Hamstring Graft Harvesting

Minimally Invasive Hamstring Graft Harvesting

Surgical Technique

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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Ordering Information

Minimally Invasive Graft Harvesting Set (AR-1279S) includes:

- Minimally Invasive Graft Harvester, open AR-1279PL
- Minimally Invasive Graft Harvester, closed AR-1279L
- Minimally Invasive Graft Harvester Case AR-1279C
The tendons are palpated in the area of the medial popliteal fossa and a 2 cm transverse skin incision is made over the tendons. Dissect subcutaneous tissue until the popliteal fascia is visualized. Incise the fascia longitudinally. At this level, the semitendinosus is just inferior to the gracilis. Muscle tissue is usually visible on the gracilis, whereas the semitendinosus is tendon only.

Clean the muscle off the tendon and stitch using #2 FiberLoop®. Pass the closed Minimally Invasive Graft Harvester over the tendon. Advance the harvester toward the tendon insertion, while pulling proximally on the tendon until the tendon is freed from the tibial cortex.

Using a right angled clamp, retract the semitendinosus and cinch a FiberTape® suture around the tendon. Free the tendon by pulling proximally and distally away from surrounding tissue. Identify and resect fascial attachments.

Place the tendon through the open Minimally Invasive Graft Harvester and advance the harvester proximally while pulling distally on the tendon, until the tendon is released.

If the gracilis tendon is also to be harvested, this may be found just superior to the position of the semitendinosus, as described in step one. Follow the same technique for removal of this tendon. The incision may then be closed.
The tendons are palpated in the area of the medial popliteal fossa and a 2 cm transverse skin incision is made over the tendons. Dissect subcutaneous tissue until the popliteal fascia is visualized. Incise the fascia longitudinally. At this level, the semitendinosus is just inferior to the gracilis. Muscle tissue is usually visible on the gracilis, whereas the semitendinosus is tendon only.

Clean the muscle off the tendon and stitch using #2 FiberLoop®. Pass the closed Minimally Invasive Graft Harvester over the tendon. Advance the harvester toward the tendon insertion, while pulling proximally on the tendon until the tendon is freed from the tibial cortex.

Using a right angled clamp, cinch a FiberTape® suture around the tendon. Free the tendon by pulling proximally and distally away from surrounding tissue. Identify and resect fascial attachments.

Place the tendon through the open Minimally Invasive Graft Harvester and advance the harvester proximally while pulling distally on the tendon, until the tendon is released.

If the gracilis tendon is also to be harvested, this may be found just superior to the position of the semitendinosus, as described in step one. Follow the same technique for removal of this tendon. The incision may then be closed.

The Arthrex Minimally Invasive Graft Harvesting Set includes two harvesters made especially for the minimally invasive technique. Shorter shafts improve stiffness and facilitate harvesting from the posteromedial incision. The open harvester is long enough to loads the thicker, more proximal portions of the hamstring tendons. The closed distal harvester is slightly sharper permitting elevation of the tendon off the bony insertion.

The mini hamstring harvest is done with no change in position from standard preparation for ACLR. The knee is kept flexed and the hip is externally rotated.

Reference:
Minimally Invasive Hamstring Graft Harvesting

The minimally invasive hamstring harvest technique allows for removal of the hamstring tendons through a small posteromedial incision. Because the hamstring tendons lie more superficial in the popliteal crease they are easily exposed and released from proximal attachments. The small incision also improves cosmesis and may decrease post-op morbidity.

Reference:

The minimally invasive hamstring harvest is done with no change in position from standard preparation for ACLR. The knee is kept flexed and the hip is externally rotated.

1. The tendons are palpated in the area of the medial popliteal fossa and a 2 cm transverse skin incision is made over the tendons. Dissect subcutaneous tissue until the popliteal fascia is visualized. Incise the fascia longitudinally. At this level, the semitendinosus is just inferior to the gracilis. Muscle tissue is usually visible on the gracilis, whereas the semitendinosus is tendon only.

2. Clean the muscle off the tendon and stitch using #2 FiberLoop®. Pass the closed Minimally Invasive Graft Harvester over the tendon. Advance the harvester toward the tendon insertion, while pulling proximally on the tendon until the tendon is freed from the tibial cortex.

3. Using a right angled clamp, retrieve the semitendinosus and cinch a FiberTape® suture around the tendon. Free the tendon by pulling proximally and distally away from surrounding tissue. Identify and resect fascial attachments.

4. Place the tendon through the open Minimally Invasive Graft Harvester and advance the harvester proximally while pulling distally on the tendon, until the tendon is released.

5. If the gracilis tendon is also to be harvested, this may be found just superior to the position of the semitendinosus, as described in step one. Follow the same technique for removal of this tendon. The incision may then be closed.

6. The minimally invasive hamstring harvest technique allows for removal of the hamstring tendons through a small posteromedial incision. Because the hamstring tendons lie more superficial in the popliteal crease they are easily exposed and released from proximal attachments. The small incision also improves cosmesis and may decrease post-op morbidity.

Reference:

The Arthrex Minimally Invasive Graft Harvesting Set includes two harvesters made especially for the minimally invasive technique. Shorter shafts improve stiffness and facilitate harvesting from the posteromedial incision. The open harvester is long enough to load the thicker, more proximal portion of the hamstring tendon. The closed distal harvester is highly designed permitting elevation of the tendon off the tibial insertion.

The mini hamstring harvest is done with no change in position from standard preparation for ACLR. The knee is kept flexed and the hip is externally rotated.

1. The tendons are palpated in the area of the medial popliteal fossa and a 2 cm transverse skin incision is made over the tendons. Dissect subcutaneous tissue until the popliteal fascia is visualized. Incise the fascia longitudinally. At this level, the semitendinosus is just inferior to the gracilis. Muscle tissue is usually visible on the gracilis, whereas the semitendinosus is tendon only.

2. Clean the muscle off the tendon and stitch using #2 FiberLoop®. Pass the closed Minimally Invasive Graft Harvester over the tendon. Advance the harvester toward the tendon insertion, while pulling proximally on the tendon until the tendon is freed from the tibial cortex.

3. Using a right angled clamp, retrieve the semitendinosus and cinch a FiberTape® suture around the tendon. Free the tendon by pulling proximally and distally away from surrounding tissue. Identify and resect fascial attachments.

4. Place the tendon through the open Minimally Invasive Graft Harvester and advance the harvester proximally while pulling distally on the tendon, until the tendon is released.

5. If the gracilis tendon is also to be harvested, this may be found just superior to the position of the semitendinosus, as described in step one. Follow the same technique for removal of this tendon. The incision may then be closed.

Reference:
Surgical Technique

This description of technique is provided as an educational tool and should not be used to practice on an unconsenting patient or any other means of medical training without the supervision of a licensed medical professional. 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.

Ordering Information

Minimally Invasive Graft Harvesting Set (AR-1279S) includes:

- Minimally Invasive Graft Harvester, open AR-1279PL
- Minimally Invasive Graft Harvester, closed AR-1279L
- Minimally Invasive Graft Harvester Case AR-1279C

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Surgical Technique

Ordering Information

Minimally Invasive Graft Harvesting Set (AR-1279S) includes:

- Minimally Invasive Graft Harvester, open AR-1278P
- Minimally Invasive Graft Harvester, closed AR-1279L
- Minimally Invasive Graft Harvester Case AR-1279C

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