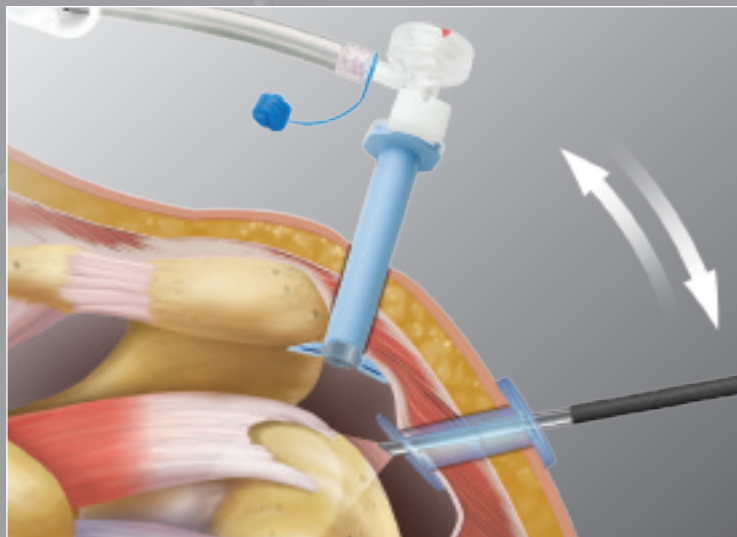
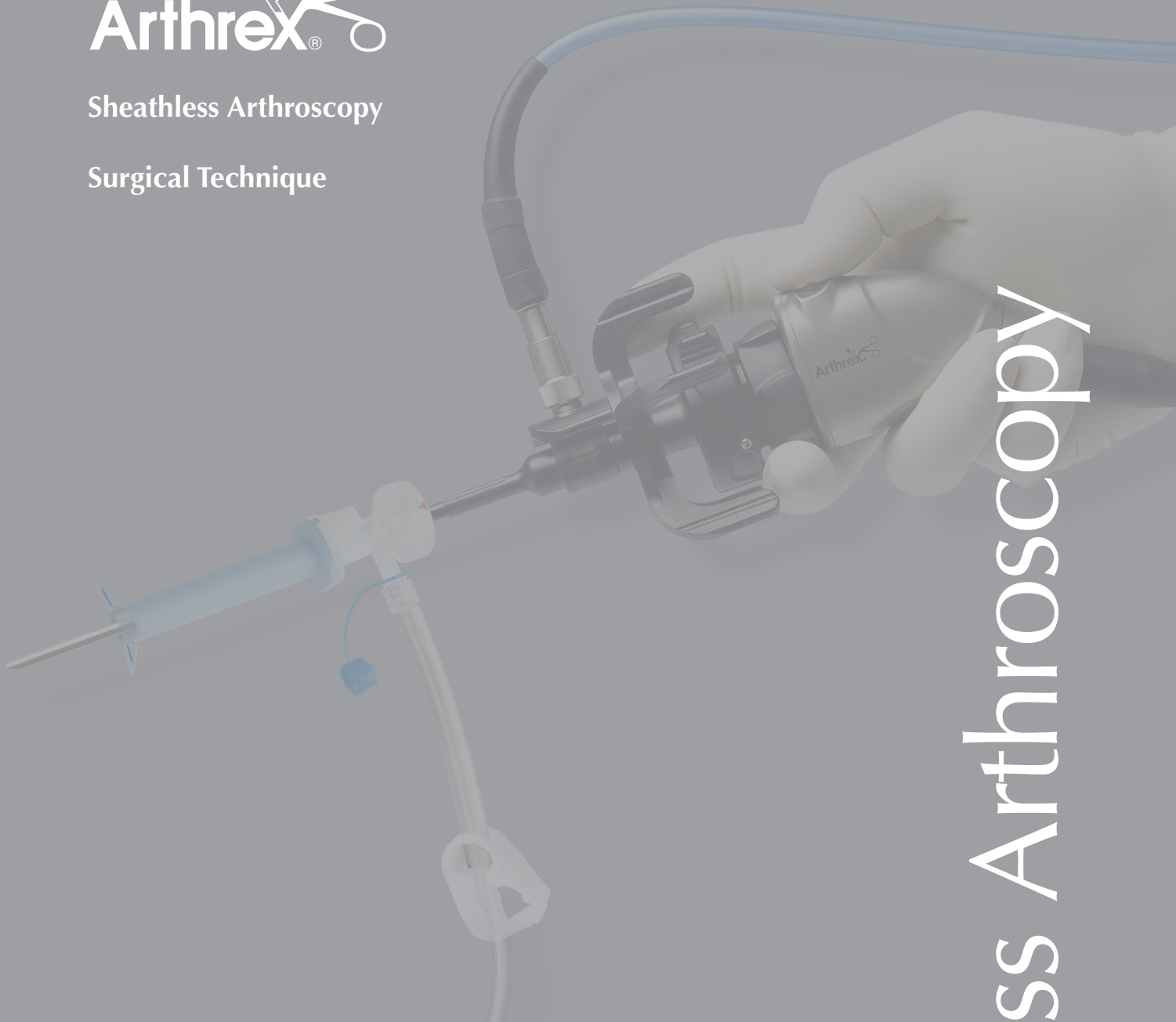




Sheathless Arthroscopy

Surgical Technique



Sheathless Arthroscopy

Sheathless Arthroscopy in the Shoulder

Gemini SR8 Cannula
HD Sheathless Arthroscope
Synergy^{HD3} Camera Head

The Sheathless Arthroscopy Technique improves accessibility and visibility while increasing fluid management and conservation.

The technique will also ease the transition during viewing portal changes without "red-out."

Benefits

Improved Scope Design

The Sheathless Arthroscope has a reinforced stainless steel shaft for additional strength, eliminating the need of a bulky outer inflow sheath. The smooth, round tip prevents inadvertent damage to the hyaline cartilage surface. The recessed, scratch-resistant sapphire lens tip reduces the risk of damage from ablation and resection instruments.

Improved access:

The standard arthroscope has a 4 mm diameter and the standard high flow arthroscope sheath has a 6 mm diameter. By removing the sheath, the surgeon decreases the scope diameter by an additional 2 mm.

Improved fluid management:

By using working cannulas, the joint space is better enclosed, resulting in less portal leakage.

Improved joint distention:

By limiting portal leakage and by having a larger diameter through which to inflow fluid, joint space distention is maximized, resulting in easier maintenance of hemostasis and joint distention without fluid turbulence. Attaching the inflow directly to the arthroscopic cannula allows for an uninterrupted inflow and constant joint distention.

Changing viewing portals:

Once arthroscopic cannulas are in place, viewing portal transition can be easily accomplished by moving the arthroscope from one cannula to the next without the use of a Switching Stick or bridge cannula system.

Note: This technique is designed for use with an Arthrex ONLY Sheathless Arthroscope. Care should still be taken to protect the arthroscope from bending or breakage during the procedure.

**James Bradley, MD,
Pittsburgh, PA**

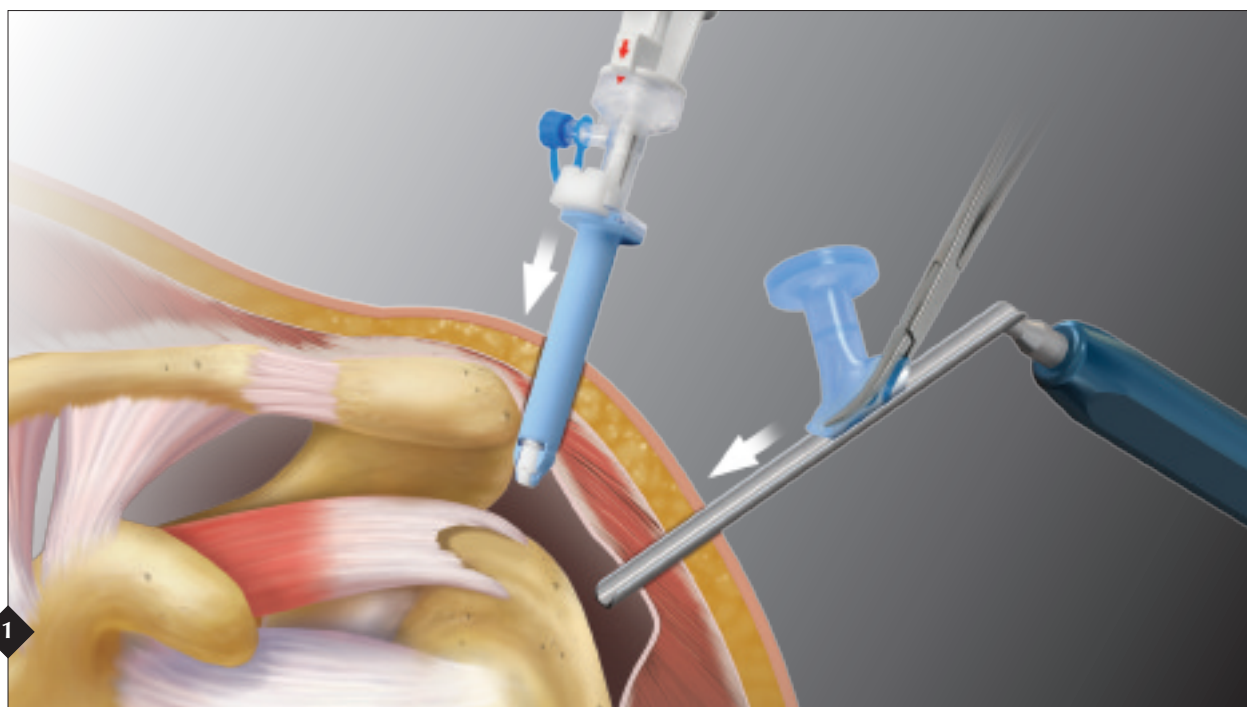
"I use the sheathless arthroscopy technique in the shoulder to view pathology from multiple angles.

I place an 8.25 mm Gemini SR Cannula anterior and a 6 mm PassPort Button Cannula posterior. This allows me to quickly and accurately assess the best approach.

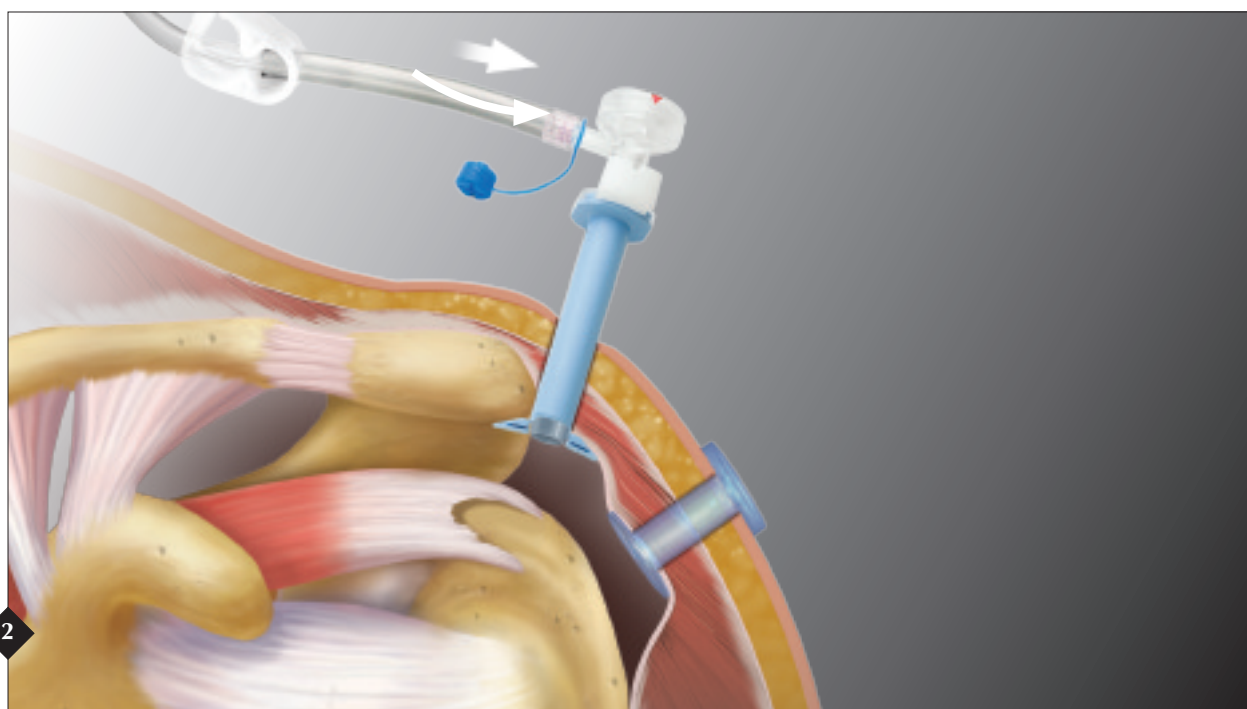
The durability of the Synergy arthroscopes also allows me to use this technique to improve access into tight joint spaces including elbows and ankles.



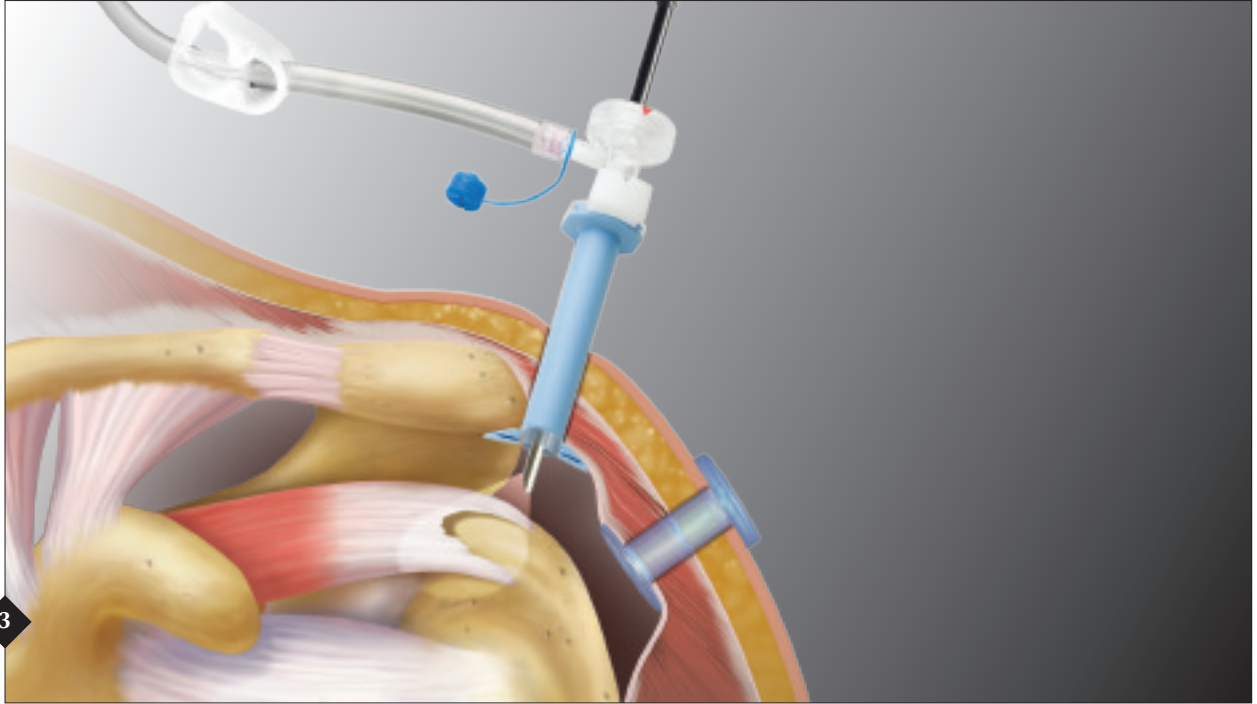
DualWave
Arthroscopy Pump



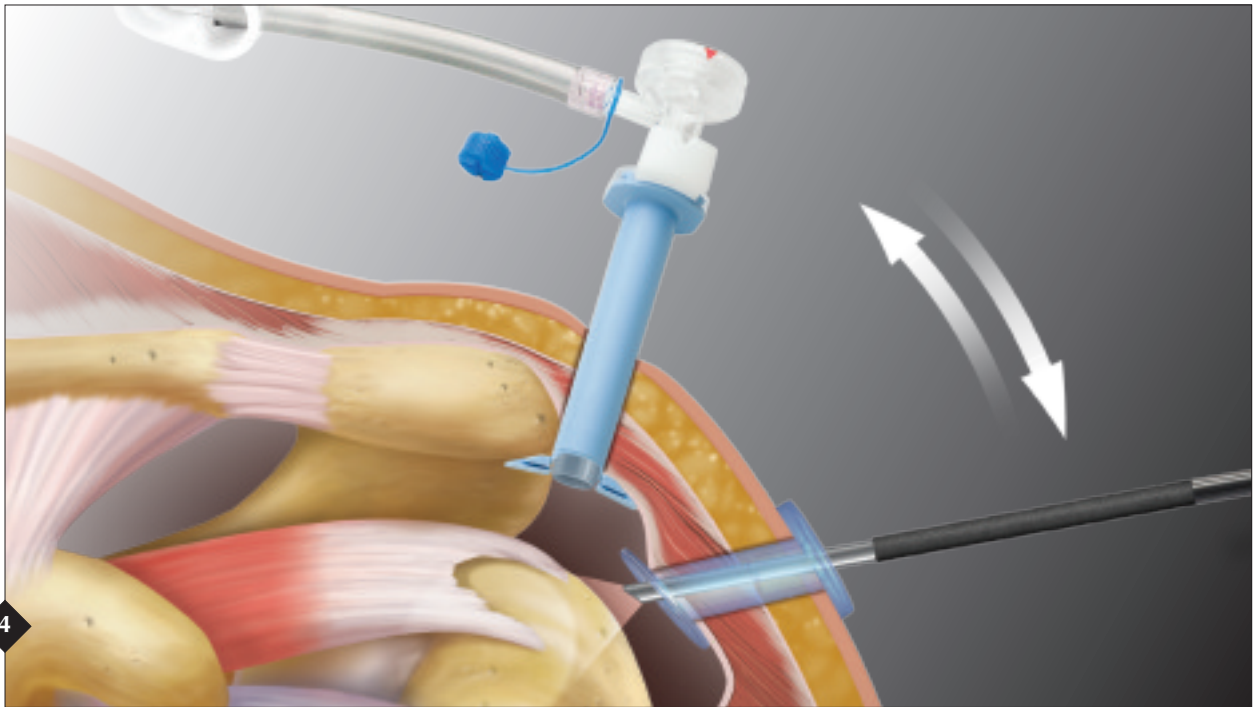
Insert arthroscopic cannulas into the viewing portals of choice. In this representation, an Arthrex PassPort Button Cannula has been placed laterally and a Gemini SR8 has been placed superior-laterally.



Attach the DualWave Arthroscopy Pump inflow tubing to the Gemini SR8 arthroscopic cannulas. Generally the larger cannula is preferred, to allow maximum unimpeded inflow. Attach backflow cap to optimize fluid pressure control.



Insert the sheathless Synergy 4 mm diameter arthroscope through either arthroscopic cannula.



The arthroscope can be moved between viewing portals without the need for a bridge cannula or Switching Stick. "Red-out" is avoided during arthroscope portal exchanges because distention is maintained throughout this process.

This description of technique is provided as an educational tool and clinical aid to assist properly licensed medical professionals in the usage of specific Arthrex products. As part of this professional usage, the medical professional must use their professional judgment in making any final determinations in product usage and technique. In doing so, the medical professional should rely on their own training and experience and should conduct a thorough review of pertinent medical literature and the product's Directions For Use.



U. S. PATENT NOS. 6,716,234; 6,991,636; 7,329,272 and PATENT PENDING
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