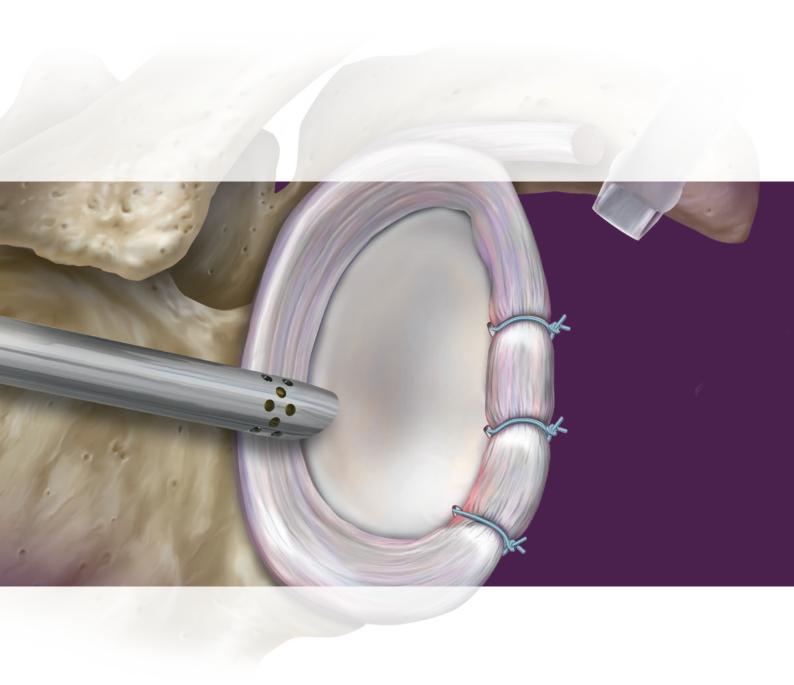
SutureTak® — Bankart and SLAP Repair

Surgical Technique





The SutureTak implant system simplifies anchor insertion using a guide to prepare a pilot hole precisely on the glenoid rim. The drill is removed and the implant is inserted through the same guide, creating a simple reproducible technique.

TigerTail® Suture

Two distinct strands on one length of FiberWire simplify suture management. The patented molded-in suture eyelet optimizes suture-on-suture sliding and eliminates the need to orient the flexible anchor eyelet during insertion.

45 40 35 35.1 30 Load-to-Failure (lbf) 25 20 15 10 5 0 2 mm 2.4 mm 3 mm

SutureTak® Ultimate Pull-Out Strength*

*Data on file



SutureTak® Suture Anchor | 2 mm x 12 mm

BioComposite	
#1 FiberWire®	AR- 1934BCF-20
PEEK	
#1 FiberWire®	AR- 1934PF-20

SutureTak® Suture Anchor | 2.4 mm x 12 mm

BioComposite	
#2 FiberWire®	AR- 1934BCF-24
#2 FiberWire®, qty. 2	AR- 1934BCF-24-2
PEEK	
#2 FiberWire®	AR- 1934PF-24

SutureTak® Suture Anchor | 3 mm x 14 mm

BioComposite	
#2 FiberWire®	AR- 1934BCF
#2 TigerTail®	AR- 1934BCFT
#2 FiberWire®, qty. 2	AR- 1934BCF-2
#2 TigerTail®, qty. 2	AR- 1934BCFT-2

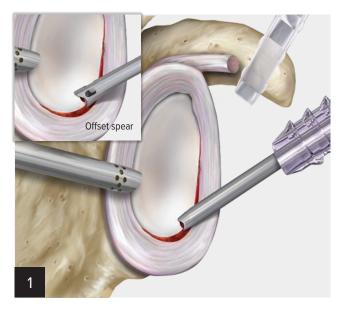
PEEK | 3 mm x 14 mm

#2 FiberWire®	AR- 1934PS
#2 FiberWire®, qty. 2	AR- 1934PS-2

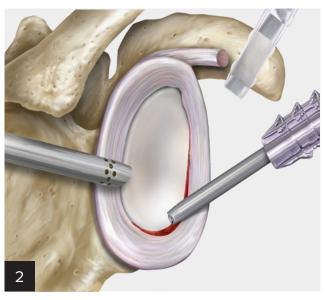
Actual Sizes



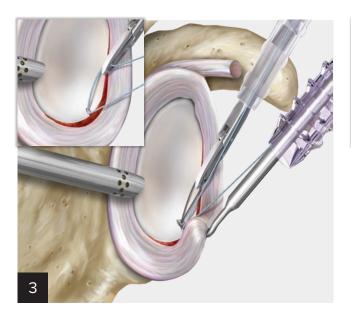




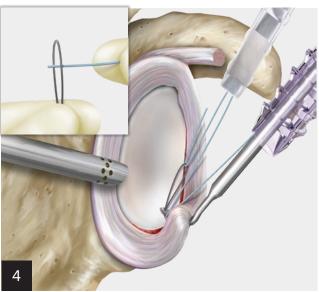
A tissue elevator is used to mobilize the labrum. Create a bleeding bed using a glenoid rasp or mechanical shaver to enhance tissue healing to bone. Pass the spear through the cannula and place it on the glenoid rim. Create a bone socket for the anchor by advancing the drill through the spear until its collar contacts the spear's handle. If desired, an offset spear can be used to place the SutureTak anchor 1.5mm onto the face of the glenoid to help create a larger labral bumper.



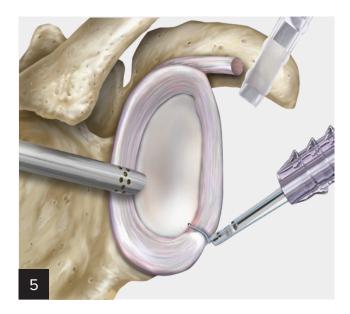
Insert the anchor through the spear and into bone by gentle impaction until the laser line on the handle end of the inserter is flush with the back of the guide. If no laser line is visible, impact the anchor until the driver handle contacts the handle of the spear. Release the cleated sutures and remove the inserter handle and spear.



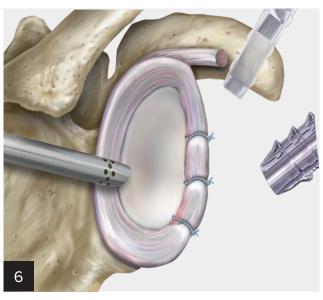
Retrieve one limb of suture through the anterosuperior portal using a KingFisher. Insert a curved SutureLasso (right curve for right shoulder) into the anteroinferior cannula and pass it through the capsulolabral tissue inferior to the anchor. Advance the nitinol wire loop into the joint. Retrieve the wire loop through the anterosuperior portal using a KingFisher.



Load the suture through the nitinol wire loop. Retract the wire loop through the SutureLasso to pull the suture to the distal end of the SutureLasso inside the joint. Remove the SutureLasso and wire loop together to shuttle the suture through the labral tissue.

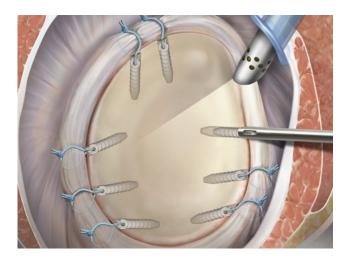


The suture eyelet of the SutureTak facilitates ease of suture sliding through tissue and anchor, necessary for securing sliding knots. Alternating half-hitch or sliding knot tying, using the 6th finger knot pusher or singlehole knot pusher, provides multiple options for knot tying.



A suture cutter, specially designed to cut FiberWire, is used to cut the excess suture, leaving a 3 mm tail.

Precise Anchor Placement Using the Percutaneous Insertion Kits





Insert 17-gauge spinal needle to precisely locate any portal. Introduce a 1.1 mm guide wire through the needle.



Insert portal dilator over the guide wire then a spear over the dilator. Drill a bone socket and tap in the anchor.



AR-1934PI-20 | 2 mm Set Includes

- 17-gauge spinal needle
- 1.1 mm guide wire
- Portal dilator
- 2 mm SutureTak drill and hard bone drill
- Disposable spear | 2.9 mm OD



AR-1934PI | 2.4 mm Set Includes

- 17-gauge spinal needle
- 1.1 mm guide wire
- Portal dilator
- 2.4 mm SutureTak drill
- Disposable spear | 3.25 mm OD



AR-1934PI-30 | 3 mm Set Includes

- 17-gauge spinal needle
- 1.1 mm guide wire
- Portal dilator
- 3 mm SutureTak drill
- Disposable spear | 4.5 mm OD

Ordering Information

2 mm Mini SutureTak®

Product Description	Item Number
Required Instruments	
2 mm SutureTak® spear, trocar and blunt obturator	AR- 1986
2 mm SutureTak® drill	AR- 1934D-20
2 mm SutureTak® drill, hard bone	AR- 1934D-20-1
Optional Instruments	
2mm SutureTak® disposables kit	AR- 1934-20DS
(includes: disposable spear, trocar and both drills)	

2.4 mm SutureTak®

Product Description	Item Number
Required Instrumentation Set (AR-1934-24S) Includes	
2.4 mm SutureTak® spear, trocar, and blunt obturator	AR- 1948
2.4 mm SutureTak® drill	AR- 1934D-24
SutureTak® instrumentation case	AR- 1934-24C
Optional Instruments	
2.4 mm SutureTak® disposable spear, trocar tip obturator	AR- 1945S
2.4 mm SutureTak® drill, for hard bone	AR- 1934D-24-1
2.4 mm SutureTak® drill, for very hard bone	AR- 1934D-24-2
2.4mm SutureTak® disposables kit (includes: AR- 1945S and AR- 1934D-24)	AR-1934- 24DS
2.4 mm SutureTak® offset guide	AR- 1948R
2.4 mm SutureTak® five o'clock guide, trocar and blunt obturator	AR- 1948-5G
2.4 mm SutureTak® spear with circumferential teeth, trocar tip obturator	AR- 1948CT
2.4 mm SutureTak® cannulated guide	AR- 1313

3 mm SutureTak®

Product Description	Item Number
Required Instrumentation Set (AR-1934S) Includes	<u> </u>
3 mm SutureTak® spear, trocar tip and blunt obturator	AR- 1949
SutureTak® instrumentation case	AR- 1934C
Required Instruments	
3mm SutureTak® drill	AR- 1250LT
Optional Instruments	
SutureTak® punch	AR- 1934P
3 mm SutureTak® spear with circumferential teeth,	AR- 1946
trocar tip obturator	
3mm SutureTak® offset guide	AR- 1934R
3mm SutureTak® disposable offset guide	AR- 1934GS
3mm SutureTak® spade tip drill, thick shaft	AR- 1252
3mm SutureTak® spade tip drill	AR- 1257
SutureTak® disposables kit	AR- 1934DS-2
(includes: disposable spear and AR-1250LT)	
SutureTak® spear portal dilator	AR- 1949PD
Needle for portal dilator	AR- 6521
3mm PEEK SutureTak® drill	AR- 1934PD

3 mm SutureTak®: Open Procedure

Product Description	Item Number
Required Instruments	
Short spear	AR- 1326G
Short spade tip drill	AR- 1256

Additional Instruments

Product Description	Item Number
QuickPass™ lasso, 25° tight curve left	AR- 6068-25TL
QuickPass™ lasso, 25° tight curve right	AR- 6068-25TR
QuickPass™ lasso, 30° straight	AR- 6068-30
QuickPass™ lasso, 45° curve left	AR- 6068-45L
QuickPass™ lasso, 45° curve right	AR- 6068-45R
QuickPass™ lasso, 90° straight	AR- 6068-90
QuickPass™ lasso, 90° curve left	AR- 6068-90L
QuickPass™ lasso, 90° curve right	AR- 6068-90R
QuickPass™ lasso, 90° tight curve	AR- 6068-90T
SutureLasso™ SD, 30° straight	AR- 4068-30
SutureLasso™ SD, 90° straight	AR- 4068-90
SutureLasso™ SD, 25° tight curve left	AR- 4068-25TL
SutureLasso™ SD, 25° tight curve right	AR- 4068-25TR
SutureLasso™ SD, 45° curve left	AR- 4068-45L
SutureLasso™ SD, 45° curve right	AR- 4068-45R
SutureLasso™ SD, 90° curve left	AR- 4068-90L
SutureLasso™ SD, 90° curve right	AR- 4068-90R
SutureLasso™ SD, crescent	AR- 4068C
SutureLasso™ SD with FiberStick™, 25° tight curve left	AR- 4068-25TLF
SutureLasso™ SD with FiberStick™, 25° tight curve right	AR- 4068-25TRF
SutureLasso™ SD wire loop	AR- 4068-05SD
ReelPass SutureLasso™, 90° straight	AR- 6069-90
ReelPass SutureLasso™, 45° curve left	AR- 6069-45L
ReelPass SutureLasso™, 45° curve right	AR- 6069-45R
Suture cutter, straight, Ø 4.2mm, with FlushPort	AR- 12250F
KingFisher® suture retriever/tissue grasper with SR handle, Ø 4.2mm, with FlushPort	AR- 13970SRF

Products advertised in this brochure/surgical technique guide may not be available in all countries. For information on availability, please contact Arthrex Customer Service or your local Arthrex representative.



Spade tip drill



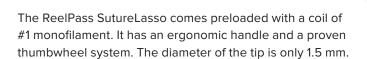
Offset spear



Spear with circumferential teeth



Spear





advance a nitinol wire loop through the labrum.



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. Postoperative management is patient specific and dependent on the treating professional's assessment. Individual results will vary and not all patients will experience the same postoperative activity level and/or outcomes.