Reusable Instruments
All necessary instruments fit into a small sterilization tray

Impact™ Suture Anchor

Material strength eliminates bioabsorbable eyelet as failure mode in repair construct
Retains over 90% of eyelet tensile strength Through 12 weeks

Impact™ Suture Anchor Strength Characteristics*

<table>
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ORDERING INFORMATION

Description                  Size                  Ref. No.
Impact Suture Anchor           3.5mm O.D. x 10.5mm L BXS4218
Impact Notcher                 NT4218
Impact Drill Guide             GE4218
Drill Guide Obturator          OB4218
Drill Bit                     3.5mm Diameter x 20mm L DB4218
Impact Sterilization Tray      ST4218

Accessories
Loop Handle Knot Pusher        C6112
Crochet Hook                   C6105
Microscissors, Straight        2.75mm Diameter 2.10011
Grasping Forceps, Straight w/Ratchet 3.4mm Diameter 11.1001
Suture Retrieval Forceps      3.4mm Diameter 16.1018
Liberator™ Knife               25.50014
Suture Saver™ Kit             (5 kits/box) C6180

Linvatec

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www.linvatec.com

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An innovative fixation system that incorporates strength and reliability

Impact™ Suture Anchor
Surgical Technique

SUPERIOR STRENGTH & SUTURE MANAGEMENT

- Manufactured using proprietary Self-Reinforced™ polymers
- Unique key-lock insertion technique
- Two individual eyelets allow for independent suture manipulation
- Pre-threaded with two color coded sutures
- High pull-out strength
- Indicated for arthroscopic, mini-open and open shoulder reconstruction

Linvatec
A ConMed Company
Impact™ Suture Anchor

Unique Key-Lock Insertion Method

The Linvatec Impact™ Suture Anchor is a bioabsorbable push-and-rotate suture anchor that is preloaded on a disposable inserter. The Impact Suture Anchor is manufactured from Self-Reinforced™ (96L/4D) PLA Copolymer that retains 90% strength through 20 weeks and completely resorbs over a period of several years depending on patient variables. The unique Self-Reinforced™ Copolymer provides high initial mechanical strength required for insertion and through the healing phase (20 weeks).

Create a 3.5mm pilot hole in the bone in the desired location for soft tissue reattachment. The Drill Guide may be used to help facilitate placement of the pilot hole and the anchor.

1. While maintaining axial alignment, insert the Impact™ Suture Anchor into the hole and advance it until the horizontal laser line located on the driver is flush with the bone.

2. Rotate the Notcher 90º in the selected direction.

3. For hard bone encountered on the glenoid, the Notcher is inserted into the pilot hole until it reaches a hard stop.

4. For rotator cuff repair, the Notcher is inserted into the pilot hole only until the notch breaks through the cortical layer of the bone. It is removed by gently taping it back out.

5. Rotate the Notcher 180º to create additional space for the implant.

6. Remove the Notcher by rotating it back to the original position and taping it gently back out.

7. Rotate the anchor/driver 90º in the same selected direction to allow the wing of the anchor to set under the cortical layer. Open the cover on the suture anchor handle and gently pull back on the handle to release the sutures.
**Increased Implant Stability**
- Sutures remain tight to the shaft, holding the anchor on the driver tip until release
- Machined implant allows for precise fit to the driver tip, increasing implant stability during insertion

**Laser Marking**
- Provides arthroscopic suture orientation

**Slotted Tip**
- For easy release of sutures
- Allows the option to change suture material and reattach inserter to implant

**Spool Design**
- Preloaded with two #2 non-absorbable braided polyester sutures
- Separate compartments within the suture handle provide for the organization of the sutures
- Enables smooth one-handed release without tangling of sutures
- Saves time in operating room

Once the sutures have been released from the handle, gently pull on the sutures to set the anchor. The anchor will rotate 90° to allow the wing to set up under the cortex and lock into the bone. An appropriate method to pass the suture through the tendon should be used. Secure the tendon to the bone with the suture using a preferred knot configuration. If multiple suture anchors are required, all anchors should be placed at least 12mm apart (center to center distance) to ensure that there are no adverse interactions between holes.