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FEATURES AND BENEFITS

locking set screws to provide an efficient and secure top-loading, rigid fixation.
Set Screw available in standard and cap with cap screw configuration to be used with crosslink
Straight and transition rods available
Polyaxial screw angulation ± 30°
Self-tapping screws with a pitch distance of 1.7 mm
Trilobe Drive Feature for increased torque
Tulip height 10.6mm for a low profile construct

SPECIFICATIONS

RENOIR™ Polyaxial Screws: 3.5mm Diameter		
Part Number	Length (mm)	
012.1408	8	
012.1410	10	
012.1412	12	
012.1414	14	
012.1416	16	
012.1418	18	
012.1420	20	
012.1422	22	
	*longer screws available upon request	

*longer screws available upon reques

RENOIR TM Polyaxial S	Screws: 4.0n	nm Diameter
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Part Number	Length (mm)
012.1510	
012.1512	
012.1514	
012.1516	
012.1518	
012.1520	
012.1522	
012.1524	

*longer screws available upon request

RENOIR™ Lamina Hooks: 3.5 Diameter

KEITOIK	Edillila 1100ks. 0.	e Blameter
Part Number	Angle	Length (mm)
012.1816		16
012.1826		17
012.1836	Left	18

			Connec	
K F	1 K 1 1 A I	roce	Connec	tore

Size	Length (mm)
Small	30
Medium	
Large	

RENOIR™ Straight Rods: 3.5mm Diameter			
Part Number	Length (mm)		
012.1030	30		
012.1040	40		
012.1050	50		
012.1060	60		
012.1070			
012.1080			
012.1090			
012.1100			
012.1120			
012.1200			
012.1240	240		

RENOIR™ Transition Ro	ds: 3.5 - 5.5mm Diameter
Part Number	Туре
	Transition Rod, D3.5 x L150, D5.5 x L150mm
012.0400	Transition Rod, D3.5 x L200, D5.5 x L200m

RENOIR™ Set Screws	
Part Number	Length (mm)
012.1404	Set Screw, Star, OD7 xL3.7mm
012.1405	Set Screw, Cap Head, Star, OD7 x L3.5mm

POSITIONING & PREPARATION

PATIENT POSITIONING

SITE PREPERATION

01. Make an incision on the mid-line preforming routine dissection to expose the vertebrae to be fused.

SCREW HOLE PREPERATION

- 01. Penetrate the cortical bone to initiate an entry point using the Awl (100.7020 Awl, Cervical with Sleeve). Note: The Awl depth stop is 10mm.
- O2. The RENOIR™ Posterior Cervico-Thoracic Fixation System screws are self-tapping. If pre-tapping is desired, connect the appropriate diameter Tap to the Quick Coupling Handle. Align the Drill Guide with the desired trajectory for screw insertion. Proceed to tap to desitred depth

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POSITIONING & PREPARATION, Cont.

- O3. A Straight Probe (015.7022 Probe, Straight) or a Curved Probe (015.7021 Probe, Curved) may be used to extend preperation hole to the bone. A ball tip Straight Tester (012.7034 Tester, Straight) or Curved Tester (012.7035 Tester, Curved) may be used to confirm the integrety of the bone hole.
- **04.** Select the drill bit of the appropriate length. Attach the Drill Bit to the Straight Handle with Rotary Cap.

Note: Each Drill has a limit stop coinciding with the drill bit depth of 12 or 14mm.

05. The Testers may be used to verify that the walls of the prepared pedicle pathway are not compromised.

USING THE ADJUSTABLE DRILL GUIDE

- O1. The Adjustable Drill Guide (012.7009 Drill Guide Adjustable Depth) may be used to ensure driver depth. Pull down the tapered sleeve to release the ratchet.
- **02.** Adjust the drill stop until the appropriate depth is indicated.
- **03**. Release the sleeve to lock the drill guide at the appropriate depth.
- O4. Ensure that the ratchet is fully engaged by pressing the drill stop.
- O5. Attach the drill bit to the Straight Handle with Rotary Cap, AO Small QC (100.2011 Straight Handle with Rotary Cap, AO Small QC) and insert the assembly through the drill guide.
- 06. Drill to stop.

Note: The Depth Gauge (100.7101 Depth Gauge, Straight Tip, 0.66mm Depth) may be used to verify depth.

SCREW INSERTION

SCREW DRIVER ASSEMBLY

- O1. Connect the Poly Screw Driver (012.7041 Driver, Polyaxial) to the Handle ().
- Select the desired Polyaxial screw size and thread the Poly Screw Driver into screw housing.
- **03.** Tighten the outer sleeve of the Poly Screw Driver until the screw housing is secured on the driver.

SCREW INSERTION

- Insert the screw down the hole previously created confirming the desired trajectory using the Poly screwdriver.
- **02.** Remove the Poly screwdriver by turning the sleeve counterclockwise to disengage from the screw housing.
- 03. Remove Driver by pulling straight out of screw housing.

Note: As an option use the Quick Screw Driver for fine tuning screw depth.

SCREW HEAD ALIGNMENT

O1. Align the heads of the screws with the Alignment Tool/Rod Pusher (012.7051 Alignment Tool/Rod Pusher) so that the saddles of the screws line up for rod placement.

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ROD INSERTION

ROD CONTOURING

- **01.** RENOIR™ Posterior Cervico-Thoracic Fixation System contains straight rods. If contouring is desired, use the Rod Bender (012.7063 Rod Bender).
- **02.** Place the rod within the Rod Bender and squeeze the handles to achieve desired curvature.

Note: Optionally, a pair of In-Situ Benders is availiable.

O3. If a pre-cut rod needs further trimming, a Rod Cutter (012.7062 Rod Cutter) can be used to cut the rod to an appropriate length.

ROD PLACEMENT

- O4. Insert the rod by grasping it with the Rod Holder (012.7061 Rod Holding Forcepts).
- **05.** Place the rod so that it fits uniformly within the implants.

ROD REDUCTION

06. Use the Alignment Tool/Rod Pusher to secure the rod into the screw housing prior to set screw insertion.

SET SCREW INSERTION

SET SCREW INSERTION

01. The Anti-Torque Device can be used to place the set screw down the barrel of the Anti-Torque Device (012.7073 Anti-Torque Tool) directly onto the screw. Alternatively, insert set screw using the Set Screw Driver (012.7071 Driver, Set Screw, Star) through the Persuader (012.7067 Rod Persuader).

Note: Alternatively, the RENOIR™ Posterior Cervico-Thoracic Fixation System has a rod fork to reduce the rod and can be used in the set screw insertion process.

COMPRESSION AND DISTRACTION

COMPRESSION

- O1. In the event compression is needed, the compressor (012.7081 Compressor) can be placed outside of two parallel screw headbodies.
- **02.** Squeeze the Instruments handles until desired compression is achieved then remove.

DISTRACTION

- 03. In the event distraction is needed, the distractor (012.7082 Distractor) can be placed inside of two parallel screw headbodies.
- **04.** Squeeze the Instruments handles until desired compression is achieved then remove.

PLACING CROSS CONNECTORS

CROSS CONNECTOR CONSTRUCT

- **01.** Use the Holder, Cross Connector to hold the cross connector firmly.
- 02. The Hex Socket Driver, 6.0 (012.7013 Hex Socket Driver, 6.0) is used to lock the desired length of the cross-link.

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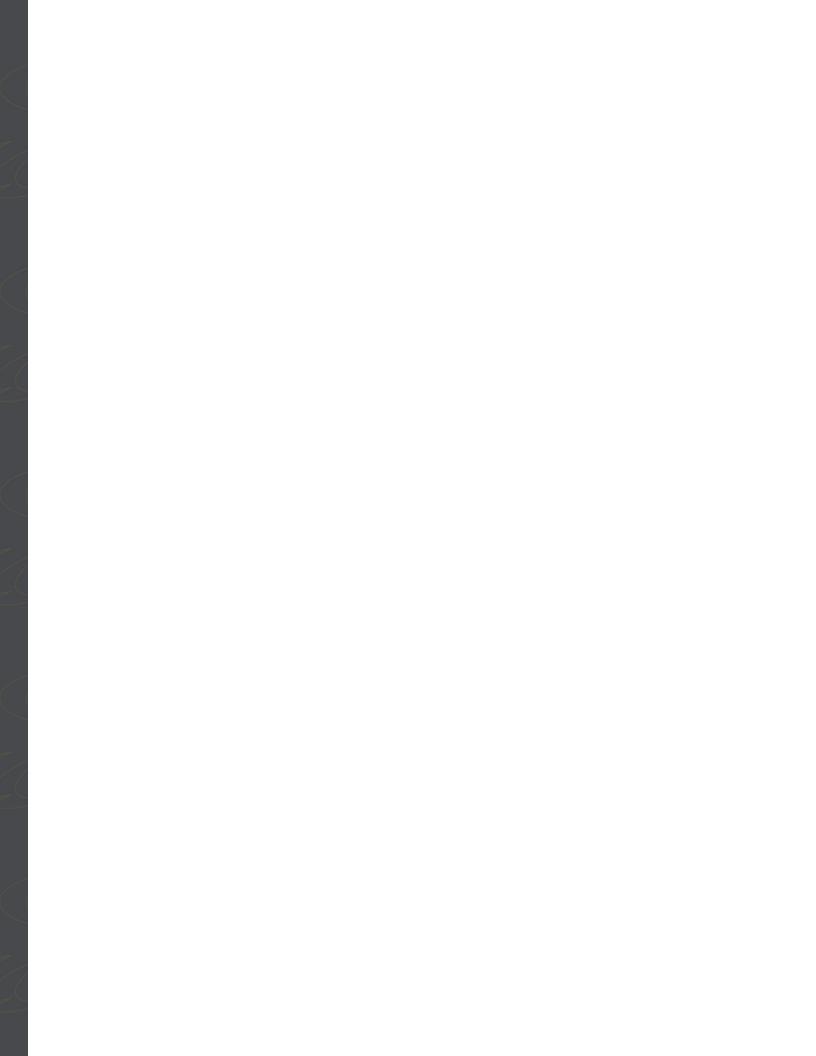
FINAL TIGHTENING

SET SCREW FINAL TIGHTENING

- In order to tighten the set screw, the Anti-Torque tool is used with the Driver, Torque Limiter, 3 N-m (012.7072 Driver, Torque Limiter, 3 N-m).
- **02.** Thread final tightener through and turn clockwise until final tightening is achieved.

CAP SCREW FINAL TIGHTENING

- O1. In order to tighten the cap screw for the cross connect, the Counter Torque, Cross Connector is used with the Driver, Torque Limiter, 3 N-m (012.7102 Counter Torque, Cross Connector).
- **02.** Thread final tightener through and turn clockwise until final tightening is achieved.



INSTRUMENTATION

INSERTERS

Part Number	Description
128.7294	TLIF Cage Inserter W9 (Must be used with part 017.7292.10 -Draw Screw,
128.7295	TLIF Cage Insert W 11 (Must be used with part 017.7292.10 -Draw Screw
017.7292.10	Draw Screw (Inserter Inner Shaft)

INSTRUCTIONS FOR USE

PRODUCT DESCRIPTION

Enter IFU Description

INDICATIONS

Enter IFU Indications

CONTRAINDICATIONS

• Enter IFU Contraindications

WARNING(S)

• Enter IFU Warnings

PRECAUTIONS

Enter IFU Precautions

For full Instructions For Use, please refer to the associated IFU. Please visit www.CTLAmedica.com, contact our customer service department or your sales representative for the most current revision of our IFU for indications, warnings, precautions and other essential medical information.

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RENOIR™ POSTERIOR CERVICO-THORACIC FIXATION SYSTEM

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NOTES	



Disclaimer: This document is intended for use by physicians. Information contained within this document regarding procedures and product are of a general nature, and does not represent medical advice or recommendations. Because this information does not purport to constitute any diagnostic or therapeutic statement with regard to any individual medical case, each patient must be examined and advised individually, and this document does not replace the need for such examination and/or advice in whole or part.

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