

## PLUG ELITE-SPK® ON THE INSERTER

- ▶ Insert a temporary shuttle suture as Vicryl suture size or a PDS USP 0 inside the rear eyelet of the device Elite-SPK®.

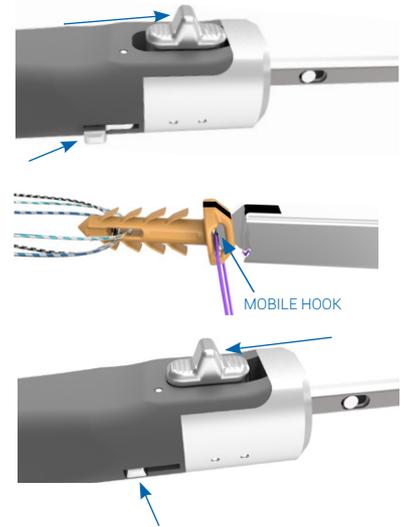
*TIP!* The shuttle sutures don't contribute to the repair stability and are removed once the construct is completed.

- ▶ Advance the mobile hook acting on the knob of the instrument. The lateral pin is out.

- ▶ Plug the the rear eyelet of the device Elite-SPK® through the mobile hook of the inserter.

**⚠ WARNING!** Use caution and insert the device in the correct direction: use the laser marking as reference. The device and inserter cannula must be aligned.

- ▶ Withdraw the knob, lock the system with the lateral pin and load the sutures in the distal eyelet of Elite-SPK®.



## PERFORM THE REPAIR WITH ELITE-SPK®

- ▶ Tie each suture limb to the shuttle suture passing through the transosseous tunnel.

*TIP!* In presence of multiple shuttles, pull the medial limbs one by one for a easier transit through the transosseous tunnel.

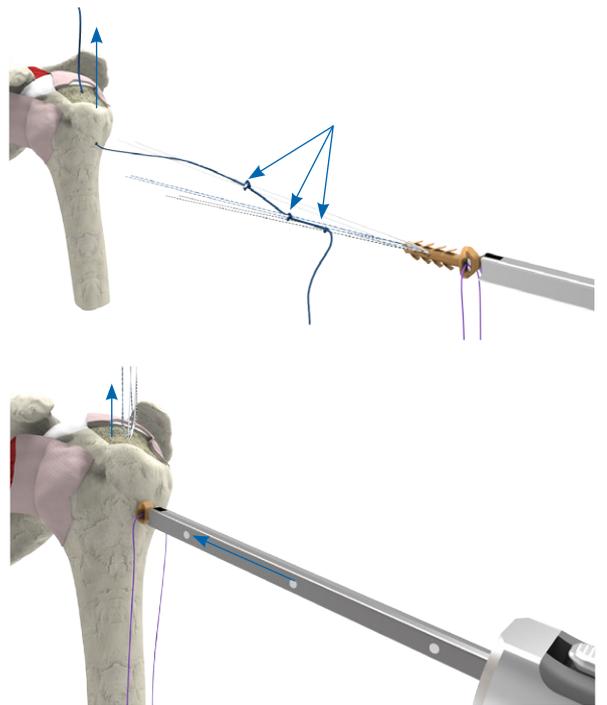
It is recommended to use a para-acromial portal to drag the shuttle suture and the high-strength sutures more easily through the transosseous tunnel.

- ▶ Hold Elite-SPK® coaxial to the lateral access of the transosseous tunnel and draw the sutures to gently carry the implant forward through the deltoid.

*TIP!* Apply slight pressure or tension at the rear of the inserter to help the passage of the implant.

- ▶ Place Elite-SPK® on the lateral cortex. If it is done, use the slot previously performed with the punch to guide the input.
- ▶ Insert completely the body of Elite-SPK® inside the humerus and tighten the supporting underhead of the device to the lateral cortex.

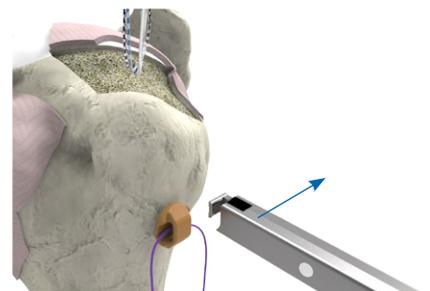
*TIP!* A gently hammering might be required.



**⚠ WARNING!** Take care not to sink the implant into the cortex!

- ▶ Unlock the lateral pin of the inserter and pull the knob forward to release Elite-SPK®, then slide the inserter laterally to remove it.

- ▶ Suture the rotator cuff in the manner deemed most appropriate.



## PLUG SHARC-FT® ON THE INSERTER

- ▶ Insert a temporary shuttle suture as Vicryl suture size or a PDS USP 0 inside the rear eyelet of the device Sharc-FT®.

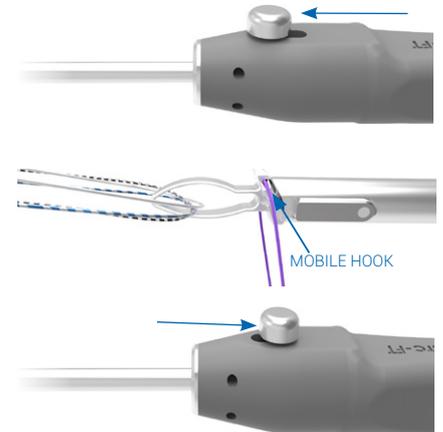
*TIP!* The shuttle sutures don't contribute to the repair stability and are removed once the construct is completed.

- ▶ Advance the mobile hook acting on the knob of the instrument.

- ▶ Plug the the rear eyelet of the device Sharc-FT® through the mobile hook of the inserter.

*WARNING!* Use caution and insert the device in the correct direction: use the laser marking as reference. The device and inserter cannula must be aligned.

- ▶ Release the knob to set the implant on the inserter and load the sutures in the distal eyelet of Sharc-FT®.



## PERFORM THE REPAIR WITH SHARC-FT®

- ▶ Tie each suture limb to the shuttle suture passing through the transosseous tunnel.

*TIP!* In presence of multiple shuttles, pull the medial limbs one by one for a easier transit through the transosseous tunnel.

It is recommended to use a para-acromial portal to drag the shuttle suture and the high-strength sutures more easily through the transosseous tunnel.

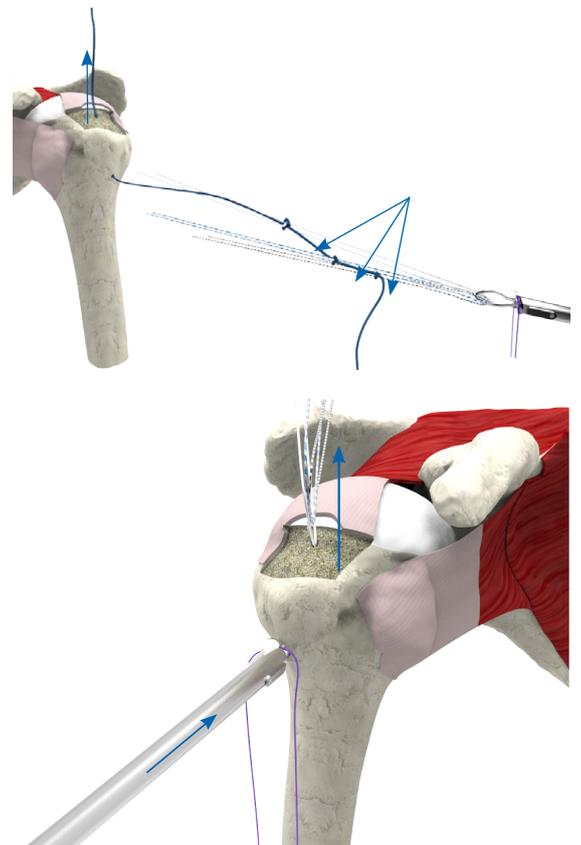
- ▶ Hold Sharc-FT® coaxial to the lateral access of the transosseous tunnel and draw the sutures to gently carry the implant forward through the deltoid.

*TIP!* Apply slight pressure or tension at the rear of the inserter to help the passage of the implant.

- ▶ Place Sharc-FT® on the lateral cortex. If it is done, use the slot previously performed with the punch to guide the input.

- ▶ Insert completely the body of Sharc-FT® inside the humerus and tighten the supporting underhead of the device to the lateral cortex.

*TIP!* A gently hammering might be required.



**⚠ WARNING!** Take care not to sink the implant into the cortex!

- ▶ Pull the knob forward to release Sharc-FT®, then slide the inserter laterally to remove it.

- ▶ Suture the rotator cuff in the manner deemed most appropriate.

