



5.0 mm Large and 7.0 mm X-Large Compression FT  
Screw System

Surgical Technique



Large and X-Large Compression FT

## 5.0 mm Large and 7.0 mm X-Large Compression FT Screws

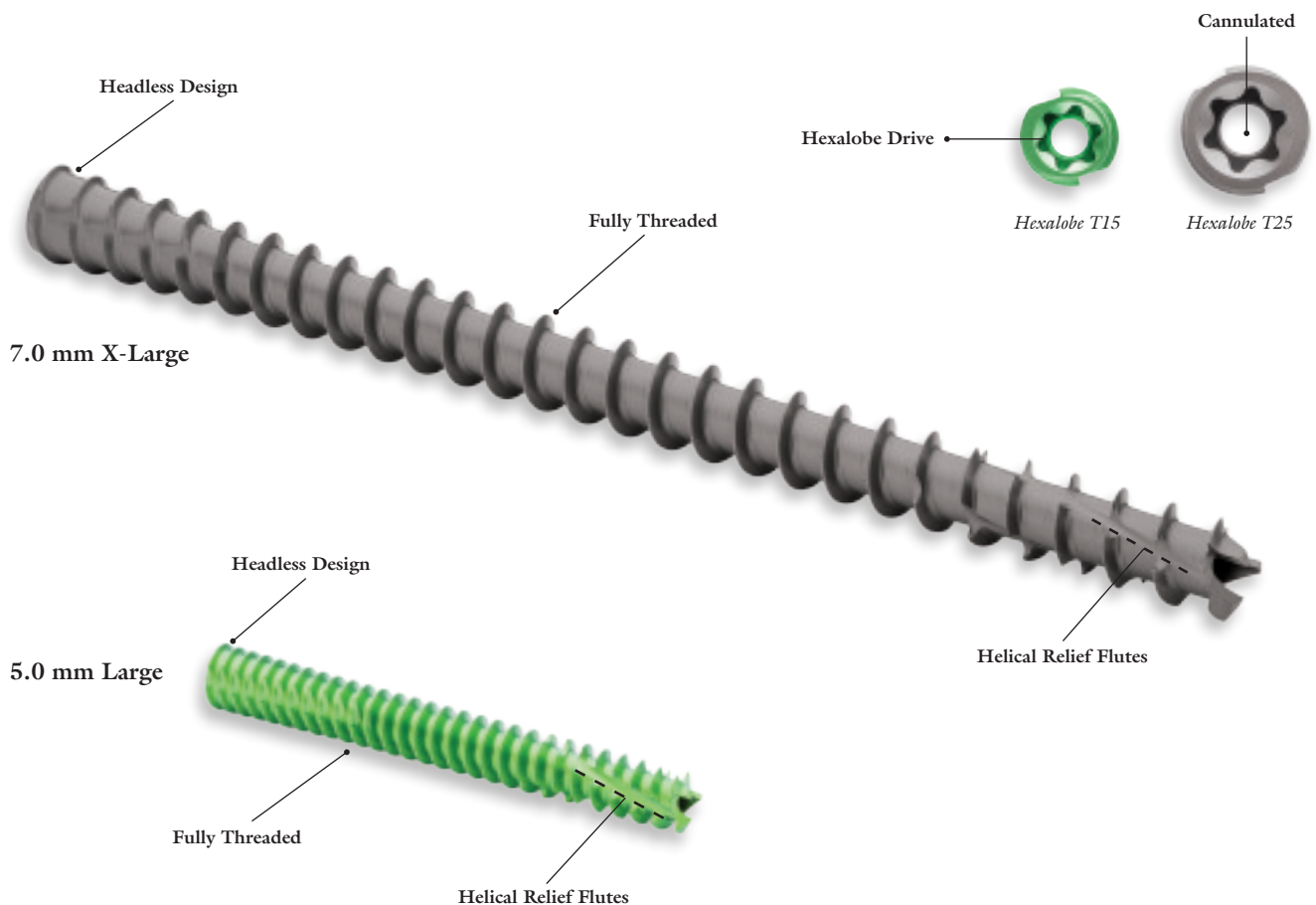
Large-headed screws have presented challenges to foot and ankle surgeons when performing midfoot and hindfoot procedures. Screw head prominence can create patient discomfort and may result in hardware removal. The fully threaded headless, titanium 5.0 mm Large and 7.0 mm X-Large Screws provide surgeons the ability to achieve zero-profile stable fixation with optimized compression. This completes the Compression FT family of screws now offering a total of 5 diameters and 91 unique screw lengths to fit the various orthopedic applications throughout the body.

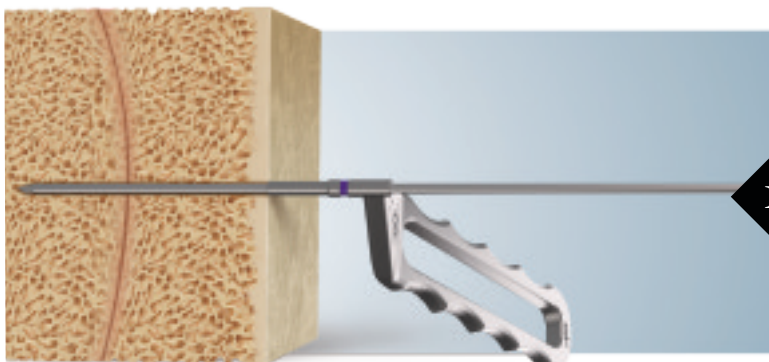
- **Headless Design** – The screws can be implanted intra-articularly and extra-articularly with minimal risk of impingement or soft-tissue irritation.
- **Compression/Fully Threaded** – Variable-stepped thread pitch and tapered proximal profile work together to compress bone fragments into 1 stable rigid unit to help promote bone union. The screw tip's wider thread pitch enters bone faster than trailing threads, gradually compressing the fragments as the screw is advanced.

### Foot and Ankle

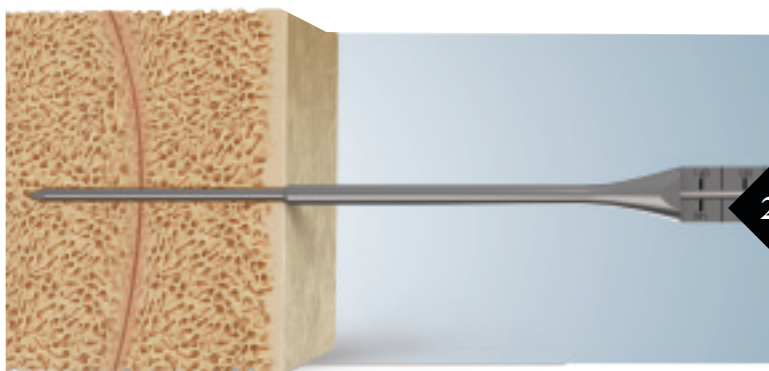
Applications in the foot and ankle include arthrodesis, osteotomies and fracture fixation. The headless Compression FT Screw provides excellent compression and holding power<sup>1</sup>. For lower extremity surgery, the Compression FT Screw may be inserted either percutaneously or in an open procedure. Accurate placement of the screw can be ensured by using the cannulated instrumentation in the set.

- **Helical Relief Flutes** – Located on the distal portion of the screw and designed to assist in bone removal to reduce insertion torque. Available in Compression FT 5.0 mm and 7.0 mm only.
- **Cannulated** – Assists in accurate placement for both percutaneous and open indications
- **Hexalobe Drive** – Improved torque transmission



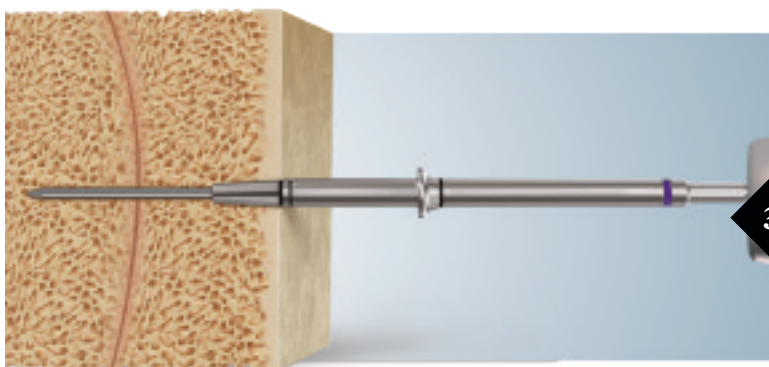


Establish the entry point for fixation and introduce the appropriate Guidewire across the fracture or fusion site. Confirm the accurate wire placement position and appropriate depth under imaging. If the fragment is unstable, it may be helpful to place a second parallel Guidewire.

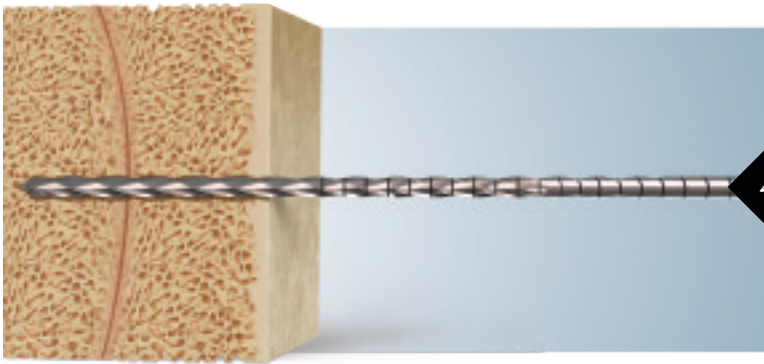


Measure the initial Guidewire length using the Depth Device. It may be necessary to subtract from this length if the desired screw placement is to be countersunk and to account for compression achieved.

After measuring the appropriate screw depth, advance the Guidewire through the far cortex of the operative site to minimize the risk of accidental withdrawal of the Guidewire while drilling.



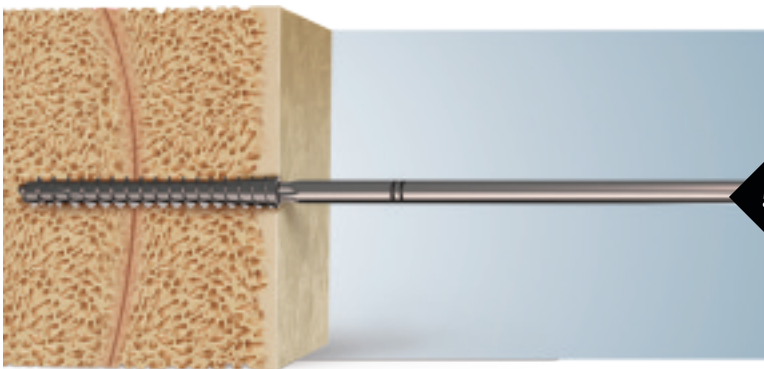
Use the appropriate size Profile Drill over the Guidewire to break the cortical bone layer. Drill to the laser line for flush screw head or hard stop to countersink screw head 2 mm.



4

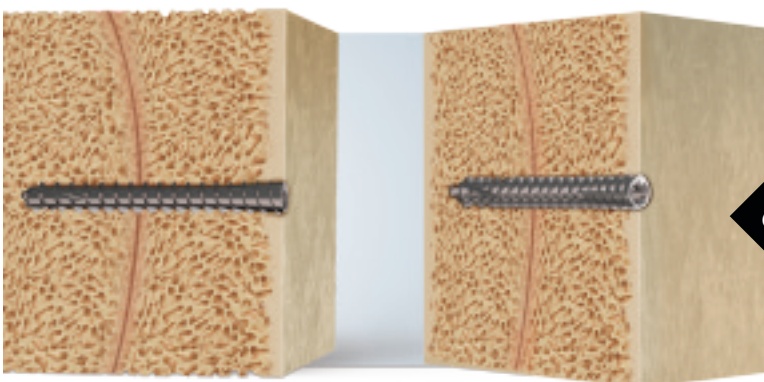
The appropriately sized straight drill bit is used to ream the entire length of the selected screw path. It is important to drill the entire length to prevent distraction of distal fragments.

Use the 3.2 mm straight, cannulated drill bit for the 5.0 mm Large Compression FT Screws and the 5.0 mm straight, cannulated drill bit for the 7.0 mm X-Large Compression FT Screws.



5

Insert the correctly sized screw with the appropriate driver. If resistance is met upon insertion, or if distraction occurs, stop, remove the screw, redrill the entire length with the appropriate cannulated drill and reinsert the screw. Dense bone may require downsizing the screw length.



6

Confirm placement and length of the screw on imaging, ensuring that both leading and trailing edges of the screw are placed beneath the surface if desired. Finally, remove the Guidewires.

### Reference

1. Arthrex Research and Development. Compression and Push-Out Force Comparison of Arthrex to Competitor Compression Screws. LA1-0487-EN\_A. Arthrex Inc. Naples, FL. 2014

## Ordering Information

Compression FT Screw System Set (AR-8750S) includes:

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5.0 mm / 7.0 mm Compression FT Instrument Case	AR-8750C
Depth Device	AR-8750-01
Percutaneous Drill Guide	AR-8750-02
Guidewire Plunger	AR-8737-56
Screw Holding Forceps	AR-8941F
Sharp Hook	AR-8943-21

### *5.0 mm Large Compression FT Screws*

Driver, cannulated, T15 Hexalobe	AR-8750-03
Driver, solid, T15 Hexalobe	AR-8750-06
Guidewire Sleeve, 1.6 mm	AR-8750-07
Soft Tissue Protector, 1.6 mm	AR-8750-08
Drill Sleeve, 5.0 Large	AR-8750-12
Screwdriver Handle, Ratcheting, AO	AR-8970RH

### *7.0 mm X-Large Compression FT Screws*

Driver, cannulated, T25 Hexalobe	AR-8770-01
Driver, solid, T25 Hexalobe	AR-8770-04
Guidewire Sleeve, 2.4 mm	AR-8770-05
Soft Tissue Protector, 2.4 mm	AR-8770-06
Drill Sleeve, 7.0 mm X-Large	AR-8770-09
Screwdriver Handle, Ratcheting, TriLobe Axial Handle	AR-8770RH
Screwdriver Handle, Ratcheting, TriLobe T-Handle	AR-8770TH

Implants:

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### *5.0 mm Large Compression FT Screws*

20 mm-50 mm (2 mm increments)	AR-8750-20H-50H
55 mm-90 mm (5 mm increments)	AR-8750-55H-90H

### *7.0 mm X-Large Compression FT Screws*

35 mm-120 mm (5 mm increments)	AR-8770-35H-120H
125 mm-140 mm (5 mm increments)*	AR-8770-125HS-140HS

Disposables (not included in set):

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### *5.0 mm Disposable Instruments*

Guidewire w/Trocar Tip, 0.062" (1.6 mm)	AR-8750K
Guidewire w/Trocar Tip, 0.062" (1.6 mm), Threaded	AR-8750KT
Profile Drill, 5 mm Large	AR-8750-05
Drill Bit, straight, cannulated, 3.2 mm	AR-8750-04
Drill Bit, straight, cannulated, Long, 3.2 mm	AR-8750-09
Trepine/Extractor, 5.0 mm Large Compression FT	AR-8750-11

### *7.0 mm Disposable Instruments*

Guidewire w/Trocar Tip, .094" (2.4 mm)	AR-8770K
Guidewire w/Trocar Tip, .094" (2.4 mm), Threaded	AR-8770KT
Profile Drill, 7 mm X-Large	AR-8770-03
Drill Bit, straight, cannulated, 5 mm	AR-8770-02
Trepine/Extractor, 7.0 mm X-Large Compression FT	AR-8770-08

Additional Screw Caddies Available (OPTIONAL):

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Compression Screw Caddy, 5.0 mm	AR-8750C-SC-01
Compression Screw Caddy, 7.0 mm	AR-8750SC-02

\*Available outside of set sterile packed



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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. Postoperative management is patient specific and dependent on the treating professional's assessment. Individual results will vary and not all patients will experience the same postoperative activity level or outcomes.*