



ADVANCED ORTHOPAEDIC SOLUTIONS

AOS FIBONACCI™ LOWER EXTREMITY PLATING SYSTEMS



INSTRUCTIONS FOR USE

Federal Law restricts this device to sale by or on the order of a physician

DEVICE DESCRIPTION

The AOS FIBONACCI™ LOWER EXTREMITY PLATING SYSTEM includes the AOS FIBONACCI™ SMALL FRAGMENT PLATING SYSTEM, the AOS FIBONACCI™ SMALL FRAGMENT PLATING SYSTEM LITE, the AOS FIBONACCI™ CALCANEAL PLATING SYSTEM, and the AOS FIBONACCI™ PROXIMAL TIBIA PLATING SYSTEM. They are open reduction and internal fixation devices that consist of titanium alloy plates and screws varying in design to provide the surgeon with multiple options to accommodate patient anatomy and optimize patient outcomes. The system is provided in a dedicated sterilization tray and includes an accompanying set of instruments.

INDICATIONS FOR USE

The AOS FIBONACCI™ SMALL FRAGMENT PLATING SYSTEM is intended to be used for fixations of fractures, osteotomies, and non-unions of the clavicle, scapula, olecranon, humerus, radius, ulna, pelvis, distal tibia, fibula, including osteopenic bone.

The AOS FIBONACCI™ SMALL FRAGMENT PLATING SYSTEM LITE is intended to be used for fixation of fractures, arthrodesis, reconstruction, replantation or reduction of small bones and small bone fragments. This system is also indicated for non-load bearing stabilization and reduction of bone fragments in long bones. Used for metaphyseal fragments that are non-comminuted and can be used in an anti-glide position.

The AOS FIBONACCI™ CALCANEAL PLATING SYSTEM is intended to be used for fixation of fractures, osteotomies, nonunions, replantations, and fusions of small bones and small bone fragments, particularly in osteopenic bone.

The AOS FIBONACCI™ PROXIMAL TIBIA PLATING SYSTEM is intended to be used for fixation of fractures, nonunions, malunions, osteopenic bone, and tibial osteotomies of the proximal tibia, including simple, comminuted, lateral wedge, depression, medial wedge, bicondylar combination of lateral wedge and depression, periprosthetic, and fractures with associated shaft fractures.

CONTRAINDICATIONS

1. Patients with an active superficial infection.
2. Pediatric patients, or patients with skeletal immaturity.
3. Patients with a history of frequent infections.
4. Patients with known sensitivity or allergies to the implant materials.
5. Patients with neuromuscular deficiencies in the affected limb sufficient to render the procedure unwarranted.
6. Conditions that preclude cooperation with the rehabilitation regimen for postoperative care or impair the patient's ability to follow directions.
7. Physical conditions that would preclude adequate implant support or retard healing, such as blood supply impairment in the treated area, insufficient bone quality or quantity, previous infection, or obesity.

WARNINGS

The AOS FIBONACCI™ LOWER EXTREMITY PLATING SYSTEM must be sterilized prior to use. Please refer to the section on STERILIZATION below.

The AOS FIBONACCI™ PROXIMAL TIBIA PLATING SYSTEM can only be used with screws that are 3.5mm in diameter or greater. Their use with screws less than 3.5mm in diameter has not been evaluated and could result in implant breakage and patient injury.

The AOS FIBONACCI™ LOWER EXTREMITY PLATING SYSTEM is intended for use by individuals with adequate training and familiarity with techniques associated with the orthopedic surgical procedure employed. For further information about techniques, complications, and hazards, consult the medical literature. Please refer to the AOS Fibonacci™ Lower Extremity Plating System Surgical Technique (PN 9094) for additional information on the use of the AOS FIBONACCI™ LOWER EXTREMITY PLATING SYSTEM.

The implants of the AOS FIBONACCI™ LOWER EXTREMITY PLATING SYSTEM are for single use only. Reuse of the devices is associated with risks for the transmission of infectious diseases and loss of mechanical strength. While the device may appear undamaged, previous stress may have created imperfections and internal stress patterns which could lead to implant failure.

Use care in storage and handling of devices. While in storage, device components should be protected from corrosive environments such as salt air, moisture, etc. While handling device components, do not apply excessive force to implants, as cutting, bending, or scratching the surface of device components can reduce their strength and fatigue resistance. Inspect all device components for damage prior to surgery. Replace damaged or worn components, as necessary.

The AOS FIBONACCI™ LOWER EXTREMITY PLATING SYSTEM has not been evaluated for safety and compatibility in the MR environment. It has not been tested for heating, migration, or image artifact in the MR environment. The safety of the AOS FIBONACCI™ LOWER EXTREMITY PLATING SYSTEM in the MR environment is unknown. Scanning a patient who has this device may result in patient injury.

For proper care and handling of AOS REUSABLE INSTRUMENTS and AOS SINGLE USE INSTRUMENTS, please refer to their package insert (IFU-9000).

POSSIBLE ADVERSE EVENTS

1. Nerve or soft tissue damage, necrosis of bone or bone resorption, necrosis of the tissue, or inadequate healing from surgical trauma or presence of implant.
2. Vascular disorders including thrombophlebitis, pulmonary emboli, wound hematomas, and avascular necrosis of the femoral head.
3. Metal sensitivity or histological or allergic reaction to device materials.
4. Irritation injury of soft tissues, including impingement syndrome.
5. Pain, discomfort, or abnormal sensations.
6. Infections, both deep and superficial.
7. Bone damage or refracture.

DIRECTIONS FOR USE

PREOPERATIVE

Inspect all AOS FIBONACCI™ LOWER EXTREMITY PLATING SYSTEM implant components under adequate lighting prior to sterilization for wear or damage that would impact its performance. If wear or damage is identified, component parts should be discarded and replaced.

An image intensifier and an appropriate fracture table are required to perform this surgery.

Allergies and other reactions to device materials should be ruled out preoperatively.

INTEROPERATIVE

Select the most appropriate implant size suitable for the patient's age, weight, and bone quality. A stable construct should be achieved and verified under image intensification.

Plates may be bent at designated bending notch locations for a contoured anatomical fit. Please refer to the surgical technique (PN 9094) for proper instructions on bending plates.

POSTOPERATIVE

The AOS FIBONACCI™ LOWER EXTREMITY PLATING SYSTEM is not designed to withstand the stress of weight bearing, load bearing, or excessive activity. Caution patients against unassisted activity that requires walking, to reduce the likelihood of weight bearing on the affected limb during treatment. Device breakage or damage can occur when the implant is subjected early weight bearing or increased loading associated with delayed union, nonunion, or incomplete healing. Internal or external supports may be utilized to minimize internal stress loading of the implant and broken bone until solid bony union is evident by radiograph.

Periodic x-ray examinations for at least the first six (6) months postoperatively are recommended for close comparison with postoperative conditions to detect changes in position, non-union, loosening, bending, or cracking of components.

The AOS FIBONACCI™ LOWER EXTREMITY PLATING SYSTEM may be removed after treatment. In the absence of pain, removal of the implant in elderly or debilitated patients is not suggested.

STERILIZATION

Inspected devices should be placed into their trays as provided. The total weight of tray with devices should not exceed 11.4kg/25 lbs. (other local limits below 11.4kg/25 lbs. may apply). Packaging should be completed utilizing a pouch or wrap which conforms to the recommended specifications for steam sterilization as outlined below. The wrap should be completed following AAMI double-wrap or equivalent guidelines with an appropriate wrap (cleared by the FDA or the local governing body). Bracketed positions designated for specific devices shall contain only devices intended for those areas. Devices should not be stacked or placed in close contact. Only AOS devices should be included in the trays. These validated instructions are not applicable to trays or cases that include devices not intended to be used with AOS trays.

Local or national specifications should be followed where steam sterilization requirements are stricter or more conservative than those listed in the table below. Sterilizers vary in design and performance characteristics. Cycle parameters and the load configuration should always be verified against the sterilizer manufacturer's instructions.

RECOMMENDED STEAM STERILIZATION PARAMETERS

Prevacuum Cycle Type	Exposure Temperature	Exposure Time	Minimum Drying Time ¹	Minimum Cooling Time ²
US Cycle ³	132 °C/270 °F	4 minutes	30 minutes	30 minutes
UK Cycle ³	134 °C/273 °F	3 minutes	30 minutes	30 minutes
Prion Cycle ⁴	134 °C/273 °F	18 minutes	30 minutes	30 minutes

¹Drying times vary according to load size and should be increased for larger loads.

²Cooling times vary according to the sterilizer used, device design, temperature and humidity of ambient environment, and type of packaging used. Cooling process should comply with ANSI/AAMI ST79.

³For markets outside of the US, the cycle parameters listed for exposure time and temperature can be considered as minimum values.

⁴For markets outside of the US, reprocessing parameters recommended by the World Health Organization (WHO) where there is concern regarding TSE/CJD contamination.

INFORMATION

For further information please contact Advanced Orthopaedic Solutions at (310) 533-9966.

SYMBOL GLOSSARY



Part number (catalog number)



Lot number (batch code)



Quantity



Material



Caution



Consult instructions for use



Manufacturer



Date of manufacture



Expiration date



Do not reuse



Sterilized using irradiation



Do not resterilize



Non-sterile product



MR Conditional



Do not use if package is damaged



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