Distal radius osteotomies

1 Ensure good guide exposure

Before the incision is made, verify that the guides match the patient and the case report by checking the unique ID on the tag. Once the ID is verified, the tag can be broken off and discarded.

After the incision is made, remove as much soft tissue around the fitting area of the bony anatomy as needed to allow for good exposure and optimal positioning of the guides.

2 Position drill guide(s)

Position the drill guide(s) on the bone by comparing its position with the guide outline on the bone model. Make sure there are no gaps and there is no soft tissue trapped underneath the guide. Affix the drill guide firmly onto the bone using K-wires.

Drill through the guide’s drill sleeves using metal guides and drill bits. Insert the metal guides as far as possible into the drill sleeves.

If you have received more than one drill guide, move to step 3, then repeat step 2 until all drill guides have been used.

3 Exchange guides

Remove all K-wires except the pin(s) indicated in your case report. Slide the guide off the bone over the remaining K-wire(s).

Slide the next guide over the same K-wire(s) onto the bone.

4 Position cutting guide(s)

Affix the cutting guide(s) firmly onto the bone by inserting K-wire(s) into the open K-wire hole(s).

Insert the sawblade into the guide’s cutting slot and perform the osteotomy. If you have received more than one cutting guide, move to step 3 and then repeat step 4 until all cutting guides have been used.

5 Remove cutting guide

Remove all K-wires and remove the guide from the bone.

In case of closing wedge osteotomies, remove the wedge.

6 Affix plate

Refer to the surgical technique of the implant in order to determine the fixation of the implant.

Use the pre-drilled screw holes (see step 2) to affix the plate.

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1 All guides are numbered. Materialise cannot guarantee a successful surgery if the guides are not used in the correct order mentioned in the case report.

2 Use only the instruments that are defined in your case report.

3 If you’re using drill guides with safety stop, make sure that you insert the drill bit into the drill sleeve as far as possible.

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Each surgeon takes full responsibility for using SurgiCase Guides and the described technique intra-operatively.

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