

SPC Anterior Cut First Technique Addendum



SPC Anterior Cut First Surgical Technique Addendum

This technique is indicated for patients with osteoarthritis who are undergoing Total Knee Arthroplasty. It is indicated to be used as an adjunct to the full technique of femoral, tibial, and patellar preparation as described in other GENESIS[®] II TKA techniques.

Femoral Rotational Alignment

Rotation of the SPC valgus alignment guide is set at 3° of external rotation to the posterior femoral condyles by using one of the following landmarks:

- A-P Axis (Whiteside's Line)
- Posterior Condyles
- Epicondylar Axis

This can be done with or without the SPC rotational alignment paddles (left and right).

Without Paddles

1. Flex the knee to 70-90°.
2. Align:

(a) The line laser-etched across the distal surface of the valgus alignment guide parallel to the epicondylar axis. (The line on the valgus alignment guide is drawn such that placing it parallel to the epicondylar axis aligns the guide in 3 degrees of external rotation.)

(b) The SPC femoral alignment template (*Figure 5a*) with the A-P axis (The femoral alignment template is designed such that setting it parallel to the A-P axis aligns the valgus alignment guide in 3° external rotation.) The SPC femoral alignment template is placed over the valgus angle bushing (*Figure 5b*) to guide rotational alignment (*Figure 5c*).



Figure 5a



Figure 5b



Figure 5c

With Paddles

1. Choose the appropriate paddles - left or right - for the knee to be replaced. The left and right specific paddles allow for 3° of external rotation.
2. Flex the knee to >100° with the patella retracted laterally or everted when inserting the SPC valgus alignment guide with the left or right modular paddles.
3. Unlock the capture mechanism on the modular paddles. The arm on the paddles distracts posteriorly and rotates to either side to unlock so the anterior lip can engage the slot in the posterior aspect of the valgus alignment guide (*Figure 6a*).
4. Insert the anterior lip of the paddles into the slot in the valgus alignment guide. Rotating the arm back centrally into the recess will lock the paddles onto the valgus alignment guide (*Figure 6b*).

Proceed as with the regular GII Technique as described in the GENESIS® II ACF or MIS ACF Technique for the rest of the procedure unless you are doing a PS knee.

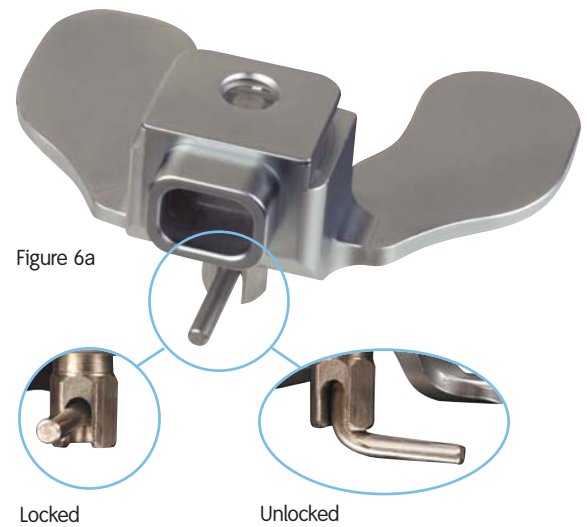


Figure 6a



Figure 6b

For Posterior Stabilized Knees:

The SPC Posterior Stabilized Collet (7144-1258) MUST be used due to the difference between the SPC GENESIS II PS femoral component and the regular GENESIS II femoral component, as the SPC component is 5 mm deeper and has an anterior wall that acts as a cement dam.

Note Bene

The technique description herein is made available to the healthcare professional to illustrate the authors' suggested treatment for the uncomplicated procedure. In the final analysis, the preferred treatment is that which addresses the needs of the patient.

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