



Sheathless Arthroscopy

Surgical Technique



Sheathless Arthroscopy

Sheathless Arthroscopy in the Shoulder

The Sheathless Arthroscopy Technique improves accessibility and visibility while increasing fluid management and conservation.

The technique will also ease the transition during viewing portal changes without "red-out."

Benefits

Improved access:

The standard arthroscope has a 4 mm diameter and the standard high flow arthroscope sheath has a 6 mm diameter. By removing the sheath, the surgeon decreases the scope diameter by an additional 2 mm.

Improved fluid management:

By using working cannulas, the joint space is better enclosed, resulting in less portal leakage.

Improved joint distention:

By limiting portal leakage and by having a larger diameter through which to inflow fluid, joint space distention is maximized, resulting in easier maintenance of hemostasis and joint distention without fluid turbulence.

Changing viewing portals:

Once arthroscopic cannulas are in place, viewing portal transition can be easily accomplished by moving the arthroscope from one cannula to the next without the use of a Switching Stick or bridge cannula system.

Nuisance reduction:

By attaching the inflow directly to the arthroscopic cannula, the arthroscope is free to move from portal to portal without the inflow tubing. When this technique is used with the TrueView Direct arthroscopic system, the integrated light cable further reduces the amount of nuisance caused by light cable and tubings at the operative site.

Note: Although this technique is designed for use without an arthroscopic sheath, care should be taken to protect the arthroscope from bending or breakage.



Partially Threaded Cannula,

*Olympus TrueView Direct
Arthroscopy and Camera*

**James Bradley, MD,
Pittsburgh, PA**

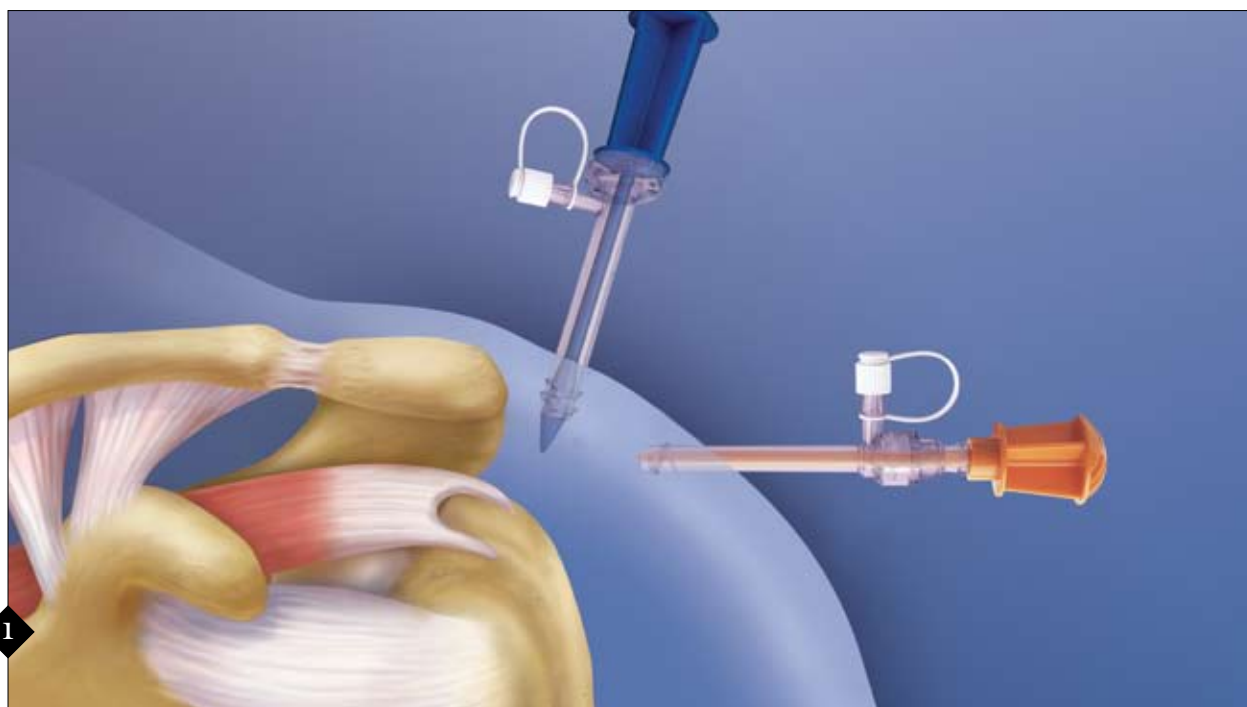
"I use the sheathless arthroscopy technique in the shoulder to view pathology from multiple angles.

I place an 8.25 mm Partially Threaded Cannula anterior and a 5.75 Crystal Cannula posterior. This allows me to quickly and accurately assess the best approach.

The durability of the Olympus arthroscopes also allows me to use this technique to improve access into tight joint spaces including elbows and ankles."



*Continuous Wave III
Arthroscopy Pump*



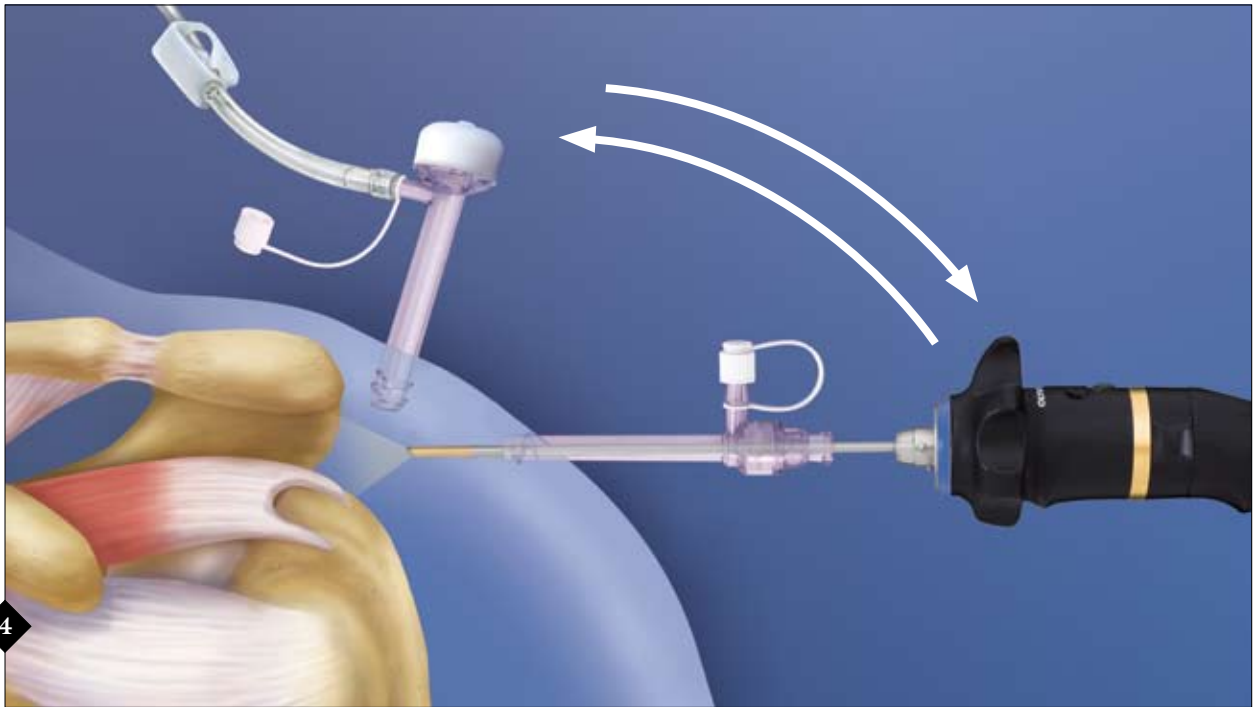
Insert arthroscopic cannulas into the viewing portals of choice. In this representation, an Arthrex 5.75 mm Partially Threaded Crystal Cannula has been placed laterally and a 8.25 mm Partially Threaded Cannula has been placed superior-laterally.



Attach the Continuous Wave III Arthroscopy Pump inflow tubing to one of the arthroscopic cannulas. Generally the larger cannula is preferred, to allow maximum unimpeded inflow. Attach backflow cap to optimize fluid pressure control.



Insert the sheathless Olympus 4 mm diameter arthroscope through either arthroscopic cannula.



The arthroscope can be moved between viewing portals without the need for a bridge cannula or Switching Stick. "Red-out" is avoided during arthroscope portal exchanges because distention is maintained throughout this process.

Ordering Information

Continuous Wave III Arthroscopy Pump and Accessory Tubing

Continuous Wave III Arthroscopy Pump	AR-6475
Main Pump Tubing	AR-6410
ReDeuce™ Tubing, Pump	AR-6411
ReDeuce Tubing, Patient	AR-6421
10' Extension Tubing	AR-6220

Olympus TrueView Arthroscopes

Olympus TrueView II Arthroscope	A70941A
Olympus TrueView Direct Arthroscope	WA70005A

Olympus VISERA™ Multi-specialty Digital Video Systems

VISERA™ Digital Video Control Unit Processor	OTV-S7-B
300W Xenon Lightsource	CLV-S40

Option 1

True View II Quick-Connect Camera Head (autoclavable)	OTV-S7H-NA-12Q
True View II Arthroscope, 4 mm diameter, 30 degree DOV (autoclavable)	A70941A

Option 2

True View Direct, Integrated Camera Head (autoclavable)	OTV-S7H-VA
True View Direct Arthroscope, 4 mm diameter, 30 degree DOV (autoclavable)	WA70005A

Partially Threaded Cannula

Crystal Cannula, partially threaded distal end, 5.75 mm x 7 cm, w/obturator, qty. 5	AR-6564
Partially Threaded Cannula, no squirt cap, 8.25 mm x 7 cm, w/obturator, qty. 5	AR-6566
Partially Threaded Cannula, no squirt cap, 7 mm x 7 cm, w/obturator, qty. 5	AR-6567
Partially Threaded Cannula, no squirt cap, 8.25 mm x 9 cm, w/obturator, qty. 5	AR-6575-09
Partially Threaded Cannula, no squirt cap, 8.25 mm x 11 cm, w/obturator, qty. 5	AR-6575-11
Reusable Obturator for AR-6575-9	AR-6541
Reusable Obturator for AR-6575-11	AR-6576-11

Crystal Cannula

Crystal Cannula, 5.75 mm I.D. x 7 cm w/obturator, qty. 5	AR-6560
Crystal Cannula smooth, 5.75 mm I.D. x 7 cm w/obturator, qty. 5	AR-6562
1-way Stopcock, w/luer lock	AR-6561
Reusable Obturator for AR-6560, AR-6562, and AR-6564	AR-6563

Clear Instrument Cannula

Instrument Cannula, 5.5 mm x 9 cm, qty. 5	AR-6532
Instrument Cannula, 7 mm x 7 cm, qty. 5	AR-6550
Reusable Obturator for AR-6550	AR-6549

Twist-in Cannula

Notched Twist-In Cannula, 8.25 mm I.D. x 7 cm, qty. 5	AR-6530N
Twist-In Cannula, 8.25 mm I.D. x 7 cm, qty. 5	AR-6530
Reusable Obturator for AR-6530	AR-6531
Twist-In Cannula, 6 mm I.D. x 7 cm, qty. 5	AR-6535
Reusable Obturator for AR-6535	AR-6536
Twist-In Cannula, 8.25 mm I.D. x 9 cm, qty. 5	AR-6540
Reusable Obturator for AR-6540	AR-6541
Twist-In Cannula, 6 mm I.D. x 9 cm, qty. 5	AR-6545
Reusable Obturator for AR-6545	AR-6546
Twist-In Cannula w/ No Squirt Cap, 7 mm I.D. x 7 cm, qty. 5	AR-6570
Reusable Obturator for AR-6570 and AR-6550	AR-6549



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This description of technique is provided as an educational tool and clinical aid to assist properly licensed medical professionals in the usage of specific Arthrex products. As part of this professional usage, the medical professional must use their professional judgment in making any final determinations in product usage and technique. In doing so, the medical professional should rely on their own training and experience and should conduct a thorough review of pertinent medical literature and the product's Directions For Use.

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