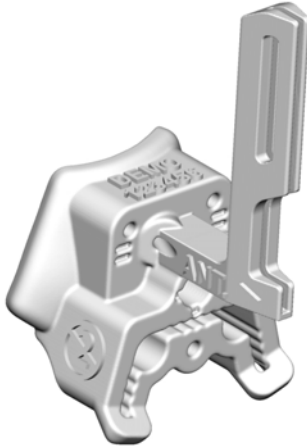
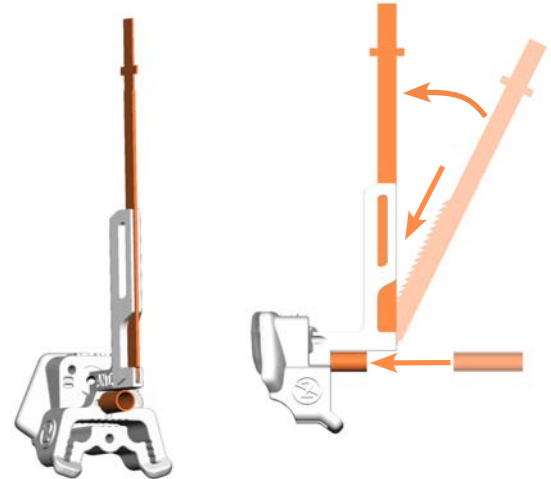


## PROCEDURE A: 3D+ TIBIA CUTTING GUIDE



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**.



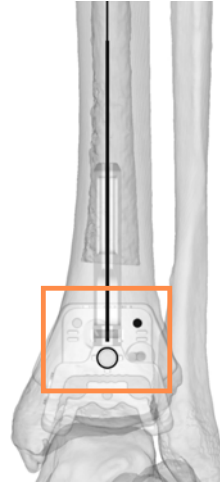
4. Place the **Tibia Cutting Guide** in the best fit location. Visually confirm the **Guide** is seated evenly around its perimeter.

**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 Pin Holes on the **Tibia Cutting Guide** for initial fixation.



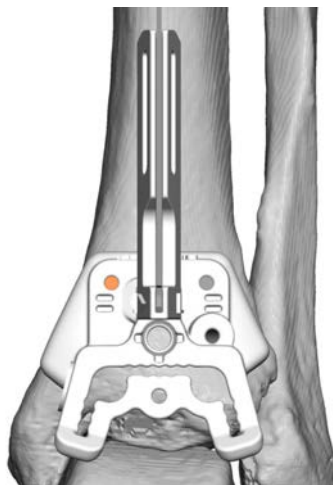
Correct Alignment



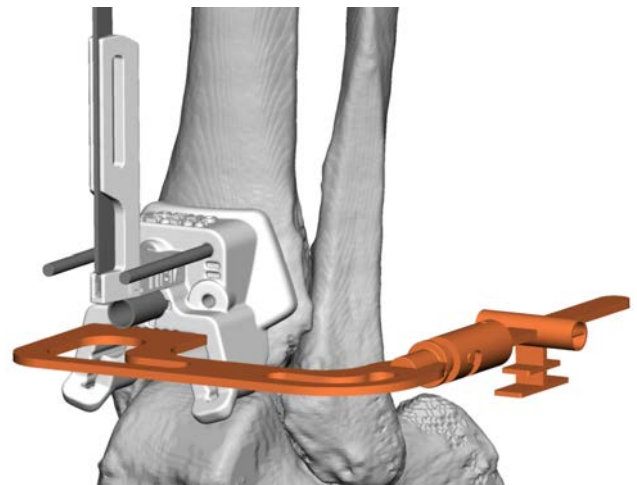
Incorrect Alignment

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.*

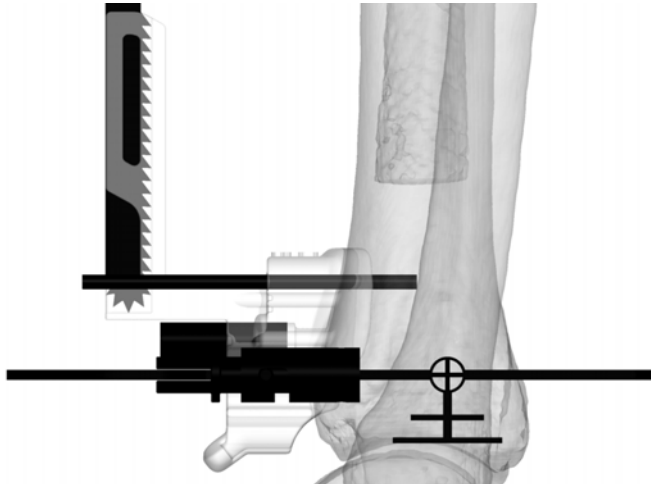


7. Place a second **Pin** through the remaining Parallel Pin Hole on the **Tibia Cutting Guide**.

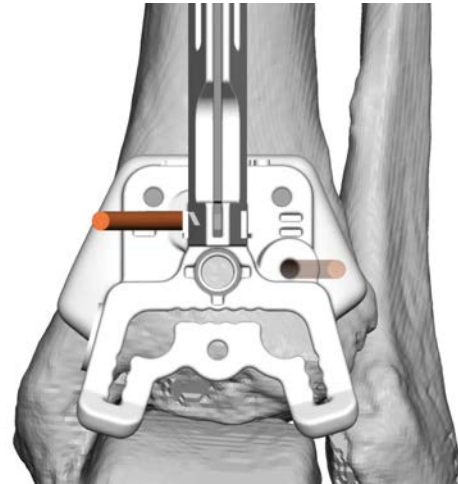


8. Set the **Vantage Ankle 3D/3D+ Reversible Angel Wing** to the designated configuration for the appropriate operative side. Insert the **Angel Wing** into the Resection Slot of the **Tibia Cutting Guide** with the body of the **Angel Wing** wrapping to the lateral side of the ankle. Ensure the **Angel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

## PROCEDURE A: 3D+ TIBIA CUTTING GUIDE

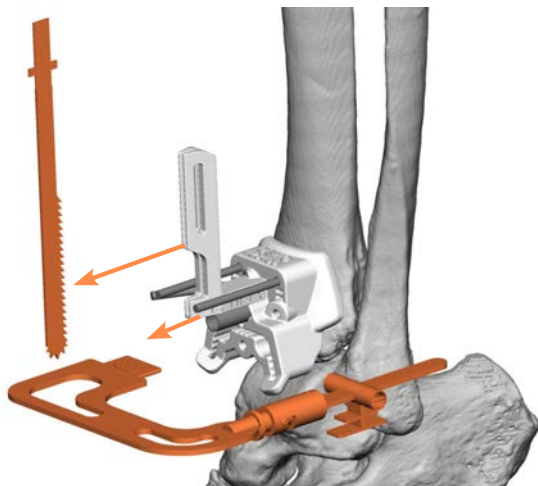


9. Take a lateral fluoroscopic image to confirm that the height and location of the tibia cut match the reference images in the case report. It is recommended that the Foot/Angel Wing be positioned as close to the detector as possible for the most accurate fluoroscopic representation of the cut location.

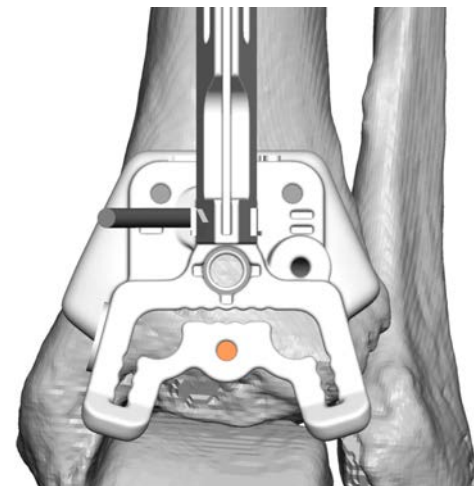


10. Place a Pin into an Oblique Fixation Hole to lock the Tibia Cutting Guide into place.

**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.

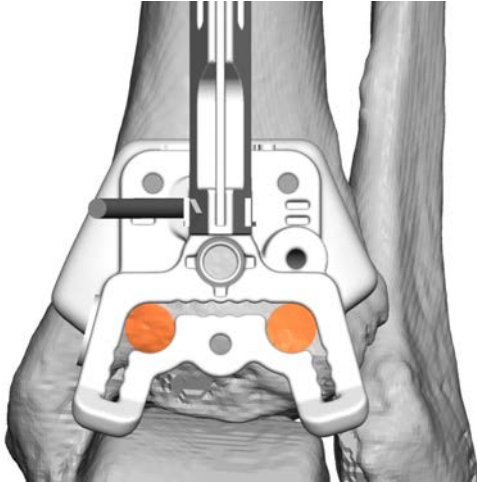


11. Remove the Vantage Ankle 3D/3D+ Reversible Angel Wing and the Reciprocating Saw Blade from the Tibia Cutting Guide.



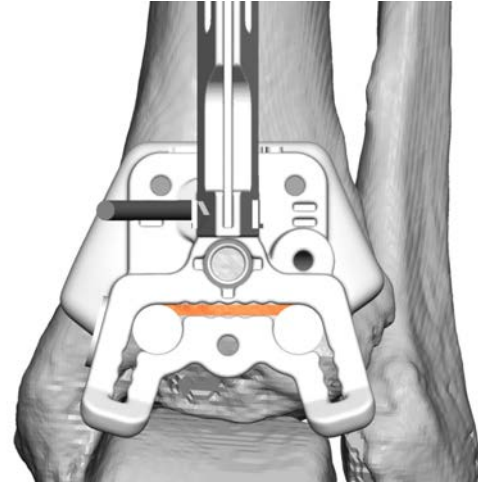
12. Place a Pin into the Distal Fixation Hole.

## PROCEDURE A: 3D+ TIBIA CUTTING GUIDE



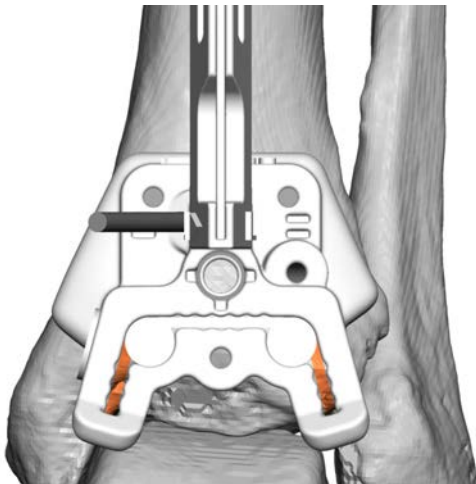
**13.** Use the **Corner Drill** to prepare the rounded corners of the tibial resection, taking care to avoid the posterior soft tissues.

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

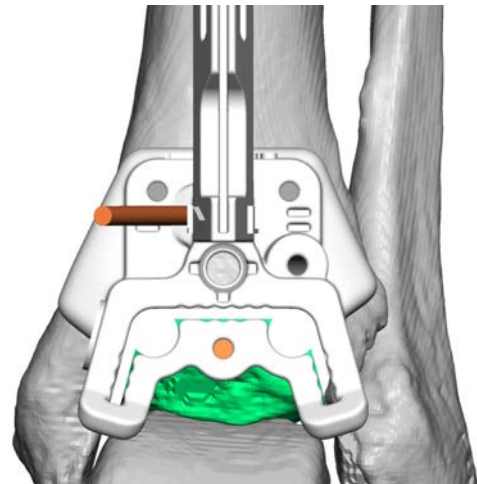


**14.** Use an **Oscillating Saw** to perform the axial portion of the tibial resection, taking care to avoid penetrating through the posterior capsule where the neurovascular bundle is located.

**Note:** *If the slot is too narrow to accommodate both plugs and the saw together, one plug may be placed at a time.*

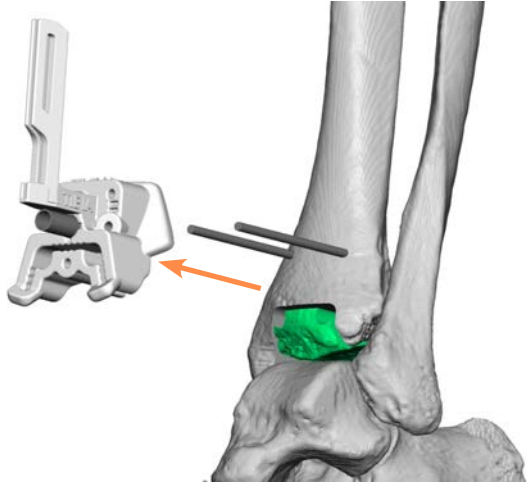


**15.** Use a **Reciprocating Saw** to perform the vertical portion(s) of the resection.

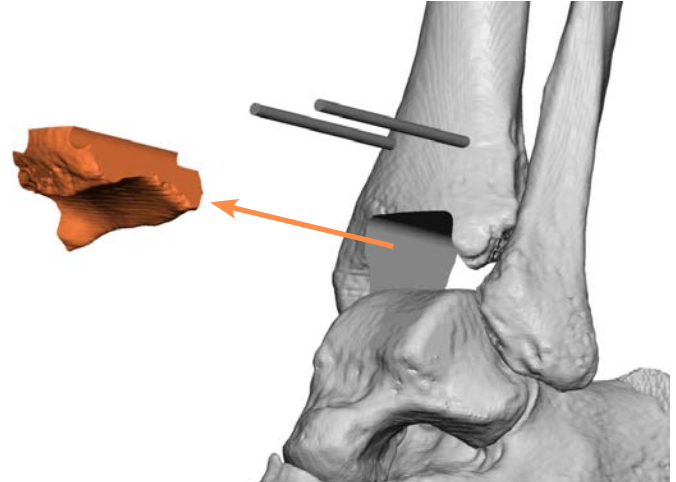


**16.** Remove **all Pins** with the exception of the two **Pins** in the Parallel Fixation Holes.

## 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.



**18.** If using a **Decoupled Talus Cutting Guide**, remove resected **tibia** 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 **tibia**.

### Supplemental Information:

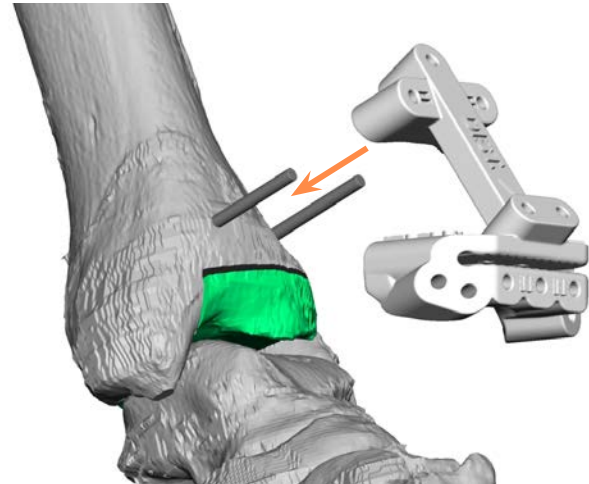
To ensure successful surgery in the event of device malfunction, have a tray of standard **Exactech Vantage Ankle** instrumentation available at the time of surgery. Switch to standard **Exactech Vantage Ankle** instrumentation if the device is dropped in the surgical suite.

## PROCEDURE B1: COUPLED CURVED CUT TALUS CUTTING GUIDE

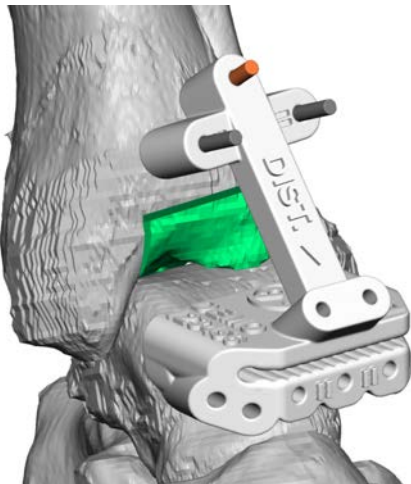
(If case is a Flat Cut Talus, proceed to Procedure B2. If case is a Decoupled Talus, proceed to Procedures C1 and C2)



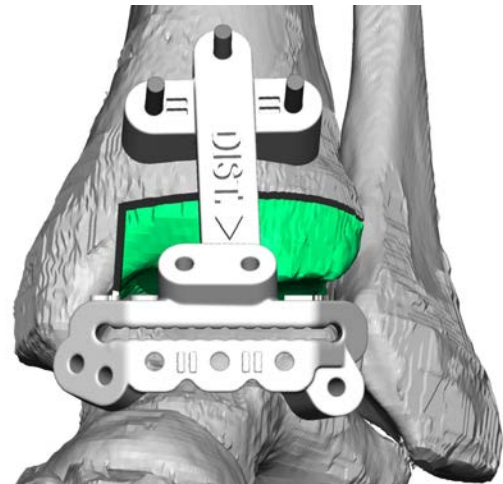
**1.** Confirm the work order number and patient information on the **Talus Cutting Guide** are correct.



**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**.

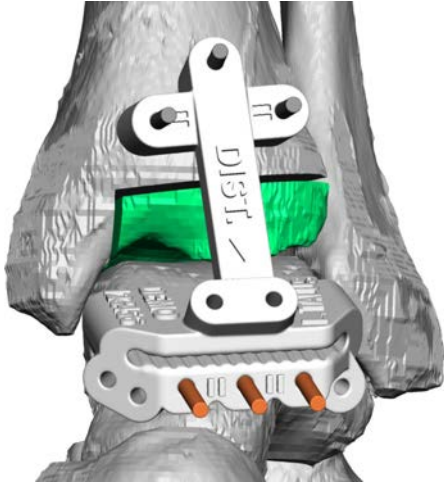


**3.** Ensure the **Talus Cutting Guide** is fully seated against the tibia and place a **Pin** in the Tibia Oblique Fixation Hole.

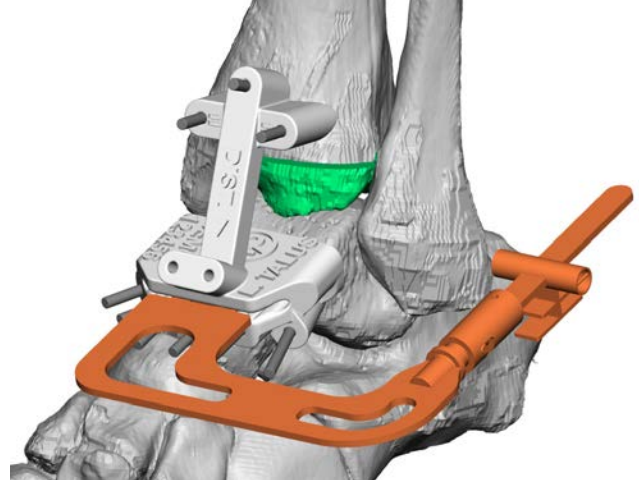


**4.** While rotating the foot as necessary, place the **Talus Cutting Guide** in the best fit location. Visually confirm the **Guide** is seated evenly around its perimeter.  
**Note:** Determining the best fit location may require applying pressure from multiple vectors and/or with two hands. Use the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

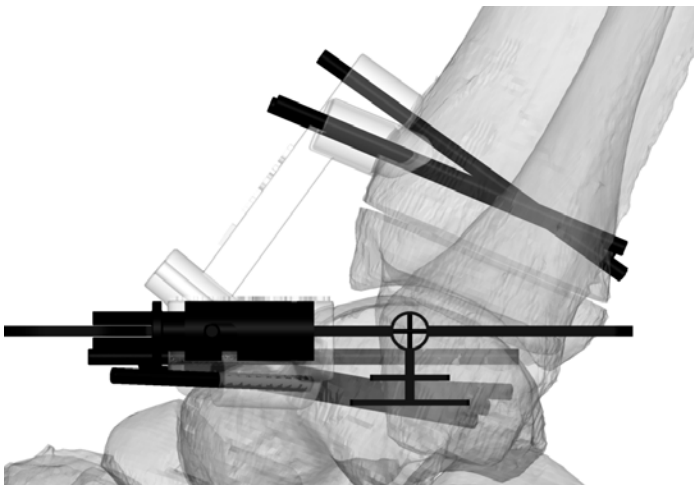
**PROCEDURE B1: COUPLED CURVED CUT TALUS CUTTING GUIDE**



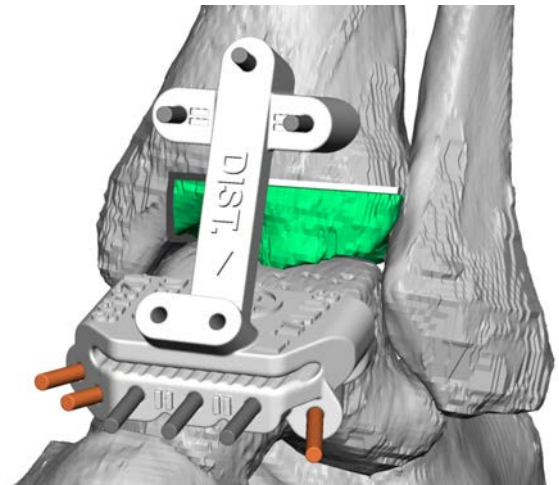
**5.** Place a **Pin** into any one Parallel Fixation Hole on the talar portion of the **Talus Cutting Guide** for initial fixation. Evaluate **Guide** placement by taking anterior fluoroscopic images and comparing the coronal alignment and medial/lateral location of the **Guide** to the reference images 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**.



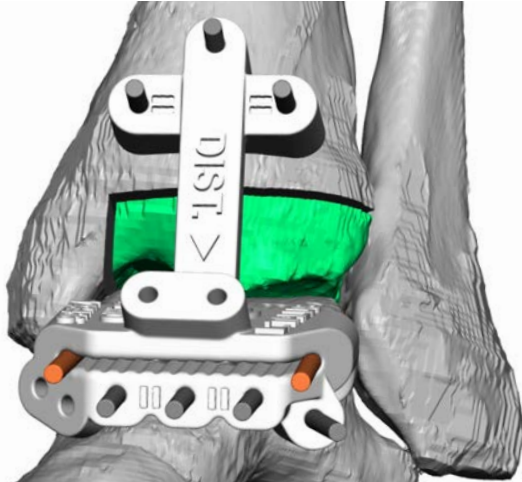
**7.** Take a lateral fluoroscopic image to confirm the height and location of the talus cut match the virtual surgical plan. It is recommended that the Foot/**Angel Wing** be positioned as close to the detector as possible for the most accurate fluoroscopic representation of the cut location.



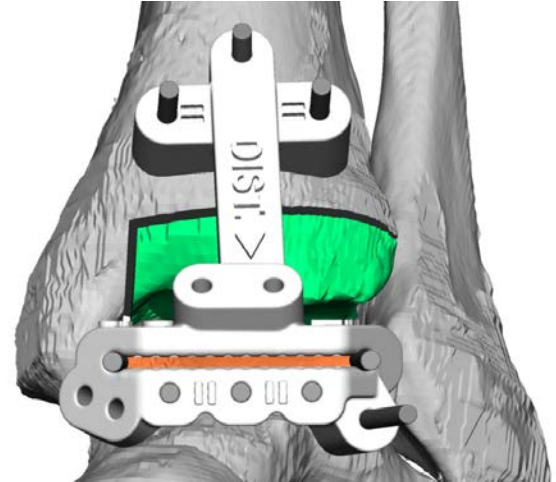
**8.** Place a **Pin** into one or multiple of the Oblique Fixation Holes to lock the **Talus Cutting Guide** into place.  
**Note:** In total, a minimum of two fixation **Pins** must be used and these **Pins** must not be parallel to each other.

CONSULT INSTRUCTIONS FOR USE PRIOR TO USING GUIDES

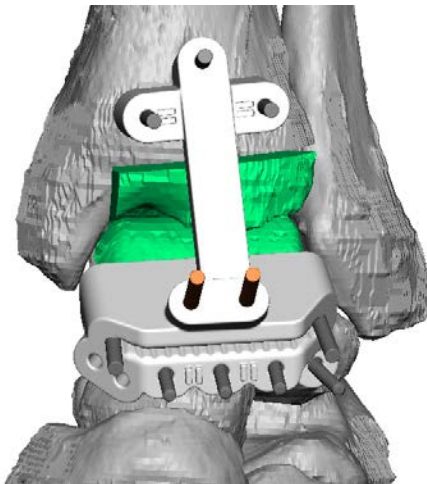
**PROCEDURE B1: COUPLED CURVED CUT TALUS CUTTING GUIDE**



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

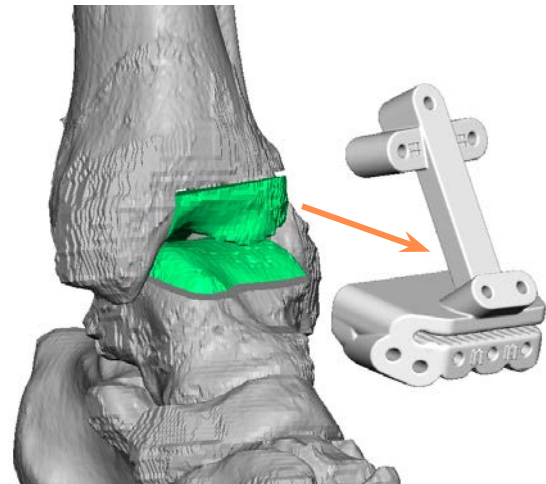


**10.** Use an **Oscillating Saw** to perform the talar resection, taking care to avoid the posterior soft tissues.



**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.

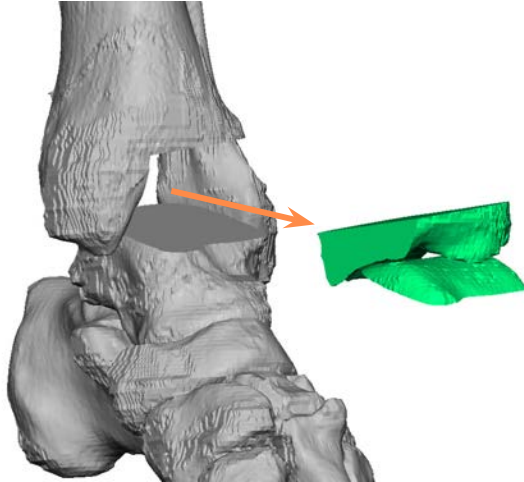


**12.** Remove both **Pins** and the **Talus Cutting Guide**.

**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.

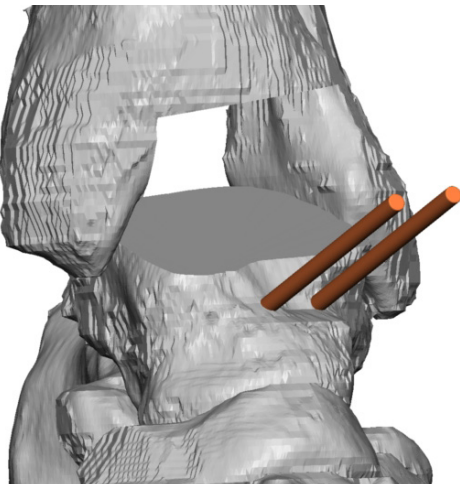


## PROCEDURE B1: COUPLED CURVED CUT TALUS CUTTING GUIDE

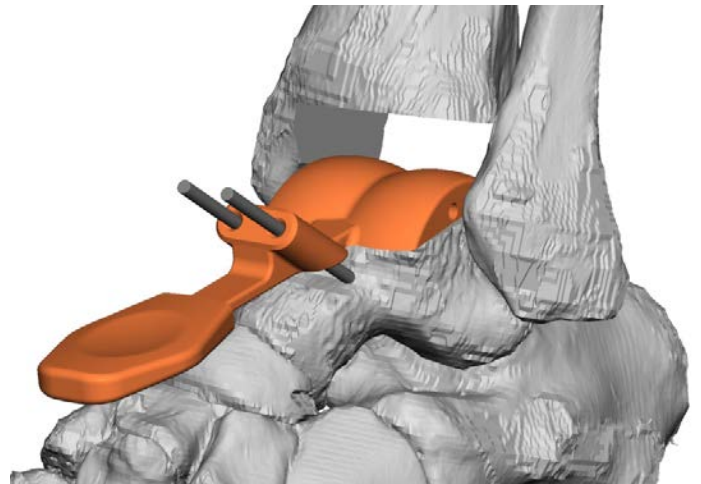


**13.** Remove all resected anatomy from the joint space. Lavage the operative site to remove any generated debris.

**14.** Proceed to finalize tibial prep per Vantage 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.

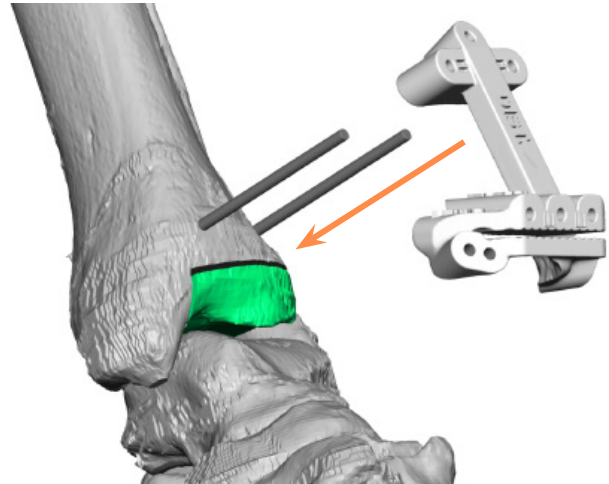
**Complete remaining steps per Vantage Ankle Fixed Bearing Operative Technique 721-00-30.**

## PROCEDURE B2: COUPLED FLAT CUT TALUS CUTTING GUIDE

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



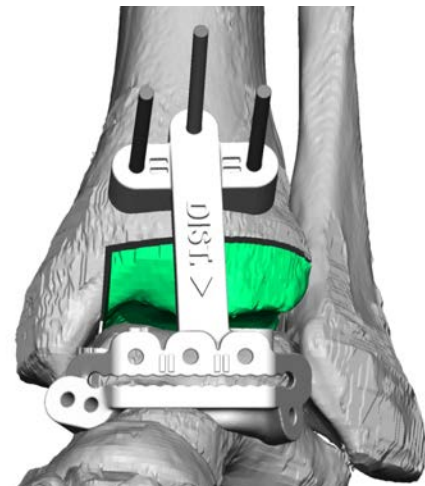
1. Confirm the work order number and patient information on the **Talus Cutting Guide** are correct.



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**.

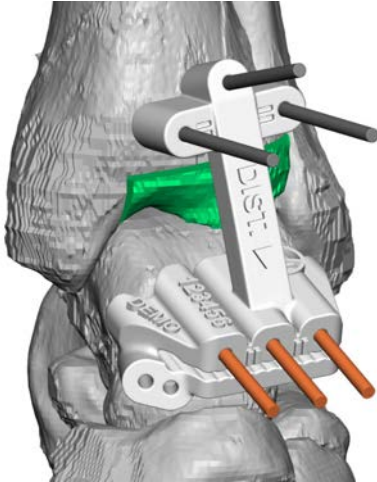


3. Ensure the **Talus Cutting Guide** is fully seated against the tibia and place a **Pin** into the Tibia Oblique Fixation Hole.

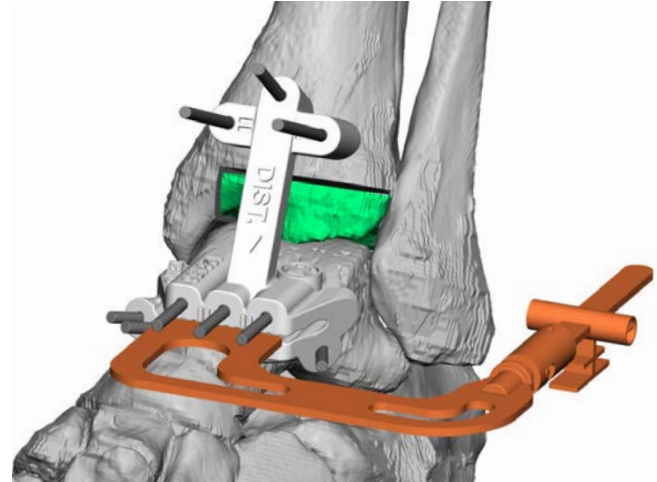


4. While rotating the foot as necessary, place the **Talus Cutting Guide** in the best fit location. Visually confirm the **Guide** is seated evenly around its perimeter.  
*Note: Determining the best fit location may require applying pressure from multiple vectors and/or with two hands. Use the Case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

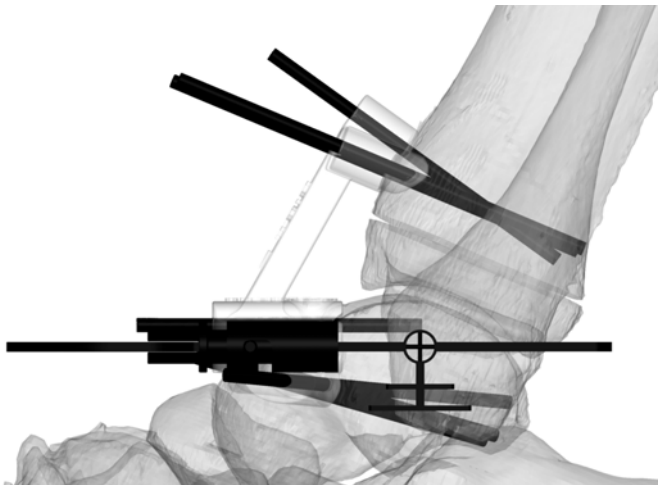
## PROCEDURE B2: COUPLED FLAT CUT TALUS CUTTING GUIDE



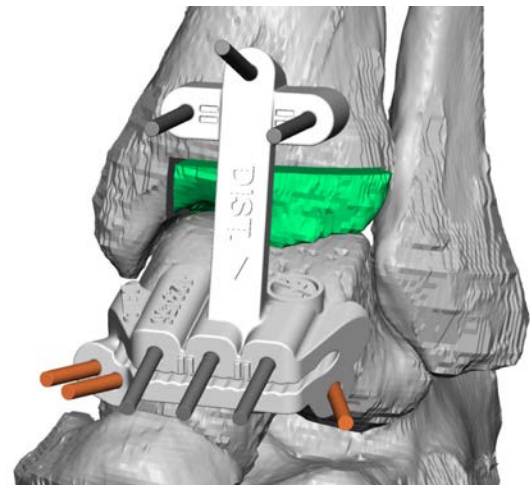
5. Place a **Pin** into any one Parallel Fixation Hole on the talar portion of the **Talus Cutting Guide** for initial fixation. Evaluate **Guide** placement by taking anterior fluoroscopic images and comparing the coronal alignment and medial/lateral location of the **Guide** to the reference images 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**.

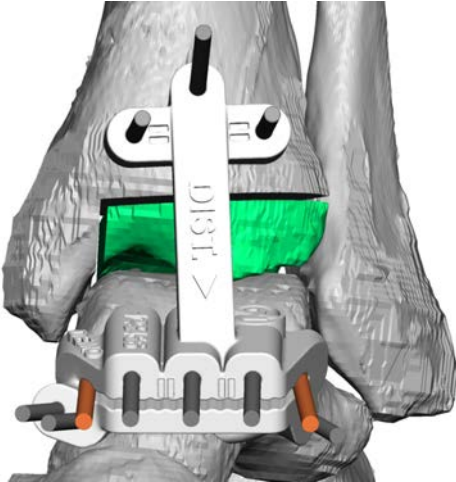


7. Take a lateral fluoroscopic image to confirm the height and location of the talus cut match the virtual surgical plan. It is recommended that the **Foot/Angel Wing** be positioned as close to the detector as possible for the most accurate fluoroscopic representation of the cut location.

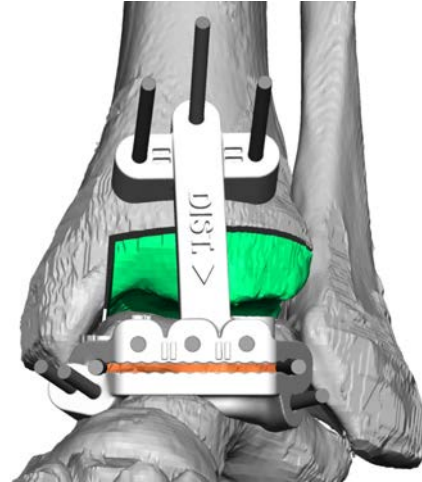


8. Place a **Pin** into one or multiple of the Oblique Fixation Holes to lock the **Talus Cutting Guide** into place.  
**Note:** In total, a minimum of two fixation **Pins** must be used and these **Pins** must not be parallel to each other.

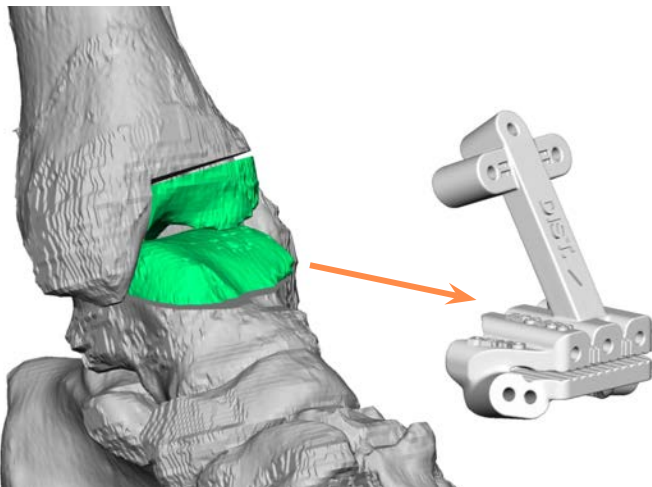
**PROCEDURE B2: COUPLED FLAT CUT TALUS CUTTING GUIDE**



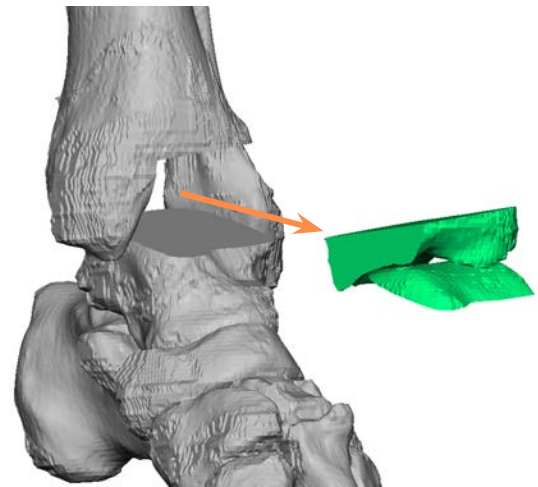
**9.** Place a **Pin** into both the Medial and Lateral Resection Limit Holes.



**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.*

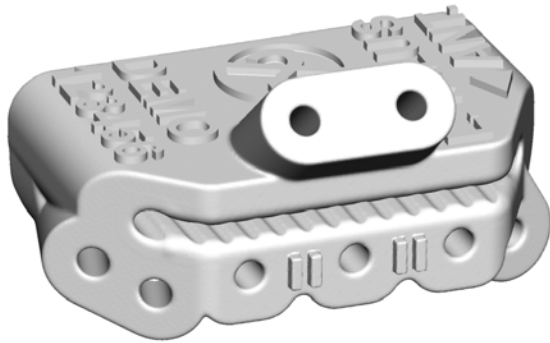


**12.** Remove all resected anatomy from the joint space. Lavage the operative site to remove any generated debris.

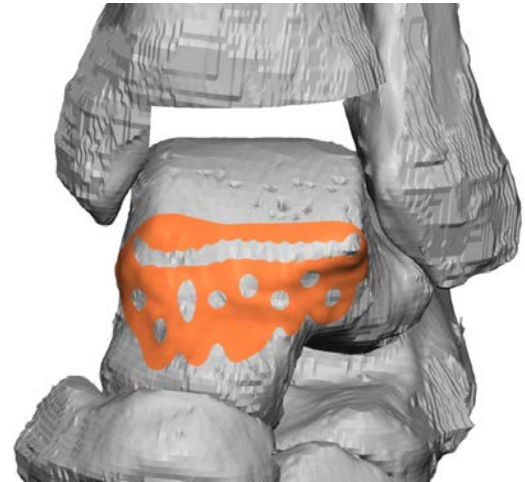
**Complete remaining steps per Vantage Ankle Flat Cut Talus – Fixed Bearing System Decoupled Cut Technique 00-000057.**

## PROCEDURE C1: DECOUPLED CURVED CUT TALUS CUTTING GUIDE

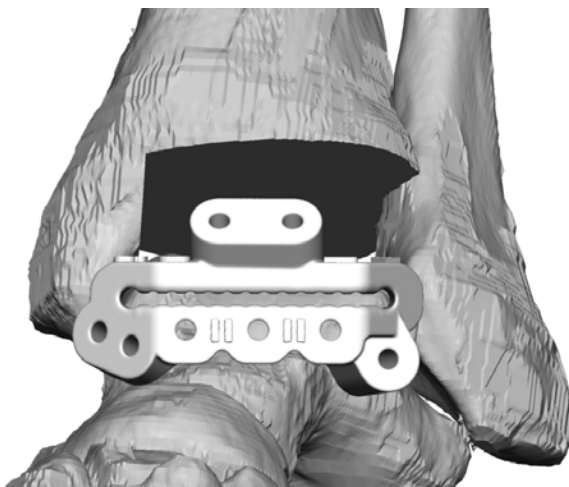
(If case is a Decoupled Flat Cut Talus, proceed to Procedure C2)



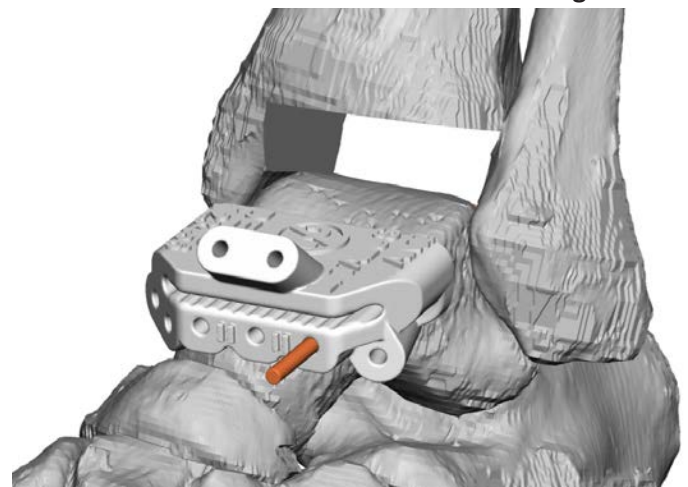
**1.** Confirm the work order number and patient information on the **Talus Cutting Guide** are correct.



**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**.

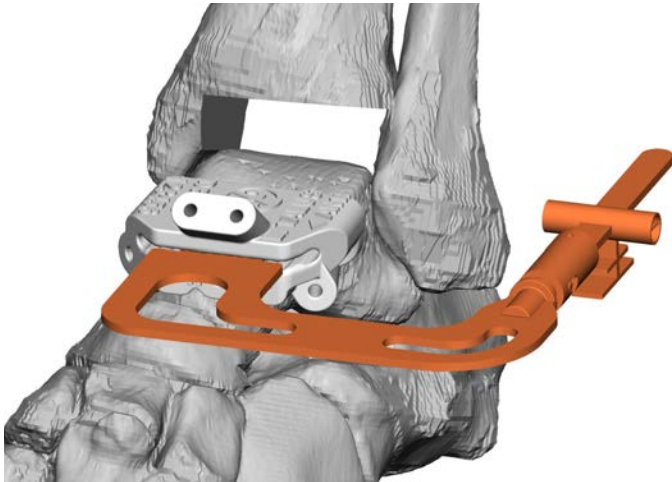


**3.** Place the **Talus Cutting Guide** in the best fit location. Visually confirm the **Guide** is seated evenly around its perimeter.  
**Note:** Determining the best fit location may require applying pressure from multiple vectors and/or with two hands. Use the case report for visual reference of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

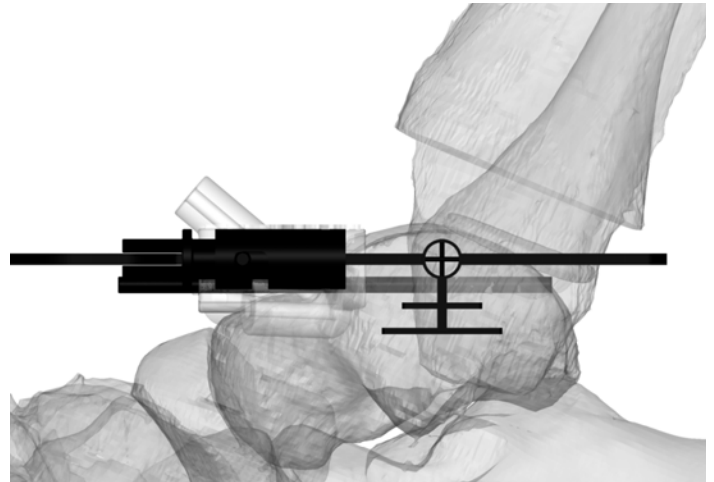


**4.** Place a **Pin** into any one Parallel Fixation Hole for initial fixation. Evaluate **Talus Cutting Guide** placement by taking anterior fluoroscopic images and comparing the coronal alignment and medial/lateral location of the **Guide** to the reference images in the **Case Report**. A second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

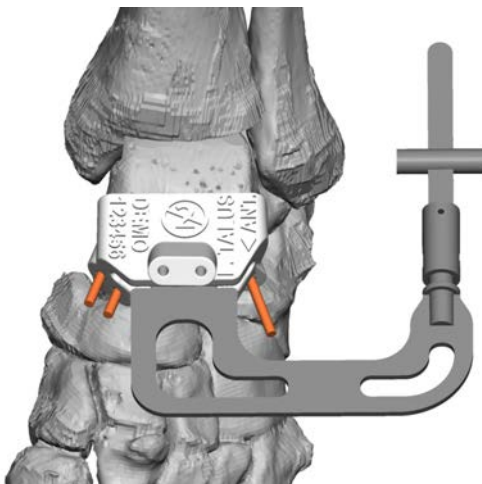
**PROCEDURE C1: DECOUPLED CURVED CUT TALUS CUTTING GUIDE**



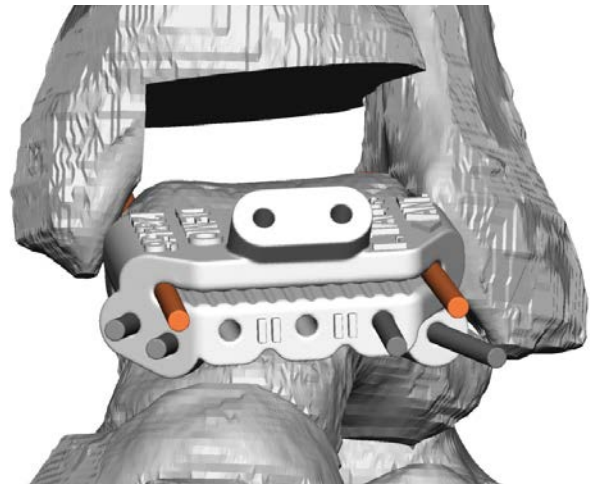
**5.** Insert the **Vantage Ankle 3D/3D+ Reversible Angel Wing** into the resection slot of the **Talus Cutting Guide**. The **Angel Wing** should sit flush against the anterior surface of the **Guide**.



**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.

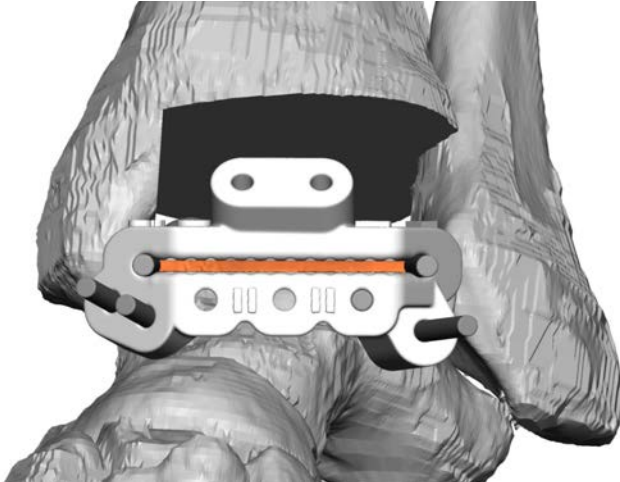


**7.** Place a **Pin** into one or multiple of the Oblique Fixation Holes to lock the **Talus Cutting Guide** into place.  
**Note:** In total, a minimum of two fixation **Pins** must be used and these **Pins** must not be parallel to each other.

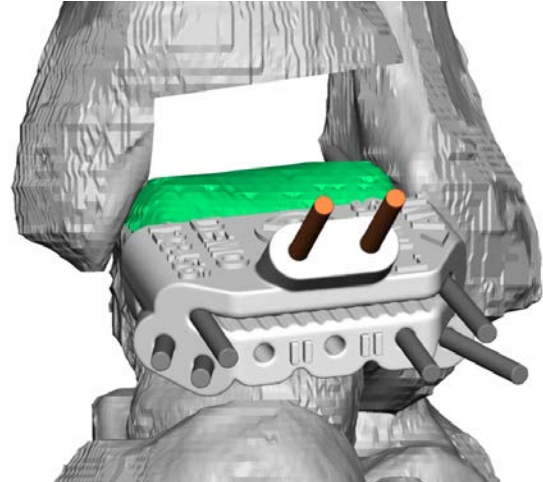


**8.** Place a **Pin** into both the Medial and Lateral Resection Limit Holes.

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

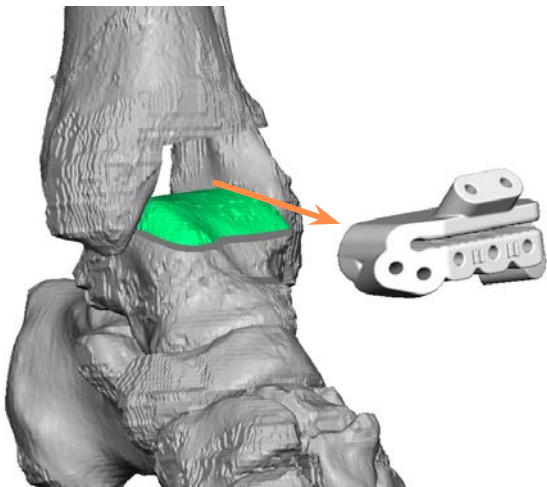


**9.** Use an **Oscillating Saw** to perform the talar resection, taking care to avoid the posterior soft tissues.

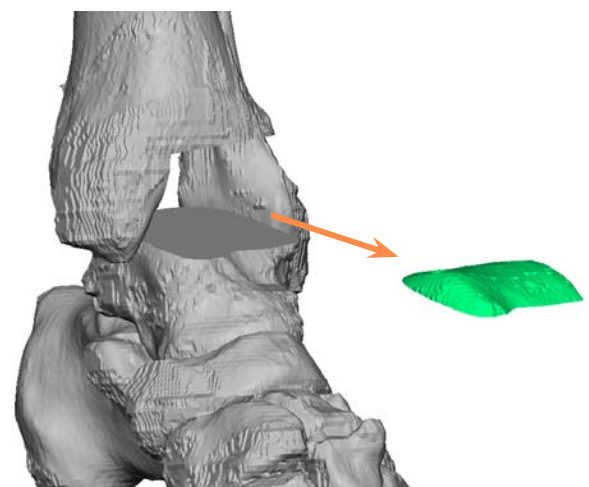


**10.** Optionally, drill a **Pin** into both of the Lollipop Pin Holes to create two guide channels, then remove the **Pins** directly.

**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.

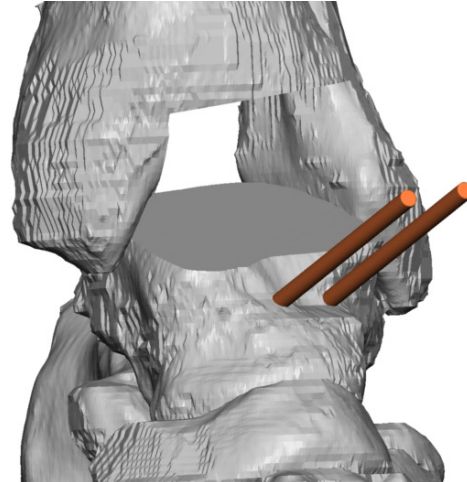


**11.** Remove both **Pins** and the **Talus Cutting Guide**.  
**Note:** A small amount of unresected bone may remain on either shoulder of the cut outside the **Resection Limit Pin** locations. This bone should be carefully cut with the **Reciprocating Saw** to complete the resection.



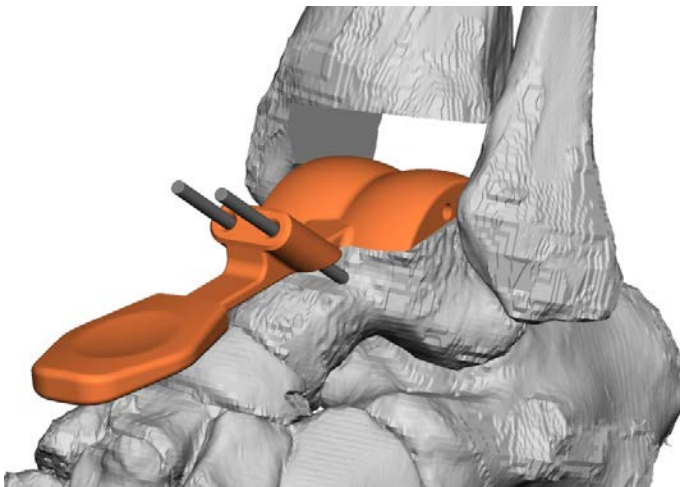
**12.** Remove all resected anatomy from the joint space. Lavage the operative site to remove any generated debris.

**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.

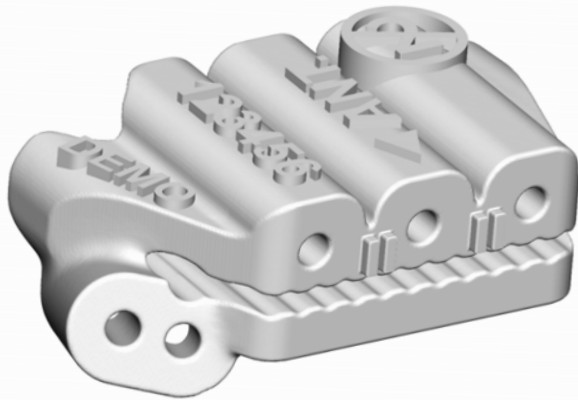


**15.** Slide the **Exactech Lollipop Guide** onto the **Pins**.

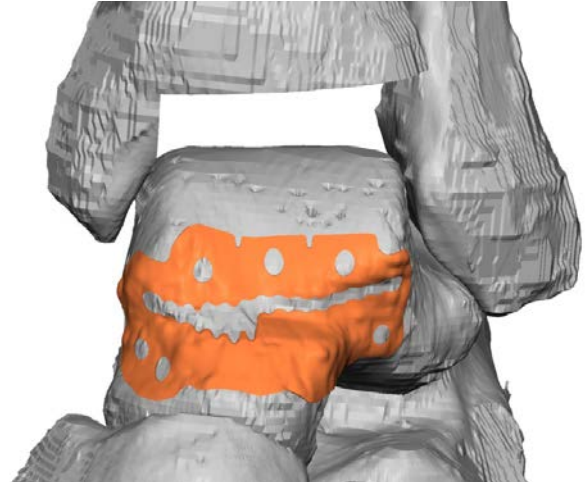
**Complete remaining steps per Vantage Ankle Fixed Bearing Operative Technique 721-00-30.**



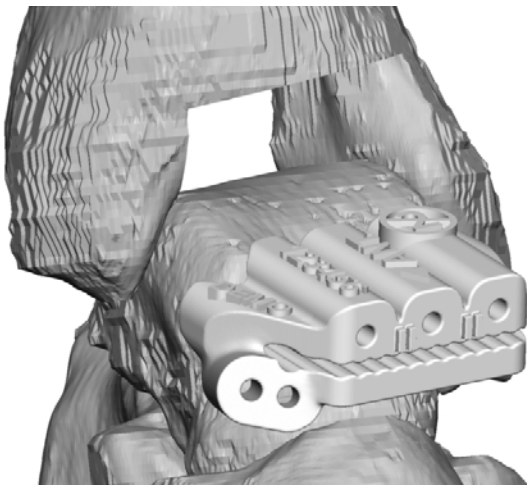
## PROCEDURE C2: DECOUPLED FLAT CUT TALUS CUTTING GUIDE



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

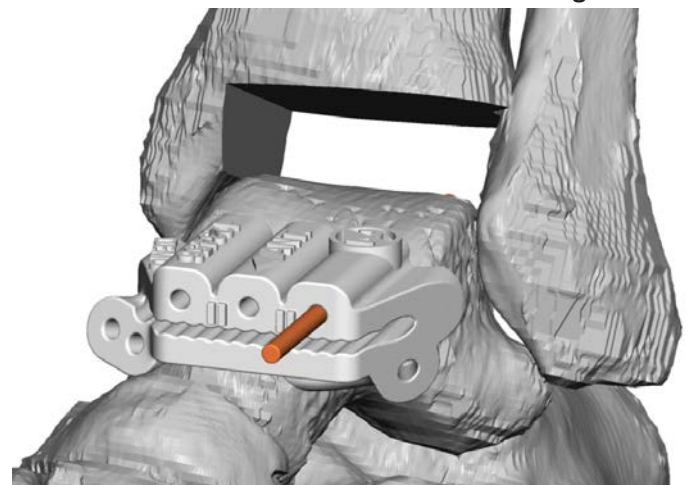


**2.** Take down soft tissue on surface of the talar dome and neck in all guide-contacting areas (shown in the “heat map” image in the Case Report). Ensure adequate dissection has been performed to accommodate the 0.5mm soft tissue tolerance of the **Talus Cutting Guide**.



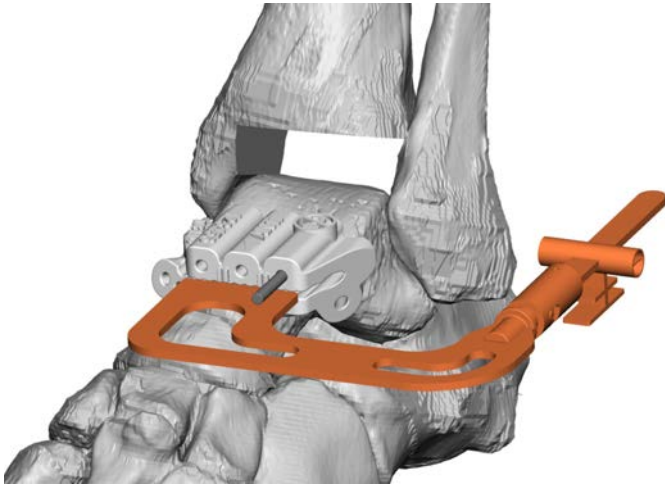
**3.** Place the **Talus Cutting Guide** in the best fit location. Visually confirm the **Guide** is seated evenly around its perimeter.

**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.

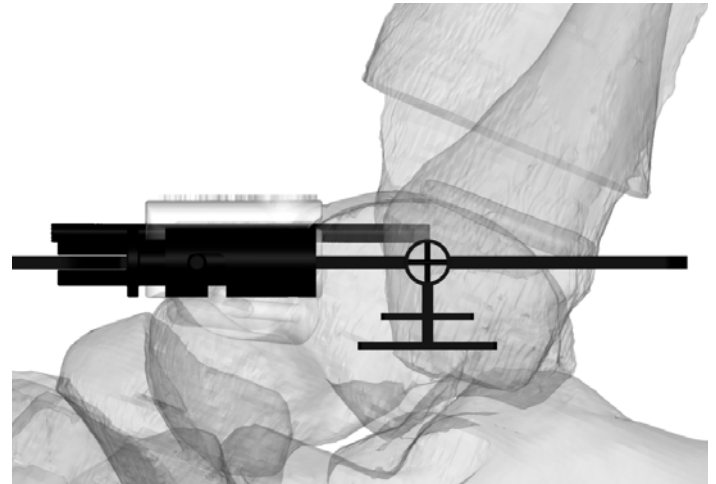


**4.** Place a **Pin** into any one Parallel Fixation Hole for initial fixation. Evaluate **Talus Cutting Guide** placement by taking anterior fluoroscopic images and comparing the coronal alignment and medial/lateral location of the **Guide** to the reference images in the Case Report. A second **Pin**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

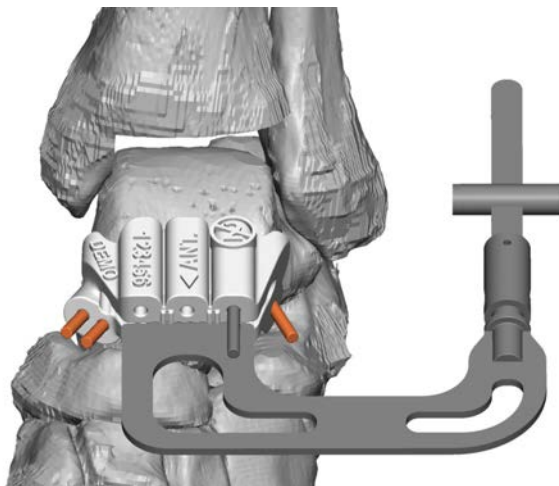
**PROCEDURE C2: DECOUPLED FLAT CUT TALUS CUTTING GUIDE**



**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**.

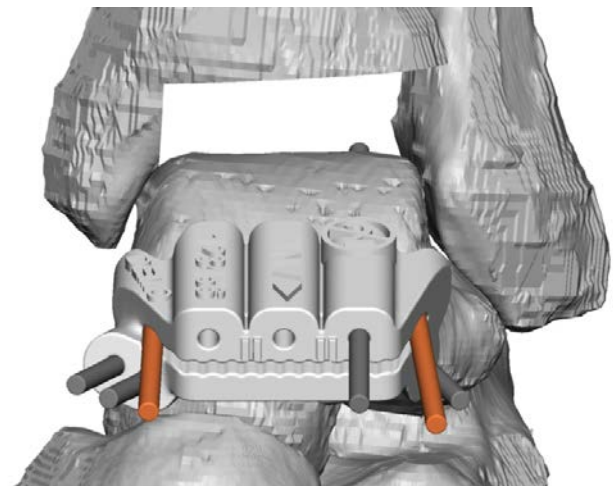


**6.** Take a lateral fluoroscopic image to confirm that the height and location of the talus cut match the reference images in the Case Report. It is recommended that the **Foot/Angel Wing** be positioned as close to the detector as possible for the most accurate fluoroscopic representation of the cut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



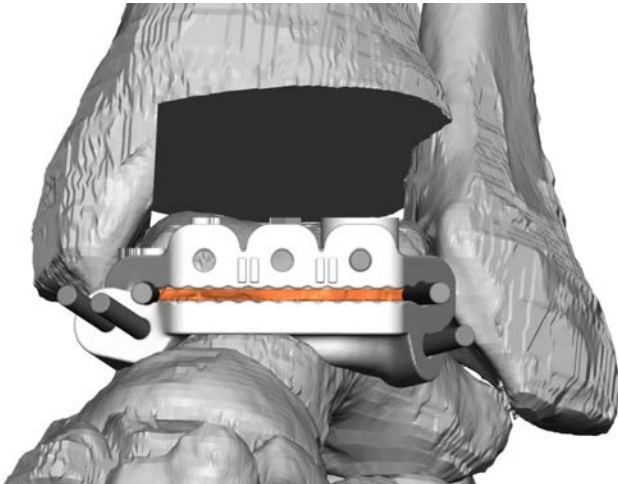
**7.** Place a **Pin** into one or multiple of the Talus Oblique Fixation Holes to lock the **Guide** into place.

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

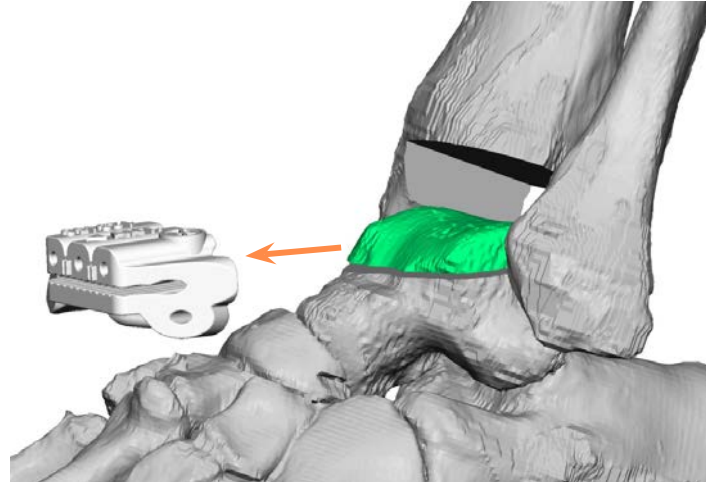


**8.** Place a **Pin** into both the Medial and Lateral Resection Limit Holes.

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

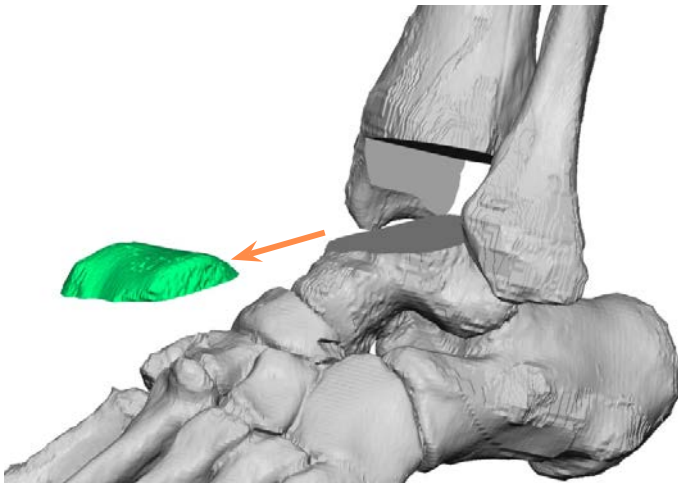


**9.** Use an **Oscillating Saw** to perform the talar resection, taking care to avoid the posterior soft tissues.



**10.** Remove the 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

Angel Wing



351-90-01

2.4mm x 3.5" Fluted Drill Bit

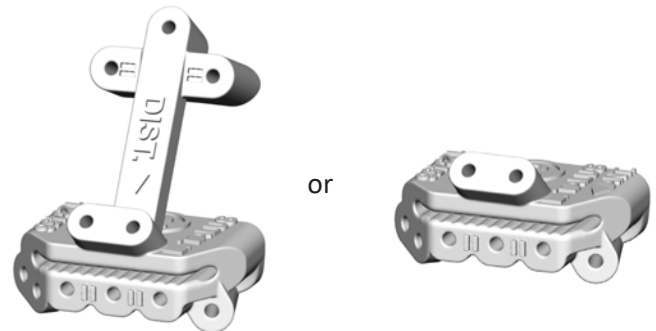
351-90-02

2.4mm x 2.5" Fluted Drill Bit



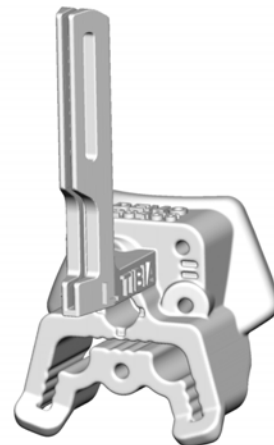
351-80-00

Talus Cutting Guide



351-80-10

Tibia Cutting Guide



CONSULT INSTRUCTIONS FOR USE PRIOR TO USING GUIDES

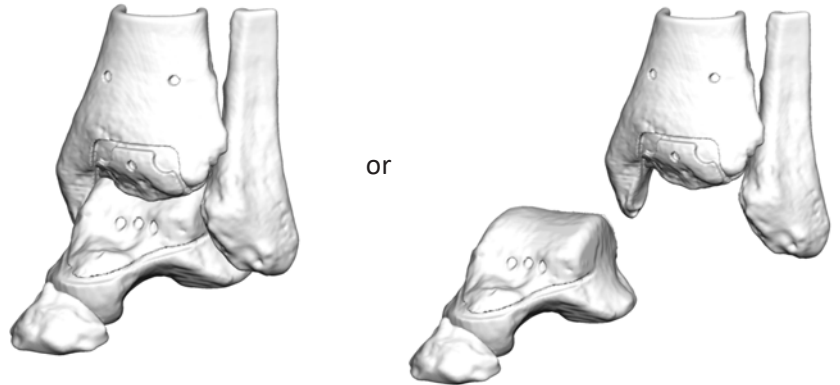
## INSTRUMENT LISTING

**CATALOG NUMBER**

**PART DESCRIPTION**

351-80-90

Anatomical Model



or

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

