

MATRIS

La Plaque Cervicale
The Cervical Plate



Surgical Procedure



NovaSpine

Table of Contents

Instruments Range	4
Indications	5
Implant Setting	5
Implant Fixation	6

Instruments Range



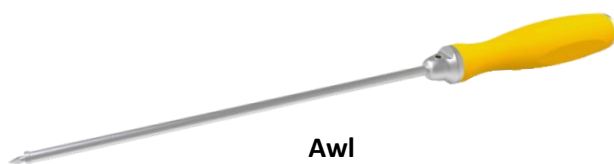
Stabilization Pin
MIP105



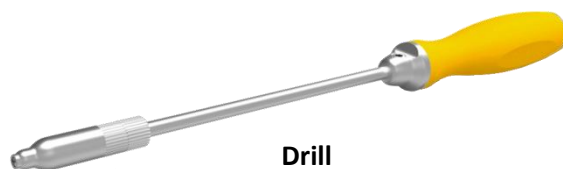
Pin Holder
MIP104



Plate Holder
MIPP101



Awl
MIPC106



Drill
MIFP102



Screwdriver
MITP103

Indications

The MATRIS Cervical Plate is indicated for cervical disc replacement procedures in skeletally mature patients with cervical disc disease, deformities, failed previous fusions.

The MATRIS Cervical Plate is implanted in cervical spine from C2 to T1 levels, via an open anterior approach. It may be supplemented with DIVA Cervical Cage.

Implant Setting

Hold the plate in the middle area with the plate holder (*Figure 1*). Screw the pin into the pin holder (*Figure 2*) to prepare implant positioning.

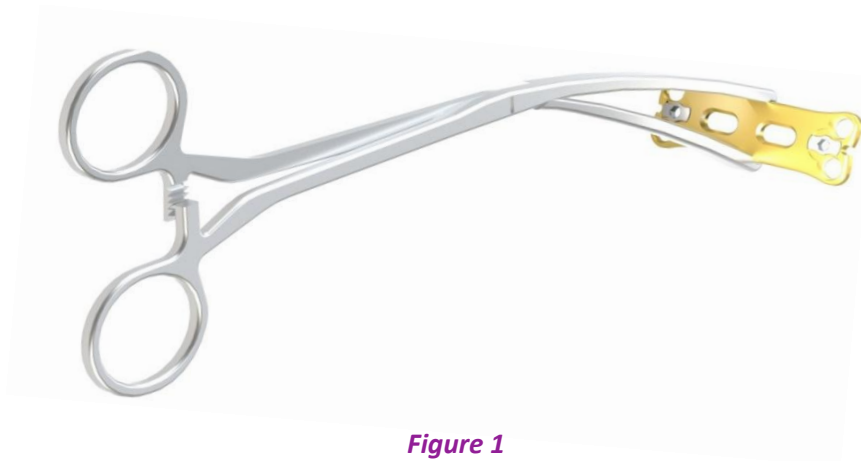


Figure 1



Figure 2

The plate is pre-bent but an additional bending may be performed if necessary, with the help of a rod bender. Place the plate in its final position on the vertebrae and insert one pin, by pushing until contact with the plate, in each positioning hole (*Figure 3*). The pin has a flat part to avoid its rotation during removal of the holder. Unscrew pin holder and remove it. Remove the plate holder. An X-Ray can be made to control the correct size and position of the plate.



Figure 3

Implant Fixation

Standard Screws

Use the drill with guide to make the path for the screw. Adapt the tip of the guide into the hole of the plate and push the drill to create the path (*figure 4*). Assemble the screw to the screwdriver and insert it in the prepared hole. Then assemble screws to the screwdriver and fix the plate in its four corners (*Figure 5*). For a better setting of the plate it is recommended to insert all the screws without tightening, beginning with two screws in diagonally opposite position. The pins may now be removed. Tighten the screws firmly until full contact with the plate, to ease the rotation of the locking buttons.

Turn the locking buttons 90°, using the same screwdriver to avoid backout of screws (*Figure 6*).

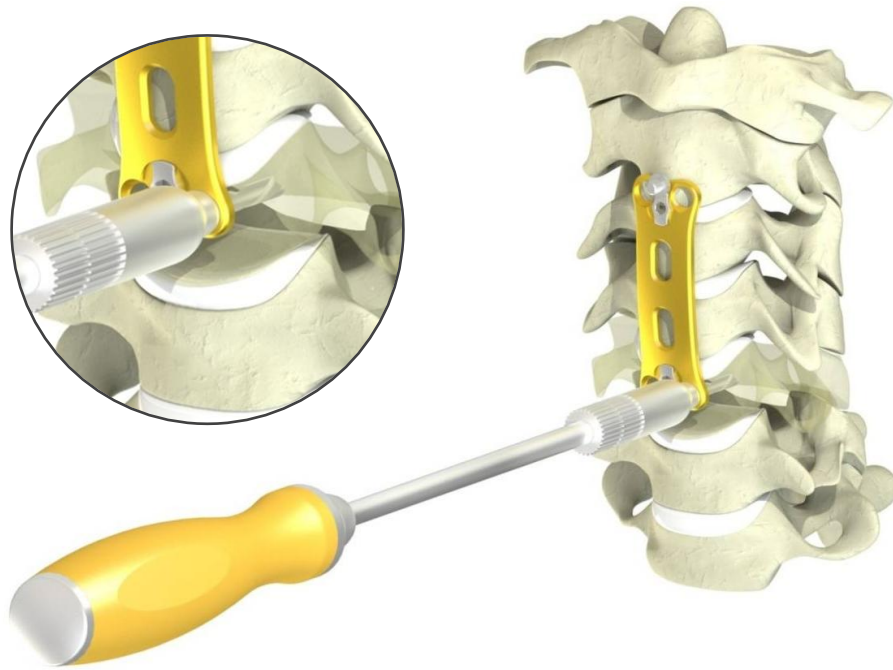


Figure 1

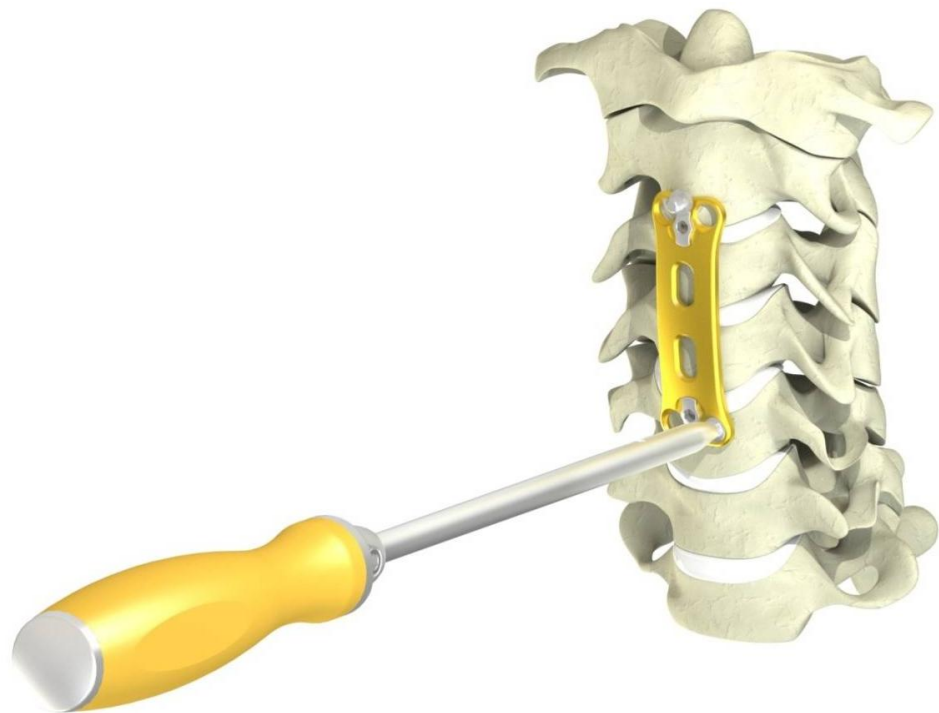


Figure 2

Self-Tapping Screws

When using self-tapping screws, use the awl to create the entry holes for the screws. Assemble the screws to the screwdriver and insert them directly using the same procedure than standard screws.

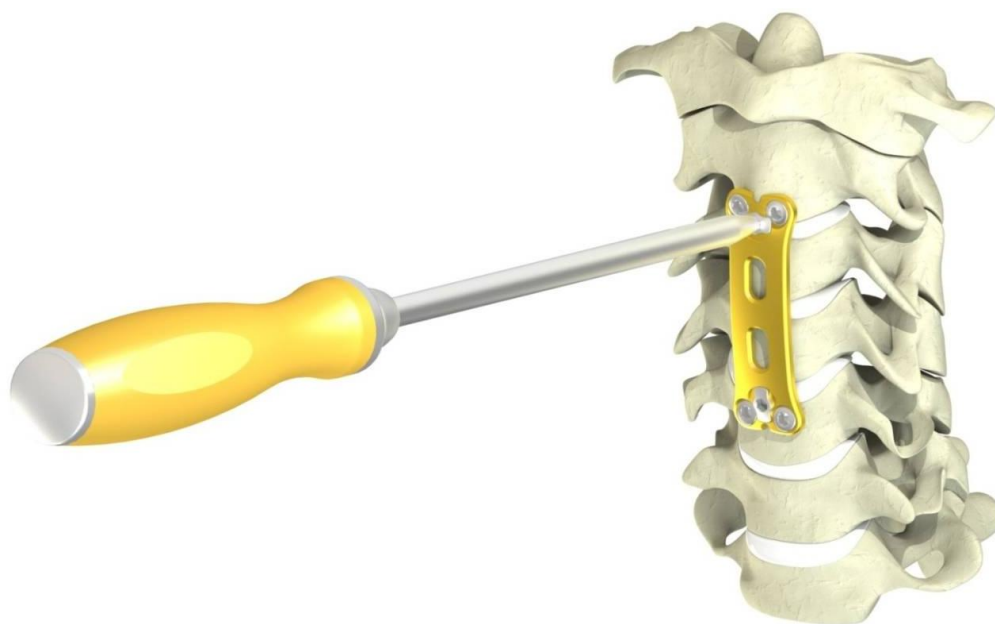


Figure 6

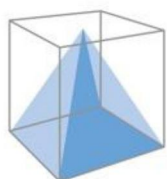
For long sizes plates, additional screws may be inserted in middle holes, following same steps, to fix the plate to all vertebral bodies, as shown in the final construct (*Figure 7*).



Figure 7

The surgical technique shown is for illustrative purpose only. The actual techniques employed will always depend on surgeons' medical judgment and can differ from one patient to another.

Distribuidor por:



BIOSpine. S.L.

Camino de los Cinamomos 283-5

33203 - Gijón (Asturias)

985195325

info@biospine.info



NovaSpine

335, Rue Saint-Fuscien

80090 Amiens – France

0033 (0)3 22 50 07 31

contact@novaspine.fr