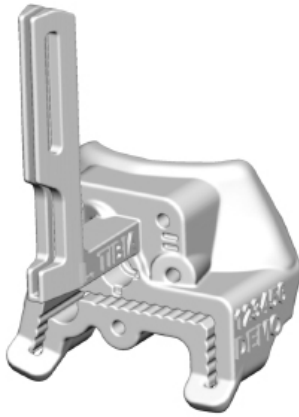
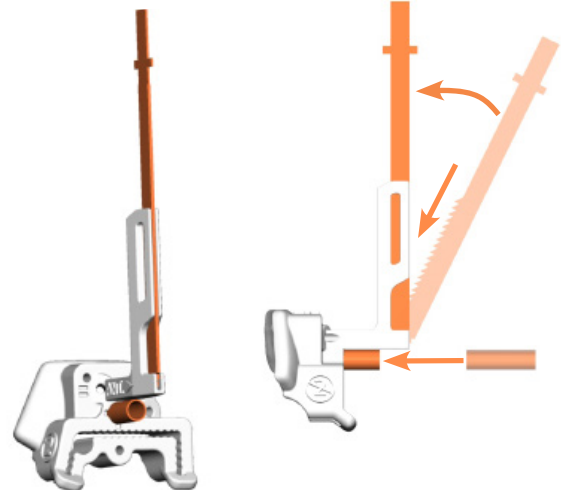


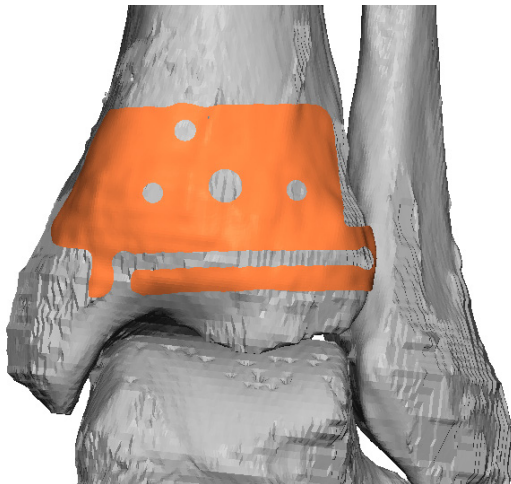
## PROCEDURE A: 3D TIBIA CUTTING GUIDE



**1.** Confirm the work order number and patient information on the **Tibia Cutting Guide** are correct.



**2.** Press the **Fluoroscopic Insert** and a **Reciprocating Saw Blade** into the **Tibia Cutting Guide**. The **Reciprocating Saw Blade** should be inserted with the teeth facing into the blade mount.

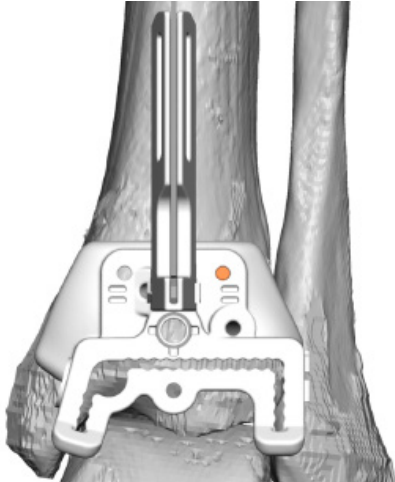


**3.** Take down soft tissue on the anterior surface of the tibia in all guide-contacting areas (shown in the “heat map” image in the Case Report). Ensure adequate dissection has been performed to accommodate the 0.5mm soft tissue tolerance of the **Tibia Cutting Guide**.

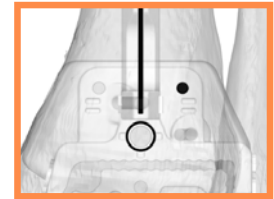
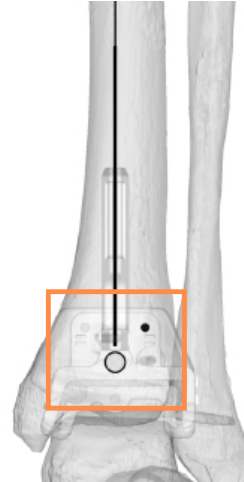


**4.** Place the **Tibia Cutting Guide** in the best fit location. Visually confirm the **Guide** is seated evenly around its perimeter.  
**Note:** Determining the best fit location may require applying pressure from multiple vectors and/or with two hands. The best fit location is often found by placing the **Guide** more proximal of the fit location shown on the case report and sliding the **Guide** distally until it locks into place.

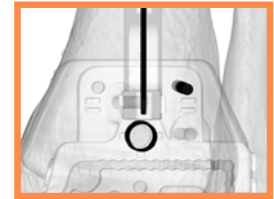
## PROCEDURE A: 3D TIBIA CUTTING GUIDE



5. Place a **Pin** through one of the Parallel Fixation Holes on the **Tibia Cutting Guide** for initial fixation.



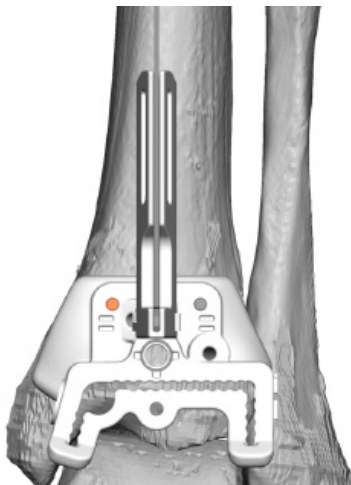
Correct Alignment



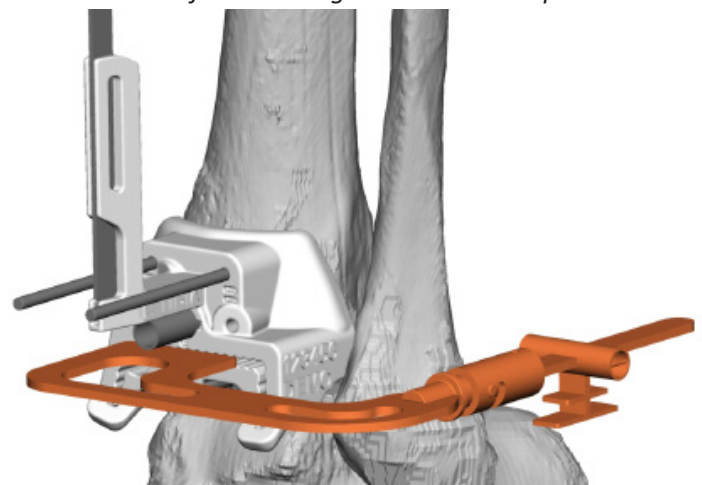
Incorrect Alignment

6. Take an anterior fluoroscopic image to confirm placement of the **Tibia Cutting Guide** matches the Case Report. Use the **Fluoroscopic Insert** to aid in view alignment.

**Note:** *Guide placement may be adjusted around the initial **Pin** and should be intermittently evaluated by taking anterior fluoroscopic images and comparing the coronal alignment and medial/lateral location of the **Guide** to the reference images in the Case Report.*

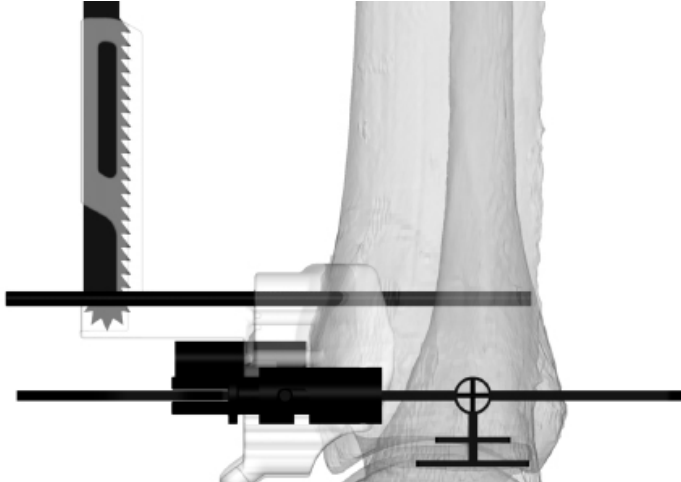


7. Place a second **Pin** through the remaining Parallel Fixation Hole of the **Tibia Cutting Guide**.

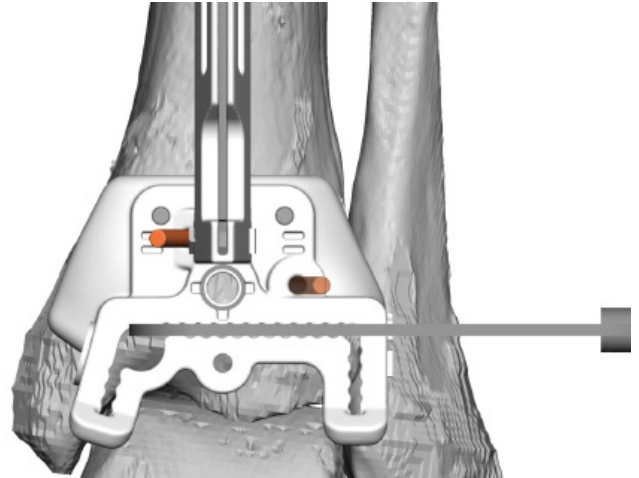


8. Set the **Vantage Ankle 3D/3D+ Reversible Angel Wing** to the designated configuration for the appropriate operative side. Insert the **Angel Wing** into the Resection Slot of the **Tibia Cutting Guide** with the body of the **Angel Wing** wrapping to the lateral side of the ankle. Ensure the **Angel Wing** is fully inserted so that it sits flush against the anterior surface of the **Guide**.

## PROCEDURE A: 3D TIBIA CUTTING GUIDE

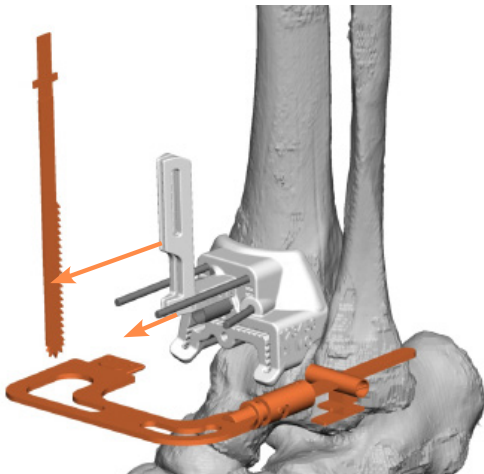


**9.** Take a lateral fluoroscopic image to confirm that the height and location of the tibia cut match the reference images in the Case Report. It is recommended that the Foot/**Angel Wing** be positioned as close to the detector as possible for the most accurate fluoroscopic representation of the cut location.

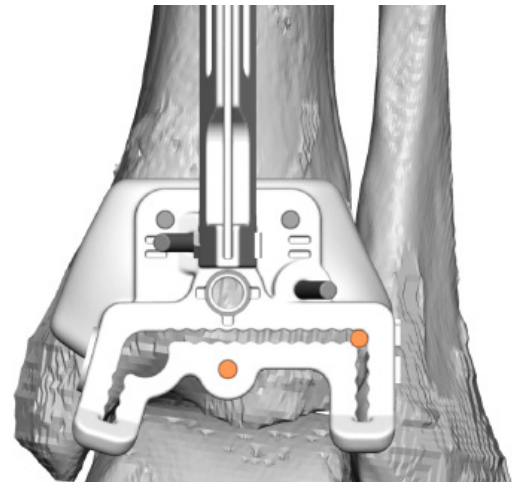


**10.** Place a **Pin** into an Oblique Fixation Hole to lock the **Tibia Cutting Guide** into place.

**Note:** Priority should be given to the Proximal Oblique Fixation Hole as the location of this hole corresponds to an oblique hole in the **Punch Guide** (used later in the technique) and can thus be used to guide anterior/posterior placement of the **Tibia Implant**. If this oblique fixation option is not available (i.e., burned after adjusting **Guide** position or not present on **Guide** for patient specific surgical considerations), the Secondary Oblique Fixation Hole may be used.

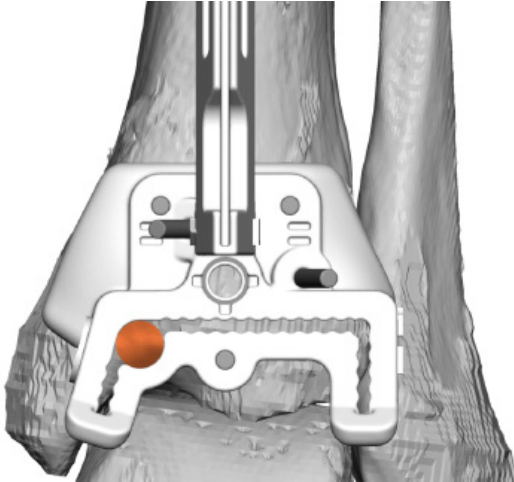


**11.** Remove the **Vantage Ankle 3D/3D+ Reversible Angel Wing** and the **Reciprocating Saw Blade** from the **Tibia Cutting Guide**.



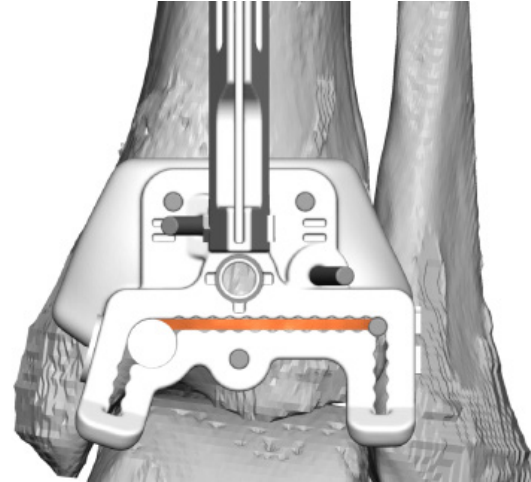
**12.** Place **Pins** into the Lateral Resection Limit Hole and the Distal Fixation Hole.

## PROCEDURE A: 3D TIBIA CUTTING GUIDE

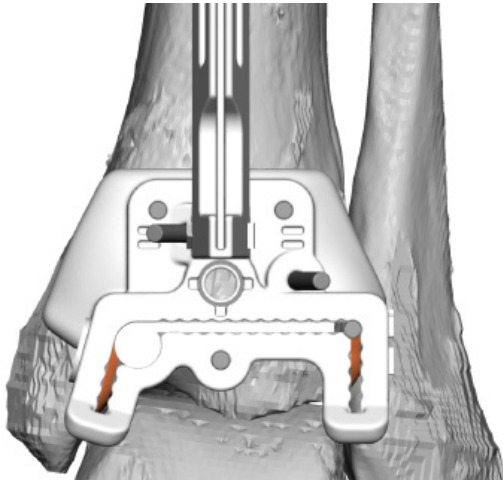


**13.** Use the **Corner Drill** to prepare the rounded corners of the tibial resection, taking care to avoid the posterior soft tissues.

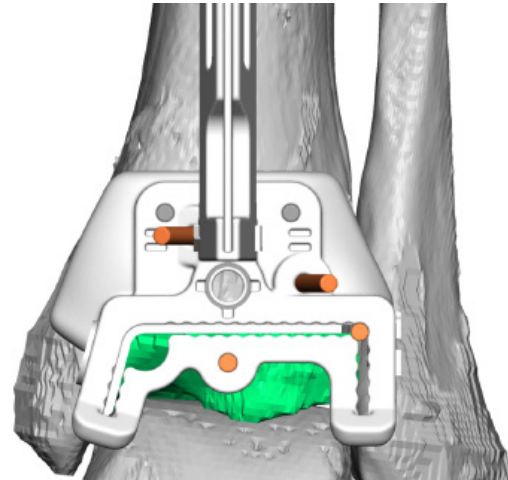
*Note: Optionally, insert a **Corner Plug** into the Drill Hole upon completion of the drilling to protect the rounded edges of the resection during the subsequent saw steps.*



**14.** Use an **Oscillating Saw** to perform the axial portion of the tibial resection, taking care to avoid penetrating through the posterior capsule where the neurovascular bundle is located.

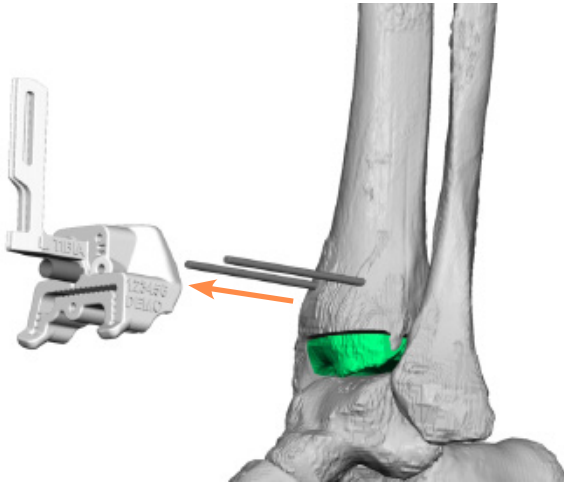


**15.** Use a **Reciprocating Saw** to perform the vertical portion(s) of the resection.



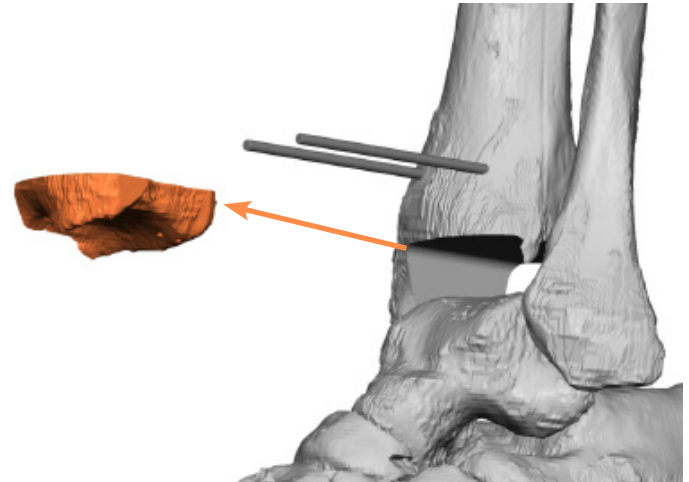
**16.** Remove all **Pins** with the exception of the two **Pins** in the Parallel Fixation Holes.

## PROCEDURE A: 3D TIBIA CUTTING GUIDE



**17.** Remove the **Tibia Cutting Guide** by sliding it off the two remaining **Pins**. Lavage the operative site to remove any generated debris.

**Note:** A portion of the anterior-lateral tibia may remain after the initial cut. This bone may be carefully cut with the **Reciprocating Blade** to complete the resection or



**18.** If using a **Decoupled Talus Cutting Guide**, remove resected anatomy and the remaining **Pins**. Refer to the **Exactech Vantage Ankle Instrumentation Operative Technique** for tools and techniques.

If using a **Coupled Talus Cutting Guide**, the resected tibia bone may be left in place for later removal as a unit with the tibia resected anatomy.

### Supplemental Information:

To ensure successful surgery in the event of device malfunction, have a tray of standard **Exactech Vantage Ankle** instrumentation available at the time of surgery. Switch to standard **Exactech Vantage Ankle** instrumentation if the device is dropped in the surgical suite.

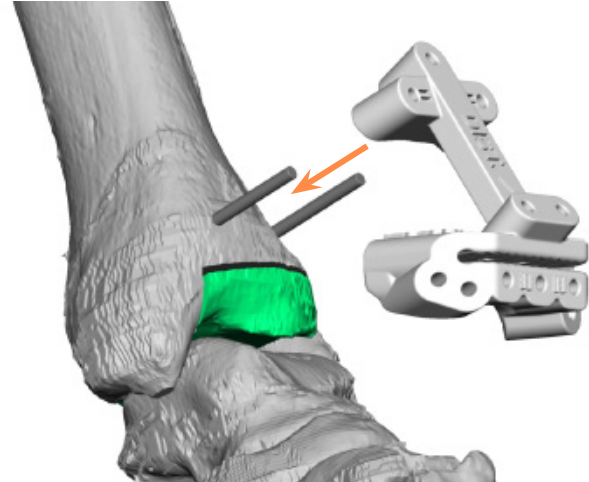
CONSULT INSTRUCTIONS FOR USE PRIOR TO USING GUIDES

## PROCEDURE B1: COUPLED CURVED CUT TALUS CUTTING GUIDE

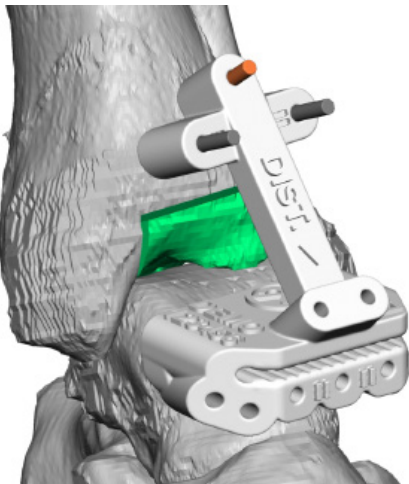
(If case is a Flat Cut Talus, proceed to Procedure B2. If case is a Decoupled Talus, proceed to Procedures C1 and C2)



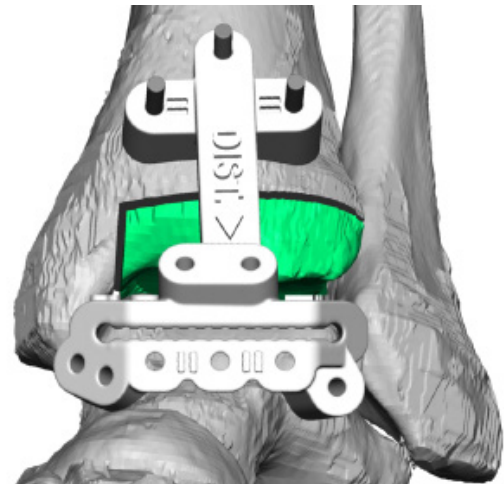
**1.** Confirm the work order number and patient information on the **Talus Cutting Guide** are correct.



**2.** Take down soft tissue on surface of the talar dome and neck in all guide-contacting areas (shown in the “heat map” image in the Case Report). Ensure adequate dissection has been performed to accommodate the 0.5mm soft tissue tolerance of the **Talus Cutting Guide**. Slide the **Guide** over the remaining tibial **Pins**.

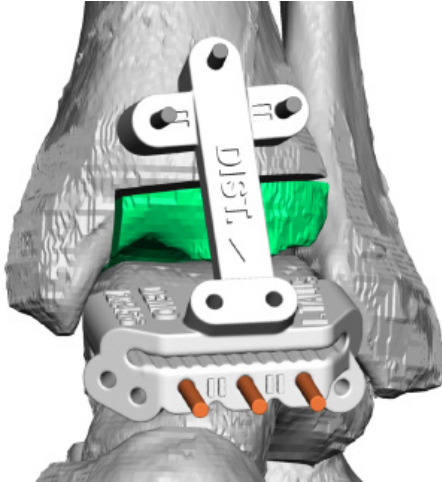


**3.** Ensure the **Talus Cutting Guide** is fully seated against the tibia and place a **Pin** in the Tibia Oblique Fixation Hole.

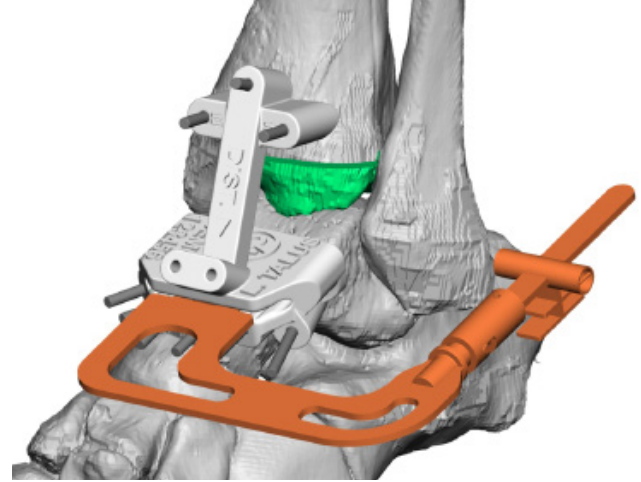


**4.** While rotating the foot as necessary, place the **Talus Cutting Guide** in the best fit location. Visually confirm the **Guide** is seated evenly around its perimeter.  
*Note: Determining the best fit location may require applying pressure from multiple vectors and/or with two hands. Use the Case Report for visual reference of correct **Guide** placement.*

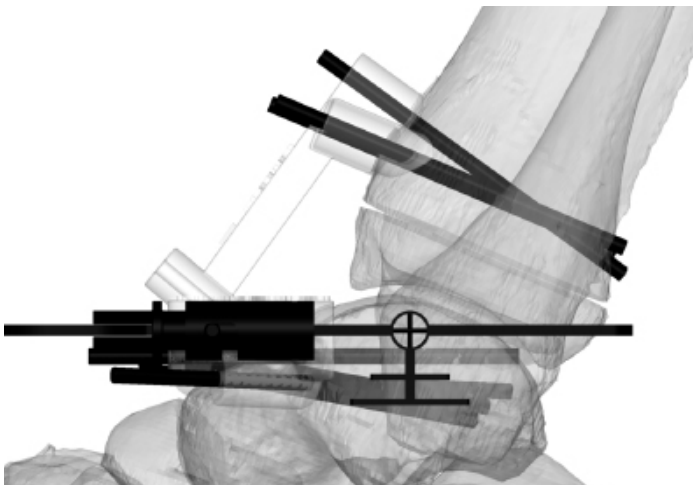
## PROCEDURE B1: COUPLED CURVED CUT TALUS CUTTING GUIDE



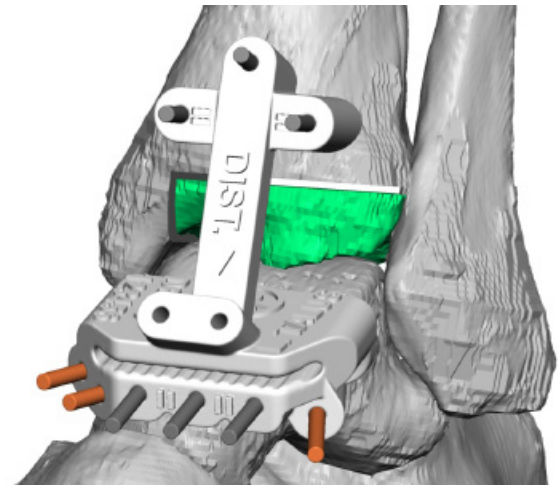
5. Place a **Pin** into any one Parallel Fixation Hole on the talar portion of the **Talus Cutting Guide** for initial fixation. Evaluate **Guide** placement by taking anterior fluoroscopic images and comparing the coronal alignment and medial/lateral location of the **Guide** to the reference images in the Case Report. A second **Pin** may then be placed into an open Parallel Fixation Hole for additional security.



6. Insert the **Vantage Ankle 3D/3D+ Reversible Angel Wing** into the slot of the **Talus Cutting Guide**. The **Angel Wing** should sit flush against the anterior surface of the **Guide**.

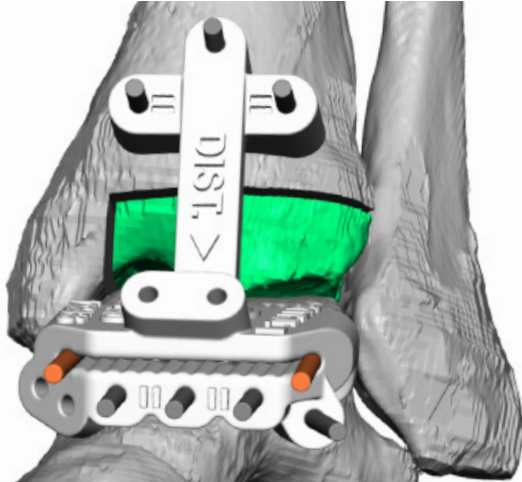


7. Take a lateral fluoroscopic image to confirm the height and location of the talus cut match the virtual surgical plan. It is recommended that the **Foot/Angel Wing** be positioned as close to the detector as possible for the most accurate fluoroscopic representation of the cut location.

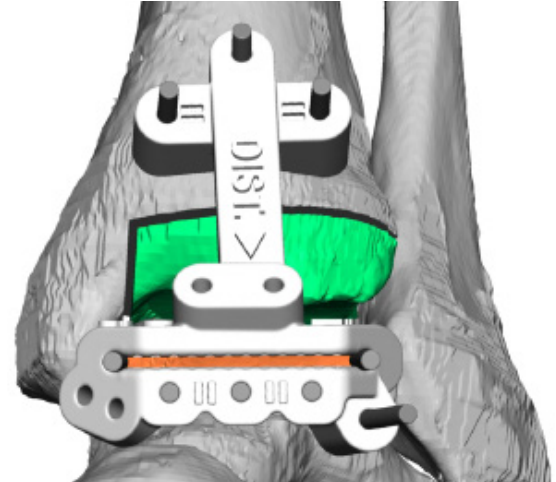


8. Place a **Pin** into one or multiple of the Oblique Fixation Holes to lock the **Talus Cutting Guide** into place.  
**Note:** In total, a minimum of two fixation **Pins** must be used and these **Pins** must not be parallel to each other.

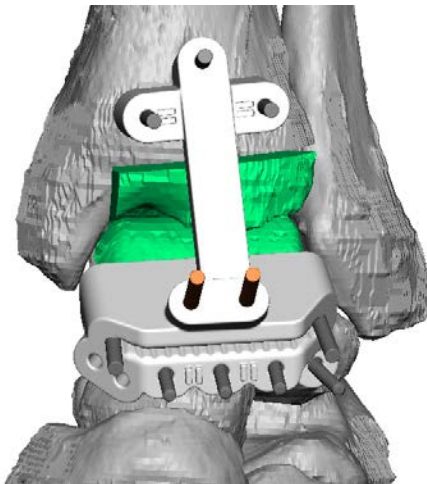
**PROCEDURE B1: COUPLED CURVED CUT TALUS CUTTING GUIDE**



**9.** Place a **Pin** into both the Medial and Lateral Resection Limit Holes.

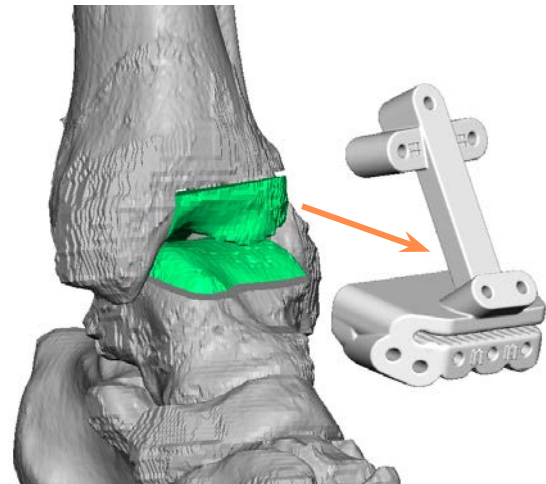


**10.** Use an **Oscillating Saw** to perform the talar resection, taking care to avoid the posterior soft tissues.



**11.** Optionally, drill a **Pin** into both of the Lollipop Pin Holes to create two guide channels, then remove the **Pins** directly.

**Note:** Complete this step if the user desires **PSI** guidance of the internal/external rotation of the **Talus Implant**. Alternatively, this step may be omitted, and the rotation may be manually set using the **Exactech Lollipop Guide** per standard procedure.

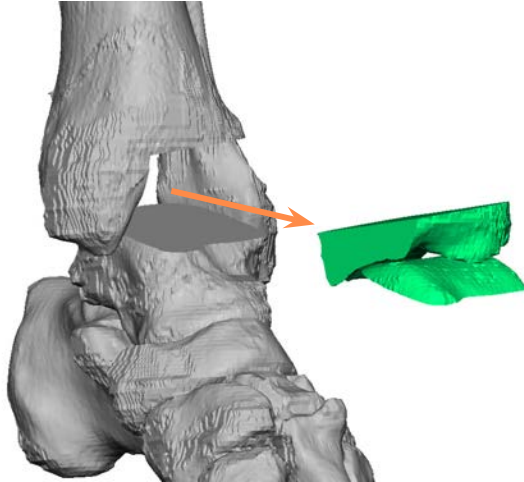


**12.** Remove both **Pins** and the **Talus Cutting Guide**.

**Note:** A small amount of unresected bone may remain on either shoulder of the cut outside the Resection Limit Pin locations. This bone should be carefully cut with the **Reciprocating Saw** to complete the resection.

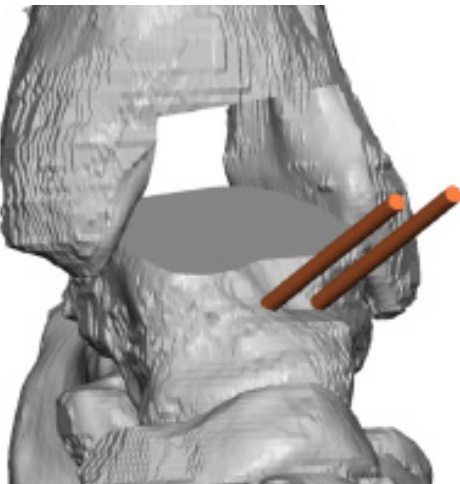


## PROCEDURE B1: COUPLED CURVED CUT TALUS CUTTING GUIDE

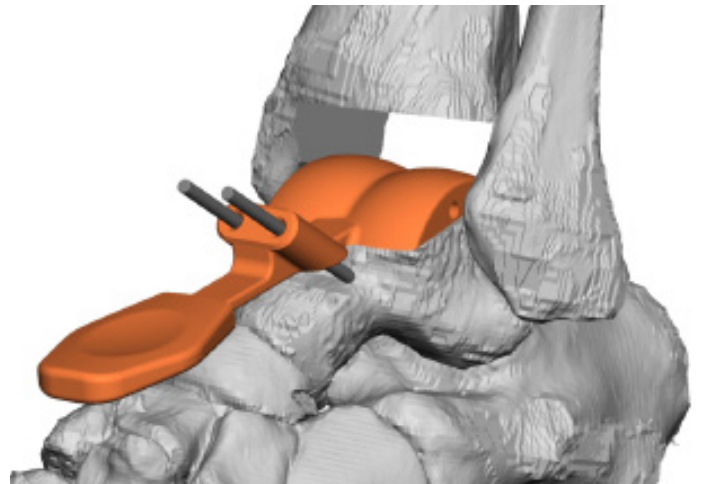


**13.** Remove all resected anatomy from the joint space. Lavage the operative site to remove any generated debris.

**14.** Proceed to finalize tibial prep per Vantage Additive 3D Fixed Bearing Curved Operative Technique.



**15.** If the **Talus Cutting Guide** was elected for use to create Lollipop Guide Channels, locate the channels in the cut talar surface and replace the **Pins** into the channels.



**16.** Slide the **Exactech Lollipop Guide** onto the Pins.

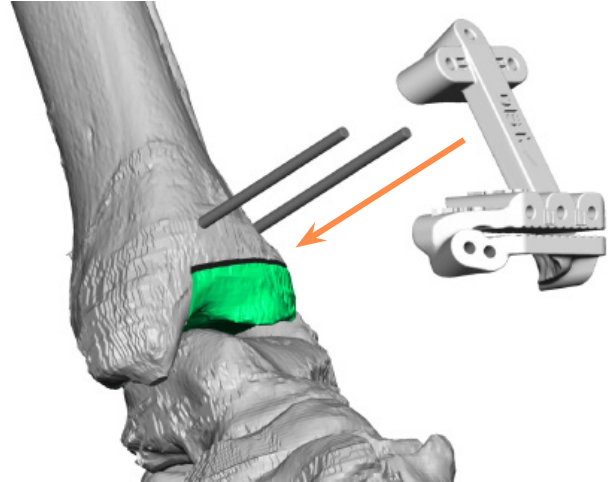
**Complete remaining steps per Vantage Ankle Fixed Bearing Operative Technique 721-00-30.**

## PROCEDURE B2: COUPLED FLAT CUT TALUS CUTTING GUIDE

(If case is a Decoupled Talus, proceed to Procedures C1 and C2)



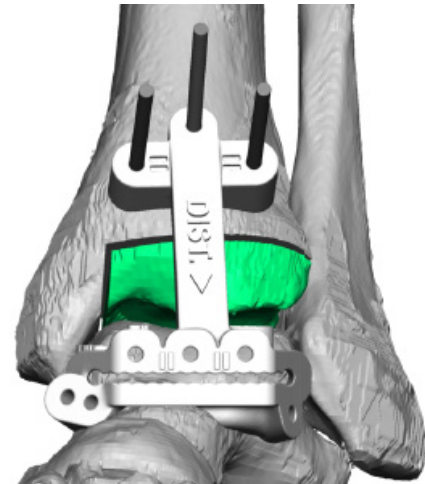
1. Confirm the work order number and patient information on the **Talus Cutting Guide** are correct.



2. Take down soft tissue on surface of the talar dome and neck in all guide-contacting areas (shown in the “heat map” image in the Case Report). Ensure adequate dissection has been performed to accommodate the 0.5mm soft tissue tolerance of the **Talus Cutting Guide**. Slide the **Guide** over the remaining tibial **Pins**.

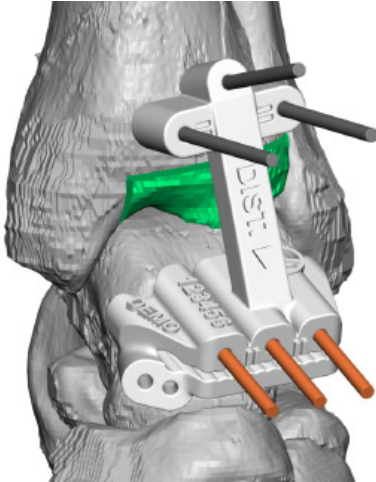


3. Ensure the **Talus Cutting Guide** is fully seated against the tibia and place a **Pin** into the Tibia Oblique Fixation Hole.

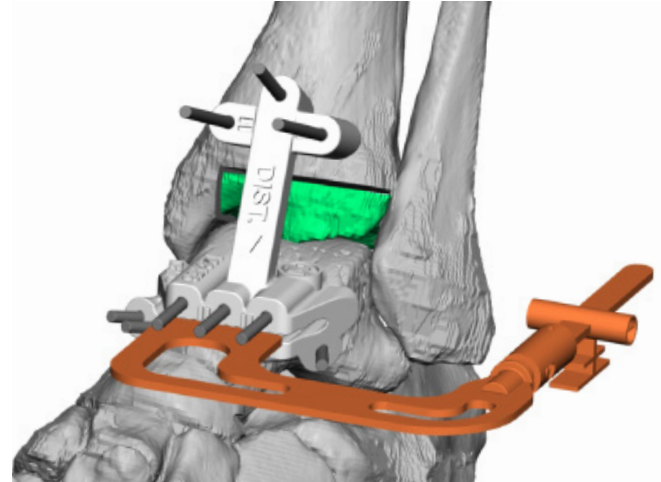


4. While rotating the foot as necessary, place the **Talus Cutting Guide** in the best fit location. Visually confirm the **Guide** is seated evenly around its perimeter.  
*Note: Determining the best fit location may require applying pressure from multiple vectors and/or with two hands. Use the Case Report for visual reference of correct **Guide** placement.*

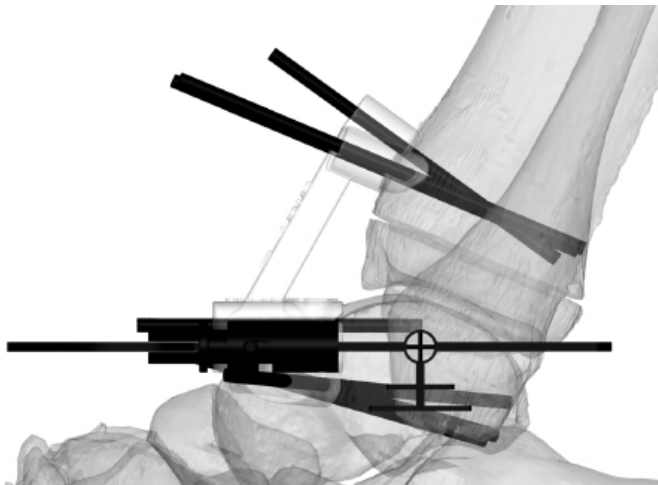
## PROCEDURE B2: COUPLED FLAT CUT TALUS CUTTING GUIDE



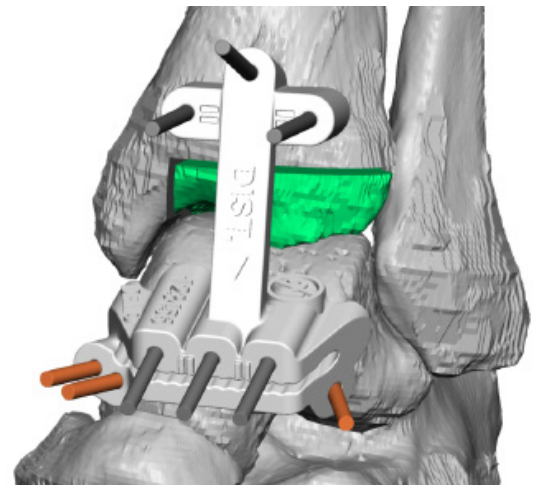
5. Place a **Pin** into any one Parallel Fixation Hole on the talar portion of the **Talus Cutting Guide** for initial fixation. Evaluate **Guide** placement by taking anterior fluoroscopic images and comparing the coronal alignment and medial/lateral location of the **Guide** to the reference images in the Case Report. A second **Pin** may then be placed into an open Parallel Fixation Hole for additional security.



6. Insert the **Vantage Ankle 3D/3D+ Reversible Angel Wing** into the slot of the **Talus Cutting Guide**. The **Angel Wing** should sit flush against the anterior surface of the **Guide**.

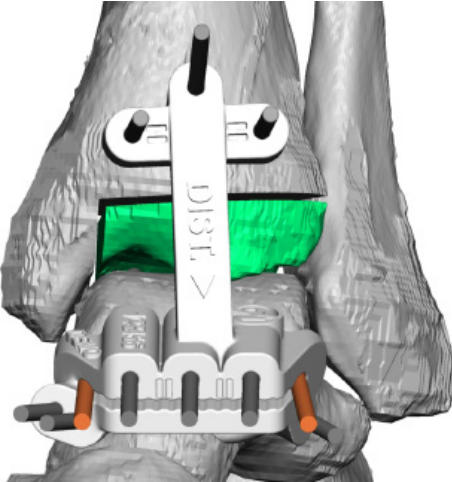


7. Take a lateral fluoroscopic image to confirm the height and location of the talus cut match the virtual surgical plan. It is recommended that the **Foot/Angel Wing** be positioned as close to the detector as possible for the most accurate fluoroscopic representation of the cut location.

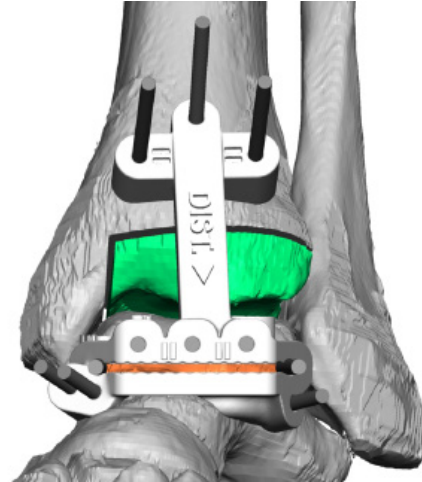


8. Place a **Pin** into one or multiple of the Oblique Fixation Holes to lock the **Talus Cutting Guide** into place.  
**Note:** In total, a minimum of two fixation **Pins** must be used and these **Pins** must not be parallel to each other.

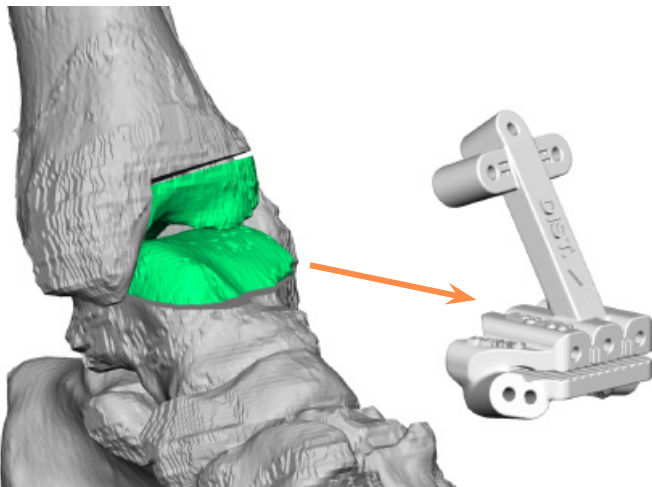
**PROCEDURE B2: COUPLED FLAT CUT TALUS CUTTING GUIDE**



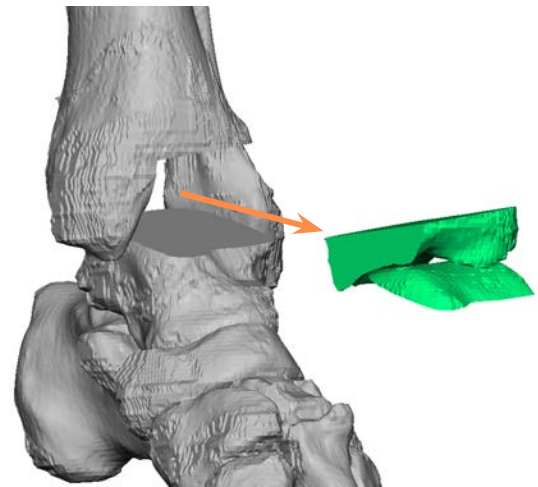
**9.** Place a **Pin** into both the Medial and Lateral Resection Limit Holes.



**10.** Use an **Oscillating Saw** to perform the talar resection, taking care to avoid the posterior soft tissues.



**11.** Remove both **Pins** and the **Talus Cutting Guide**.  
*Note: A small amount of unresected bone may remain on either shoulder of the cut outside the Resection Limit Pin locations. This bone should be carefully cut with the **Reciprocating Saw** to complete the resection.*

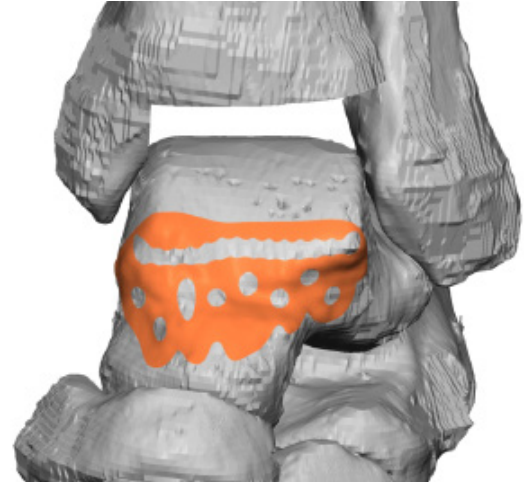
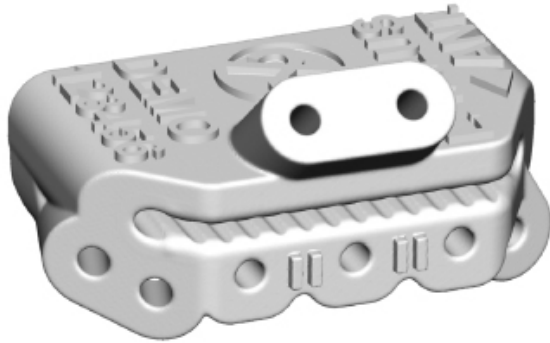


**12.** Remove all resected anatomy from the joint space. Lavage the operative site to remove any generated debris.

**Complete remaining steps per Vantage Ankle Flat Cut Talus – Fixed Bearing System Decoupled Cut Technique 00-000057.**

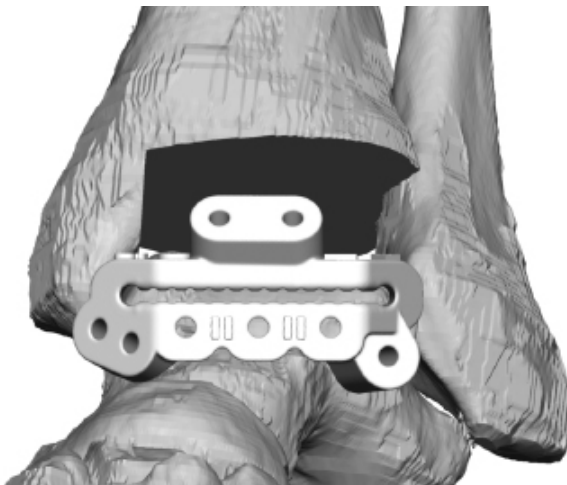
## PROCEDURE C1: DECOUPLED CURVED CUT TALUS CUTTING GUIDE

(If case is a Decoupled Flat Cut Talus, proceed to Procedure C2)

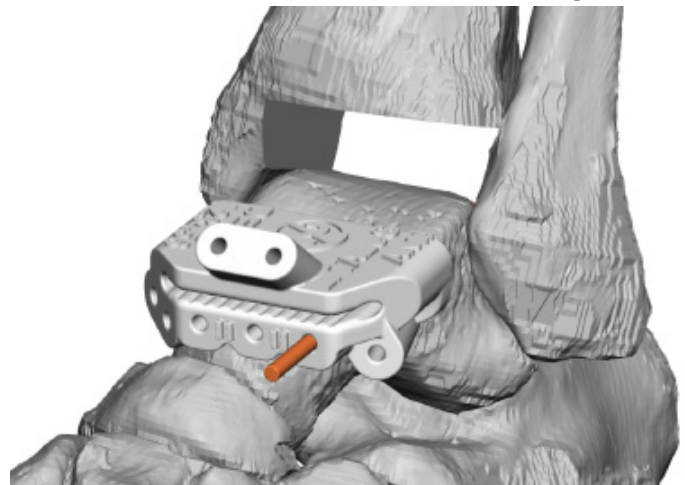


**1.** Confirm the work order number and patient information on the **Talus Cutting Guide** are correct.

**2.** Take down soft tissue on surface of the talar dome and neck in all guide-contacting areas (shown in the “heat map” image in the Case Report). Ensure adequate dissection has been performed to accommodate the 0.5mm soft tissue tolerance of the **Talus Cutting Guide**.



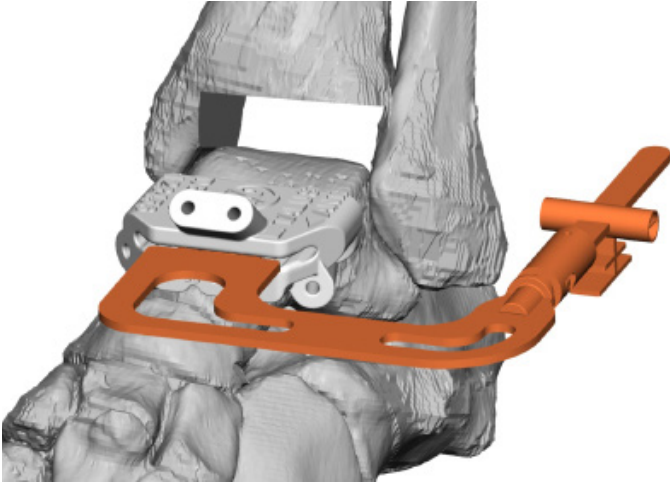
**3.** Place the **Talus Cutting Guide** in the best fit location. Visually confirm the **Guide** is seated evenly around its perimeter.  
**Note:** Determining the best fit location may require applying pressure from multiple vectors and/or with two hands. Use the case report for visual reference of correct **Guide** placement.



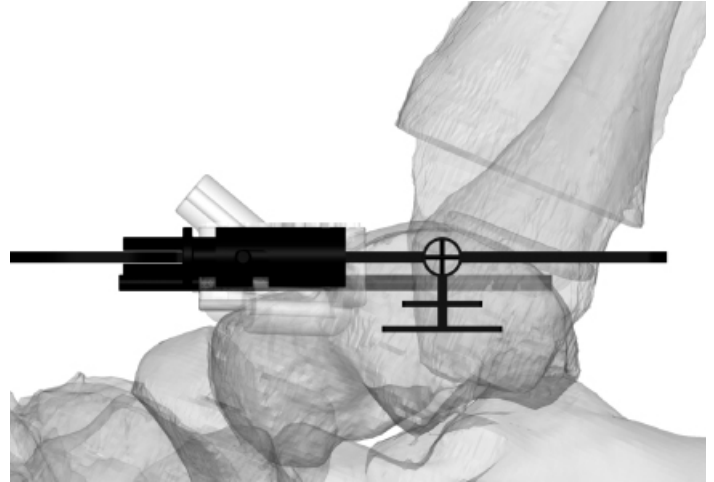
**4.** Place a **Pin** into any one Parallel Fixation Hole for initial fixation. Evaluate **Talus Cutting Guide** placement by taking anterior fluoroscopic images and comparing the coronal alignment and medial/lateral location of the **Guide** to the reference images in the **Case Report**. A second **Pin** may then be placed into an open Parallel Fixation Hole for additional security.

CONSULT INSTRUCTIONS FOR USE PRIOR TO USING GUIDES

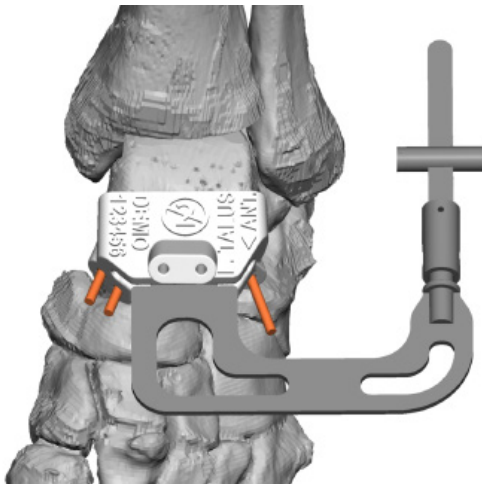
## PROCEDURE C1: DECOUPLED CURVED CUT TALUS CUTTING GUIDE



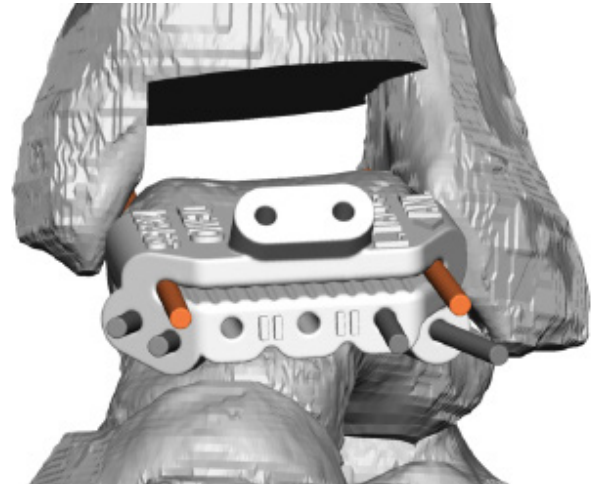
**5.** Insert the **Vantage Ankle 3D/3D+ Reversible Angel Wing** into the resection slot of the **Talus Cutting Guide**. The **Angel Wing** should sit flush against the anterior surface of the **Guide**.



**6.** Take a lateral fluoroscopic image to confirm that the height and location of the talus cut match the reference images in the case report. It is recommended that the **Foot/Angel Wing** be positioned as close to the detector as possible for the most accurate fluoroscopic representation of the cut location.

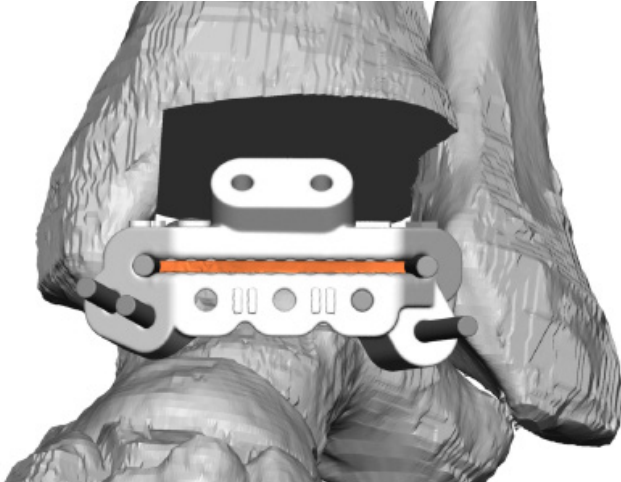


**7.** Place a **Pin** into one or multiple of the Oblique Fixation Holes to lock the **Talus Cutting Guide** into place.  
**Note:** In total, a minimum of two fixation **Pins** must be used and these **Pins** must not be parallel to each other.

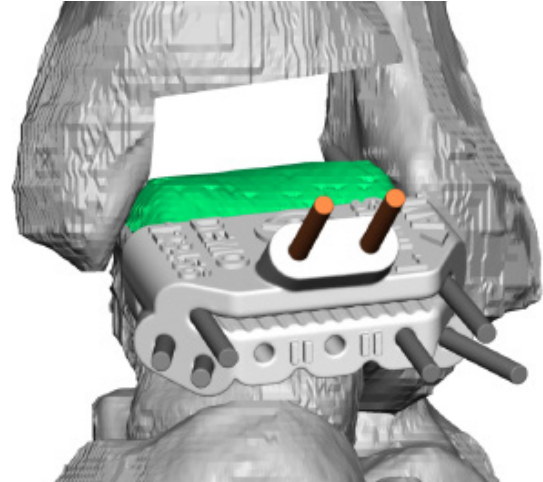


**8.** Place a **Pin** into both the Medial and Lateral Resection Limit Holes.

**PROCEDURE C1: DECOUPLED CURVED CUT TALUS CUTTING GUIDE**

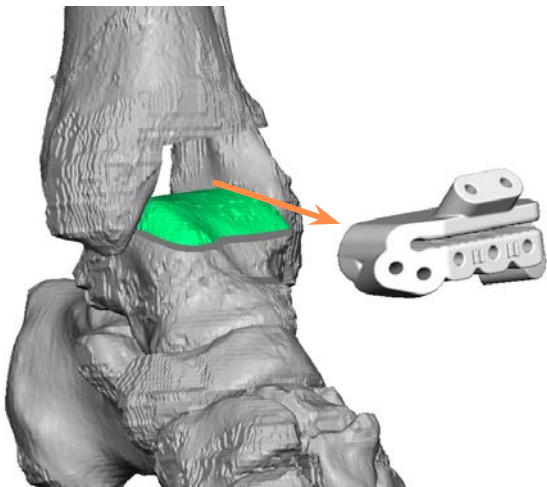


**9.** Use an **Oscillating Saw** to perform the talar resection, taking care to avoid the posterior soft tissues.

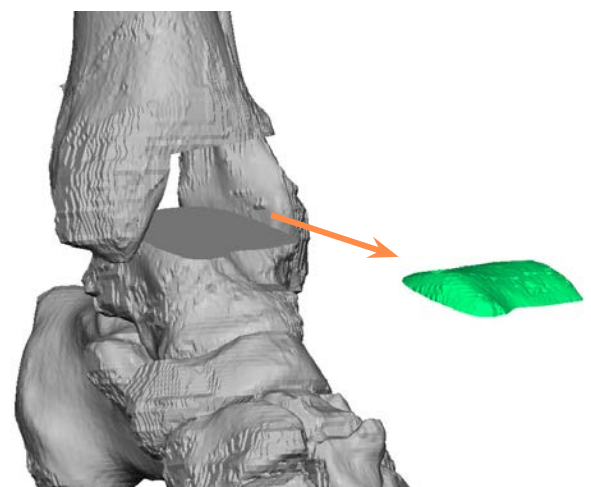


**10.** Optionally, drill a **Pin** into both of the Lollipop Pin Holes to create two guide channels, then remove the **Pins** directly.

**Note:** Complete this step if the user desires **PSI** guidance of the internal/external rotation of the **Talus Implant**. Alternatively, this step may be omitted, and the rotation may be manually set using the **Exactech Lollipop Guide** per standard procedure.

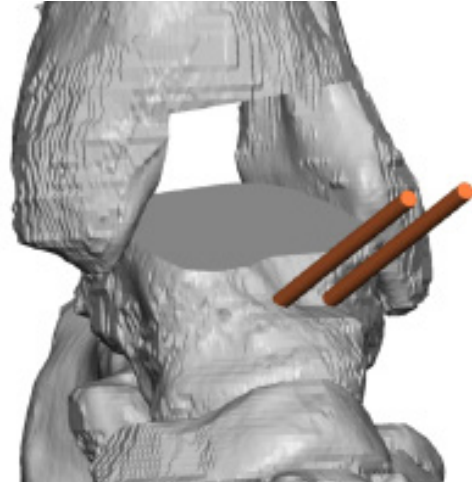


**11.** Remove both **Pins** and the **Talus Cutting Guide**.  
**Note:** A small amount of unresected bone may remain on either shoulder of the cut outside the **Resection Limit Pin** locations. This bone should be carefully cut with the **Reciprocating Saw** to complete the resection.



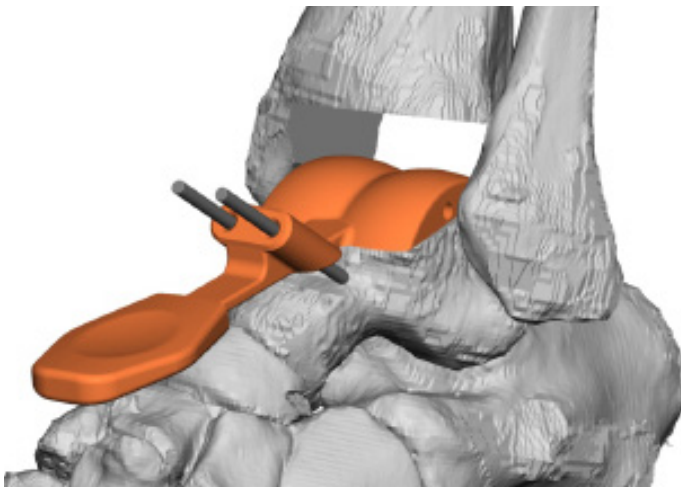
**12.** Remove all resected anatomy from the joint space. Lavage the operative site to remove any generated debris.

**PROCEDURE C1: DECOUPLED CURVED CUT TALUS CUTTING GUIDE**



**13.** Proceed to finalize tibial prep per Vantage Additive 3D Fixed Bearing Curved Operative Technique.

**14.** If the **Talus Cutting Guide** was elected for use to create Lollipop Guide Channels, locate the channels in the cut talar surface and replace the **Pins** into the channels.

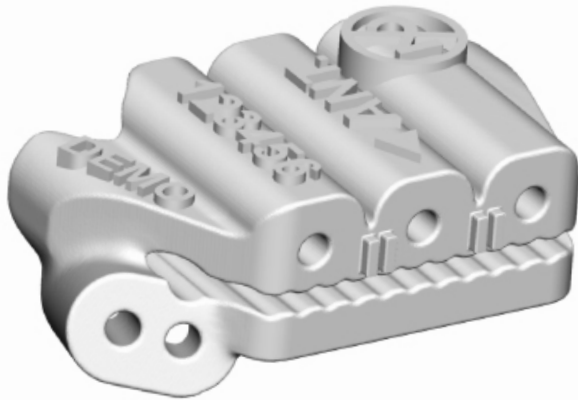


**15.** Slide the **Exactech Lollipop Guide** onto the **Pins**.

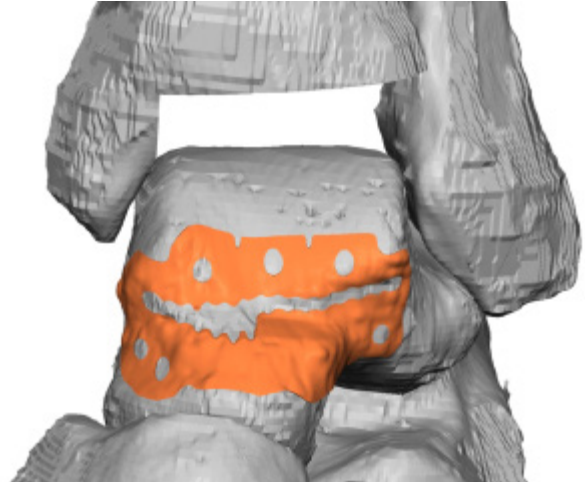
**Complete remaining steps per Vantage Ankle Fixed Bearing Operative Technique 721-00-30.**



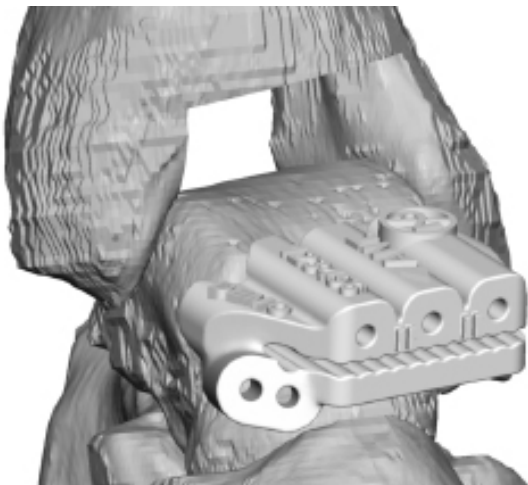
PROCEDURE C2: DECOUPLED FLAT CUT TALUS CUTTING GUIDE



1. Confirm the work order number and patient information on the **Talus Cutting Guide** are correct.



2. Take down soft tissue on surface of the talar dome and neck in all guide-contacting areas (shown in the “heat map” image in the Case Report). Ensure adequate dissection has been performed to accommodate the 0.5mm soft tissue tolerance of the **Talus Cutting Guide**.

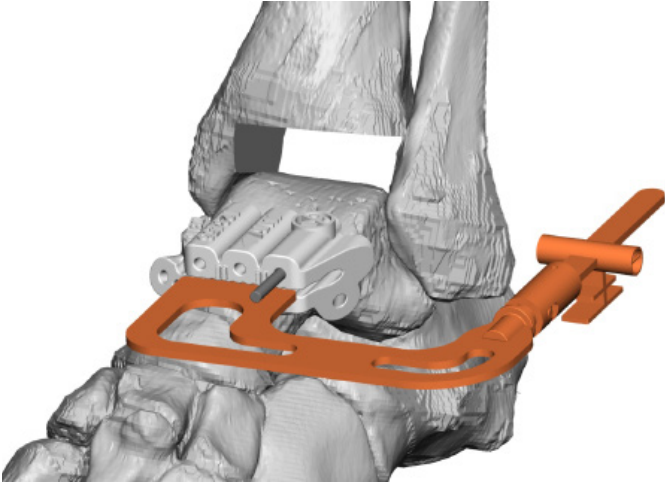


3. Place the **Talus Cutting Guide** in the best fit location. Visually confirm the **Guide** is seated evenly around its perimeter.  
**Note:** Determining the best fit location may require applying pressure from multiple vectors and/or with two hands. Use the case report for visual reference of correct **Guide** placement.

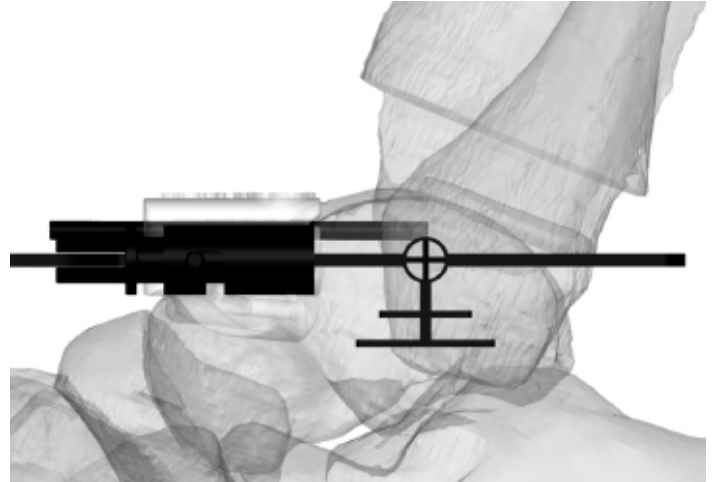


4. Place a **Pin** into any one Parallel Fixation Hole for initial fixation. Evaluate **Talus Cutting Guide** placement by taking anterior fluoroscopic images and comparing the coronal alignment and medial/lateral location of the **Guide** to the reference images in the Case Report. A second **Pin** may then be placed into an open Parallel Fixation Hole for additional security.

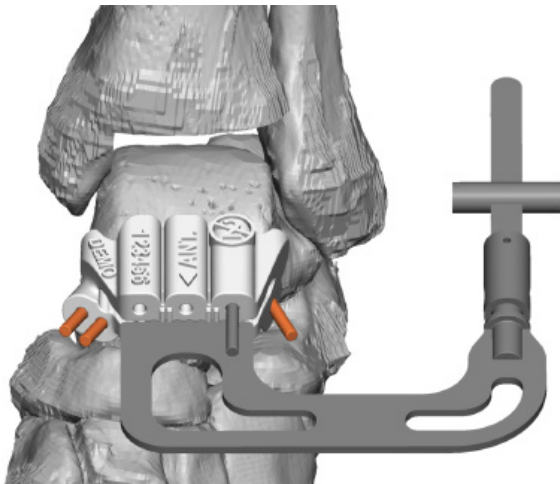
**PROCEDURE C2: DECOUPLED FLAT CUT TALUS CUTTING GUIDE**



**5.** Insert the **Vantage Ankle 3D/3D+ Reversible Angel Wing** into the Resection Slot of the **Talus Cutting Guide**. The **Angel Wing** should sit flush against the anterior surface of the **Guide**.

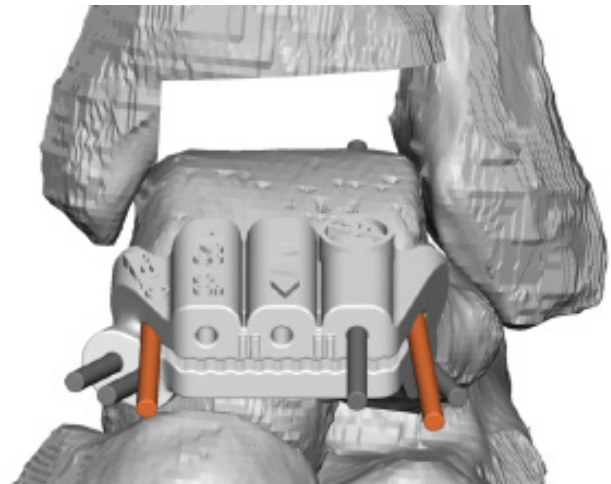


**6.** Take a lateral fluoroscopic image to confirm that the height and location of the talus cut match the reference images in the Case Report. It is recommended that the **Foot/Angel Wing** be positioned as close to the detector as possible for the most accurate fluoroscopic representation of the cut location.



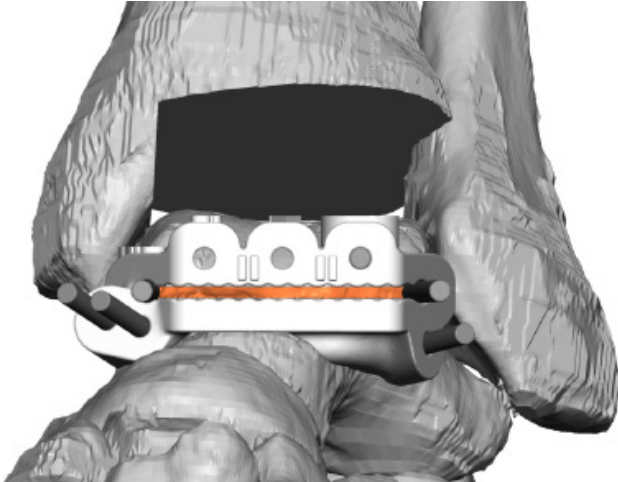
**7.** Place a **Pin** into one or multiple of the Talus Oblique Fixation Holes to lock the **Guide** into place.

**Note:** In total, a minimum of two fixation **Pins** must be used and these **Pins** must not be parallel to each other.

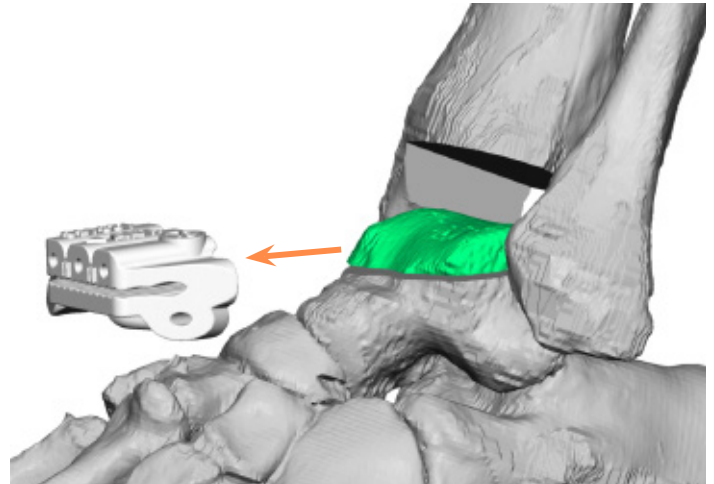


**8.** Place a **Pin** into both the Medial and Lateral Resection Limit Holes.

**PROCEDURE C2: DECOUPLED FLAT CUT TALUS CUTTING GUIDE**

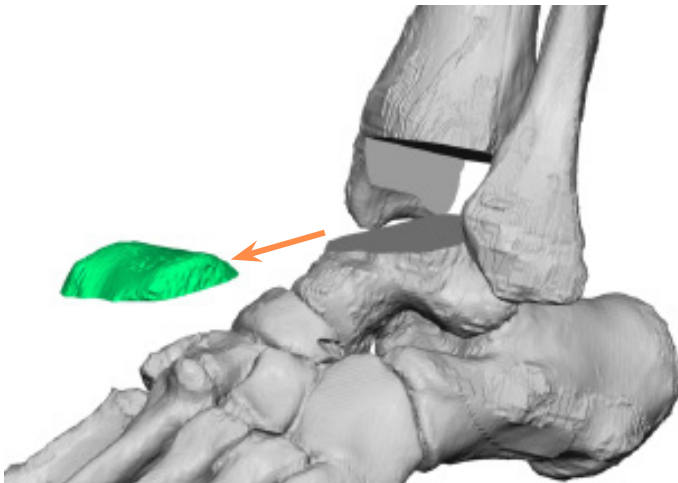


**9.** Use an **Oscillating Saw** to perform the talar resection, taking care to avoid the posterior soft tissues.



**10.** Remove **all Pins** and the **Talus Cutting Guide**.

**Note:** A small amount of unresected bone may remain on either shoulder of the cut outside the Resection Limit Pin locations. This bone should be carefully cut with the **Reciprocating Saw** to complete the resection.



**11.** Remove all resected anatomy from the joint space. Lavage the operative site to remove any generated debris.

**Complete remaining steps per Vantage Ankle Flat Cut Talus – Fixed Bearing System Decoupled Cut Technique 00-000057.**

CONSULT INSTRUCTIONS FOR USE PRIOR TO USING GUIDES

## INSTRUMENT LISTING

**CATALOG NUMBER**

**PART DESCRIPTION**

351-10-14

Vantage Ankle 3D/3D+ Reversible  
Angel Wing



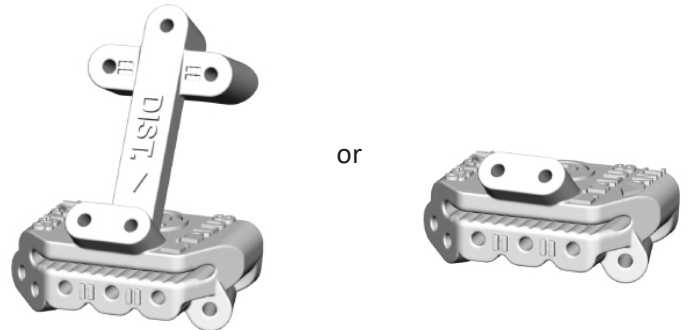
351-90-01  
351-90-02

2.4mm x 3.5" Fluted Drill Bit  
2.4mm x 2.5" Fluted Drill Bit



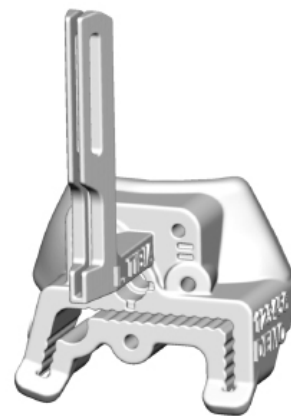
351-80-00

Talus Cutting Guide



351-80-10

Tibia Cutting Guide



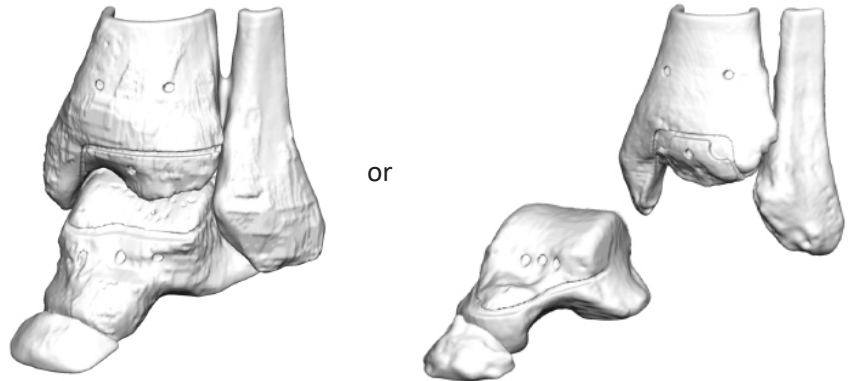
CONSULT INSTRUCTIONS FOR USE PRIOR TO USING GUIDES

## INSTRUMENT LISTING

**CATALOG NUMBER**      **PART DESCRIPTION**

351-80-90

Anatomical Model



351-80-11

Fluoroscopic Insert



351-91-03  
351-91-06

Reciprocating Saw Blade (Stryker®)  
Reciprocating Saw Blade (Hall®)



351-01-01  
351-01-02  
351-01-03  
351-01-04  
351-01-05

Lollipop Guide - Size 1  
Lollipop Guide - Size 2  
Lollipop Guide - Size 3  
Lollipop Guide - Size 4  
Lollipop Guide - Size 5

