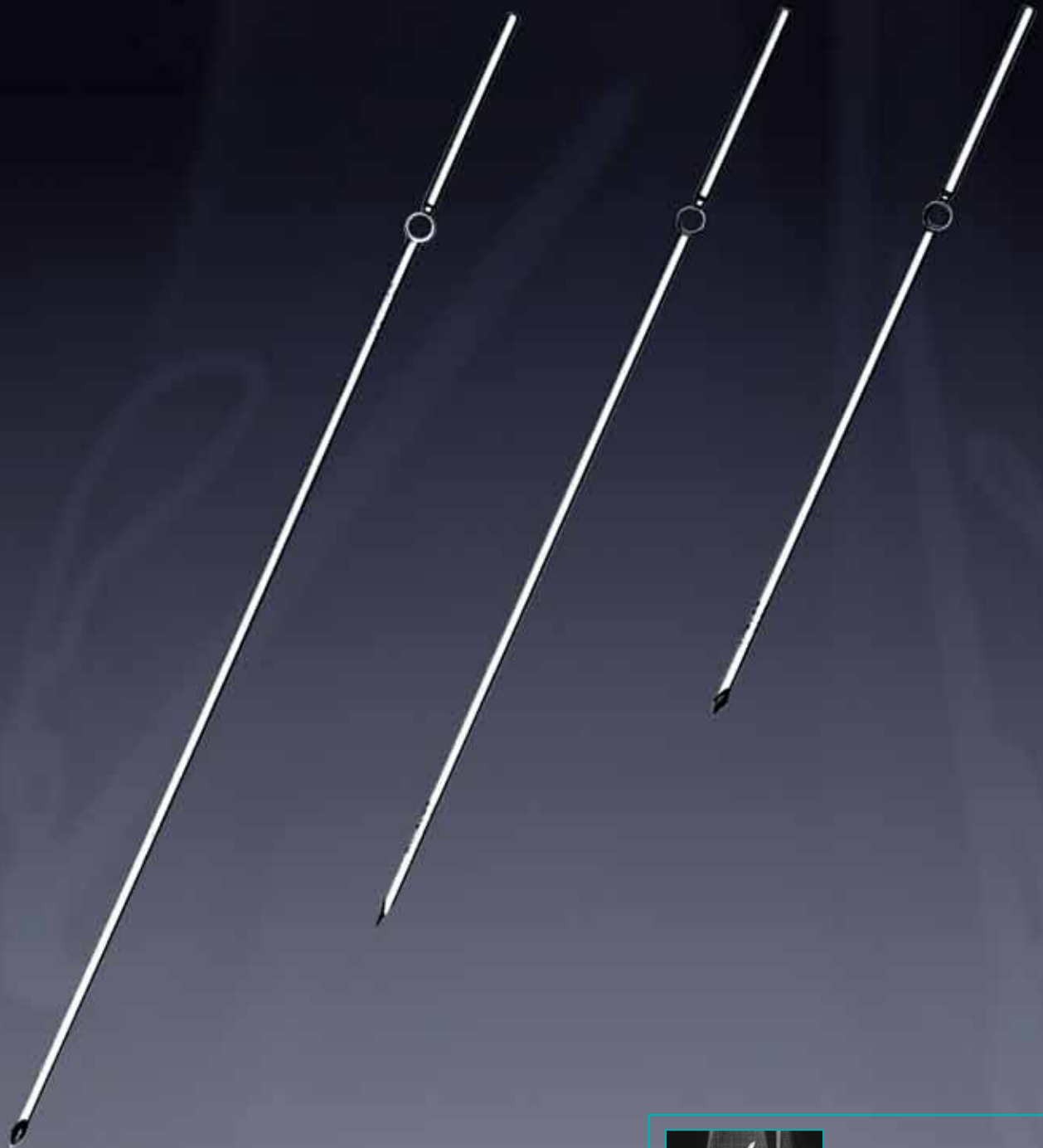


ACUMED®

Innovative Solutions



**Tension Band
Pin System**

Tension Band Pin System

Acumed is an industry leader in innovative solutions for extremities and trauma.

We are dedicated to pioneering solutions that benefit the patient and drive the industry forward.

While tension band pinning with K-wires is a well-accepted form of fixation, doctors have voiced their frustration around the post-surgical complications associated with these pins. Often, patient care is impacted and a secondary procedure is required to address prominence of the K-wire at the insertion site and/or migration of the pin out of the bone. Acumed recognized these problems and has developed the first interlocking system designed to provide low-profile, secure fixation.



For decades, tension band pinning has been an accepted and effective procedure, but it has not been without complications. Clinical studies in the literature discuss complication rates as high as 71.7%.¹ Complications include pin migration and soft tissue irritation, both which lead to a second surgery for revision or hardware removal.

Although tension band pins offer the benefit of a straightforward and cost effective procedure, a second surgery adds additional costs. Acumed recognizes these issues and has developed a solution to provide the benefits of tension band pinning, while eliminating pin migration issues seen with the traditional K-wire technique.

Acumed's Tension Band Pin System features an innovative method to prevent pin migration. An eyelet is located on the proximal end of the stainless steel pin. By passing the cerclage wire through the eyelet, the pin is secured, allowing compression to be maintained across the fracture or osteotomy site and preventing migration of the pins postoperatively.

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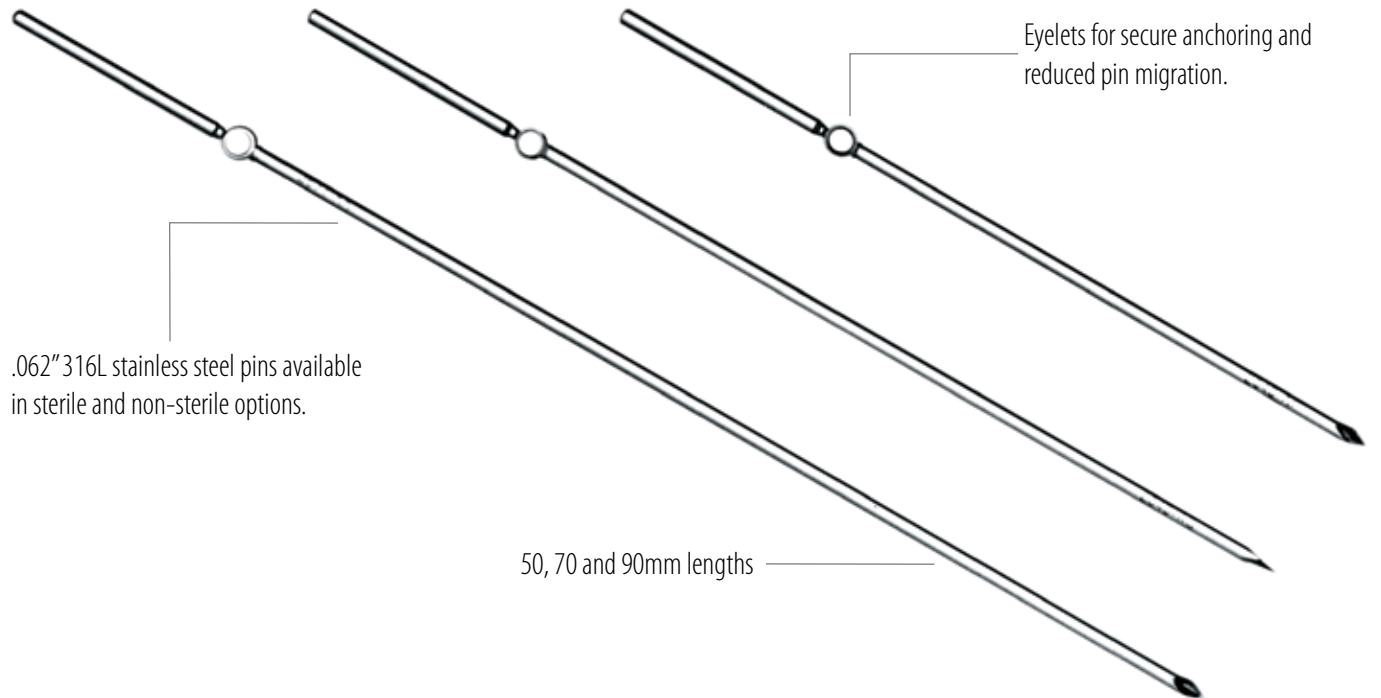
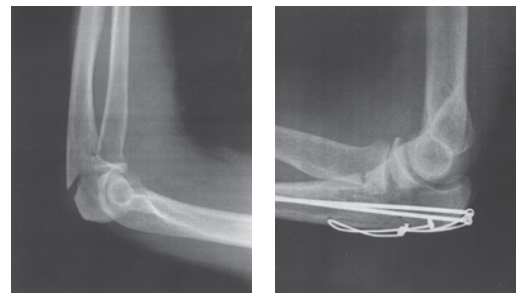
Straightforward Application and minimal instrumentation follow the same "point and drill" surgical technique as traditional fixation techniques.



Secure passing of the wire through the eyelets produces both effective fracture reduction and stable anchoring of pins, eliminating migration or back out.



Non-irritating low-profile heads minimize soft tissue irritation and reduce patient discomfort.



Surgical Technique



1 Using a K-wire driver, insert the Tension Band Pins through the triceps attachment, aligning the pins in a parallel arrangement with the eyelets 5mm proud.



2 Pass a 16 gauge or smaller stainless steel cerclage wire through both pins and the bone in a figure 8 application. If passing the wire under the triceps tendon, a 12 gauge needle may be inserted through the tendon to help line up the eyelets and pass the wire.



3 Seat the head of the Tension Band Pins into the bone with the punch included in the kit.



4 After tightening the wire to achieve the desired reduction, use forceps to break the tail from the Tension Band Pins and cut trocar ends to length as necessary.



Upper Extremity

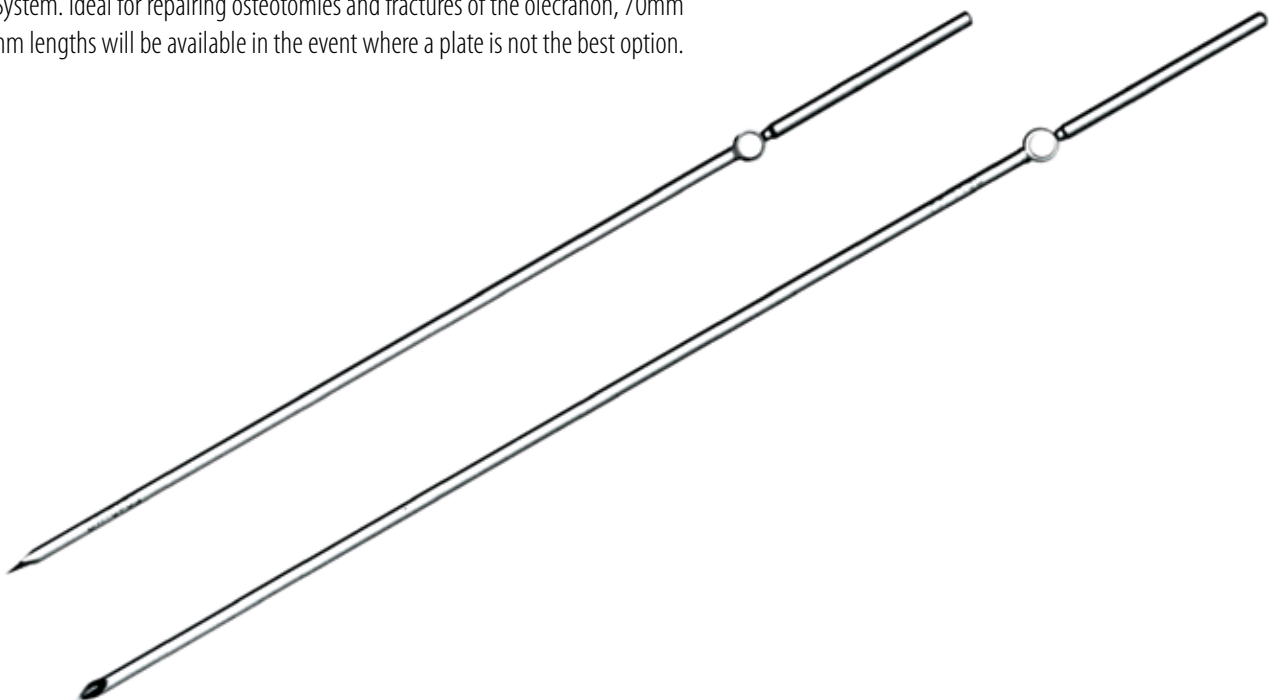
- Olecranon Osteotomies
- Transverse Olecranon Fractures



Lower Extremity

- Medial Malleolar fractures
- Lateral Malleolar fractures
- Patella Fractures

Acumed's Tension Band Pin System is also available in non-sterile format in the Elbow Plating System. Ideal for repairing osteotomies and fractures of the olecranon, 70mm and 90mm lengths will be available in the event where a plate is not the best option.



Ordering Information

Implants:

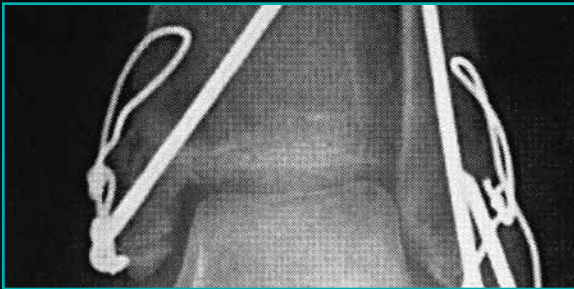
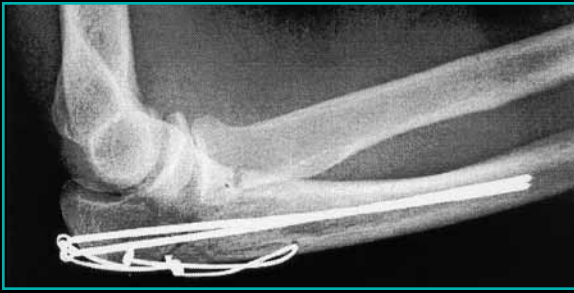
50.0mm Tension Band Kit	TB-1550K-S
50.0mm Tension Band Pin (Non-Sterile)	30-0097
70.0mm Tension Band Kit	TB-1570K-S
70.0mm Tension Band Pin (Non-Sterile)	30-0098
90.0mm Tension Band Kit	TB-1590K-S
90.0mm Tension Band Pin (Non-Sterile)	30-0099

Instrumentation

Tension Band Pin Snapper	80-0411
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For ordering information, please contact your local Acumed® Sales Representative.





REFERENCES

1. "Complications and re-operation rate after tension-band wiring of olecranon fractures," Romero JM, Miran A, Jensen CH, J Orthop Sci. 2000;5(4):318-20.

ACUMED®

5885 NW Cornelius Pass Road

Hillsboro, OR 97124

(888) 627-9957

www.acumed.net

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