

EnFix TAC[®]

DEMINERALIZED BONE FIBER IMPLANT FOR ENTHESES REPAIR

GLUTEUS MEDIUS REPAIR SURGICAL TECHNIQUE



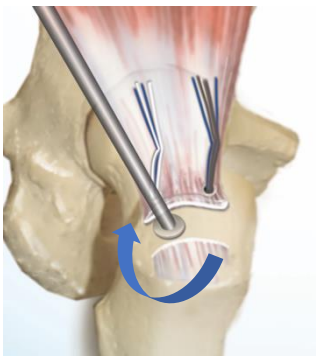
- 1 With the patient in the lateral position, prepare the bone for insertion of two proximal row anchors. The EnFix TAC is suture anchor agnostic.

Pass the sutures through the tendon in the surgeon's preferred construct.



- 2 Placement of the Enfix TAC(s) should be where the healing of the enthesis at the footprint is desired. Because the greater trochanter is hard bone, it is recommended to predrill the holes with either a 3.5mm or 4.0mm drill.

Insert the cutting awl and gently tap until the cutting surface contacts the bone surface.



- 3 Rotate the cutting awl clockwise until it is flush with the bone to ensure the EnFix TAC will sit level with the bone.

If the surgeon prefers to have the implant sit proud, it is recommended to partially abrade the bone with the cutting awl to ensure the device is supported by the bone.



- 4 Place the EnFix TAC on the inserter ensuring that the base plate of the inserter is flush with the top of the implant.

Selection of EnFix TAC-O or EnFix TAC-T is surgeon preference. The amount of space available between the proximal and distal rows should be taken into consideration.

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5 Place the EnFix TAC into the awl hole.

Push or lightly tap the inserter to properly seat the EnFix TAC device in the prepared hole, then remove the inserter.



6 Two EnFix TACs are recommended for a Gluteus Medius repair to ensure full coverage of the enthesis.

Repeat steps 2-5 for additional implants.



7 Insert two distal row anchors.



8 Complete the repair in the usual manner.

NOTES:

- The EnFix TAC device is inserted dry. Do not pre-hydrate.
- Either TAC-O or TAC-T implants may be used for Gluteus Medius repair procedures, per surgeon preference. The surgical technique remains the same.

Surgical technique developed by Lonnie Davis, M.D., Washington Sports Medicine Institute, Tysons, VA