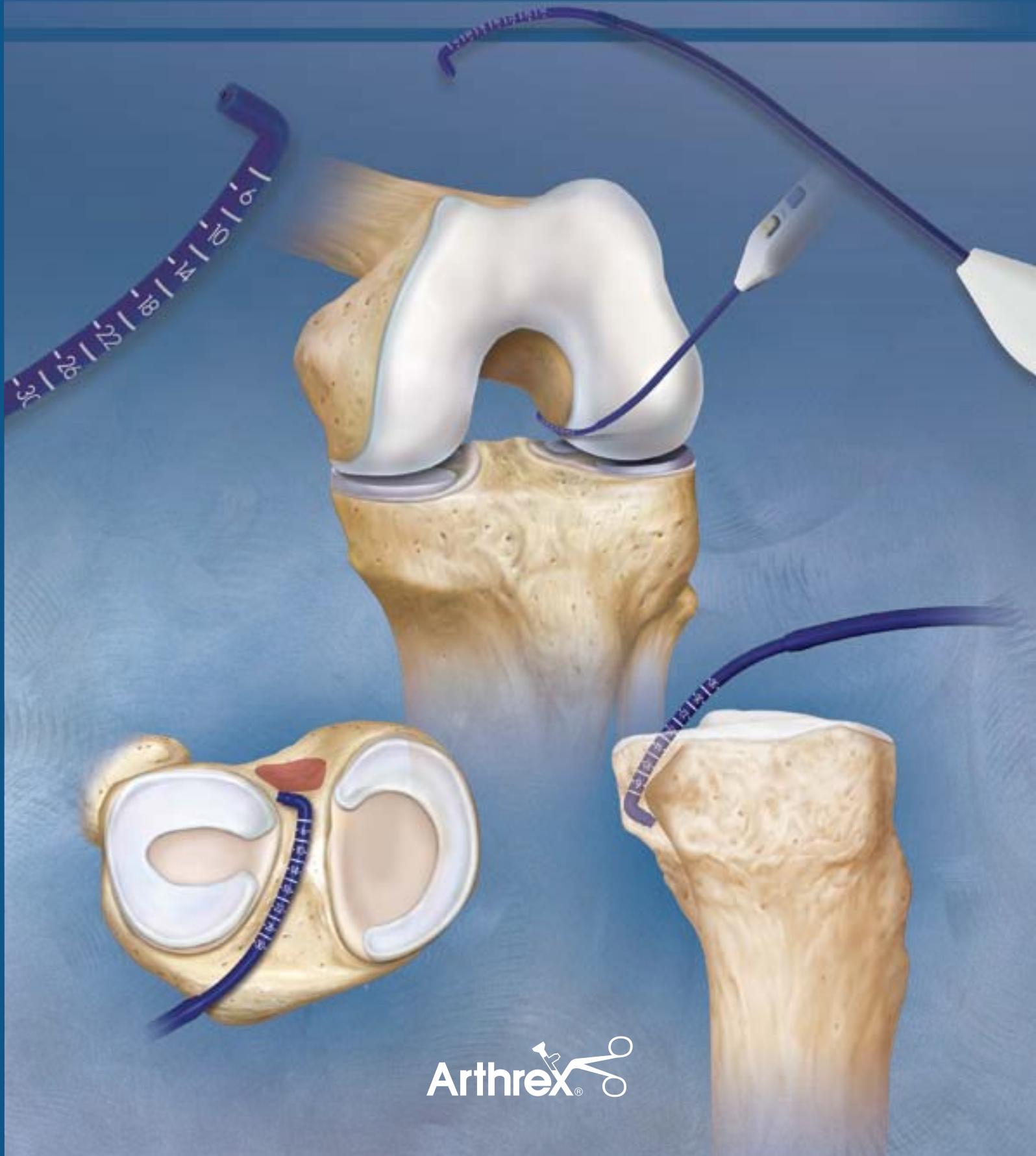


CoolCut CaliBlator™

A New Curve in ACL/PCL Reconstruction Measurement & Ablation





CoolCut CaliBlator for ACL Reconstruction

Anatomic socket placement is paramount to successful ACL reconstruction. Despite extensive research on the location of the native ACL, identification and referencing of the ACL footprint and bony landmarks can be difficult in a live arthroscopic setting. The direct measurement technique has been shown to reproducibly locate the average center of the native ACL in a surgical setting.¹ The CaliBlator further simplifies direct measurement by allowing surgeons to arthroscopically measure the femur and tibia and mark desired guide pin location for reference. The mark can then be referenced for FlipCutter guide placement or with a standard guide pin and Low Profile Reamer through the anteromedial portal.



Ruler-style markings simplify measurement of the ACL footprint and femoral notch length

7 mm tip facilitates measurement, while the fine ablating tip works to both debride soft tissue and clearly demarcate the ACL footprint and guide pin location

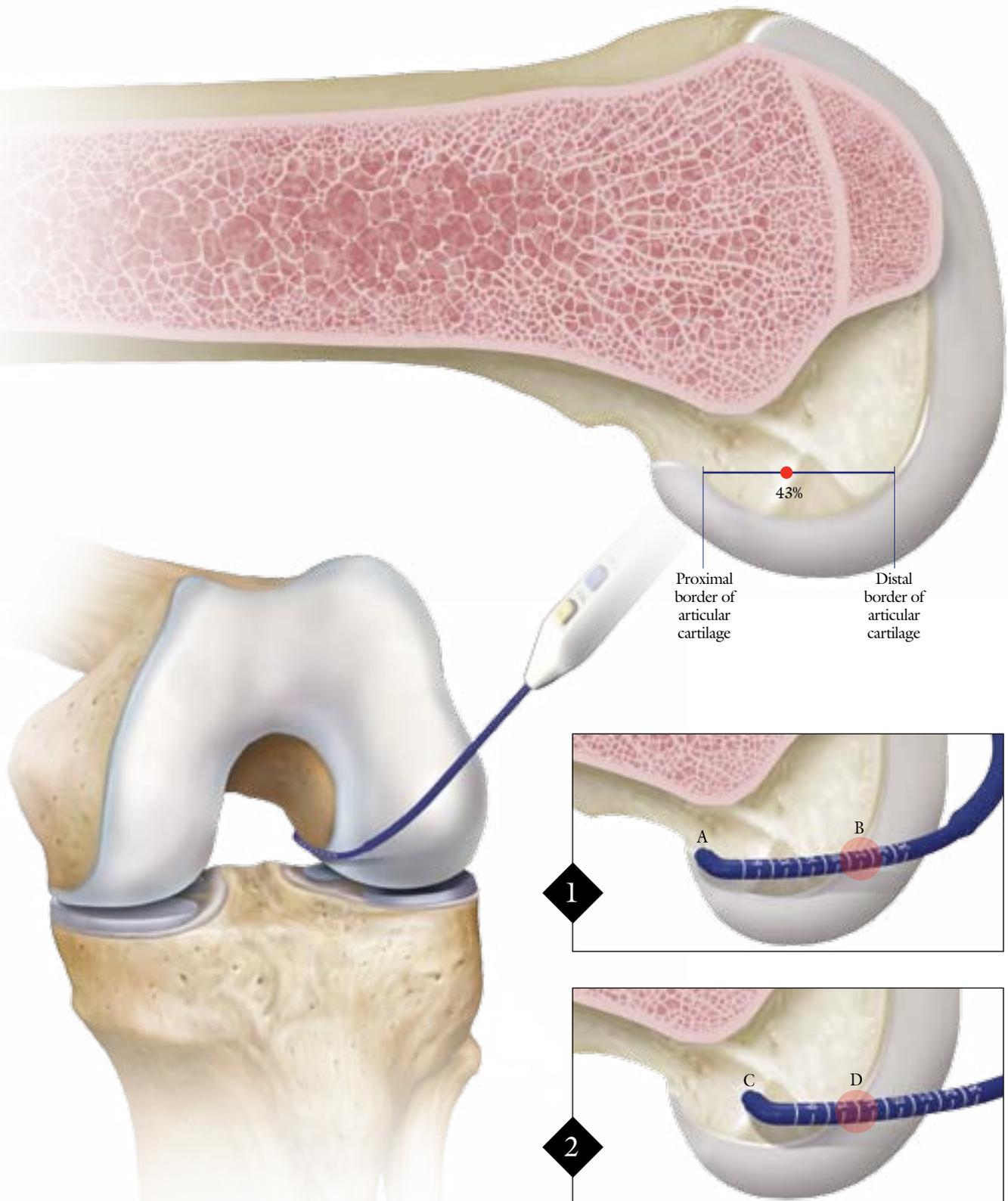
Anatomically-curved shaft permits placement through the lateral portal to allow medial portal arthroscopic viewing of the femoral notch

References:

1. Bird et al, *Validation of a New Technique to Determine Midbundle Femoral Tunnel Position in ACLR Using 3D CT Analysis*, Arthroscopy, Vol 27, No 9, 2011: pp 1259-1267.
2. Lubowitz et al, *ACL Femoral Footprint Anatomy: Systematic Review of the 21st Century Literature*, Arthroscopy, Vol 28, No 6, 2012: pp 872-881.
3. Hwang et al, *ACL Tibial Footprint Anatomy: Systemic Review of the 21st Century Literature*, Arthroscopy, Vol 28, No 5, 2012: pp 728-734.

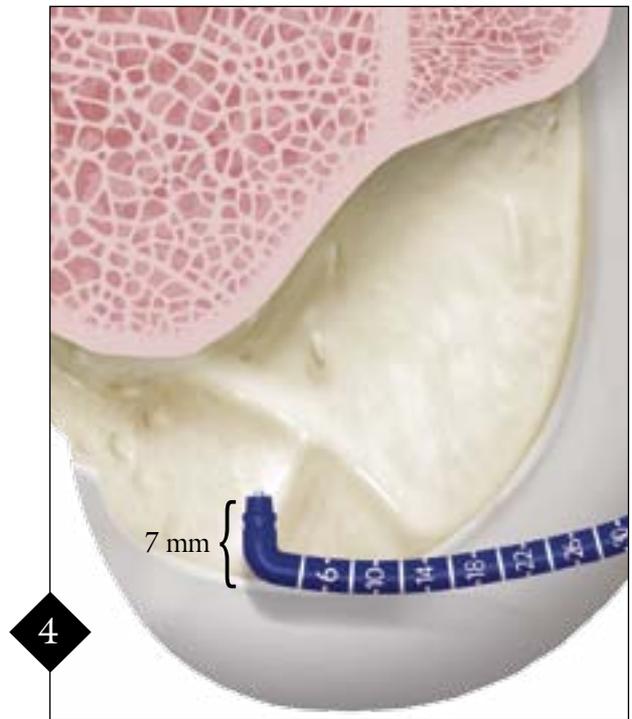
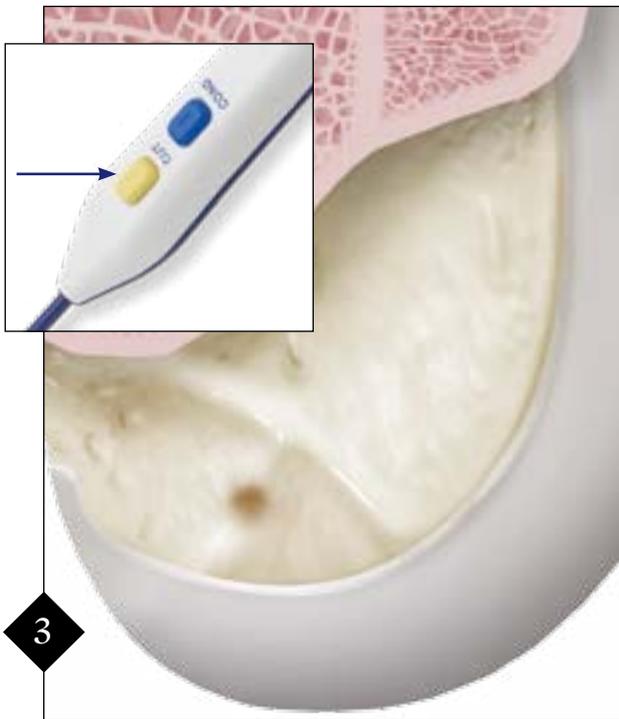
Anatomic Femoral ACL Socket Placement Technique

Anatomic studies have shown that the average center of the femoral ACL footprint is located approximately halfway, or 43%, of the distance from the proximal cartilage border to the distal cartilage border.²



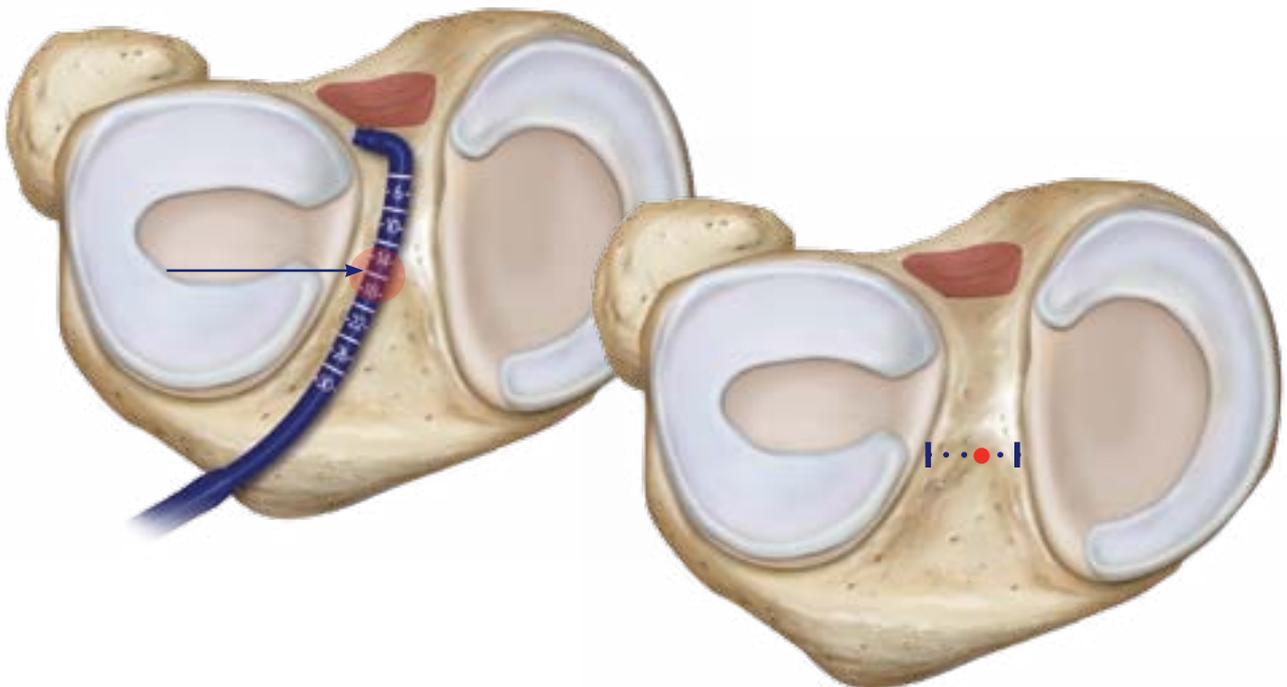
The CoolCut CaliBlator Probe is placed through the lateral portal. Tissue should be cleared from the proximal cartilage border so the transition from posterior cortex to cartilage can be seen on the femoral condyle. With the shaft of the CaliBlator parallel to the long axis of the femur, place the tip at the junction of the cartilage and posterior cortex (A). Note the measurement at the distal cartilage border, in this case 22 mm (B).

The CaliBlator tip can now be moved distally until the measurement at the distal border is near half (43%) from the backwall (C). In this case, the ruler should read near 12.5 mm to the anterior cartilage, which would leave 9.5 mm (43% of 22 mm) to the posterior cartilage (D).



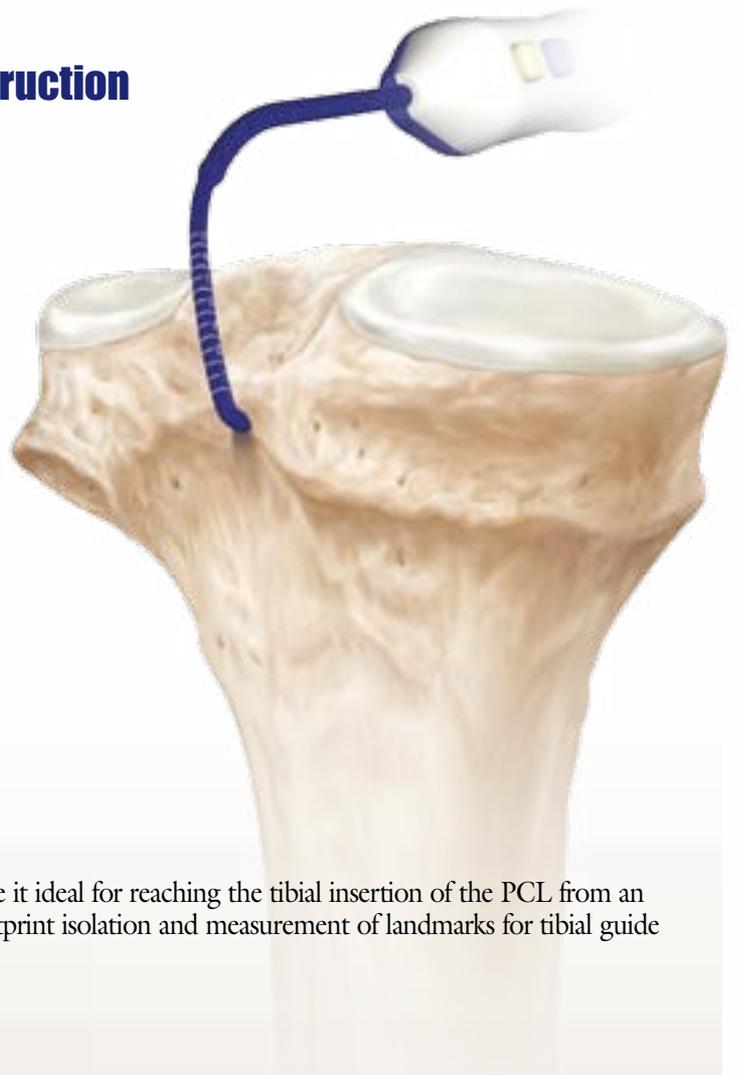
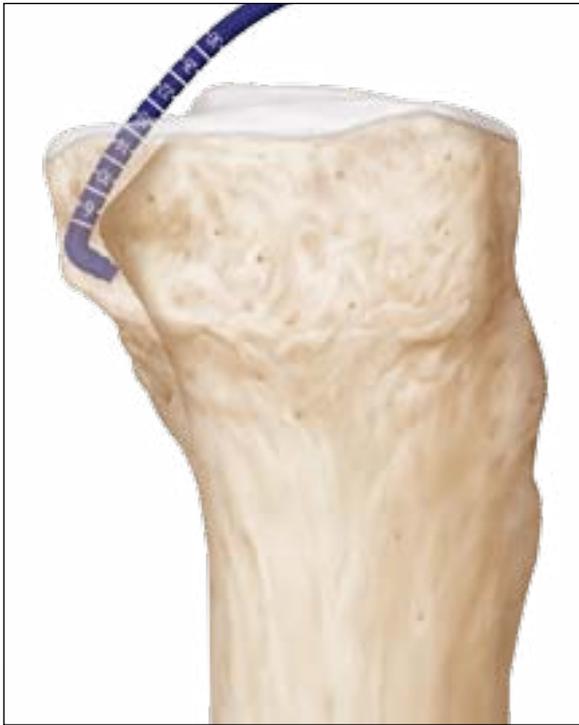
Activate the CaliBlator, by depressing the CUT button, to mark the spot on the lateral notch for reference (3). To measure the anterior-posterior position, the 7 mm tip of the CaliBlator may be used by referencing the posterior cartilage (4). The edge of the ACL footprint has been shown to be approximately 3 mm from the posterior cartilage². Therefore the AP center of the femoral socket should be equal to the radius of the socket plus 3 mm. For example, when drilling a 10 mm socket, the center should be equal to the radius (5 mm) + 3 mm = 8 mm.

Anatomic Tibial ACL Socket Placement

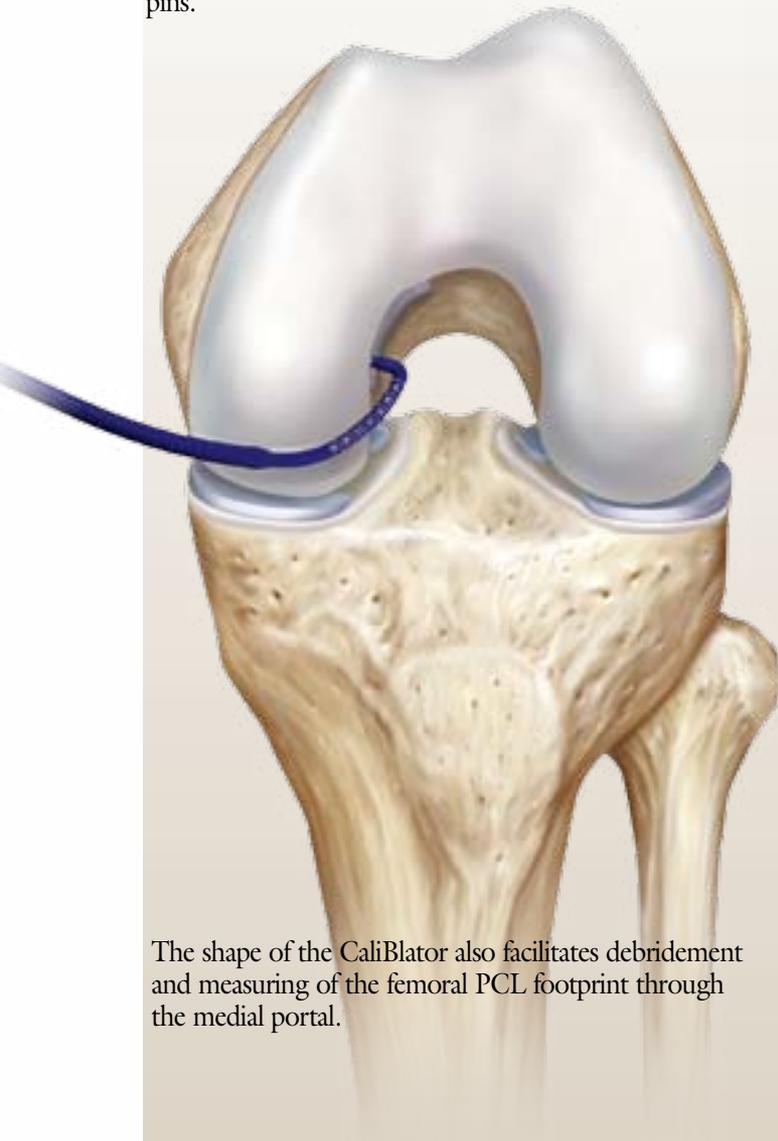


The CaliBlator can also be used to help estimate tibial guide pin placement. Laying the end of the CaliBlator against the PCL allows measurement in the AP direction. Current recommendations from the literature approximate a 15 mm average distance from the PCL and $\frac{2}{5}$ of the distance from the medial tibial spine to the lateral tibial spine.³

CoolCut CaliBlator for PCL Reconstruction



The unique curvature and flexibility of the CaliBlator make it ideal for reaching the tibial insertion of the PCL from an anterior portal. This facilitates soft tissue debridement, footprint isolation and measurement of landmarks for tibial guide pins.



The shape of the CaliBlator also facilitates debridement and measuring of the femoral PCL footprint through the medial portal.

Ordering Information

CoolCut CaliBlator Probe

AR-9802C



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.



PATENT PENDING

© 2013, Arthrex Inc. All rights reserved. LTI-0141-EN_A