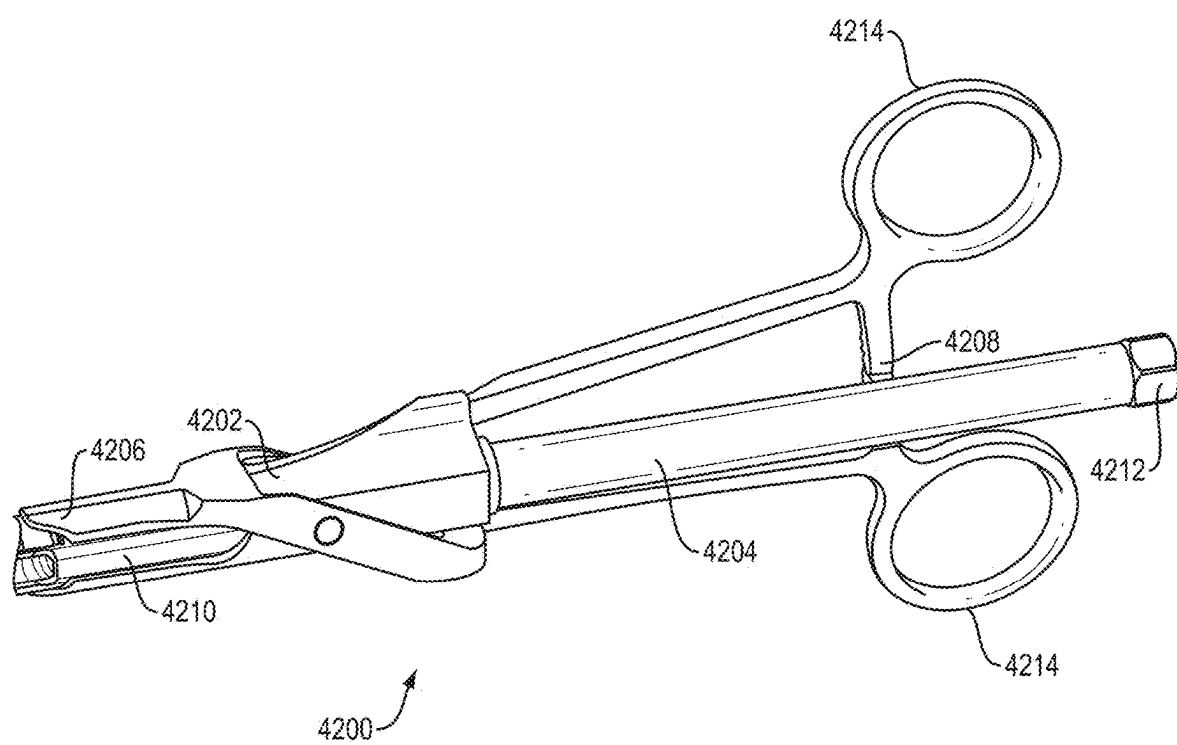


FIG. 42

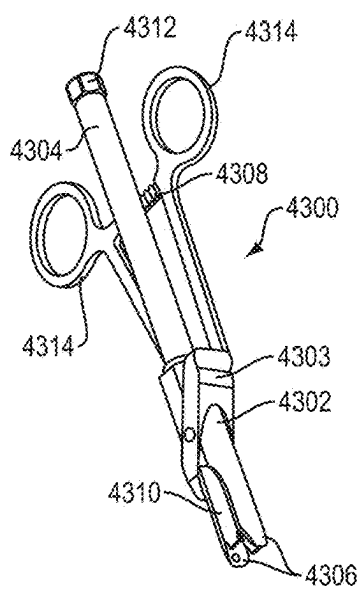


FIG. 43A

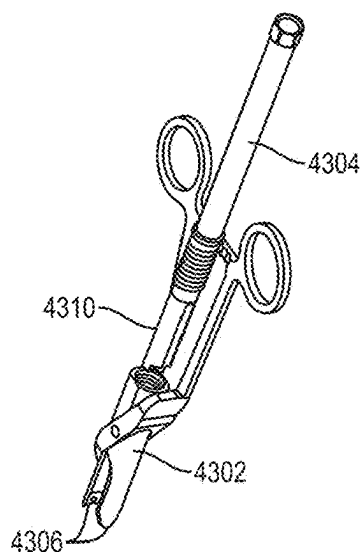


FIG. 45

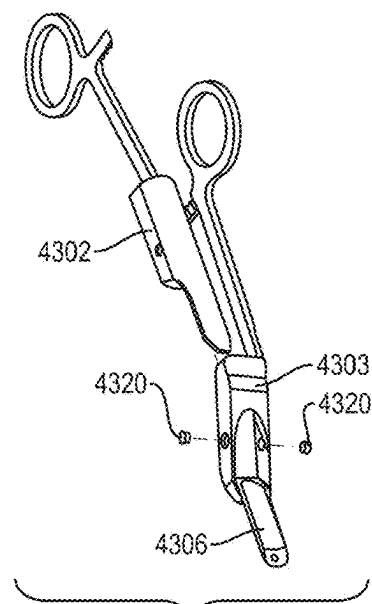


FIG. 46

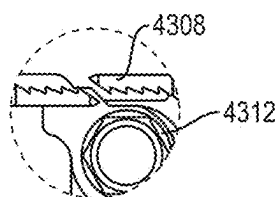


FIG. 43C

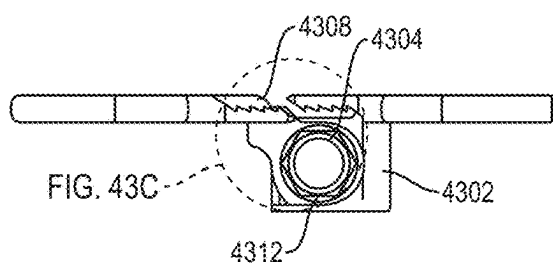


FIG. 43B

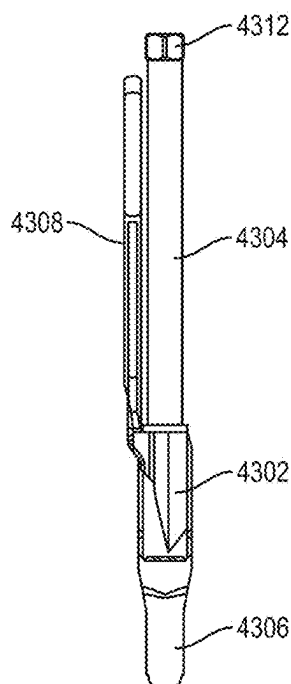


FIG. 43D

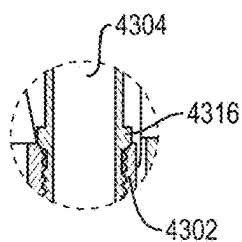


FIG. 44B

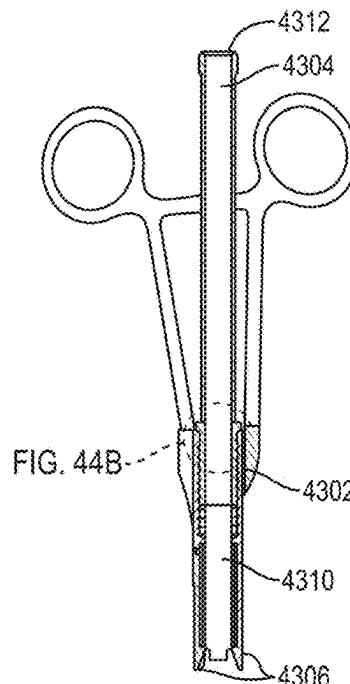


FIG. 44A

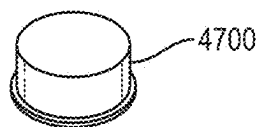


FIG. 47A

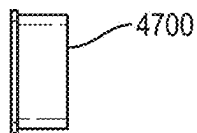


FIG. 47B

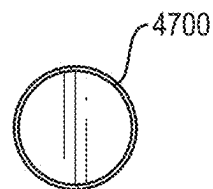


FIG. 47C

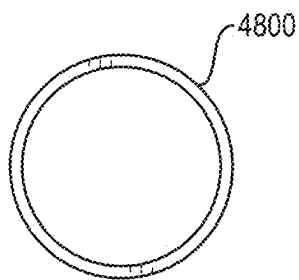


FIG. 48A

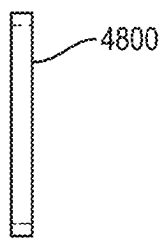


FIG. 48B

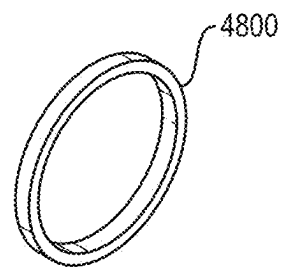


FIG. 48C

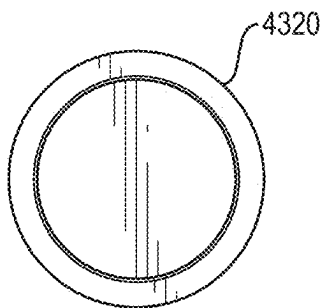


FIG. 49A

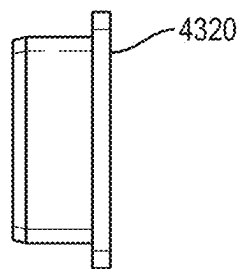


FIG. 49B

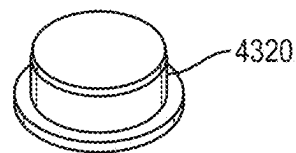


FIG. 49C

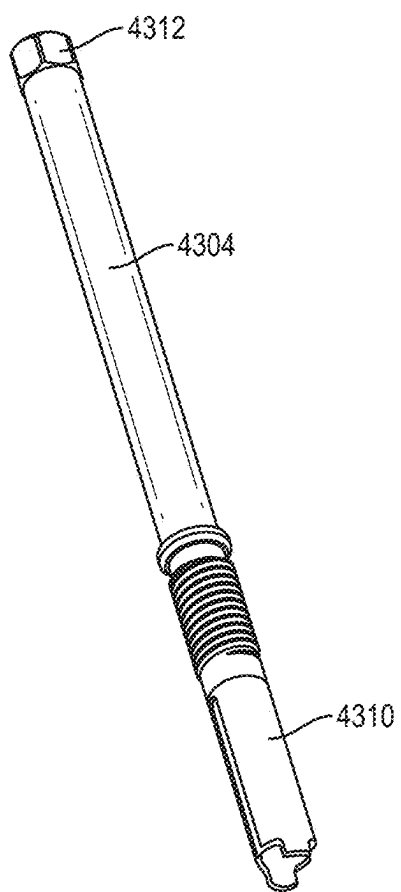


FIG. 50A

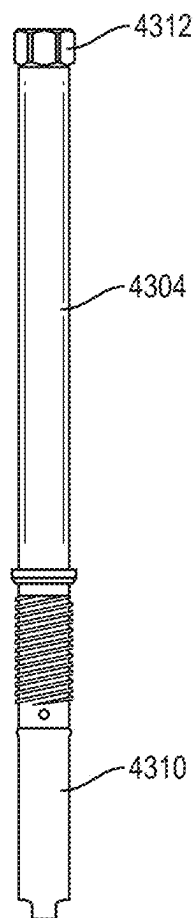


FIG. 50B

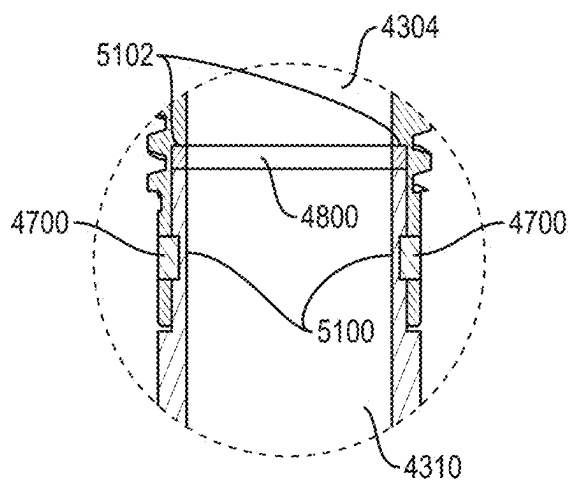


FIG. 51B

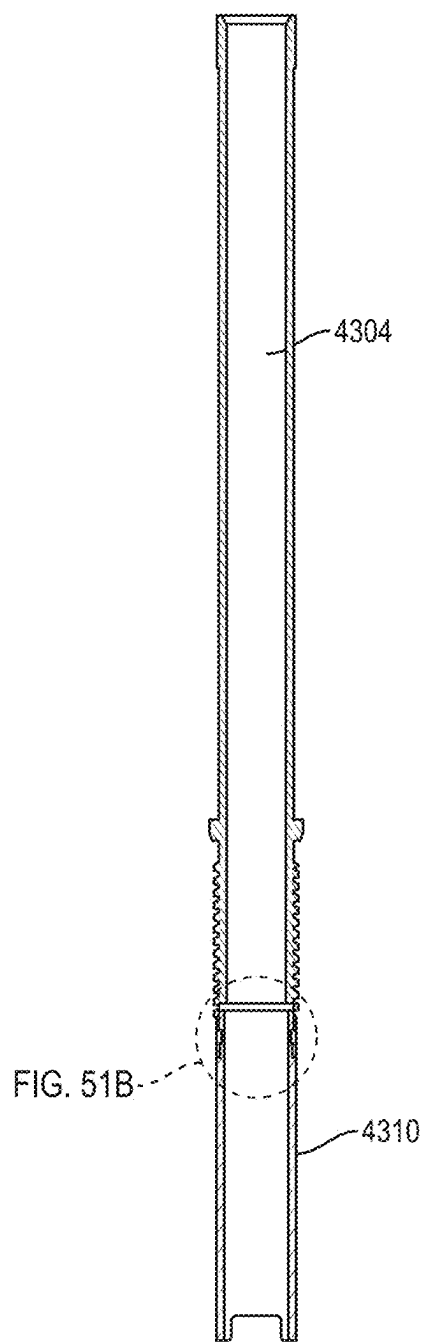


FIG. 51A

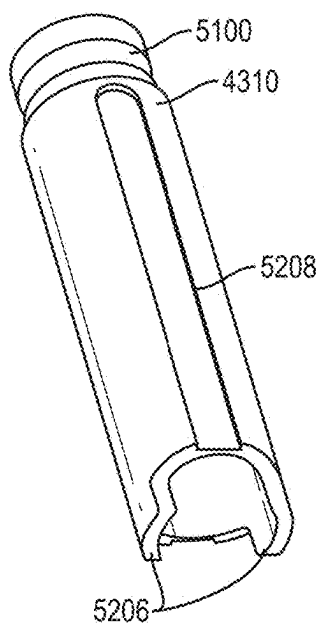


FIG. 52A

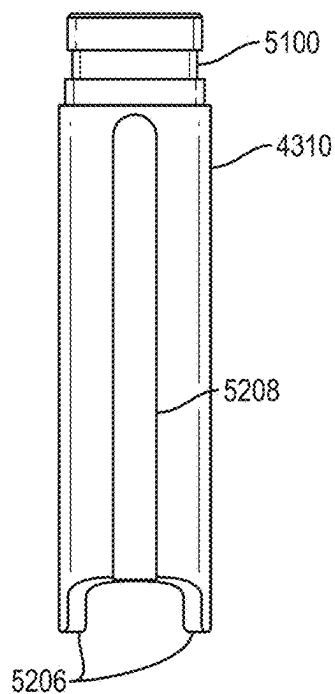


FIG. 52B

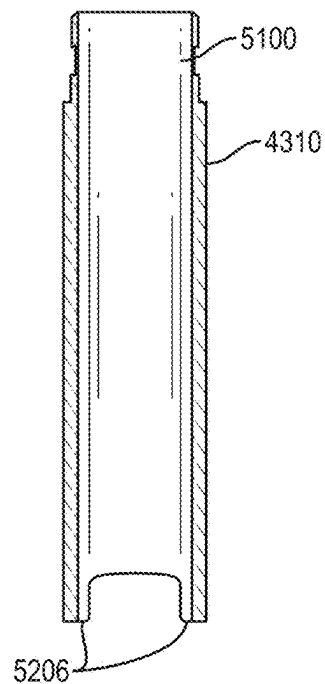


FIG. 53

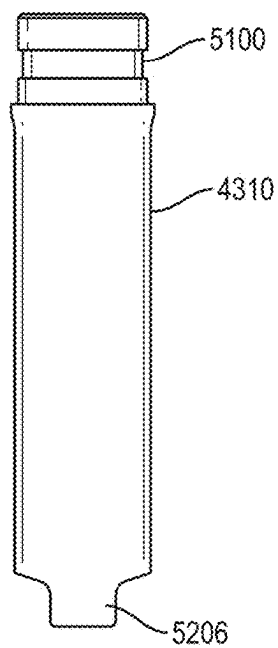


FIG. 52C

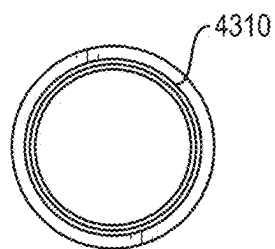


FIG. 52D

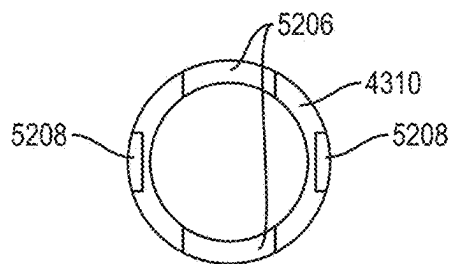


FIG. 52E

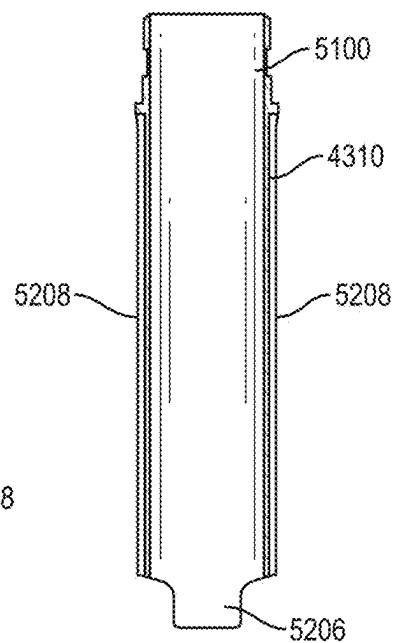


FIG. 54

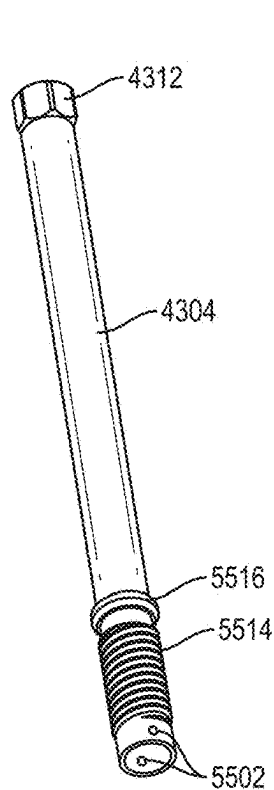


FIG. 55A

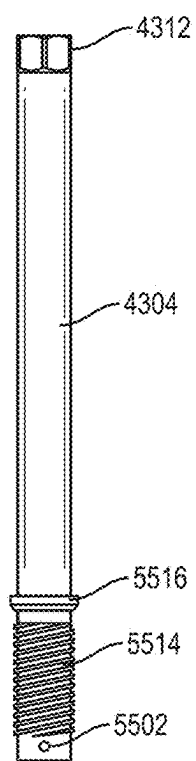


FIG. 55B

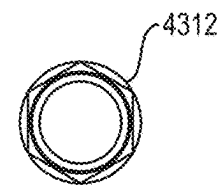


FIG. 55C

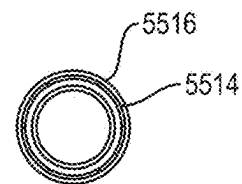


FIG. 55D

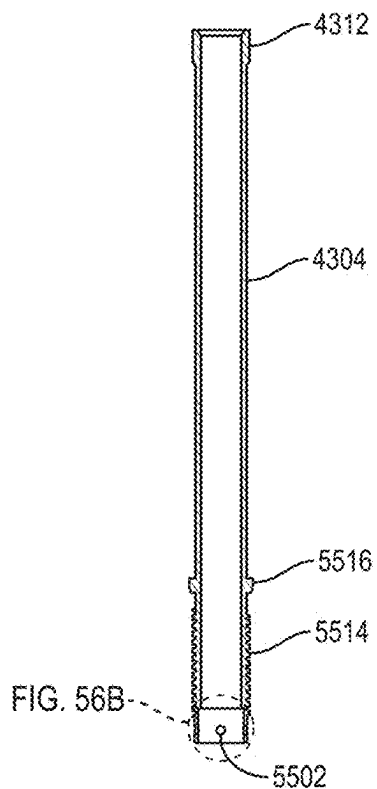


FIG. 56A

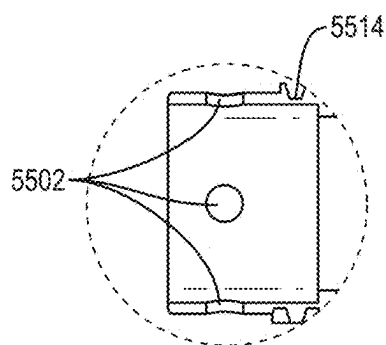


FIG. 56B





FIG. 57B



FIG. 57C

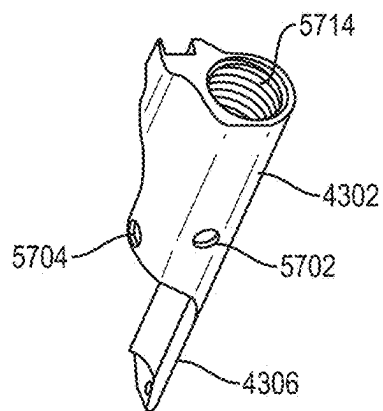


FIG. 57A

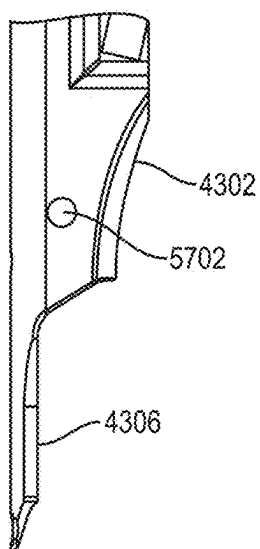


FIG. 57D

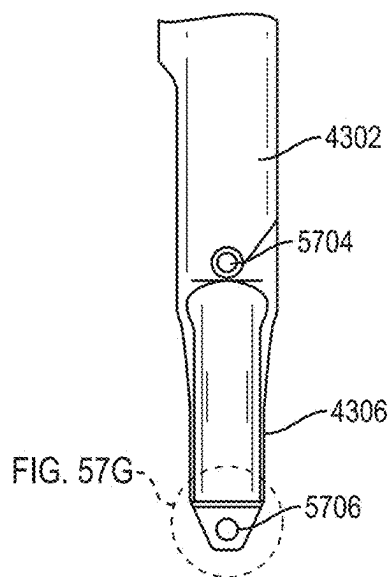


FIG. 57E

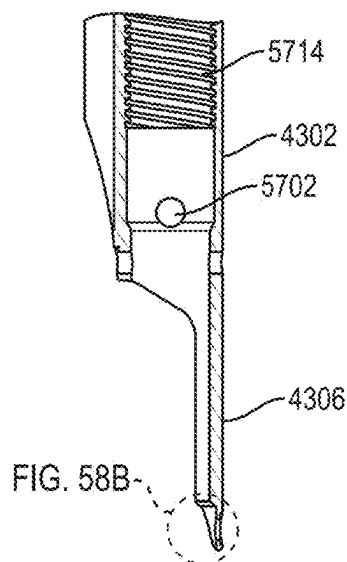


FIG. 58A

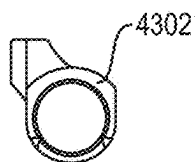


FIG. 57F

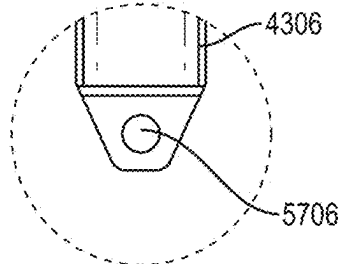


FIG. 57G

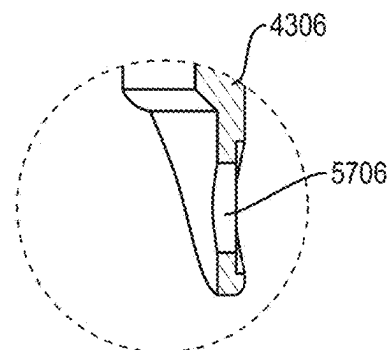


FIG. 58B

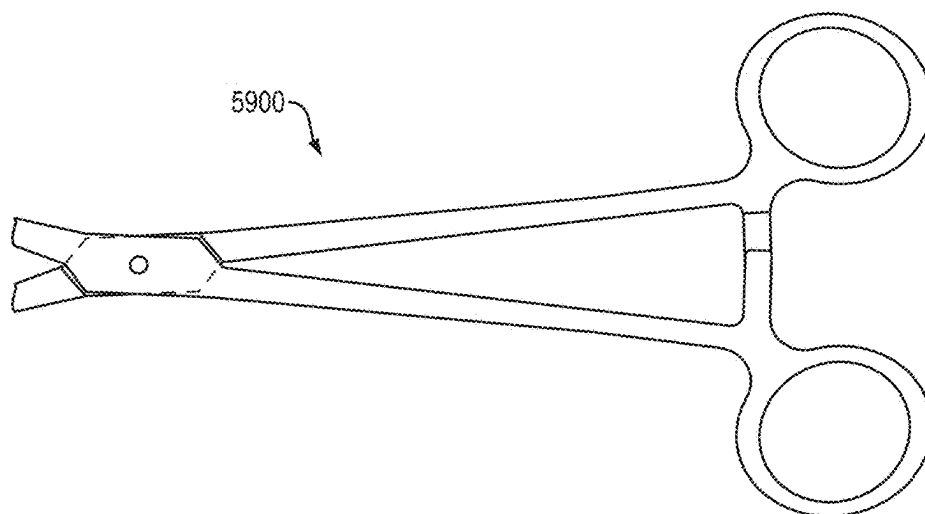


FIG. 59

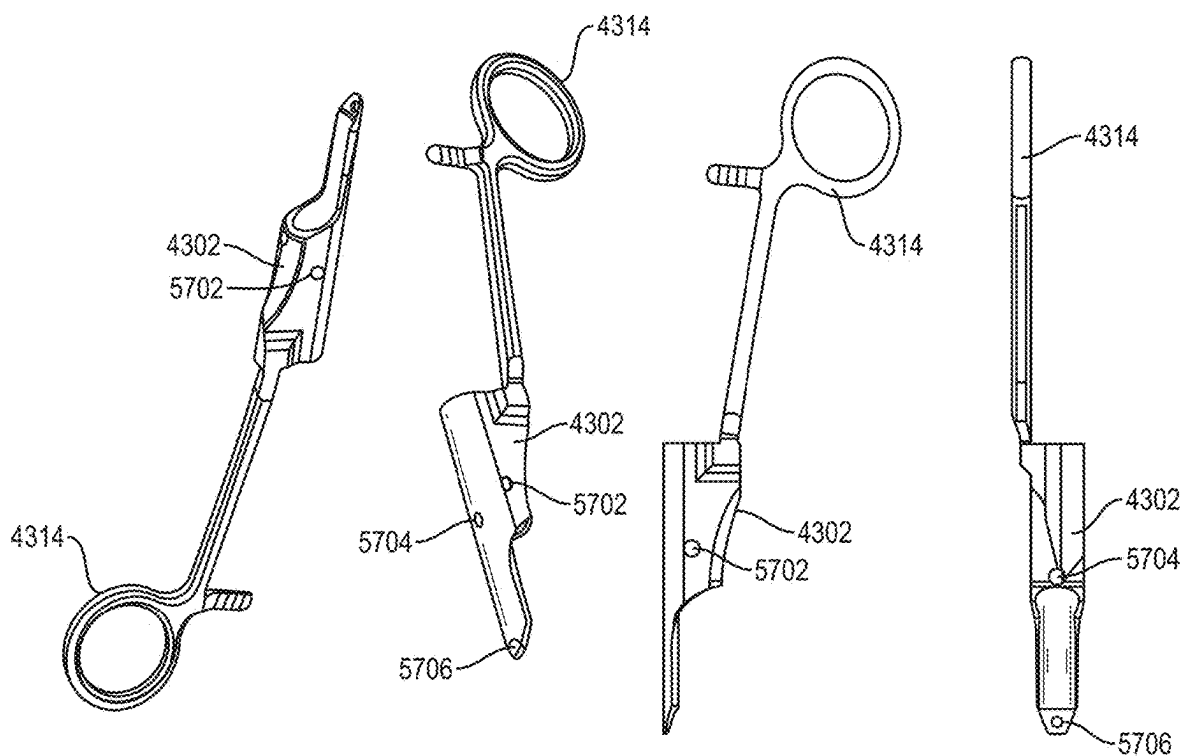
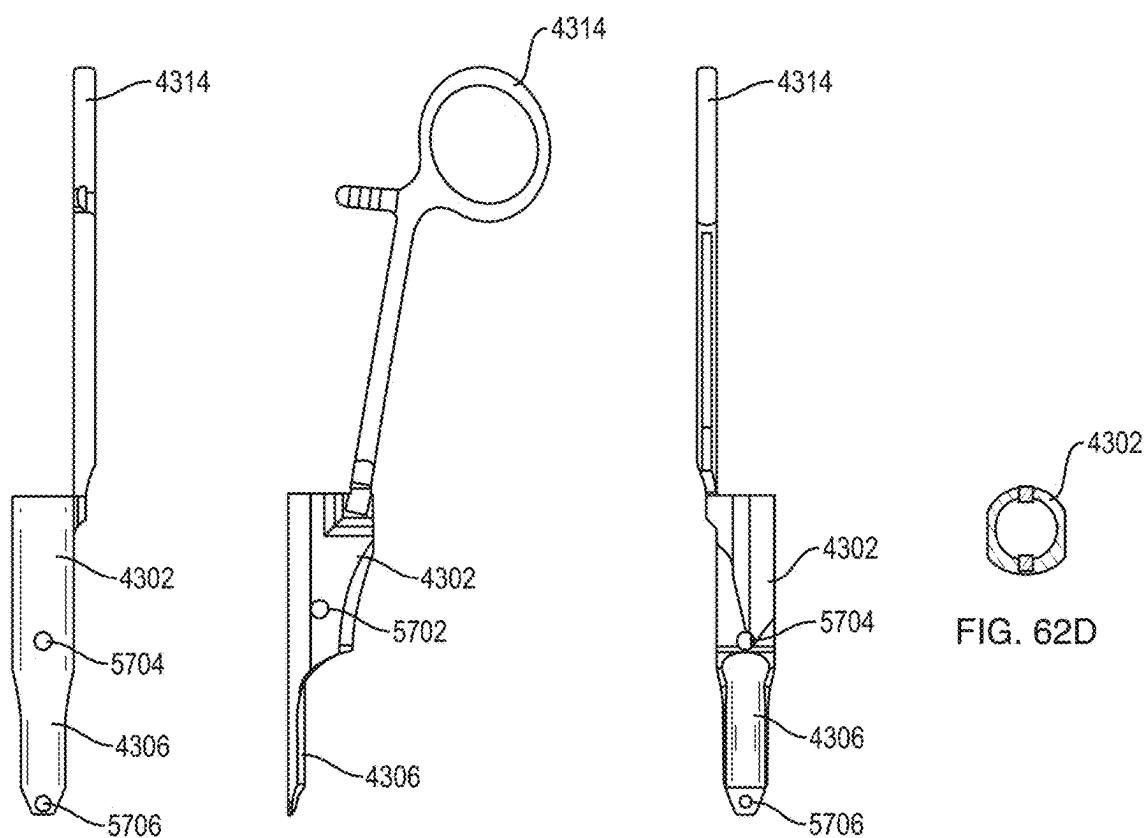
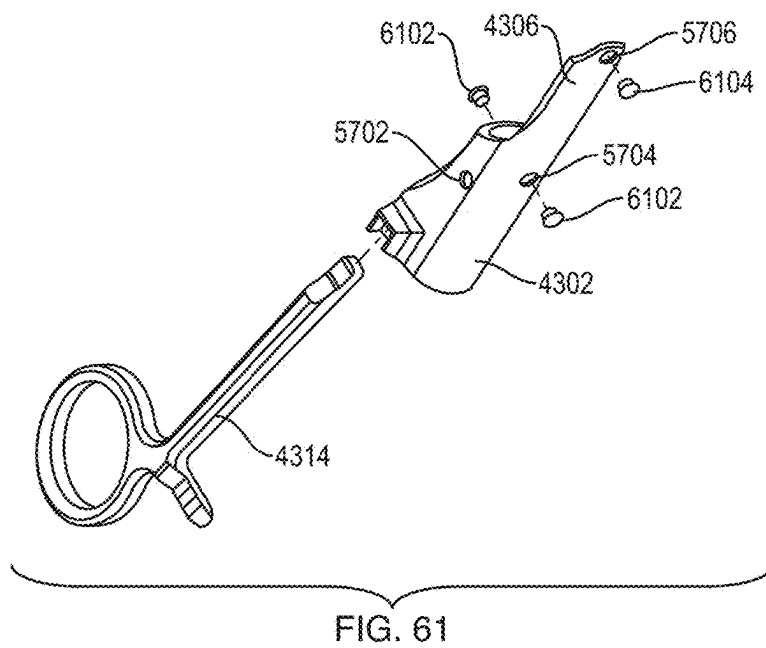


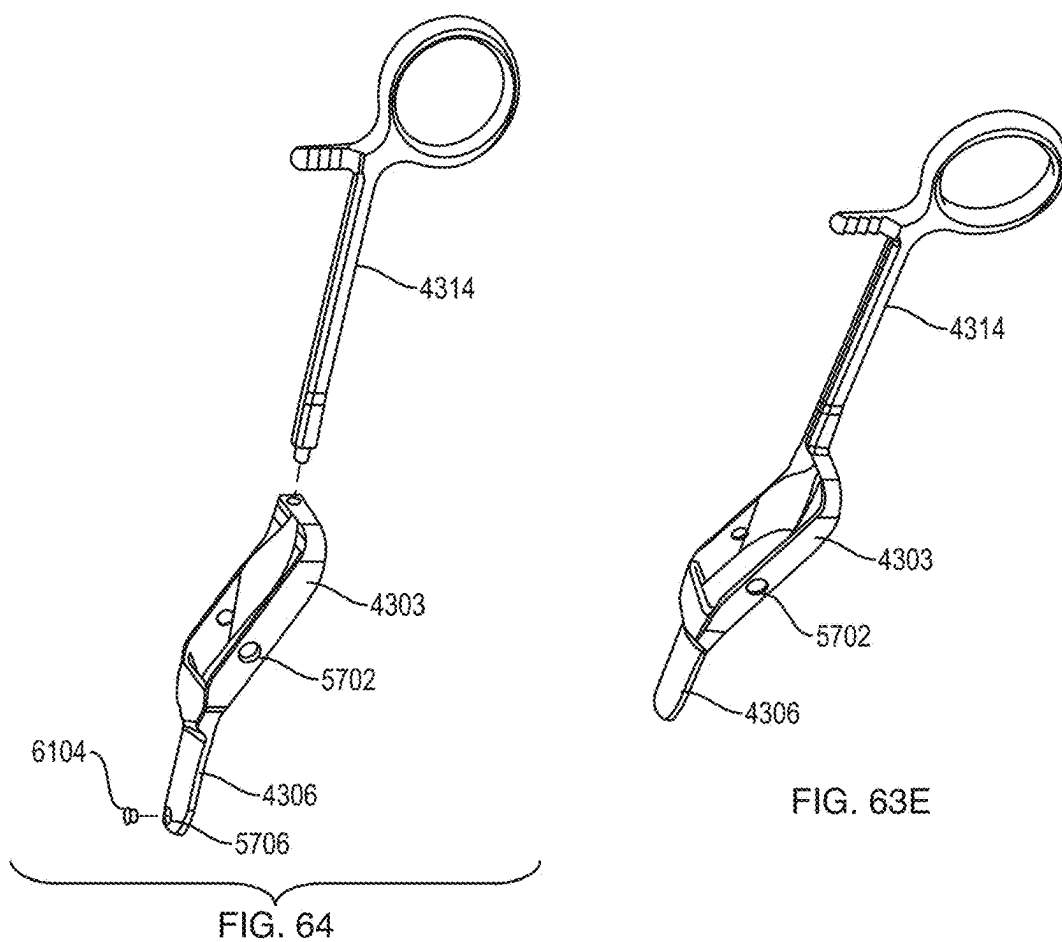
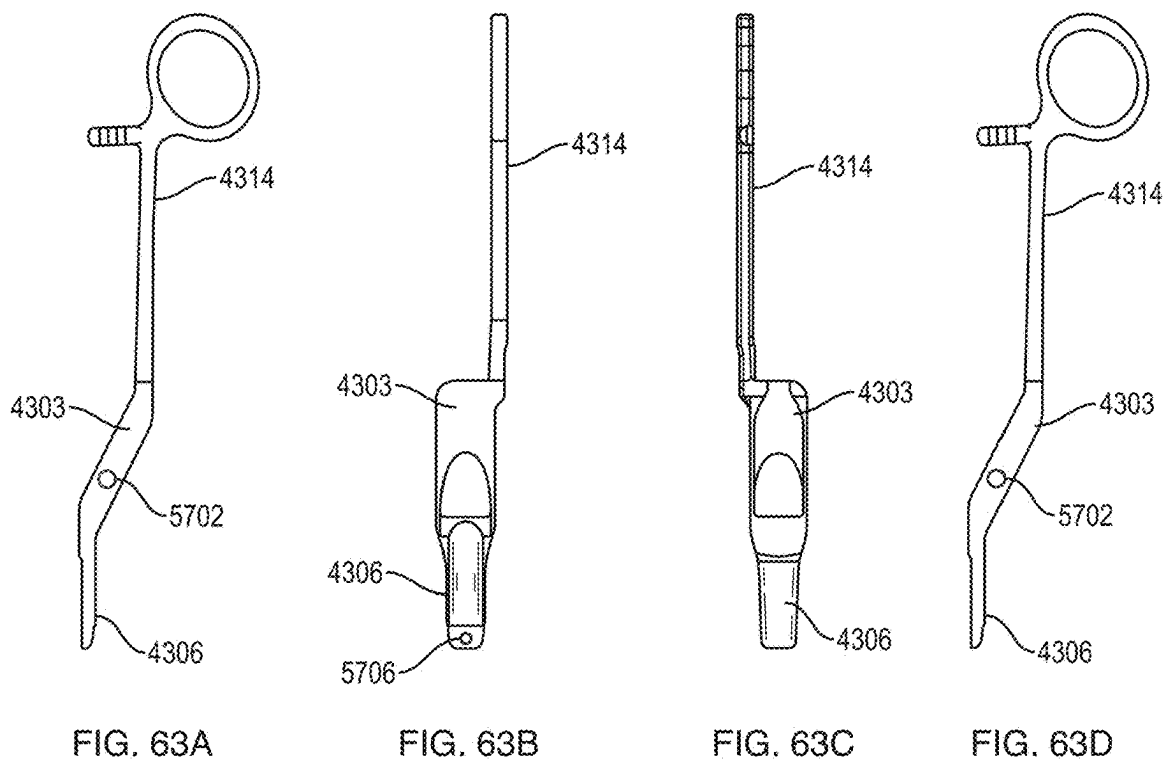
FIG. 60A

FIG. 60B

FIG. 60C

FIG. 60D





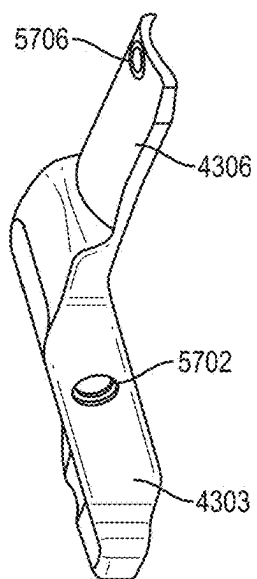


FIG. 65A

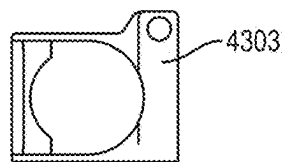


FIG. 65B

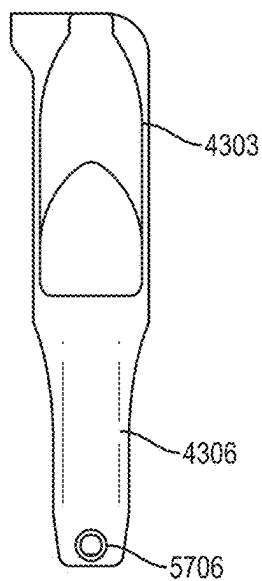


FIG. 65C

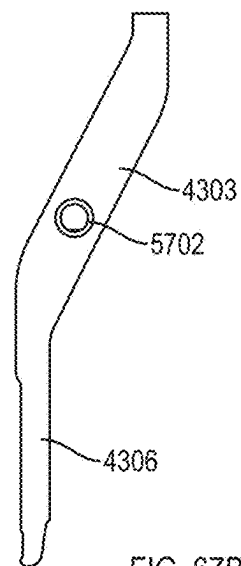


FIG. 65D

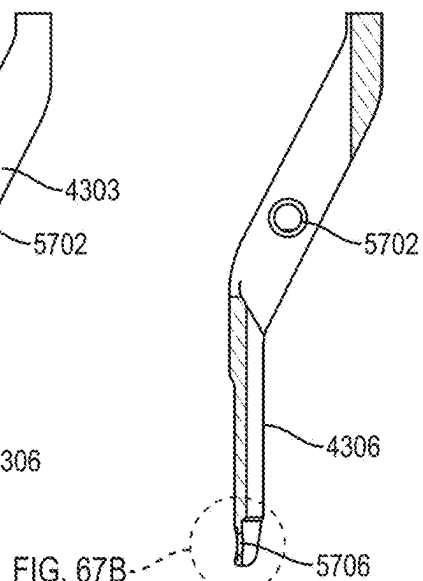


FIG. 67A

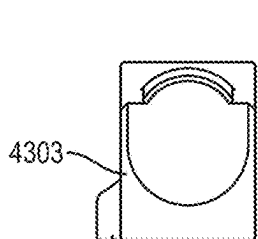


FIG. 65E

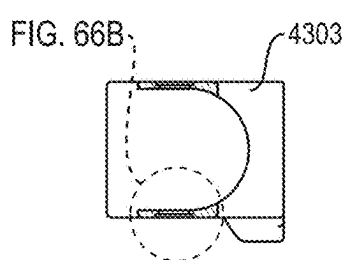


FIG. 66A

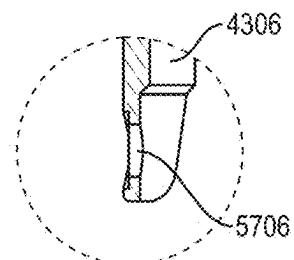


FIG. 67B

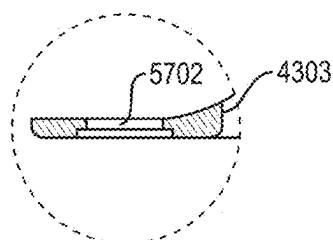


FIG. 66B

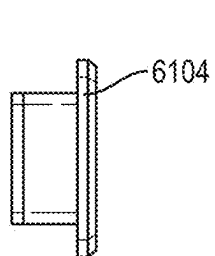


FIG. 68A

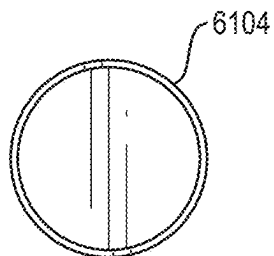


FIG. 68B

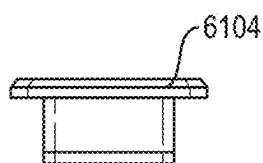


FIG. 68C

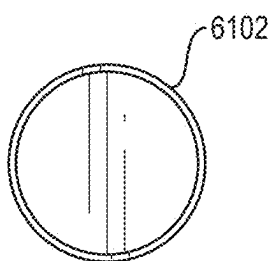


FIG. 69A

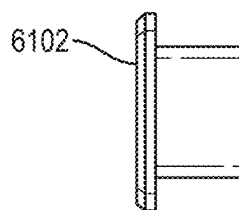


FIG. 69B

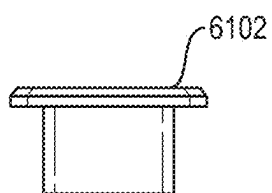


FIG. 69C

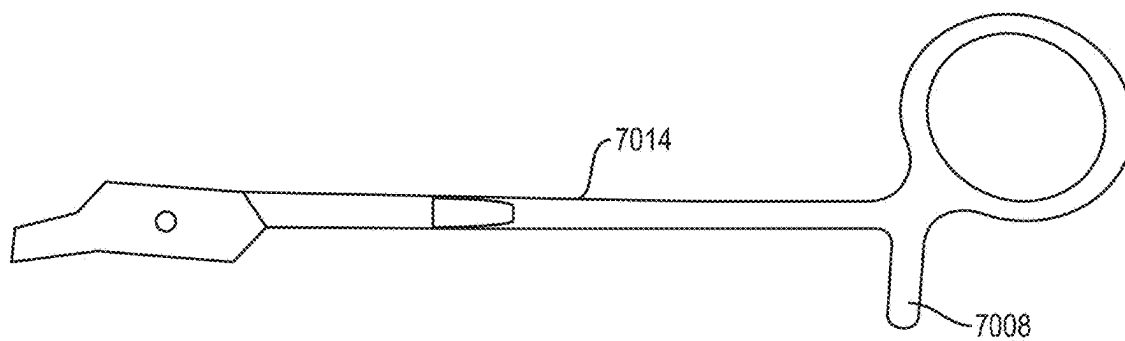


FIG. 70

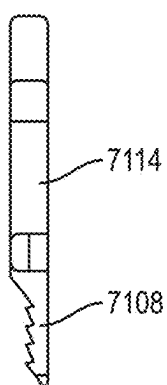


FIG. 71A

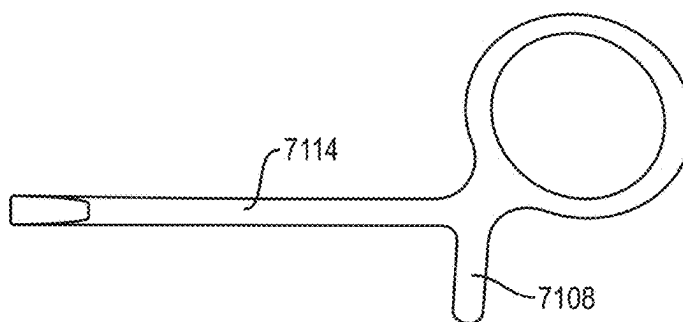


FIG. 71B

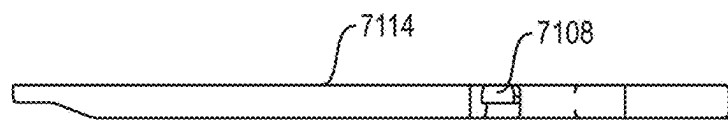


FIG. 71C

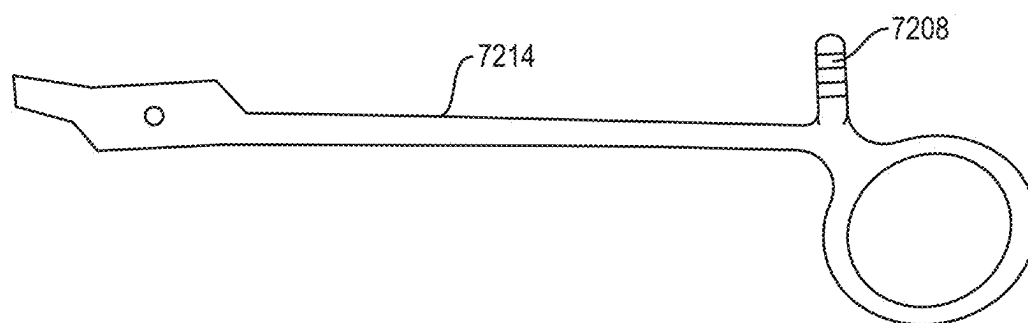


FIG. 72

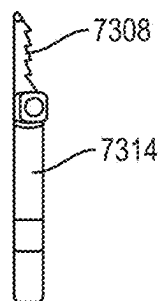


FIG. 73A

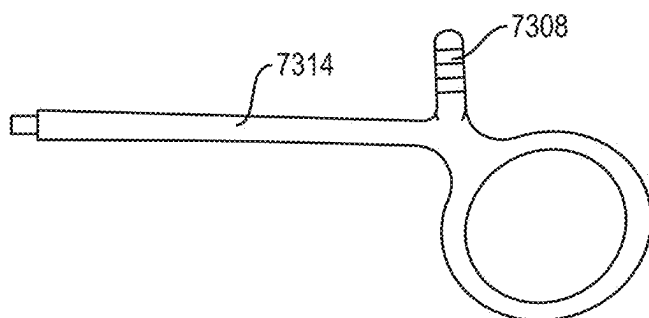


FIG. 73B



## BIPLANAR FORCEPS REDUCERS AND METHODS OF USE

### CROSS-REFERENCE TO RELATED APPLICATIONS

[0001] This application is a continuation of U.S. application Ser. No. 17/522,164, filed on Nov. 9, 2021. U.S. application Ser. No. 17/522,164 claims the benefit of U.S. Provisional Application No. 63/111,606, filed on Nov. 9, 2020. The entire contents of each of these applications are hereby incorporated by reference.

### FIELD

[0002] This disclosure relates generally to surgical instruments and methods of use and, more particularly, to surgical instruments utilized to move one object relative to another, e.g., move a rod or spinal fixation element relative to an implanted bone anchor or other spinal fixation construct component during spine surgery.

### BACKGROUND

[0003] During spine surgery, such as procedures to correct deformities in the spine, fixation constructs are often assembled to hold the spine in a desired shape. Such constructs often include a plurality of implanted bone anchors along multiple vertebrae and a connecting spinal fixation element, such as a rod, that is received within a head of each of the bone anchors and secured using a set screw. In many cases, the bone anchors are first implanted in the vertebrae, a rod is then positioned relative to the bone anchor heads, and set screws applied to secure the rod relative to each bone anchor.

[0004] It can be challenging to position the rod to be received in the head of each bone anchor. In some cases, a rod can be positioned offset from a bone anchor head both dorsally and medially-laterally such that the rod must be translated in both the sagittal plane and the coronal plane to capture it with the bone anchor head. This challenge can be particularly prevalent in procedures to correct deformities, as longer fixation constructs are often used along with uniplanar bone anchor heads that pivot in only one direction, though similar challenges can be faced when using bone anchor heads that move polyaxially as well.

[0005] Prior approaches to overcoming such challenges involve the use of multiple instruments. For example, a first instrument can be utilized to laterally translate a rod over a bone anchor head, and axial reduction of the rod into the bone anchor head can be performed with a second instrument. Often this is accomplished by attaching a lateral reducing instrument to a first bone anchor to move the rod over one or more bone anchors along a portion of a spinal fixation construct. An axial reducer can then be attached to an adjacent bone anchor and used to translate the rod axially into the bone anchor head.

[0006] Such prior approaches can have drawbacks. For example, use of instruments that can reduce, or translate, a rod in only one plane requires the use of additional instrumentation to complete a procedure. Further, since different reducing instruments are attached to different vertebral levels, load sharing among reducers is not possible. Still further, in some cases reducing instruments must be removed prior to set screw insertion due to interference with set screw insertion devices, or such devices must be loaded

in a reducer instrument prior to loading a set screw. Both of these requirements can reduce flexibility and complicate a procedure. Finally, some prior instruments are too bulky to fit alongside adjacent instrumentation or around anatomy, especially when bone anchor heads are close together.

[0007] Accordingly, there is a need for improved instruments and methods for reducing or moving one component, such as a spinal fixation rod, relative to another component, such as a bone anchor, including improved instruments and methods for reducing or moving a component in multiple planes.

### SUMMARY

[0008] Disclosed herein are biplanar forceps reducer instruments and methods of use that address these and other challenges of prior approaches. The biplanar forceps reducer instruments disclosed herein can engage an implant, such as a bone anchor receiver head, and reduce or move a spinal fixation element, such as a rod, in two planes to move the rod into a channel formed in the receiver head. Further, the biplanar forceps reducer instruments disclosed herein can allow for introduction and tightening of a set screw using an inserter that can pass through a cannulated tube of the reducer. The low profile and biplanar reduction functionality can allow a single type of reducer instrument to couple with each bone anchor along a spinal fixation construct and remain in position until the construct is secured in position.

[0009] In one aspect, a surgical instrument can include a first arm having a proximal end, a distal end, and a housing disposed therebetween, the housing including a threaded lumen defining a longitudinal axis. The instrument can also include a second arm having a proximal end and a distal end, the second arm pivotably coupled to the first arm. The instrument can further include a tube having a threaded outer surface portion disposed within the threaded lumen, a depth stop formed proximal to the threaded portion, and a drive feature at a proximal end of the tube configured to removably couple with a driver to impart torque to the tube. The instrument can also include a rod-engaging tip rotatably coupled to a distal end of the tube. Further, the first and second arms can be configured to translate a spinal fixation element laterally toward the longitudinal axis when pivoted toward one another and the rod-engaging tip can be configured to translate the spinal fixation element axially along the longitudinal axis when the tube is rotated relative to the housing.

[0010] Any of a variety of alternative or additional features can be included and are considered within the scope of the present disclosure. For example, in some embodiments, the depth stop can define a maximum outer diameter of the tube. In certain embodiments, the depth stop can be a shoulder formed around at least a portion of the circumference of the tube.

[0011] In some embodiments, the lumen can include continuous threads formed around a circumference thereof. Further, in certain embodiments an inner lumen of the tube can be accessible from a proximal end of the tube through the drive feature. Moreover, in some embodiments the rod-engaging tip can include an inner lumen coaxially disposed with the inner lumen of the tube.

[0012] In some embodiments, the rod-engaging tip can include an opening formed in a distal portion of a sidewall to facilitate viewing contents of an inner lumen of the rod-engaging tip.

**[0013]** In certain embodiments, a distal end of at least one of the first and second arms can include a protrusion configured to extend into a recess of a bone anchor receiver member. Further, the protrusion can be a pin disposed in a bore formed in the distal end of at least one of the first and second arms. In some embodiments, the protrusion can be a ridge extending across a width of the arm. The ridge or other protrusion can extend across an entire width of the arm or, in some embodiments, can extend across only a portion of a width of the arm or include one or more breaks along its length. In certain embodiments, the protrusion can be disposed proximal to a distal-most end of the arm and an inner surface of the arm distal to the protrusion can have a conical tapering profile. In some embodiments, the inner surface of the arm can include sidewalls extending outward from the inner surface at lateral ends of the arm, and opposed, inward-facing surfaces of each sidewall can have a planar tapering profile.

**[0014]** In certain embodiments, the instrument can further include a lock configured to selectively maintain a position of the first and second arms relative to one another. In some embodiments, the lock can be coupled to a proximal portion of one or more of the first and second arms, and a proximal end of the tube can be disposed distal to the lock.

**[0015]** In another aspect, a surgical method can include positioning a first arm of a reducer instrument against a bone anchor receiver member, as well as positioning a second arm of the reducer instrument against a spinal fixation element. The method can further include positioning a threaded outer surface portion of a tube of the reducer instrument within a threaded lumen formed in a housing of the first arm of the reducer instrument. The method can also include pivoting the first and second arms of the reducer instrument toward one another to translate the spinal fixation element laterally toward a longitudinal axis defined by the threaded lumen. The method can further include coupling a driver to a drive feature formed at a proximal end of the tube, and rotating the tube of the reducer instrument to translate the spinal fixation element axially along the longitudinal axis until a depth stop formed on the tube proximal to the threaded outer surface portion contacts the housing.

**[0016]** As with the instruments described above, the methods disclosed herein can include any of a variety of additional or alternative steps that are considered within the scope of the present disclosure. For example, in some embodiments the method can further include engaging a lock to maintain a position of the first and second arms relative to one another after pivoting the first and second arms toward one another.

**[0017]** In certain embodiments, the method can also include separating the driver from the proximal end of the tube after rotating the tube to translate the spinal fixation element axially. Further, the method can include inserting a set screw through an inner lumen of the tube and coupling the set screw with the receiver member. Still further, the method can include visually inspecting the set screw while coupled to the receiver member using an opening formed in a distal portion of a sidewall of rod-engaging tip coupled to the tube.

**[0018]** In another aspect, a surgical instrument can include a first arm having a proximal end, a distal end, and a housing disposed therebetween, the housing including a lumen defining a longitudinal axis, the lumen having continuous threads formed around a circumference thereof. The instrument can

further include a second arm having a proximal end and a distal end, the second arm pivotably coupled to the first arm, and a tube having a threaded outer surface portion disposed within the lumen. The instrument can further include a rod-engaging tip rotatably coupled to a distal end of the tube, the rod-engaging tip being constrained against rotation relative to the housing by a protrusion coupled to the housing that is received in a recess of the rod-engaging tip. Further, the first and second arms can be configured to translate a spinal fixation element laterally toward the longitudinal axis when pivoted toward one another and the rod-engaging tip can be configured to translate the spinal fixation element axially along the longitudinal axis when the tube is rotated relative to the housing.

**[0019]** A number of additional or alternative features can be included. For example, in some embodiments, the threads on the outer surface portion of the tube can have a plurality of starts. In some embodiments, the threads on the outer portion of the tube can have three starts. Further, in certain embodiments an outer diameter of the threaded outer surface portion of the tube can be less than or equal to about 45% larger than a diameter of an inner lumen of the tube. In certain embodiments, an outer diameter of the threaded outer surface portion of the tube can be less than or equal to about 40%, about 35%, about 30%, about 25%, or about 20% larger than a diameter of an inner lumen of the tube. Utilizing such a configuration can minimize an outer diameter of the threads of the tube and provide a lower profile instrument to access a surgical site through a smaller opening or with less interference for adjacent anatomy or instrumentation.

**[0020]** In another aspect, a surgical instrument can include opposed arms pivotably coupled to one another, a tube threadably coupled to the opposed arms, and a rod-engaging tip rotatably coupled to the tube. Further, the opposed arms can be configured to laterally translate a spinal fixation element when pivoted toward one another and the rod-engagement tip can be configured to axially translate the spinal fixation element when the tube is rotated relative to the opposed arms and the rod-engagement tip.

**[0021]** As with the aspects and embodiments described above, a number of additional or alternative features are possible. For example, in some embodiments one of the opposed arms can include a housing having a threaded lumen formed therein. Further, in some embodiments the tube can include external threads formed thereon that interface with the threaded lumen of the body. The external threads formed on the tube can include a plurality of starts. In some embodiments, the external threads formed on the tube can include three starts. Further, in some embodiments an outer diameter of the external threads of the tube can be less than or equal to about 45% larger than a diameter of an inner lumen of the tube. In certain embodiments, an outer diameter of the threaded outer surface portion of the tube can be less than or equal to about 40%, about 35%, about 30%, about 25%, or about 20% larger than a diameter of an inner lumen of the tube. Utilizing such a configuration can minimize an outer diameter of the threads of the tube and provide a lower profile instrument to access a surgical site through a smaller opening or with less interference for adjacent anatomy or instrumentation.

**[0022]** In certain embodiments, the tube can include a depth stop formed proximal to the external threads. The depth stop can define a maximum outer diameter of the tube

in certain embodiments. The depth stop can have a variety of forms, and can be a shoulder formed around at least a portion of the circumference of the tube in some embodiments.

**[0023]** In some embodiments, the threaded lumen can include continuous threads formed around a circumference thereof. In certain embodiments the housing can include a protrusion received within a recess of the rod-engaging tip to constrain the rod-engaging tip against rotation relative to the housing.

**[0024]** In certain embodiments, the opposed arms can include opposed proximally-extending handles for user actuation. In some embodiments, the opposed arms can include a lock to maintain their relative position. The lock can include a ratchet in certain embodiments. In some such embodiments, the ratchet can be offset from a longitudinal axis of the tube. In certain embodiments, the lock can be coupled to a proximal portion of one or more of the opposed arms, and a proximal end of the tube can be disposed distal to the lock.

**[0025]** In some embodiments, the tube can include a drive feature formed at a proximal end thereof to facilitate rotation of the tube. In certain embodiments, an inner lumen of the tube can be accessible from a proximal end of the tube through the drive feature. In some embodiments, the rod-engaging tip can include an inner lumen that is coaxial with the inner lumen of the tube. In certain embodiments, the rod-engaging tip can include an opening formed in a distal portion of a sidewall to facilitate viewing contents of the inner lumen of the rod-engaging tip.

**[0026]** In certain embodiments, a distal end of at least one of the opposed arms can include an engagement feature configured to interface with a complementary feature of a bone anchor receiver member. In some embodiments, the engagement feature can include a protrusion configured to extend into a recess of a bone anchor receiver member. For example, the protrusion can be a pin disposed in a bore formed in the distal end of the arm, or a ridge extending across a width of the arm. The ridge or other protrusion can extend across an entire width of the arm or, in some embodiments, can extend across only a portion of a width of the arm or include one or more breaks along its length. In some embodiments, the engagement feature can be disposed proximal to a distal-most end of the arm and an inner surface of the arm distal to the protrusion can have a conical tapering profile. Further, in certain embodiments the inner surface of the arm can include sidewalls extending outward from the inner surface at lateral ends of the arm, and opposed, inward-facing surfaces of each sidewall can have a planar tapering profile.

**[0027]** In another aspect, a surgical method can include positioning a first arm of a reducer instrument against a bone anchor receiver member, and positioning a second arm of the reducer instrument against a spinal fixation element. The method can further include pivoting the first and second arms of the reducer instrument toward one another to laterally translate the rod toward the receiver member, and rotating a tube of the reducer instrument to axially translate the spinal fixation element toward the receiver member.

**[0028]** A number of additional or alternative steps can be included. For example, in some embodiments, the method can further include inserting a set screw through a lumen formed in the tube and coupling the set screw to the receiver member. Further, the method can include visually inspecting

the set screw while coupled to the receiver member using an opening formed in a distal portion of a sidewall of a rod-engaging tip coupled to the tube.

**[0029]** In certain embodiments, the method can also include locking a position of the first and second arms relative to one another.

**[0030]** In some embodiments, the method can include positioning a threaded outer surface portion of the tube within a threaded lumen formed in a housing coupled to one or more of the first arm and the second arm. In certain embodiments, rotating the tube can be continued until a depth stop formed on the tube proximal to the threaded outer surface portion contacts the housing.

**[0031]** In some embodiments, the method can further include coupling a driver to a drive feature formed at a proximal end of the tube prior to rotating the tube to axially translate the spinal fixation element. The method can also include separating the driver from the proximal end of the tube after rotating the tube to axially translate the spinal fixation element.

**[0032]** In certain embodiments, the method can also include engaging a lock to maintain a position of the first and second arms relative to one another after pivoting the first and second arms toward one another.

**[0033]** Any of the features or variations described herein can be applied to any particular aspect or embodiment of the present disclosure in a number of different combinations. The absence of explicit recitation of any particular combination is due solely to avoiding unnecessary length or repetition.

#### BRIEF DESCRIPTION OF THE DRAWINGS

**[0034]** The aspects and embodiments of the present disclosure can be more fully understood from the following detailed description taken in conjunction with the accompanying drawings, in which:

**[0035]** FIG. 1A is a perspective view of one embodiment of a biplanar forceps reducer instrument of the present disclosure;

**[0036]** FIG. 1B is another perspective view of the instrument of FIG. 1A;

**[0037]** FIG. 2 is a perspective view of opposed forceps arms of the instrument of FIG. 1A;

**[0038]** FIG. 3 is an exploded view of the opposed forceps arms of FIG. 2;

**[0039]** FIG. 4A is a top perspective view of a first forceps arm of the instrument of FIG. 1A;

**[0040]** FIG. 4B is a bottom perspective view of a first forceps arm of FIG. 4A;

**[0041]** FIG. 4C is a detail perspective view of a distal portion of FIG. 4B;

**[0042]** FIG. 4D is a detail top view of a distal portion of FIG. 4B;

**[0043]** FIG. 4E is a detail longitudinal cross-sectional view of a distal portion of FIG. 4B;

**[0044]** FIG. 5 is a partially-transparent detail view of a proximal portion of the forceps arm of FIG. 4A;

**[0045]** FIG. 6A is a top perspective view of a second forceps arm of the instrument of FIG. 1A;

**[0046]** FIG. 6B is a bottom perspective view of a second forceps arm of FIG. 6A;

**[0047]** FIG. 6C is a front perspective view of a second forceps arm of FIG. 6A;

- [0048] FIG. 6D is a rear perspective view of a second forceps arm of FIG. 6A;
- [0049] FIG. 6E is another rear perspective view of a second forceps arm of FIG. 6A;
- [0050] FIG. 6F is another rear perspective view of a second forceps arm of FIG. 6A;
- [0051] FIG. 7 is a perspective view of a reducer tube and rod-engaging reduction tip of the instrument of FIG. 1A;
- [0052] FIG. 8 is a perspective view of another embodiment of a reducer tube and rod-engaging reduction tip according to the present disclosure;
- [0053] FIG. 9 is an exploded view of the reducer tube and rod-engaging reduction tip of FIG. 8;
- [0054] FIG. 10 is a perspective view of the rod-engaging reduction tip of FIG. 8;
- [0055] FIG. 11A is a perspective view of the reducer tube of FIG. 8;
- [0056] FIG. 11B is a detail view of a distal portion of the reducer tube of FIG. 11A;
- [0057] FIG. 12A is a longitudinal cross-sectional view of the reducer tube and rod-engaging reducer tip of FIG. 8;
- [0058] FIG. 12B is a detail view of a distal portion of the reducer tube and a proximal portion of the rod-engaging reducer tip of FIG. 12A;
- [0059] FIG. 13 is a longitudinal cross-sectional view of one embodiment of a biplanar forceps reducer instrument of the present disclosure;
- [0060] FIG. 14 is a partially-transparent perspective view of the instrument of FIG. 13;
- [0061] FIG. 15 is a perspective view of one embodiment of a bone screw implanted in a vertebra;
- [0062] FIG. 16 is a perspective view of the instrument of FIG. 1 capturing a bone screw and spinal fixation rod;
- [0063] FIG. 17 is a perspective view of the instrument of FIG. 1 laterally reducing a spinal fixation rod;
- [0064] FIG. 18 is a perspective view of the instrument of FIG. 1 axially reducing a spinal fixation rod using a driver;
- [0065] FIG. 19 is a perspective view of the instrument of FIG. 1 after axially reducing a spinal fixation rod;
- [0066] FIG. 20 is a perspective view of the instrument of FIG. 1 after removal of a driver;
- [0067] FIG. 21 is a perspective view of a set screw being inserted through the instrument of FIG. 1;
- [0068] FIG. 22 is another perspective view of a set screw being inserted through the instrument of FIG. 1;
- [0069] FIG. 23A is a perspective view of the instrument of FIG. 1 after insertion of a set screw;
- [0070] FIG. 23B is a detail view of a distal portion of FIG. 23A;
- [0071] FIG. 24 is a perspective view of the instrument of FIG. 1 releasing from a bone screw;
- [0072] FIG. 25 is a perspective view of the instrument of FIG. 1 withdrawing from a bone screw;
- [0073] FIG. 26 is a perspective view of a bone screw and spinal fixation rod fastened to a vertebra;
- [0074] FIG. 27A is a perspective view of one embodiment of a biplanar forceps reducer and driver according to the present disclosure;
- [0075] FIG. 27B is a perspective view of one embodiment of a biplanar forceps reducer with integrated driver according to the present disclosure;
- [0076] FIG. 28 is a perspective view of one embodiment of a biplanar forceps reducer according to the present disclosure;
- [0077] FIG. 29 is an exploded view of the instrument of FIG. 28;
- [0078] FIG. 30 is an exploded view of a rod-engaging reducer tip and a distal portion of a reducer tube of the instrument of FIG. 28;
- [0079] FIG. 31 is a detail side view of a distal portion of the instrument of FIG. 28;
- [0080] FIG. 32 is detail end view of a forceps body of the instrument of FIG. 28;
- [0081] FIG. 33 is a perspective view of the instrument of FIG. 28 approaching a bone screw and spinal fixation rod;
- [0082] FIG. 34 is a perspective view of the instrument of FIG. 28 capturing a bone screw and spinal fixation rod;
- [0083] FIG. 35 is a perspective view of the instrument of FIG. 28 laterally reducing a spinal fixation rod;
- [0084] FIG. 36 is a perspective view of the instrument of FIG. 28 axially reducing a spinal fixation rod;
- [0085] FIG. 37 is a perspective view of a set screw being inserted through the instrument of FIG. 28;
- [0086] FIG. 38 is another perspective view of a set screw being inserted through the instrument of FIG. 28;
- [0087] FIG. 39 is a perspective view of one embodiment of a biplanar forceps reducer according to the present disclosure;
- [0088] FIG. 40 is a perspective view of the instrument of FIG. 39 capturing a bone screw and spinal fixation rod;
- [0089] FIG. 41 is a perspective view of the instrument of FIG. 39 after laterally and axially reducing a spinal fixation rod into a bone screw;
- [0090] FIG. 42 is a perspective view of one embodiment of a biplanar forceps reducer according to the present disclosure;
- [0091] FIG. 43A is a perspective view of one embodiment of a biplanar forceps reducer according to the present disclosure;
- [0092] FIG. 43B is an end view of the instrument of FIG. 43A;
- [0093] FIG. 43C is a detail view of the instrument of FIG. 43B;
- [0094] FIG. 43D is a top view of the instrument of FIG. 43A;
- [0095] FIG. 44A is a longitudinal cross-sectional view of the instrument of FIG. 43A;
- [0096] FIG. 44B is a detail view of a middle portion of FIG. 44A;
- [0097] FIG. 45 is a partial-exploded view of the instrument of FIG. 43A;
- [0098] FIG. 46 is another partial-exploded view of the instrument of FIG. 43A;
- [0099] FIG. 47A is a perspective view of one embodiment of a pin used to couple a reducer tube and rod-engaging reducer tip according to the present disclosure;
- [0100] FIG. 47B is a side view of the pin of FIG. 47A;
- [0101] FIG. 47C is an end view of the pin of FIG. 47A;
- [0102] FIG. 48A is an end view of one embodiment of a thrust washer according to the present disclosure;
- [0103] FIG. 48B is a side view of the thrust washer of FIG. 48A;
- [0104] FIG. 48C is a perspective view of the thrust washer of FIG. 48A;
- [0105] FIG. 49A is an end view of one embodiment of a pin used to couple opposing forceps arms according to the present disclosure;
- [0106] FIG. 49B is a side view of the pin of FIG. 49A;

- [0107] FIG. 49C is a perspective view of the pin of FIG. 49A;
- [0108] FIG. 50A is a perspective view of a reducer tube and rod-engaging reducer tip of the instrument of FIG. 43A;
- [0109] FIG. 50B is a side view of a reducer tube and rod-engaging reducer tip of the instrument of FIG. 43A;
- [0110] FIG. 51A is a longitudinal cross-sectional view of a reducer tube and rod-engaging reducer tip of the instrument of FIG. 43A;
- [0111] FIG. 51B is a detail view of a middle portion of FIG. 51A;
- [0112] FIG. 52A is a perspective view of a rod-engaging reducer tip of the instrument of FIG. 43A;
- [0113] FIG. 52B is a top view of a rod-engaging reducer tip of the instrument of FIG. 43A;
- [0114] FIG. 52C is a side view of a rod-engaging reducer tip of the instrument of FIG. 43A;
- [0115] FIG. 52D is a first end view of a rod-engaging reducer tip of the instrument of FIG. 43A;
- [0116] FIG. 52E is a second end view of a rod-engaging reducer tip of the instrument of FIG. 43A;
- [0117] FIG. 53 is a longitudinal cross-sectional view of a rod-engaging reducer tip of the instrument of FIG. 43A;
- [0118] FIG. 54 is another longitudinal cross-sectional view of a rod-engaging reducer tip of the instrument of FIG. 43A;
- [0119] FIG. 55A is a perspective view of a reducer tube of the instrument of FIG. 43A;
- [0120] FIG. 55B is a side view of a reducer tube of the instrument of FIG. 43A;
- [0121] FIG. 55C is a first end view of a reducer tube of the instrument of FIG. 43A;
- [0122] FIG. 55D is a second end view of a reducer tube of the instrument of FIG. 43A;
- [0123] FIG. 56A is a longitudinal cross-sectional view of a reducer tube of the instrument of FIG. 43A;
- [0124] FIG. 56B is a detail view of a distal portion of FIG. 56A;
- [0125] FIG. 57A is a perspective view of a forceps body of the instrument of FIG. 43A;
- [0126] FIG. 57B is a first end view of a forceps body of the instrument of FIG. 43A;
- [0127] FIG. 57C is a second end view of a forceps body of the instrument of FIG. 43A;
- [0128] FIG. 57D is a side view of a forceps body of the instrument of FIG. 43A;
- [0129] FIG. 57E is top view of a forceps body of the instrument of FIG. 43A;
- [0130] FIG. 57F is a third end view of a forceps body of the instrument of FIG. 43A;
- [0131] FIG. 57G is a detail view of a distal portion of FIG. 57E;
- [0132] FIG. 58A is a longitudinal cross-sectional view of a forceps body of the instrument of FIG. 43A;
- [0133] FIG. 58B is a detail view of a distal portion of FIG. 58A;
- [0134] FIG. 59 is a side view of one embodiment of forceps handles according to the present disclosure;
- [0135] FIG. 60A is a perspective view of a first forceps arm of the instrument of FIG. 43A;
- [0136] FIG. 60B is another perspective view of a first forceps arm of the instrument of FIG. 43A;
- [0137] FIG. 60C is a side view of a first forceps arm of the instrument of FIG. 43A;
- [0138] FIG. 60D is a top view of a first forceps arm of the instrument of FIG. 43A;
- [0139] FIG. 61 is an exploded view of a first forceps arm of the instrument of FIG. 43A;
- [0140] FIG. 62A is a bottom view of a first forceps arm of the instrument of FIG. 43A;
- [0141] FIG. 62B is another side view of a first forceps arm of the instrument of FIG. 43A;
- [0142] FIG. 62C is another top view of a first forceps arm of the instrument of FIG. 43A;
- [0143] FIG. 62D is an end view of a first forceps arm of the instrument of FIG. 43A;
- [0144] FIG. 63A is a side view of a second forceps arm of the instrument of FIG. 43A;
- [0145] FIG. 63B is a bottom view of a second forceps arm of the instrument of FIG. 43A;
- [0146] FIG. 63C is a top view of a second forceps arm of the instrument of FIG. 43A;
- [0147] FIG. 63D is another side view of a second forceps arm of the instrument of FIG. 43A;
- [0148] FIG. 63E is a perspective view of a second forceps arm of the instrument of FIG. 43A;
- [0149] FIG. 64 is an exploded view of a second forceps arm of the instrument of FIG. 43A;
- [0150] FIG. 65A is a perspective view of a pivot arm of the instrument of FIG. 43A;
- [0151] FIG. 65B is an end view of a pivot arm of the instrument of FIG. 43A;
- [0152] FIG. 65C is a top view of a pivot arm of the instrument of FIG. 43A;
- [0153] FIG. 65D is a side view of a pivot arm of the instrument of FIG. 43A;
- [0154] FIG. 65E is a second end view of a pivot arm of the instrument of FIG. 43A;
- [0155] FIG. 66A is a transverse cross-sectional view of a pivot arm of the instrument of FIG. 43A;
- [0156] FIG. 66B is a detail view of an end of FIG. 66A;
- [0157] FIG. 67A is a longitudinal cross-sectional view of a pivot arm of the instrument of FIG. 43A;
- [0158] FIG. 67B is a detail view of a distal portion of FIG. 66A;
- [0159] FIG. 68A is a side view of a pin used to aid coupling a forceps arm with a bone screw according to the present disclosure;
- [0160] FIG. 68B is an end view of the pin of FIG. 68A;
- [0161] FIG. 68C is a top view of the pin of FIG. 68A;
- [0162] FIG. 69A is an end view of pin used to prevent rotation of a rod-engaging reducer tip according to the present disclosure;
- [0163] FIG. 69B is a side view of the pin of FIG. 69A;
- [0164] FIG. 69C is a top view of the pin of FIG. 69A;
- [0165] FIG. 70 is a side view of a forceps handle according to the present disclosure;
- [0166] FIG. 71A is an end view of a forceps handle according to the present disclosure;
- [0167] FIG. 71B is a side view of a forceps handle of FIG. 71A;
- [0168] FIG. 71C is a top view of a forceps handle of FIG. 71A;
- [0169] FIG. 72 is a side view of a forceps handle according to the present disclosure;
- [0170] FIG. 73A is an end view of a forceps handle according to the present disclosure; and

[0171] FIG. 73B is a side view of a forceps handle of FIG. 73A.

#### DETAILED DESCRIPTION

[0172] Certain exemplary embodiments will now be described to provide an overall understanding of the principles of the structure, function, manufacture, and use of the devices, systems, and methods disclosed herein. One or more examples of these embodiments are illustrated in the accompanying drawings. The devices, systems, and methods specifically described herein and illustrated in the accompanying drawings are non-limiting embodiments. The features illustrated or described in connection with one embodiment may be combined with the features of other embodiments. Such modifications and variations are intended to be included within the scope of the present disclosure. Additionally, to the extent that linear, circular, or other dimensions are used in the description of the disclosed devices and methods, such dimensions are not intended to limit the types of shapes that can be used in conjunction with such devices and methods. Equivalents to such dimensions can be determined for different geometric shapes, etc. Further, like-numbered components of the embodiments can generally have similar features. Still further, sizes and shapes of the devices, and the components thereof, can depend at least on the anatomy of the subject in which the devices will be used, the size and shape of objects with which the devices will be used, and the methods and procedures in which the devices will be used.

[0173] Disclosed herein are biplanar forceps reducer instruments and methods of use that can facilitate engaging an implant, such as a bone anchor receiver head, and reducing or moving a spinal fixation element, such as a rod, in two planes to move the rod into a channel formed in the receiver head. Further, the biplanar forceps reducer instruments disclosed herein can allow for introduction and tightening of a set screw using an inserter that can pass through a cannulated tube of the reducer. The low profile and biplanar reduction functionality can allow a single type of reducer instrument to couple with each bone anchor along a spinal fixation construct and remain in position until the construct is secured in position.

[0174] FIGS. 1A and 1B illustrate one embodiment of a biplanar forceps reducer instrument 100 according to the present disclosure. The instrument 100 includes a first arm 102 and a second arm 104 that are pivotably coupled to one another, as well as a reducer tube 106 threadably coupled to the opposed first and second arms and a rod-engaging tip 108 that is rotatably coupled to the reducer tube. As explained in more detail below, the instrument 100 operates by using the opposed first and second arms 102, 104 to capture a spinal fixation element, such as a rod, and a bone anchor, such as a proximal receiver member of a bone anchor assembly. The instrument 100 can reduce, or translate, the rod in multiple dimensions, e.g., laterally and axially. By way of example, a user can squeeze the proximal portions of the first and second arms 102, 104 toward one another to cause the distal portions thereof to also move toward one another. Contacting one arm to a spinal fixation element and the other to a bone anchor can allow the lateral reduction or translation of the rod into alignment over the bone anchor. Subsequently, the tube 106 can be rotated, which can result in distal translation of the rod-engaging tip 108 rotatably coupled thereto. The rod-engaging tip 108 can

contact the rod and reduce or translate it distally into, e.g., a rod-receiving seat of the bone anchor. Finally, a rod locking element, such as a set screw, can be introduced to the bone anchor through a lumen formed in the reducer tube 106 and rod-engaging tip 108.

[0175] FIG. 2 illustrates the opposed first and second arms 102, 104 in isolation, and FIG. 3 shows an exploded view of the assembly. The first and second arms 102, 104 are pivotably coupled with one another by pins 202 that allow the arms to pivot relative to one another about an axis A 1 that is transverse to a longitudinal axis A 2 of the instrument. The opposed outer handles of the instrument can also include a lock 204 configured to maintain a relative position of the handles or arms, and a biasing element 206 that can be configured to bias the arms in a desired direction. For example, in the illustrated embodiment a portion of the lock 204 can be coupled to a proximal end of the second arm 104 using a screw 302. A leaf spring 206 can be utilized as a biasing element and secured to the first arm 102 using screws 308. The leaf spring 206 can contact a portion of the second arm 104 to urge the first and second arms into an open configuration relative to one another. FIG. 3 also illustrates a mechanism that can be utilized to provide friction and maintain a position of a portion of the lock 204 until, e.g., positively moved by a user. The mechanism can include a pin 304 disposed in a bore formed in the second arm 104 such that one end of the pin is in contact with a portion of the lock 204. A coil spring 306 or other biasing element can urge the pin 304 against the portion of the lock 204 to provide a friction or drag force against movement of the lock relative to the second arm 104. This mechanism is illustrated in greater detail in FIG. 5.

[0176] FIGS. 4A-4E illustrate the second arm 104 in greater detail. The second arm 104 can include a distal portion 402 configured to contact a spinal fixation element and/or bone anchor, a pivot arm 404, a proximal handle 406, and a proximal end portion 408 that can include the lock 204. Also shown in these figures is the ratchet bar 410 of the lock 204.

[0177] The proximal handle 406 of the second arm 104 can include a number of different features to facilitate a user grasping and manipulating the handle. For example, the proximal handle 406 can include one or more depressions 411 configured to seat a user's fingers. In some embodiments, the proximal handle 406 of the second arm 104 can include one or more finger loops configured to receive a user's fingers, as shown, for example, in FIGS. 28, 39, 42, and 43. In still other embodiments, the proximal handle 406 can include grip or comfort-enhancing features, such as a silicone or other material overmolded portion to facilitate grasping. In some embodiments, the proximal handle 406 can also include one or more protrusions configured to assist user's in maintaining their grip when imparting axial forces to the instrument 100. For example, the second arm 104 includes a protrusion 413 formed at a distal position along the handle 406 to prevent a user's hand from slipping off the handle when, e.g., urging the instrument distally to couple with a bone anchor receiver member.

[0178] The pivot arm 404 can extend at an oblique angle relative to longitudinal axes defined by the distal portion 402 and the proximal handle 406. The pivot arm 404 can also define a recess 415 between opposed struts 417 that can receive the first arm 102 therethrough during assembly and

operation. The opposed struts **417** can include bores to receive the pins **202** that pivotably couple the first and second arms **102**, **104**.

[**0179**] The distal portion **402** can have a curved profile to accommodate passage of the reducer tube **106** and/or rod-engaging tip **108**, as well as to facilitate coupling with a bone anchor receiver member that can have a generally curved shape at the interface between the two components. The distal portion **402** can also include an engagement feature **412** formed along a distal portion thereof that can be configured to interface with a complementary feature on a bone anchor receiver member to facilitate coupling between the two components.

[**0180**] FIGS. 4C-4E illustrate the distal end of the distal portion **402** in greater detail. As shown in the figures, the engagement feature **412** can be a protrusion **412**, such as a ridge extending across a width of the arm, that can be configured to be received within a slot or other recess formed in a proximal outer surface portion of a bone anchor receiver member to facilitate coupling between the components. The ridge or other protrusion can extend across an entire width of the arm or, in some embodiments, can extend across only a portion of a width of the arm or include one or more breaks along its length. Example bone anchors having such features are described in U.S. Pat. No. 7,179,261, the entire contents of which are incorporated by reference herein. Other engagement feature configurations are possible as well, including reversing the above-described configuration such that a protrusion formed on a bone anchor is received in a recess formed in the distal portion **402**. It is also possible to utilize other geometries, e.g., a pin extending from the inner surface of the distal portion **402** that can be received within a bore formed in a receiver member of a bone anchor. An example of a pin disposed in a bore formed in the distal portion **402** can be seen in the embodiment of FIG. 43.

[**0181**] In some embodiments, the engagement feature **412** can be disposed proximal to a distal-most end of the arm's distal portion **402** and an inner surface of the arm distal to the engagement feature can be configured to facilitate alignment and coupling of the instrument with a bone anchor receiver member. For example, an internal surface **419** of the arm can have a shape or profile that is complementary to an outer surface of the bone anchor in order to facilitate coupling even in the event there is some amount of misalignment, whether that be, e.g., lateral or rotational misalignment along an axis of a rod, rotational misalignment along a longitudinal axis of the instrument **100**, etc. In some embodiments, for example, the inner surface **419** can include a tapered profile complementary to an outer surface of opposed arms of a polyaxial bone anchor receiver head. In some instances, the inner surface **419** can include a conical tapering profile that is complementary to the conical tapering profile of a receiver member. Such an arrangement can allow for some pivoting misalignment between the receiver head and the instrument **100** that can be corrected as the instrument is advanced distally relative to the receiver head. In other embodiments, however, the profile can be flat without any tapering. Even in such a configuration, the additional extension of the distal portion of the arm beyond the engagement feature **412** can facilitate alignment and coupling between the instrument **100** and a bone anchor receiver member.

[**0182**] Further, the inner surface **419** can include sidewalls **421** extending outward from the inner surface **419** at lateral ends thereof. The sidewalls **421** can similarly include a tapering profile to aid alignment with a receiver member of a bone anchor, e.g., by self-correcting for rotational misalignment about the longitudinal axis of the instrument as the instrument is advanced distally relative to the bone anchor. In some embodiments, the opposed, inward-facing surfaces of each sidewall **421** can have a planar tapering profile that can be complementary to a planar tapering profile of abutting surfaces on a bone anchor receiver member. The various tapered surfaces can accommodate misalignment when coupling the instrument **100** to a bone anchor such that advancement of the instrument over the bone anchor forces the two components into proper alignment just prior to positive engagement of the pivoting arms **102**, **104** with the anchor to simplify attachment of the instrument **100** to the anchor. As noted, the receiver member can include one or more complementary tapering profiles to the tapered surfaces provided on the outer sleeve. Further details on features of the anchor that can be utilized with the instruments disclosed herein can be found in U.S. Pat. Nos. 10,039,578 and 10,299,839, as well as U.S. Provisional Appl. No. 63/157,362, entitled "Multi-Feature Polyaxial Screw" and filed on Mar. 5, 2021. The entire contents of each of these applications are incorporated by reference herein.

[**0183**] FIG. 5 illustrates the portion of the lock **204** coupled to the second arm **104** in greater detail. As noted above, the lock **204** can include a ratchet bar **410** rotatably coupled to the proximal portion **408** of the second arm **104** by being disposed in a bore formed in the proximal portion of the second arm and secured with screw **302**. In addition, a drag or friction force can be applied to the ratchet bar **410** using a pin **304** disposed in a transversely-oriented bore formed in the proximal portion **408** of the second arm **104**. The pin **304** can be urged against a portion of the ratchet bar **410** using a coil spring **306** or other biasing element.

[**0184**] FIGS. 6A-6F illustrate the first arm **102** in greater detail. The first arm **102** can include a distal portion **602**, a housing **604**, a proximal handle **606**, and a proximal end **608** that include a catch **610** that forms a complementary portion of the lock **204** and interfaces with the ratchet bar **410**. The distal portion **602** can be similar to the distal portion **402** of the second arm **104** described above, including an engagement feature **612** and similarly configured surface profiles to facilitate coupling with a bone anchor receiver member. Similarly, the proximal handle **606** can be a mirror or similarly configured as the proximal handle **406** of the second arm **104** described above, including the use of features like finger-recesses **611** and a protrusion **613** to assist during application of axial forces to the first arm **102**.

[**0185**] The housing **604** can include a lumen **615** having threads **614** formed along at least a portion of a surface thereof. The lumen **615** can define the longitudinal axis **A 2** of the instrument **100**, or at least the longitudinal axis **A 2** along which the reducer tube **106** and rod-engaging tip **108** translate during reduction maneuvers. The threads **614** formed on the surface of the lumen **615** can be continuous and extend around a circumference thereof, i.e., around an entire perimeter of the lumen **615**. This can be in contrast to partial-circumference thread forms interrupted by longitudinal slots, etc. In some embodiments, however, such a configuration could be utilized in connection with a biplanar

forceps reducer according to the present disclosure, e.g., to prevent rotation of a rod-engaging tip without using protrusions formed on the housing 604. More details on such a configuration and other features can be found in U.S. Pat. No. 8,647,347, the entire contents of which are incorporated by reference herein.

[0186] The lumen 615 of the housing 604 can also include one or more protrusions 616 extending from a surface thereof at a position distal to the threads 614. As explained in more detail below, the one or more protrusions 616 can be received within a recess of the rod-engaging tip 108 to prevent relative rotation between the tip and the first arm 102. Other configurations are also possible, however, including, for example, a feature formed along the distal portion 602 rather than in the housing 604, any of a variety of cooperating shapes, protrusions, and recesses that can prevent relative rotation, etc.

[0187] FIG. 7 illustrates the reducer tube 106 and rod-engaging tip 108 in greater detail. The reducer tube 106 is rotatably coupled to the rod-engaging tip 108, i.e., the two components can rotate relative to one another but are prevented from axially translating relative to one another. The rod-engaging tip 108 can include opposed extensions 705 formed at a distal end thereof that can be sized and shaped to contact a spinal fixation element, such as a rod, during an axial reduction maneuver. The extensions 705 can also be configured to extend into a U-shaped gaps formed between opposed arms of a bone anchor receiver member, such that the rod-engaging tip 108 can axially reduce a rod into the receiver member without interfering with delivery of a set screw or other locking element, as described below. Also to facilitate delivery of a set screw or other locking element, the rod-engaging tip 108 and reducer tube 106 can define an inner lumen 707, and the portions thereof extending through each component 106, 108 can be coaxially aligned.

[0188] The rod-engaging tip 108 can also include one or more openings 710 formed in a sidewall to facilitate viewing into the lumen 707. This can be useful to facilitate visualizing placement of a set screw or locking element delivered through the lumen 707, as described in more detail below.

[0189] The rod-engaging tip 108 can also include a groove 709 or other recess formed in an outer surface thereof and extending at least partially along a length thereof. The groove 709 can receive the protrusion 616 formed on the surface of the lumen 615 of the housing 604 in order to prevent relative rotation between the tip 108 and the first arm 102.

[0190] As noted above, the reducer tube 106 and rod-engaging tip 108 can be rotatably coupled in a manner that permits relative rotation while preventing relative axial translation between the components. This can be accomplished using pins 712 disposed through bores formed in the reducer tube 106 and extending into an interior of the reducer tube. The pins can be received within a groove formed in a proximal end of the rod-engaging tip 108, as described in more detail below.

[0191] The reducer tube 106 can include a threaded outer surface portion 714 configured to interface with the threads 614 formed on the surface of the lumen 615 of the housing 604. A depth stop 716 can be formed on the reducer tube 106 at a position proximal to the threads 714. The depth stop 716 can be configured to contact a proximal portion of the housing 604 in order to limit the distal advancement of the

reducer tube 106 and rod-engaging tip 108 relative to the first and second arms 102, 104. This depth can be configured to allow for the reduction of multiple diameter spinal fixation rods, e.g., 5.5 mm and 6 mm diameter rods, while providing sufficient reduction to allow a set screw or other locking element to engage a receiver member (e.g., threads of a set screw to engage with threads formed on a proximal surface of a receiver member) and prevent excessive reduction that can create tension and inhibit easy decoupling of the instrument from the receiver member after the set screw or other locking element is installed. For example, in some embodiments the depth stop can be positioned to provide about 6.5 mm of clearance between a distal end of the rod-engaging tip 108 and the base of a bone anchor receiver member rod slot at maximum axial reduction when the depth stop 716 contacts the housing 604. Such a configuration can allow using the device with both 5.5 mm and 6 mm rods with the benefits noted above. The depth stop 716 can have a variety of forms, including any of a variety of protrusions formed on an outer surface of the reducer tube 106 around part of or an entirety of its circumference. In the illustrated embodiment, the depth stop 716 is a shoulder formed around a circumference (i.e., an entire perimeter) of the reducer tube 106.

[0192] An intermediate portion 704 can extend proximally from the depth stop to a drive feature 718 formed on a proximal end of the reducer tube 106. The intermediate portion 704 can have a variety of shapes, diameters, and lengths. In the illustrated embodiment, the intermediate portion 704 has a generally cylindrical shape. The drive feature 718 formed at a proximal end of the reducer tube 106 can allow for modular coupling of a driver handle, powered driver, or other torque application implement to the reducer tube 106 in order to effect rotation of the tube and axial reduction of a spinal fixation element. The drive feature 718 can also permit access to the lumen 707 therethrough, e.g., as shown in FIG. 11A described below. The drive feature 718 can have a variety of forms and sizes. In some embodiments, the drive feature 718 can include one or more flats to facilitate the application of torque thereto. In the illustrated embodiment, the drive feature 718 is a hex feature having six flat portions disposed around a circumference of the reducer tube 106. Further, in the illustrated embodiment an outer diameter of the depth stop 716 can be greater than an outer diameter of any other portion of the reducer tube 106 (e.g., greater than the outer diameter of the threaded portion 714 or the drive feature 718). Utilizing a lower profile drive feature 718 can reduce the footprint of the instrument 100 while still allowing a larger driver handle (e.g., a T-handle, powered driver, etc.) to be coupled to the instrument when needed.

[0193] FIGS. 8-12B illustrate another embodiment of a reducer tube 806 and a rod-engaging tip 808 in greater detail. The reducer tube 806 and rod-engaging tip 808 are similar to the embodiments described above, including the use of distal extensions 805 formed on the rod-engaging tip 808, a lumen 807 extending through the two components, and a groove 809 to receive a protrusion formed on the housing 604. The rod-engaging tip 808 includes a differently-shaped opening 810 or window formed in a sidewall thereof. In particular, the opening is extended along a longitudinal axis of the tip 808 but compressed in the radial dimension. The reducer tube 806 includes similar pins 812 or other protrusions (e.g., integrally-formed protrusions,



protrusions of different shape, etc.) that can be used to couple the reducer tube to the rod-engaging tip, as well as threads **814**, depth stop **816**, intermediate portion **804**, and drive feature **818**.

[0194] The exploded view of FIG. 9 and the cross-sectional views of FIGS. 12A and 12B illustrate the rotatable coupling of the reducer tube **806** and rod-engaging tip **808** in greater detail. For example, the pins **812** or other protrusions extending into an interior of the reducer tube **806** are visible, as well as the groove **904** formed in the rod-engaging tip **808** where the pins ride to allow for relative rotation while preventing relative translation. Also shown is a thrust washer **902** disposed between a proximal end of the rod-engaging tip **808** and an interior shoulder **1201** (see FIG. 12B) formed along a distal portion of the reducer tube **806**.

[0195] FIGS. 10-11B show the rod-engaging tip **808** and reducer tube **806** in isolation to better illustrate their features. Of note in FIG. 11B is the detail view of the threads **814** formed on the outer surface of the reducer tube **806**. Any of a variety of thread forms can be utilized with the instruments of the present disclosure. In some embodiments, it can be desirable to utilize a thread form that is low profile in order to minimize an outer diameter of the threaded portion **814**, which can allow minimization of a size of the housing **604** and resulting instrument **100**. For example and with reference to the detail cross-sectional view of FIG. 12B, in some embodiments an outer diameter D1 of the threaded outer surface portion of the tube can be less than or equal to about 45% larger than a diameter D2 of an inner lumen **807** of the tube **806**. In certain embodiments, the outer diameter D1 of the threaded outer surface portion of the tube can be less than or equal to about 40%, about 35%, about 30%, about 25%, or about 20% larger than the diameter D2 of the inner lumen **807** of the tube **806**. For example, in one embodiment the diameter D1 can be about 13 mm and the diameter D2 can be about 9 mm. Utilizing such a configuration can minimize an outer diameter of the threads of the tube and provide a lower profile instrument to access a surgical site through a smaller opening or with less interference for adjacent anatomy or instrumentation.

[0196] In some embodiments it can also be desirable to provide thread forms with lower mechanical advantage, which can provide better tactile feedback to a user during a reduction maneuver. In some embodiments, thread forms with one or more starts can be utilized and, in some embodiments, a thread forms with a plurality of starts can be utilized. In the illustrated embodiment, a thread form with three starts **1102** (the third start is not visible) is illustrated, as shown in FIG. 11B.

[0197] FIGS. 13 and 14 illustrate one embodiment of a biplanar reducer instrument **1300** according to the present disclosure that incorporates the first and second arms **102**, **104** discussed above with the reducer tube **806** and rod-engaging tip **808**. These figures also illustrate in greater detail the placement and operation of the biasing element **206** that can bias the arms **102**, **104** toward an open configuration and the lock **204** with drag force mechanism.

[0198] FIGS. 15-26 illustrate a method of operation of a biplanar forceps reducer instrument according to the present disclosure. FIG. 15 illustrates one embodiment of a vertebral body **1502** and a bone anchor or implant **1504** (also shown is a longitudinal axis A **3** of the implanted bone anchor). FIG. 16 shows the vertebral body **1502** and implant **1504** with a spinal fixation element **1602**, e.g., a rod, disposed in

a position that is both laterally (e.g., transverse to the longitudinal axis A **3** of the implanted bone anchor) and axially (e.g., parallel to the longitudinal axis A **3** of the implanted bone anchor) offset relative to the bone anchor. FIG. 16 also shows the introduction of the biplanar forceps reducer instrument **100**, in particular a first positioning of the instrument in which a distal portion **402** of the first arm **102** is docked against one side of the bone anchor **1504** and the distal portion **602** of the second arm **104** is used to capture the laterally offset rod **1602**.

[0199] FIG. 17 illustrates a lateral reduction step that can be achieved by actuating the first and second arms **102**, **104**. In particular, a user can bring proximal handle portions of the arms **102**, **104** toward one another to cause the distal portions **402**, **602** to pivot toward one another. This movement will urge the rod **1602** and the implant **1504** toward one another in a lateral direction (e.g., a direction transverse to the longitudinal axis of the instrument or the implant), ultimately bringing the rod into lateral alignment with the implant along a longitudinal axis, as shown in FIG. 17. Actuation of the arms **102**, **104** can also result in the distal portions **402**, **602** of both arms being docked to the implant **1504** (e.g., such that engagement features formed thereon interface with complementary features formed on opposed outer surfaces of the implant). Still further, FIG. 17 shows the lock **204** maintaining a relative position of the first and second arms **102**, **104** such that a user need not maintain force applied to the arms to pivot them toward one another.

[0200] FIG. 18 illustrates the introduction of a modular driver **1801** that can be coupled to a proximal drive feature **718** of the reducer tube **106** to effect rotation thereof. The driver **1801** can include a coupling feature **1803** at a distal end thereof and a proximal handle **1805**. The coupling feature can be configured to interface with the drive feature **718** in a manner that permits application of torque to the reducer tube **106**. In the illustrated embodiment, the coupling feature can be a hex socket **1803** configured to receive the hex drive feature **718** formed on the reducer tube **106**. As noted above, any of a variety of alternative drive and coupling feature geometries can be utilized. Further, while a hand-actuated driver **1801** is illustrated, in other embodiments a differently-configured hand-powered (e.g., a T-handle, etc.) or powered (e.g., electric, pneumatic, hydraulic, etc.) actuator can be utilized.

[0201] Once the driver **1801** is assembled to the reducer tube **106**, a user can rotate the reducer tube to effect axial translation or reduction of the rod **1602** toward the implant **1504**. In particular, and as described above, rotation of the reducer tube **106** can cause distal advancement thereof relative to the arms **102**, **104** and implant coupled thereto due to the threaded coupling between the reducer tube and the housing **604** of the first arm **102**. Distal advancement of the reducer tube **106** can cause distal advancement of the rod-engaging tip **108** since these components are coupled in a manner that allows for relative rotation but prevents relative translation. The rod-engaging tip **108** can be prevented from rotating relative to the arms **102**, **104** by the protrusion formed on the housing **604** of the first arm **104** riding within the longitudinal groove **709** of the rod-engaging tip. As the rod-engaging tip **108** advances distally, the distal-most extensions **705** formed thereon can contact the rod **1602** and urge it distally toward the implant **1504**. Lateral movement of the rod **1602** can be prevented by the distal portions **402**, **602** of the arms **102**, **104**.

[0202] FIG. 19 illustrates a fully reduced position of the rod 1602 within a seat of a receiver member of the implant 1504 when the reducer tube 106 has been advanced to a point where the depth stop 716 contacts a proximal end of the housing 604 of the first arm 102. Following reduction, the driver 1801 can be removed from the instrument 100, as shown in FIG. 20.

[0203] With the modular driver 1801 separated from the reducer tube 106, a set screw 2102 or other locking element can be advanced toward the implant 1504 through the inner lumen 707 of the reducer tube 106. In particular, the set screw 2102 can be coupled to a distal end of an inserter 2104 and the inserter can be utilized to advance the set screw into the lumen 707 from the proximal end of the reducer tube 106, as shown in FIG. 21. Once the set screw 2102 reaches the implant 1504, the inserter 2104 can be utilized to engage the set screw with threads formed on a proximal portion of the implant receiver member, as shown in FIG. 22. As noted above, the depth stop 716 and configuration of the instrument 100 can be such that it does not achieve a true final position of the rod 1602 (i.e., where the rod is bottomed out against a distal portion of a rod seat of the receiver member), but instead reduces the rod far enough to allow a set screw to engage threads in the receiver member. This can allow final reduction and tightening of the rod to be performed using the set screw 2102 and inserter 2104. This will also allow for easier separation of the instrument 100 by reducing tension in the coupling with the implant 1504 and rod 1602.

[0204] Once the inserter 2104 is utilized to tighten the set screw 2102 to a desired degree, the inserter 2104 can be removed proximally and withdrawn from the inner lumen 707 of the reducer tube 106 and rod-engaging tip 108. Placement of the set screw 2102 can be verified visually through the opening 710 formed in the sidewall of the rod-engaging tip 108, as shown in FIGS. 23A and 23B.

[0205] FIG. 24 illustrates a next method step in which the instrument 100 is separated from the implant 1504. This can be accomplished by releasing the lock 204 (e.g., pivoting the ratchet bar 410 out of engagement with the catch 610) and allowing the first and second arms 102, 104 to pivot away from one another to separate the distal portions 402, 602 thereof from the implant 1504. The instrument 100 can then be withdrawn proximally, as shown in FIG. 25. This leaves the final implanted bone anchor 1504 with fully reduced rod 1602 secured by set screw 2102, as shown in FIG. 26.

[0206] FIGS. 27A and 27B illustrate alternative embodiments of biplanar forceps reducer instruments. FIG. 27A, for example, illustrates an embodiment in which a reducer tube 2706 having a shorter intermediate portion 2709 is utilized. In particular, the reducer tube 2706 can include an intermediate portion 2709 that is short enough in length that the proximal end drive feature of the reducer tube is disposed distal to the lock 204 and/or proximal ends of the arms 102, 104. In order to avoid interference with the proximal portions of the arms 102, 104 and lock 204 during operation, a driver 2701 can be utilized that includes an extended intermediate portion 2707 between its coupling feature 2703 and proximal handle 2705.

[0207] FIG. 27B illustrates another embodiment in which a reducer tube 2706' includes an integrated driver handle 2713 rather than the modular configuration described above. In such an embodiment, the reducer tube driver handle 2713 can still provide access to an inner lumen thereof through its

proximal end, such that a set screw inserter 2104 can be utilized to deliver a set screw, as shown in FIG. 27B.

[0208] Still other alternative embodiments are also contemplated and provided in the present disclosure. For example, FIGS. 28-35 illustrate views of one embodiment of a biplanar forceps reducer 2800 according to the present disclosure. The exploded view of FIG. 29 shows that the instrument 2800 includes lateral reduction forceps 2902 with internal reduction threads that interface with a hollow axial reducer tube 2904 having external reduction threads formed thereon. Opposed distal tips 2906 of the forceps 2902 include implant engagement features that can interface with portions of a bone anchor receiver head, such as opposed sides or features formed on opposed sides, e.g., notches, grooves, holes, etc. The forceps 2902 can include a ratchet lock 2908 that is offset from the longitudinal axis of the reducer tube to ensure no interference between these components. A rod-engaging reduction tip 2910 can be coupled to a distal end of the reducer tube 2904 in a manner that allows relative rotation of the tip about a longitudinal axis of the tube but prevents axial translation or separation of the components. The rod-engaging tip 2910 can be disposed between the opposed lateral reduction forceps 2902 and prevented from rotating relative thereto such that the tip remains properly oriented to engage a rod even as the axial reducer tube is rotated. Finally, a driver feature 2912 or handle can be formed on a proximal end of the axial reducer tube 2904 to facilitate rotation of the tube to effect axial reduction of a rod disposed between the opposed jaws of the lateral reduction forceps 2902.

[0209] FIG. 30 illustrates the distal end of the axial reducer tube 2904 and the rod-engaging tip 2910. The axial reducer tube 2904 and rod-engaging tip 2910 can be hollow to allow for set screw passage while minimizing tube outer diameter. This can contribute to lower instrument profile and improve the ability to use the instrument in tight spaces, e.g., on adjacent closely spaced vertebral levels, etc. The distal end of the reducer tube 2904 can include a groove 3002 and the proximal end of the rod-engaging tip 2910 can include opposed wings 3004 with a feature 3006 that snaps into the groove 3002 of the reducer tube to allow free rotation about a longitudinal axis of the tube while preventing axial translation or separation thereof.

[0210] As shown in FIGS. 31 and 32, the body of the forceps 2902 can include internal threads 3202 to interface with the external threads of the reducer tube. The threads 3202 can include bilateral slots 3204 formed therein to allow the rod-engaging tip 2910 to pass through. Further, the opposed wings or arms 004 of the rod-engaging tip can articulate with the distal portion of the lateral reducer forceps jaws to prevent rotation of the rod-engaging tip 2910 as the axial reducer tube is rotated through the threads formed on the forceps body 2902.

[0211] FIGS. 33-38 illustrate a method of using the instrument 2800 described above. In FIG. 33, the illustrated rod 3302 is positioned both laterally and axially offset from the channel 3304 of the bone anchor 3306 receiver head 3308. The reducer forceps 2902 are moved to an open position and the reducer tube 2904 is rotated to withdraw it proximally. The reducer is positioned to capture both the rod 3302 and receiver head 3308 between distal forceps arms or jaws. In FIG. 34, the reducer instrument 2800 engages the rod 3302 and receiver head 3308 by positioning a first forceps jaw or arm against the bone anchor receiver head and a second

forceps jaw or arm against the rod that is laterally and axially offset from the receiver head. FIG. 35 shows the lateral rod translation or reduction accomplished by bringing the forceps handles toward one another and causing the distal forceps jaws or arms to move toward one another. The ratchet lock 2908 of the forceps can maintain the lateral reduction and allow for step-wise, incremental reduction engaging sequential teeth of the ratchet lock. Further, closing the forceps jaws or arms toward one another can lock the forceps to the bone anchor receiver head 3308 by bringing the second forceps jaw or arm into contact with the receiver head. As noted above, the receiver head 3308 can include one or more features (e.g., notches, grooves, indentations, protrusions, etc.) that can interface with complementary features formed on inner surfaces of the distal forceps jaws or arms to facilitate more secure locking of the forceps to the receiver head.

[0212] With lateral reduction complete, the rod can be axially reduced into the channel of the receiver head, as shown in FIG. 36. This is accomplished by rotating the reducer tube 2904 using the drive feature formed at its proximal end. Rotation of the reducer tube 2904 through the threads formed on the forceps body causes translation of the rod-engaging tip 2910 along the distal forceps arms or jaws. The rod-engaging tip translates distally and forces the rod 3302 in the same direction toward the channel 3304 of the receiver head 3308. This axial reduction can be maintained by virtue of the threaded connection between the reducer tube and forceps body.

[0213] FIG. 37 illustrates introduction of a set screw 3702 and set screw insertion instrument 3704 through the cannula of the reducer tube 2904. Using this cannula access, the set screw 3702 can be delivered to the receiver head 3308 of the bone anchor and installed to secure capture of the rod 3302 within the channel 3304 of the receiver head. FIG. 38 illustrates tightening of the set screw 3702 using the inserter 3704 positioned within the cannula of the reducer tube 2904. Introduced to the bone anchor in this manner, the set screw 3702 can be provisionally and finally tightened to complete spinal fixation construct without the need to remove the biplanar forceps reducer.

[0214] FIG. 39 illustrates another embodiment of a biplanar forceps reducer 3900 that is similar to the reducer 2800 discussed above, including lateral reduction forceps 3902 with internal reduction threads that interface with a hollow axial reducer tube 3904 having external reduction threads formed thereon. The instrument 3900 likewise includes opposed distal tips 3906 of the forceps 3902 that can interface with portions of a bone anchor receiver head, a ratchet lock 3908 that is offset from the longitudinal axis of the reducer tube, a rod-engaging reduction tip 3910 coupled to a distal end of the reducer tube 3904 in a manner that allows relative rotation of the tip about a longitudinal axis of the tube but prevents axial translation or separation of the components, and a driver feature 3912 or handle formed on a proximal end of the axial reducer tube 3904 to facilitate rotation of the tube to effect axial reduction of a rod disposed between the opposed jaws of the lateral reduction forceps 3902. The reducer 3900, however, utilizes a different configuration of user-graspable handles/finger loops 3914 from the handles/finger loops 2914 utilized in the reducer 2800. Any of a variety of finger loops or other user-graspable handle configurations can be employed. Several examples

are disclosed in the embodiments described herein, but any combination of grips is possible and contemplated by the present disclosure.

[0215] FIG. 40 illustrates a rod 4002 that is positioned both laterally and dorsally relative to one or more bone anchors 4004 implanted in the vertebrae of a patient's spine 4006. In such a case, the rod 4002 needs to be translated in two planes to be received within the channel formed in the receiver heads of the implanted bone anchors 4004: medially in the coronal plane and anteriorly in the sagittal plane. The figure shows the biplanar forceps reducer 3900 disposed to impart lateral and axial reduction to the rod 4002 relative to a bone anchor 4004. In some procedures, additional reducer instruments can be coupled to each of the adjacent bone anchors (or all of the bone anchors) and used together to provide the required reduction forces.

[0216] FIG. 41 illustrates the biplanar forceps reducer 3900 after imparting lateral and axial reduction forces to move the rod 4002 into the channels of the implanted receiver heads of bone anchors 4004. The lateral reduction can be maintained by virtue of the locking forceps handles and the axial reduction can be maintained by virtue of the threaded engagement between the reducer tube and the forceps body. From the illustrated configuration, a user can introduce a set screw through the cannulated reducer tube 3904 and provisionally or finally lock the rod 4002 into position relative to the implanted bone anchor 4004.

[0217] FIG. 42 illustrates another embodiment of a biplanar forceps reducer 4200 that is similar to the reducers 2800, 3900 discussed above, including lateral reduction forceps 4202 with internal reduction threads that interface with a hollow axial reducer tube 4204 having external reduction threads formed thereon. The instrument 4200 likewise includes opposed distal tips 4206 of the forceps 4202 that can interface with portions of a bone anchor receiver head, a ratchet lock 4208 that is offset from the longitudinal axis of the reducer tube, a rod-engaging reduction tip 4210 coupled to a distal end of the reducer tube 4204 in a manner that allows relative rotation of the tip about a longitudinal axis of the tube but prevents axial translation or separation of the components, and a driver feature 4212 or handle formed on a proximal end of the axial reducer tube 4204 to facilitate rotation of the tube to effect axial reduction of a rod disposed between the opposed jaws of the lateral reduction forceps 4202. The reducer 4200, however, utilizes a different configuration of user-graspable handles/finger loops 4214 from those utilized in the above-described reducers. More particularly, the handles 4214 in the instrument 4200 are offset from the longitudinal axis of the reducer tube 4204, such that they lie in a plane with the ratchet lock 4208. In contrast, the user-graspable handles 2914 and 3914 are aligned with the longitudinal axis of the reducer tube and only the ratchet lock 4208 extends to a position offset from the longitudinal axis of the reducer tube.

[0218] FIGS. 43A-73B illustrate additional views of embodiments of the biplanar forceps reducer instruments disclosed herein. More particularly, FIGS. 43A-43D illustrate various views of a biplanar forceps reducer 4300 similar to the reducer 4200 described above, including forceps 4302, reducer tube 4304, ratchet lock 4308, reducing tip 4310, and drive feature 4312. FIGS. 44A and 44B illustrate cross-sectional views of the reducer 4300 showing interaction of the reducer tube 4304 with the forceps body 4302 and the shoulder 4316 formed on the tube that serves

as a depth stop for distal advancement of the tube relative to the forceps body. FIG. 45 illustrates the proximal removal of the reducer tube 4304 and reducing tip 4310 from the forceps body 4302. FIG. 46 illustrates an exploded view of the two forceps handles that are coupled by pins 4320 to facilitate pivoting movement therebetween.

[0219] FIGS. 47A-47C illustrate various views of a dowel pin 4700 that can be used to couple the reducer tube and rod-engaging end in a manner that permits relative rotation and prevents relative axial translation. This component can be seen in the detail cross-sectional view of FIG. 51B that illustrates the reducer tube and rod-engaging tip assembly. The detail cross-sectional view of FIG. 51B shows the dowel pin 4700 of FIG. 47 disposed in holes formed in the distal portion of the reducer tube 4304 and extending into a groove 5100 formed in the proximal portion of the rod-engaging tip 4310 to couple these components in a manner that allows rotation and prevents axial translation. Also shown in this view is the thrust washer 4800 of FIGS. 48A-48C disposed between the reducer tube 4304 and rod-engaging tip 4310. More particularly, the thrust washer 4800 is disposed at a proximal end of the rod-engaging tip 4310 and interfaces at its proximal end with a distal-facing shoulder 5102 formed on an inner surface of the reducer tube 4304.

[0220] FIGS. 49A-49C illustrate various views of a rotation pin 4320 that can be used to couple the opposed arms of the forceps 4302, as shown in FIG. 46.

[0221] FIGS. 50A and 50B illustrate various views of the reducer tube 4304 and rod-engaging tip 4310. FIGS. 51A and 51B illustrate these components in cross-section to show their coupling, as described above.

[0222] FIGS. 52A-52E illustrate various views of the rod-engaging tip 4310 that interfaces with the reducer tube 4304 and forceps 4302 to provide translation without rotation in connection with rotation of the reducer tube. FIGS. 53 and 54 illustrate different cross-sectional views of the rod-engaging tip 4310. In particular, these figures highlight the groove 5100 formed at a proximal end of the rod-engaging tip and configured to receive the pins 4700 to couple the tip to the reducer tube 4304 in a manner that allow for relative rotation. Also shown is the longitudinal or axial groove 5208 formed in opposing sides of the outer surface of the tip 4310 that can receive a pin or other protrusion formed on an inner surface of a lumen of the forceps 4302 to maintain a rotational position of the tip 4310 as it translates in response to rotation of the tube 4304.

[0223] FIGS. 55A-55D illustrate various views of the reducer tube 4304, including holes 5502 near a distal end thereof that receive the dowel pins 4700 of FIG. 47. Also shown is the drive feature 4312, threads 5514 that engage with the forceps 4302, and shelf 5516 that serves as a stop against further distal advancement of the reducer tube 4304 relative to the forceps 4302. FIGS. 56A and 56B illustrate different cross-sectional views of the reducing tube 4304.

[0224] FIGS. 57A-57G illustrate various views of the forceps body 4302, including the internal threads 5714 formed thereon and holes 5702 that receive the rotation pins 4320 of FIGS. 49A-49C to join the opposed forceps arms or jaws. FIGS. 58A and 58B illustrate cross-sectional views of the forceps body 4302. Also shown in these figures is a hole 5704 that can accommodate a pin 6102 (see FIGS. 61 and 68A-68C) that extends into the inner lumen of the forceps body 4302. This pin can, for example, be received within the groove 5208 formed in the rod-engaging tip 4310 to main-

tain its rotational position relative to the forceps body 4302 as the reducer tube 4304 is rotated to cause translation of the rod-engaging tip 4310. One or more of these holes can be formed in the forceps body 4302 (e.g., two opposing pins 6102 are shown in FIG. 61) and the pin can be secured in a number of manners, including use of adhesives, welding, other mechanical fastening, etc. Further, in some embodiments, a protrusion or other feature can be integrally formed with the body rather than inserting a pin through a hole.

[0225] These figures also illustrate a further hole 5706 formed in a distal end of the distal tip 4306 of the forceps. This hole can accommodate a pin 6104 (see FIGS. 61 and 67A-67C) that extends radially inward from the distal tip 4306 and can be received in, for example, a hole or bore formed in a receiver head of a bone screw in order to facilitate coupling between the distal tip 4306 of the forceps and the receiver head. One or more of these holes can be formed in the forceps body 4302 and the pin can be secured in a number of manners, including use of adhesives, welding, other mechanical fastening, etc. Further, in some embodiments, a protrusion or other feature can be integrally formed with the body rather than inserting a pin through a hole. And, as described above, in other embodiments different shapes, such as a shoulder or ridge, etc., can be utilized.

[0226] FIG. 59 illustrates one embodiment of proximal forceps handles 5900 including rings to accept user fingers and a ratchet lock. As noted above, a variety of different forceps handle shapes, whether including finger rings or not, can be utilized.

[0227] FIGS. 60A-60D, 61, and 62A-62D illustrate various views of the forceps body 4302 and proximal handles/finger rings 4314, which can be integrally formed or joined by any of a variety of techniques, including mechanical coupling with bolts, welding, adhesives, etc.

[0228] FIGS. 63A-63E and 64 illustrate various view of the forceps pivot arm 4303 that couples to the forceps body 4302 of FIGS. 60A-62D to form the opposed forceps jaws or arms. FIGS. 65A-67B illustrate various views of portions of the pivot arm 4303 of FIGS. 63A-64.

[0229] FIGS. 68A-68C illustrate various views of an implant locking pin 6104 that can be received within a bore 5706 of each distal forceps jaw or arm (e.g., as shown in FIGS. 60A-62D and 63A-67B). The locking pins 6104 can be configured to protrude from an inner surface of the forceps jaws and be received within a recess formed in a bone anchor receiver member to aid the forceps in locking to the receiver head.

[0230] FIGS. 69A-69C illustrate various views of an alignment pin 6102 that can be received within a bore 5704 formed in the forceps body, as shown in FIGS. 60A-62D. In the illustrated embodiment, these alignment pins 6102 can extend into longitudinal grooves 5208 formed in the sides of the rod-engaging tip 4310 (as shown in FIGS. 52A-54) to prevent the rod-engaging tip 4310 from rotating relative to the forceps body 4302 as it translates relative thereto when the reducer tube 4304 is rotated through the threads 5714 formed on an inner surface of the forceps body.

[0231] FIGS. 70-73B illustrate various views of proximal handles 7014, 7114, 7214, 7314 that can be used with the forceps reducers disclosed herein, including rings to accept user fingers for actuation and ratchet locks 7008, 7108, 7208, 7308 to maintain lateral reduction.

[0232] The instruments disclosed herein can be constructed from any of a variety of known materials. Exemplary materials include those which are suitable for use in surgical applications, including metals such as stainless steel, titanium, nickel, cobalt-chromium, or alloys and combinations thereof, polymers such as PEEK, ceramics, carbon fiber, and so forth.

[0233] The devices and methods disclosed herein can be used in minimally-invasive surgery and/or open surgery. While the devices and methods disclosed herein are generally described in the context of surgery on a human patient, it will be appreciated that the methods and devices disclosed herein can be used in any of a variety of surgical procedures with any human or animal subject, or in non-surgical procedures.

[0234] The devices disclosed herein can be designed to be disposed of after a single use, or they can be designed to be used multiple times. In either case, however, the device can be reconditioned for reuse after at least one use. Reconditioning can include any combination of the steps of disassembly of the device, followed by cleaning or replacement of particular pieces, and subsequent reassembly. In particular, the device can be disassembled, and any number of the particular pieces or parts of the device can be selectively replaced or removed in any combination. Upon cleaning and/or replacement of particular parts, the device can be reassembled for subsequent use either at a reconditioning facility, or by a surgical team immediately prior to a surgical procedure. Those skilled in the art will appreciate that reconditioning of a device can utilize a variety of techniques for disassembly, cleaning/replacement, and reassembly. Use of such techniques, and the resulting reconditioned device, are all within the scope of the present application.

[0235] The devices described herein can be processed before use in a surgical procedure. First, a new or used instrument can be obtained and, if necessary, cleaned. The instrument can then be sterilized. In one sterilization technique, the instrument can be placed in a closed and sealed container, such as a plastic or TY VEK bag. The container and its contents can then be placed in a field of radiation that can penetrate the container, such as gamma radiation, x-rays, or high-energy electrons. The radiation can kill bacteria on the instrument and in the container. The sterilized instrument can then be stored in the sterile container. The sealed container can keep the instrument sterile until it is opened in the medical facility. Other forms of sterilization known in the art are also possible. This can include beta or other forms of radiation, ethylene oxide, steam, or a liquid bath (e.g., cold soak). Certain forms of sterilization may be better suited to use with different portions of the device due to the materials utilized, the presence of electrical components, etc.

[0236] Further features and advantages based on the above-described embodiments are possible and within the scope of the present disclosure. Accordingly, the disclosure is not to be limited by what has been particularly shown and described. All publications and references cited herein are expressly incorporated herein by reference in their entirety, except for any definitions, subject matter disclaimers or disavowals, and except to the extent that the incorporated material is inconsistent with the express disclosure herein, in which case the language in this disclosure controls.

[0237] Examples of the above-described embodiments can include the following:

[0238] 1. A surgical instrument, comprising:

[0239] a first arm having a proximal end, a distal end, and a housing disposed therebetween, the housing including a threaded lumen defining a longitudinal axis;

[0240] a second arm having a proximal end and a distal end, the second arm pivotably coupled to the first arm;

[0241] a tube having a threaded outer surface portion disposed within the threaded lumen, a depth stop formed proximal to the threaded portion, and a drive feature at a proximal end of the tube configured to removably couple with a driver to impart torque to the tube; and

[0242] a rod-engaging tip rotatably coupled to a distal end of the tube;

[0243] wherein the first and second arms are configured to translate a spinal fixation element laterally toward the longitudinal axis when pivoted toward one another and the rod-engaging tip is configured to translate the spinal fixation element axially along the longitudinal axis when the tube is rotated relative to the housing.

[0244] 2. The instrument of example 1, wherein the depth stop defines a maximum outer diameter of the tube.

[0245] 3. The instrument of any of examples 1 to 2, wherein the depth stop is a shoulder formed around at least a portion of the circumference of the tube.

[0246] 4. The instrument of any of examples 1 to 3, wherein the lumen includes continuous threads formed around a circumference thereof.

[0247] 5. The instrument of any of examples 1 to 4, wherein an inner lumen of the tube is accessible from a proximal end of the tube through the drive feature.

[0248] 6. The instrument of example 5, wherein the rod-engaging tip includes an inner lumen coaxially disposed with the inner lumen of the tube.

[0249] 7. The instrument of any of examples 1 to 6, wherein the rod-engaging tip includes an opening formed in a distal portion of a sidewall to facilitate viewing contents of an inner lumen of the rod-engaging tip.

[0250] 8. The instrument of any of examples 1 to 7, wherein a distal end of at least one of the first and second arms includes a protrusion configured to extend into a recess of a bone anchor receiver member.

[0251] 9. The instrument of example 8, wherein the protrusion is a pin disposed in a bore formed in the distal end of at least one of the first and second arms.

[0252] 10. The instrument of example 8, wherein the protrusion is a ridge extending across a width of the arm.

[0253] 11. The instrument of any of examples 8 to 10, wherein the protrusion is disposed proximal to a distal-most end of the arm and an inner surface of the arm distal to the protrusion has a conical tapering profile.

[0254] 12. The instrument of example 11, wherein the inner surface of the arm includes sidewalls extending outward from the inner surface at lateral ends of the arm, and opposed, inward-facing surfaces of each sidewall have a planar tapering profile.

[0255] 13. The instrument of any of examples 1 to 12, further comprising a lock configured to selectively maintain a position of the first and second arms relative to one another.

[0256] 14 The instrument of example 13, wherein the lock is coupled to a proximal portion of one or more of the first and second arms, and a proximal end of the tube is disposed distal to the lock.

[0257] 15. A surgical method, comprising:

[0258] positioning a first arm of a reducer instrument against a bone anchor receiver member;

[0259] positioning a second arm of the reducer instrument against a spinal fixation element;

[0260] positioning a threaded outer surface portion of a tube of the reducer instrument within a threaded lumen formed in a housing of the first arm of the reducer instrument;

[0261] pivoting the first and second arms of the reducer instrument toward one another to translate the spinal fixation element laterally toward a longitudinal axis defined by the threaded lumen;

[0262] coupling a driver to a drive feature formed at a proximal end of the tube;

[0263] rotating the tube of the reducer instrument to translate the spinal fixation element axially along the longitudinal axis until a depth stop formed on the tube proximal to the threaded outer surface portion contacts the housing.

[0264] 16. The method of example 15, further comprising engaging a lock to maintain a position of the first and second arms relative to one another after pivoting the first and second arms toward one another.

[0265] 17. The method of any of examples 15 to 16, further comprising separating the driver from the proximal end of the tube after rotating the tube to translate the spinal fixation element axially.

[0266] 18. The method of example 17, further comprising inserting a set screw through an inner lumen of the tube and coupling the set screw with the receiver member.

[0267] 19. The method of example 18, further comprising visually inspecting the set screw while coupled to the receiver member using an opening formed in a distal portion of a sidewall of rod-engaging tip coupled to the tube.

[0268] 20. A surgical instrument, comprising:

[0269] a first arm having a proximal end, a distal end, and a housing disposed therebetween, the housing including a lumen defining a longitudinal axis, the lumen having continuous threads formed around a circumference thereof;

[0270] a second arm having a proximal end and a distal end, the second arm pivotably coupled to the first arm;

[0271] a tube having a threaded outer surface portion disposed within the lumen;

[0272] a rod-engaging tip rotatably coupled to a distal end of the tube, the rod-engaging tip being constrained against rotation relative to the housing by a protrusion coupled to the housing that is received in a recess of the rod-engaging tip;

[0273] wherein the first and second arms are configured to translate a spinal fixation element laterally toward the longitudinal axis when pivoted toward one another and the rod-engaging tip is configured to translate the spinal fixation element axially along the longitudinal axis when the tube is rotated relative to the housing.

[0274] 21 The instrument of example 20, wherein the threads on the outer surface portion of the tube have a plurality of starts.

[0275] 22. The instrument of example 21, wherein the threads on the outer portion of the tube have three starts.

[0276] 23. The instrument of any of examples 20 to 22, wherein an outer diameter of the threaded outer surface portion of the tube is less than or equal to about 45% larger than a diameter of an inner lumen of the tube.

[0277] 24. A surgical instrument, comprising:

[0278] opposed arms pivotably coupled to one another;

[0279] a tube threadably coupled to the opposed arms; and

[0280] a rod-engaging tip rotatably coupled to the tube;

[0281] wherein the opposed arms are configured to laterally translate a spinal fixation element when pivoted toward one another and the rod-engagement tip is configured to axially translate the spinal fixation element when the tube is rotated relative to the opposed arms and the rod-engagement tip.

[0282] 25. The instrument of example 24, wherein one of the opposed arms includes a housing having a threaded lumen formed therein.

[0283] 26. The instrument of example 25, wherein the tube includes external threads formed thereon that interface with the threaded lumen of the body.

[0284] 27. The instrument of example 26, wherein the external threads formed on the tube include a plurality of starts.

[0285] 28. The instrument of example 27, wherein the external threads formed on the tube include three starts.

[0286] 29. The instrument of any of examples 26 to 28, wherein an outer diameter of the external threads of the tube is less than or equal to about 45% larger than a diameter of an inner lumen of the tube.

[0287] 30 The instrument of any of examples 26 to 29, wherein the tube includes a depth stop formed proximal to the external threads.

[0288] 31 The instrument of example 30, wherein the depth stop defines a maximum outer diameter of the tube.

[0289] 32 The instrument of any of examples 30 to 31, wherein the depth stop is a shoulder formed around at least a portion of the circumference of the tube.

[0290] 33. The instrument of any of examples 25 to 32, wherein the threaded lumen includes continuous threads formed around a circumference thereof.

[0291] 34 The instrument of any of examples 25 to 33, wherein the housing includes a protrusion received within a recess of the rod-engaging tip to constrain the rod-engaging tip against rotation relative to the housing.

[0292] 35. The instrument of any of examples 24 to 34, wherein the opposed arms include opposed proximally-extending handles for user actuation.

[0293] 36 The instrument of any of examples 24 to 35, wherein the opposed arms include a lock to maintain their relative position.

[0294] 37 The instrument of example 36, wherein the lock includes a ratchet.

[0295] 38. The instrument of example 37, wherein the ratchet is offset from a longitudinal axis of the tube.

[0296] 39. The instrument of any of examples 36 to 38, wherein the lock is coupled to a proximal portion of one or more of the opposed arms, and a proximal end of the tube is disposed distal to the lock.

[0297] 40. The instrument of any of examples 24 to 39, wherein the tube includes a drive feature formed at a proximal end thereof to facilitate rotation of the tube.

[0298] 41. The instrument of example 40, wherein an inner lumen of the tube is accessible from a proximal end of the tube through the drive feature.

[0299] 42. The instrument of any of examples 24 to 41, wherein the tube includes an inner lumen and the rod-engaging tip includes an inner lumen that is coaxial with the inner lumen of the tube.

[0300] 43. The instrument of any of examples 24 to 42, wherein the rod-engaging tip includes an opening formed in a distal portion of a sidewall to facilitate viewing contents of an inner lumen of the rod-engaging tip.

[0301] 44. The instrument of any of examples 24 to 43, wherein a distal end of at least one of the opposed arms includes an engagement feature configured to interface with a complementary feature of a bone anchor receiver member.

[0302] 45. The instrument of example 44, wherein the engagement feature includes a protrusion configured to extend into a recess of a bone anchor receiver member.

[0303] 46. The instrument of example 45, wherein the protrusion is a pin disposed in a bore formed in the distal end of the arm.

[0304] 47. The instrument of example 45, wherein the protrusion is a ridge extending across a width of the arm.

[0305] 48. The instrument of any of examples 44 to 47, wherein the engagement feature is disposed proximal to a distal-most end of the arm and an inner surface of the arm distal to the protrusion has a conical tapering profile.

[0306] 49. The instrument of example 48, wherein the inner surface of the arm includes sidewalls extending outward from the inner surface at lateral ends of the arm, and opposed, inward-facing surfaces of each sidewall have a planar tapering profile.

[0307] 50. A surgical method, comprising:

[0308] positioning a first arm of a reducer instrument against a bone anchor receiver member;

[0309] positioning a second arm of the reducer instrument against a spinal fixation element;

[0310] pivoting the first and second arms of the reducer instrument toward one another to laterally translate the rod toward the receiver member;

[0311] rotating a tube of the reducer instrument to axially translate the spinal fixation element toward the receiver member.

[0312] 51. The method of example 50, further comprising inserting a set screw through a lumen formed in the tube and coupling the set screw to the receiver member.

[0313] 52. The method of example 51, further comprising visually inspecting the set screw while coupled to the receiver member using an opening formed in a distal portion of a sidewall of a rod-engaging tip coupled to the tube.

[0314] 53. The method of any of examples 50 to 52, further comprising locking a position of the first and second arms relative to one another.

[0315] 54. The method of any of examples 50 to 53, further comprising positioning a threaded outer surface portion of the tube within a threaded lumen formed in a housing coupled to one or more of the first arm and the second arm.

[0316] 55. The method of example 54, wherein rotating the tube is continued until a depth stop formed on the tube proximal to the threaded outer surface portion contacts the housing.

[0317] 56. The method of any of examples 50 to 55, further comprising coupling a driver to a drive feature

formed at a proximal end of the tube prior to rotating the tube to axially translate the spinal fixation element.

[0318] 57. The method of example 56, further comprising separating the driver from the proximal end of the tube after rotating the tube to axially translate the spinal fixation element.

[0319] 58. The method of any of examples 50 to 57, further comprising engaging a lock to maintain a position of the first and second arms relative to one another after pivoting the first and second arms toward one another.

What is claimed is:

1. A surgical instrument, comprising:

a first arm having a proximal end, a distal end, and a housing disposed therebetween, the housing including a threaded lumen defining a longitudinal axis;

a second arm having a proximal end and a distal end, the second arm pivotably coupled to the first arm;

a tube having a threaded outer surface portion disposed within the threaded lumen, a depth stop formed proximal to the threaded portion, and a drive feature at a proximal end of the tube configured to removably couple with a driver to impart torque to the tube; and a rod-engaging tip rotatably coupled to a distal end of the tube;

wherein the first and second arms are configured to translate a spinal fixation element laterally toward the longitudinal axis when pivoted toward one another and the rod-engaging tip is configured to translate the spinal fixation element axially along the longitudinal axis when the tube is rotated relative to the housing.

2. The instrument of claim 1, wherein the depth stop defines a maximum outer diameter of the tube.

3. The instrument of claim 1, wherein the depth stop is a shoulder formed around at least a portion of the circumference of the tube.

4. The instrument of claim 1, wherein the lumen includes continuous threads formed around a circumference thereof.

5. The instrument of claim 1, wherein an inner lumen of the tube is accessible from a proximal end of the tube through the drive feature.

6. The instrument of claim 5, wherein the rod-engaging tip includes an inner lumen coaxially disposed with the inner lumen of the tube.

7. The instrument of claim 1, wherein the rod-engaging tip includes an opening formed in a distal portion of a sidewall to facilitate viewing contents of an inner lumen of the rod-engaging tip.

8. The instrument of claim 1, wherein a distal end of at least one of the first and second arms includes a protrusion configured to extend into a recess of a bone anchor receiver member.

9. The instrument of claim 8, wherein the protrusion is a pin disposed in a bore formed in the distal end of at least one of the first and second arms.

10. The instrument of claim 8, wherein the protrusion is a ridge extending across a width of the arm.

11. The instrument of claim 8, wherein the protrusion is disposed proximal to a distal-most end of the arm and an inner surface of the arm distal to the protrusion has a conical tapering profile.

12. The instrument of claim 11, wherein the inner surface of the arm includes sidewalls extending outward from the

inner surface at lateral ends of the arm, and opposed, inward-facing surfaces of each sidewall have a planar tapering profile.

**13.** The instrument of claim **1**, further comprising a lock configured to selectively maintain a position of the first and second arms relative to one another.

**14.** The instrument of claim **13**, wherein the lock is coupled to a proximal portion of one or more of the first and second arms, and a proximal end of the tube is disposed distal to the lock.

**15.** A surgical method, comprising:

positioning a first arm of a reducer instrument against a bone anchor receiver member;

positioning a second arm of the reducer instrument against a spinal fixation element;

positioning a threaded outer surface portion of a tube of the reducer instrument within a threaded lumen formed in a housing of the first arm of the reducer instrument;

pivoting the first and second arms of the reducer instrument toward one another to translate the spinal fixation element laterally toward a longitudinal axis defined by the threaded lumen;

coupling a driver to a drive feature formed at a proximal end of the tube;

rotating the tube of the reducer instrument to translate the spinal fixation element axially along the longitudinal axis until a depth stop formed on the tube proximal to the threaded outer surface portion contacts the housing.

**16.** The method of claim **15**, further comprising engaging a lock to maintain a position of the first and second arms relative to one another after pivoting the first and second arms toward one another.

**17.** The method of claim **15**, further comprising separating the driver from the proximal end of the tube after rotating the tube to translate the spinal fixation element axially.

**18.** The method of claim **17**, further comprising inserting a set screw through an inner lumen of the tube and coupling the set screw with the receiver member.

**19.** The method of claim **18**, further comprising visually inspecting the set screw while coupled to the receiver member using an opening formed in a distal portion of a sidewall of a rod-engaging tip coupled to the tube.

**20.** A surgical instrument, comprising:

a first arm having a proximal end, a distal end, and a housing disposed therebetween, the housing including a lumen defining a longitudinal axis, the lumen having continuous threads formed around a circumference thereof;

a second arm having a proximal end and a distal end, the second arm pivotably coupled to the first arm;

a tube having a threaded outer surface portion disposed within the lumen;

a rod-engaging tip rotatably coupled to a distal end of the tube, the rod-engaging tip being constrained against rotation relative to the housing by a protrusion coupled to the housing that is received in a recess of the rod-engaging tip;

wherein the first and second arms are configured to translate a spinal fixation element laterally toward the longitudinal axis when pivoted toward one another and the rod-engaging tip is configured to translate the spinal fixation element axially along the longitudinal axis when the tube is rotated relative to the housing.

**21.** The instrument of claim **20**, wherein the threads on the outer surface portion of the tube have a plurality of starts.

**22.** The instrument of claim **21**, wherein the threads on the outer portion of the tube have three starts.

**23.** The instrument of claim **20**, wherein an outer diameter of the threaded outer surface portion of the tube is less than or equal to about 45% larger than a diameter of an inner lumen of the tube.

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