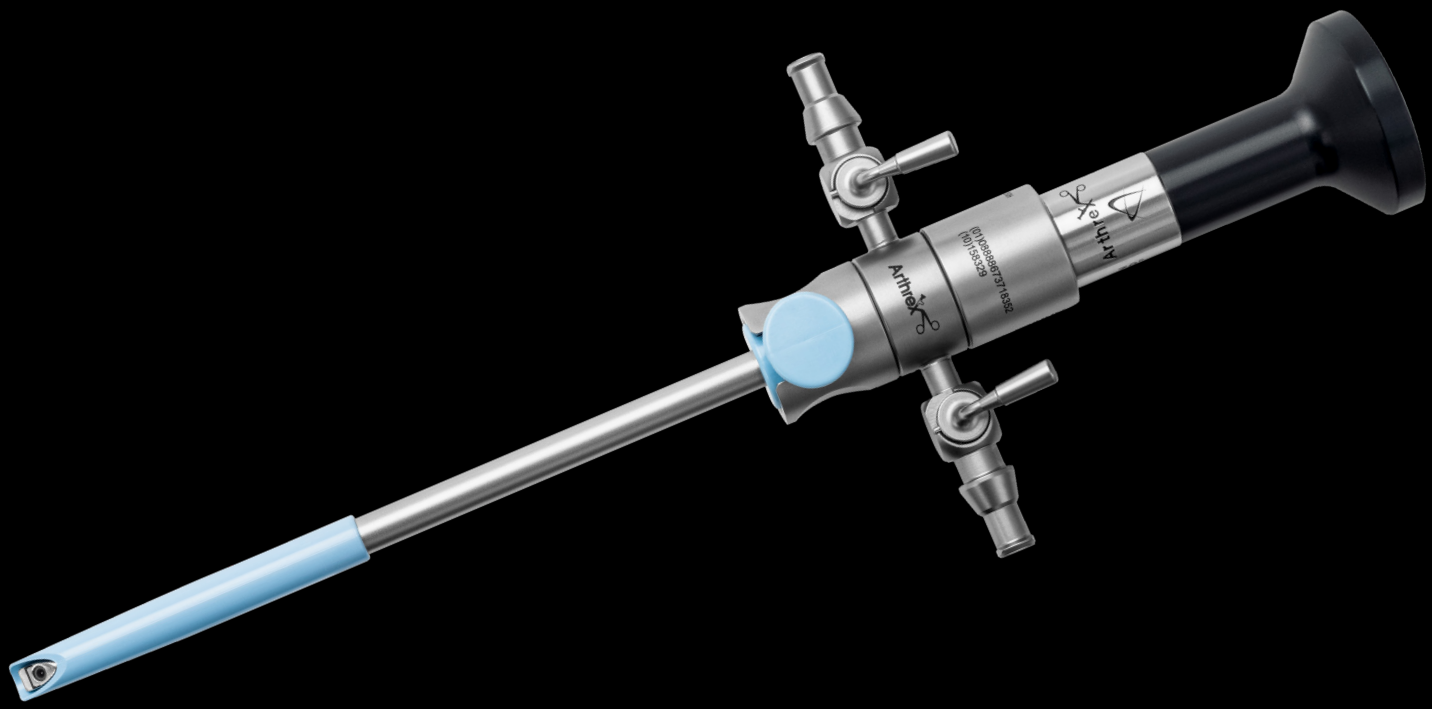
FlushFit Atraumatic Hip Cannulas for Safe Joint Access

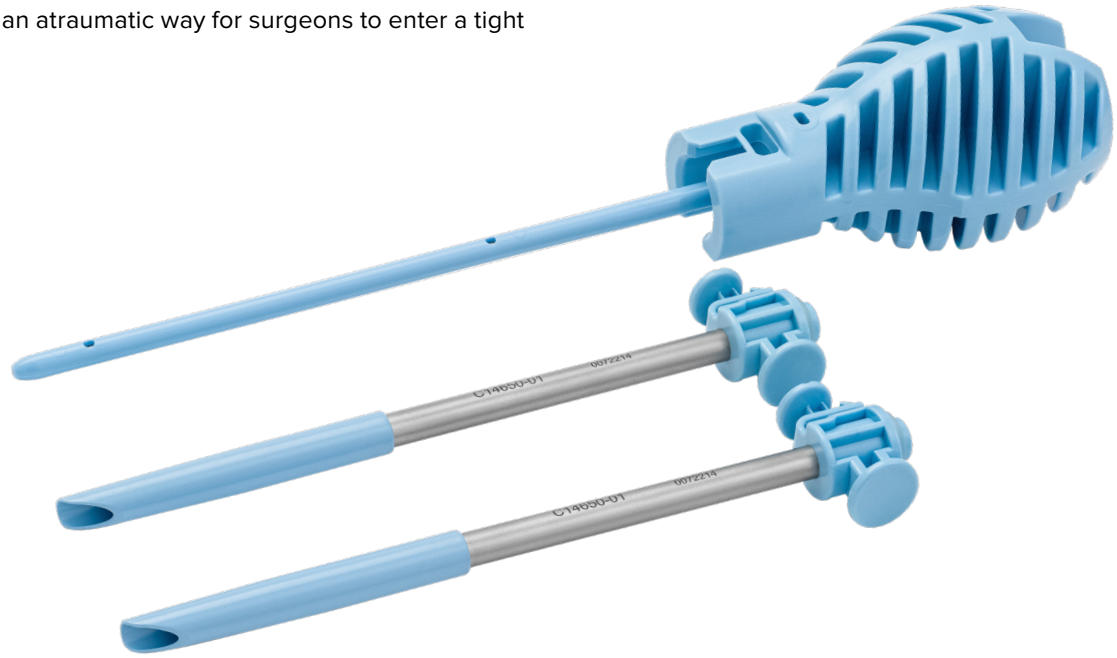
Brochure



Arthrex®

FlushFit Atraumatic Cannula System

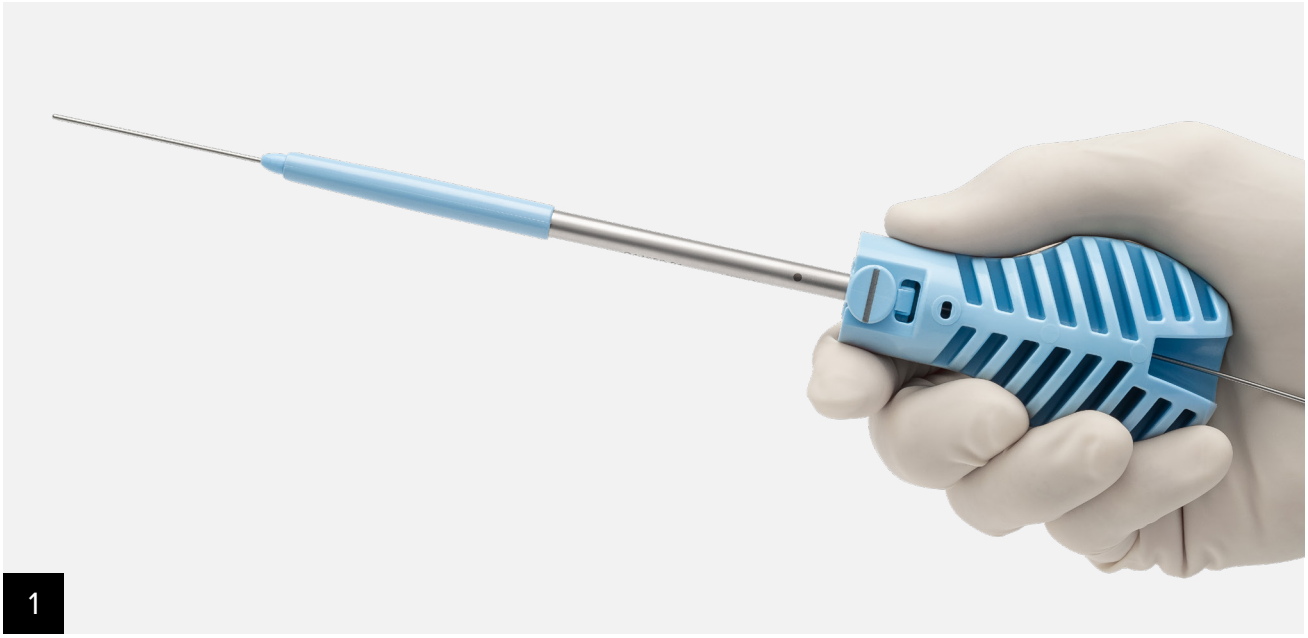
Iatrogenic damage to the articular cartilage surfaces of the hip is a known complication associated with hip arthroscopy.[1] The FlushFit atraumatic cannula has a soft plastic tip and is cut at an angle to allow a 70° arthroscope to sit flush with the end. This unique design provides an atraumatic way for surgeons to enter a tight hip joint while under distraction without scuffing the femoral head. The 5 mm inner diameter accommodates CapsuleCut™ blades and some shaver blades for capsulotomy and soft-tissue resection.



Features and Benefits

- Cannula angled to prevent the arthroscope from protruding further than the plastic tip of the cannula
- Softer plastic material is designed to deflect off the cartilage surface during joint access and the entirety of the case
- Disposable cannulas are compatible only with 70° arthroscopes
- Inner diameter of the cannula is 5 mm
- Quick connect for both the scope and cannula
- 125 mm working length for the standard-length cannula
- 145 mm working length for the hip-length cannula
- Disposable kit contains 2 cannulas and 1 cannulated obturator
- Cannulated obturator is compatible with 1.1 mm and 1.5 mm nitinol guide wires and has a cutout for a hand to fit over the wire through the obturator
- Reusable obturator is available for thicker capsules
- FlushFit cannulas and obturator are made with a radiopaque plastic and can be seen under fluoroscopy

Insertion Steps



1

Simultaneously twist and push the cannula and cannulated obturator over the top of a 1.1 mm or 1.5 mm nitinol wire that is inside the hip joint through the anterolateral portal.

2

Once the tip of the cannula is inside the hip joint, push down and forward on the cannula release button and remove the cannulated obturator and nitinol wire from the joint.

Note: Push down on the release button behind the black laser line to disengage the obturator from the cannula. Pushing directly on or in front of the laser line will not allow the cannula to release from the obturator. This is also applicable when disengaging the cannula from the reusable bridge.

3

Place the 70° arthroscope through the cannula and push the plastic cannula connection through the metal bridge until the laser lines are in line and a click is felt to ensure the bridge is locked into the cannula.

Repeat these steps to create a second working portal.

Ordering Information

Reusable Bridge and Disposable FlushFit Cannula Kits

Product Description	Item Number
Reusable Instruments	
Reusable quick-connect bridge for FlushFit cannula, Arthrex	**AR-3380-4050H**
Reusable quick-connect bridge for FlushFit cannula, XL, Arthrex	**AR-3380-4055H**
Reusable quick-connect bridge for FlushFit cannula, Arthrex Pano™ scope	AR-**3380-4056H**
Reusable quick-connect bridge for FlushFit cannula, Stryker	AR-**3380-4051H**
Reusable quick-connect bridge for FlushFit cannula, Smith and Nephew	AR-**3380-4052H**
Reusable quick-connect bridge for FlushFit cannula, Linvatec	AR-**3380-4053H**
Reusable quick-connect bridge for FlushFit cannula, Storz	AR-**3380-4054H**
Reusable obturator for FlushFit cannula	**AR-3391**
Reusable obturator for FlushFit cannula, XL	**AR-3391HL**
Disposable Kits	
Disposable FlushFit Cannula Kit	**AR-3390H**
Disposable FlushFit Cannula Kit, XL	**AR-3390HL**

AR-3380-4055H and 3390HL are compatible with the XL arthroscopes. All other bridges are compatible with AR-3390H and standard-length arthroscopes.

Reference

1. Harris JD, McCormick FM, Abrams GD, et al. Complications and reoperations during and after hip arthroscopy: a systematic review of 92 studies and more than 6,000 patients. *Arthroscopy.* 2013;29(3):589-595. doi:10.1016/j.arthro.2012.11.003

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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. Postoperative management is patient-specific and dependent on the treating professional's assessment. Individual results will vary and not all patients will experience the same postoperative activity level or outcomes.

Arthrex manufacturer, authorized representative, and importer information (Arthrex eIFUs)

US patent information

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