

OMNISPAN™

Meniscal Repair System

Ordering Information

OMNISPAN™ Applier w/ Malleable Graft Retractor	228143
OMNISPAN Meniscal Repair System 0° (Straight)	228140
OMNISPAN Meniscal Repair System 12°	228141
OMNISPAN Meniscal Repair System 27°	228142
Arthroscopic Pusher/Cutter	228302
Meniscal Rasp Up 45°	253110
Meniscal Rasp Up 90°	253111
Meniscal Rasp Straight 90°, calibrated	253112
Meniscal Probe	253113
Meniscal Depth Probe	228001
#2/0 ORTHOCORD® with Double-arm Meniscal Needles	228144
#2/0 ORTHOCORD (three free strands) with Meniscal Needle	228145
CHIA PERCPASSER® Suture Passer (5/box)	214101

* PDS is a trademark of Ethicon, Inc.

** ULTRA FAST-FIX is a registered trademark of Smith & Nephew, MAXFIRE is a registered trademark of Biomet Sports Medicine, and CROSSFIX is a registered trademark of Cayenne Medical.

1 A. Barber, Arthroscopy, September 2009.

*Prominent in Strength,
Subtle in Profile*

OMNISPAN™
Meniscal Repair System



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P/N 901086 Rev. A 5/10

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The OMNISPAN™ Meniscal Repair System from DePuy Mitek is designed to provide optimized all-inside meniscal repairs. The system consists of a low profile needle, pre-loaded with two PEEK backstops and ORTHOCORD® suture, which are delivered using the OMNISPAN applicator.

No Hard Bodies on the Surface of the Meniscus: OMNISPAN repairs leave no hard bodies making contact with the femoral chondyles. Even the knot has been moved to the backside of the meniscus, leaving a just low profile double span of #2/0 ORTHOCORD suture.

Excellent Strength¹: Testing has shown OMNISPAN provides outstanding strength compared to competitive all-inside devices. Single pull to failure testing (table 1) in porcine menisci resulted in over 177 N of strength, while cyclic testing (table 2) in porcine menisci resulted in 204 N of strength.

Less Mass Postoperatively: While providing an excellent strength profile, #2/0 ORTHOCORD is composed of 55% PDS™* and 45% High Molecular Weight Polyethylene. As a result, the suture's PDS component is resorbable and will result in less suture mass on the surface of the meniscus over time.

Active Deployment: The active deployment provided by the OMNISPAN applicator allows you decide when and where the backstops are ultimately deployed behind the meniscus – no plunging and relying on friction.

Table 1 Single Destructive Pull Data^{1**}

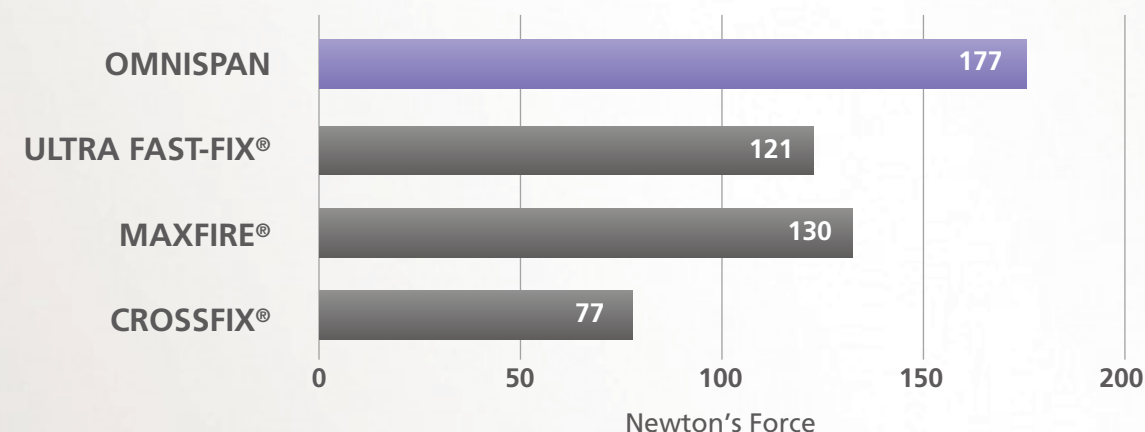
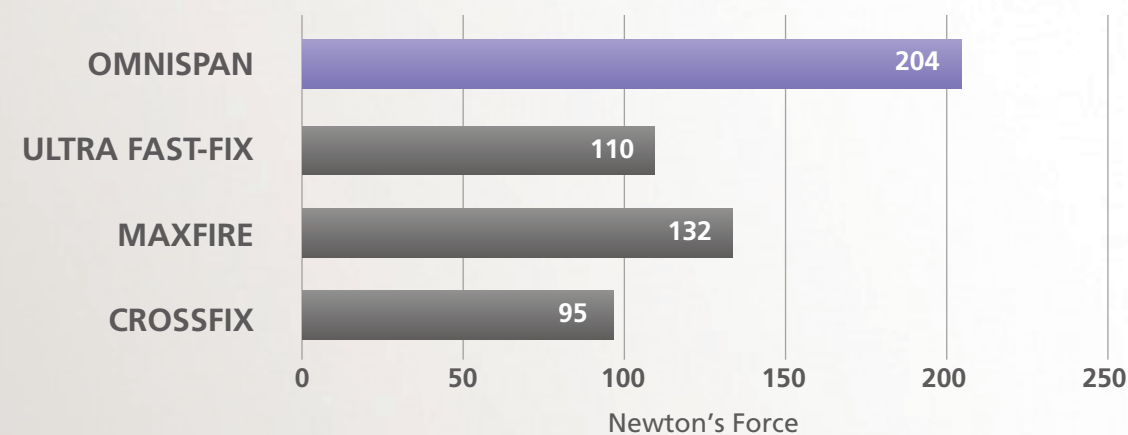


Table 2 Cyclic Load Data^{1**}

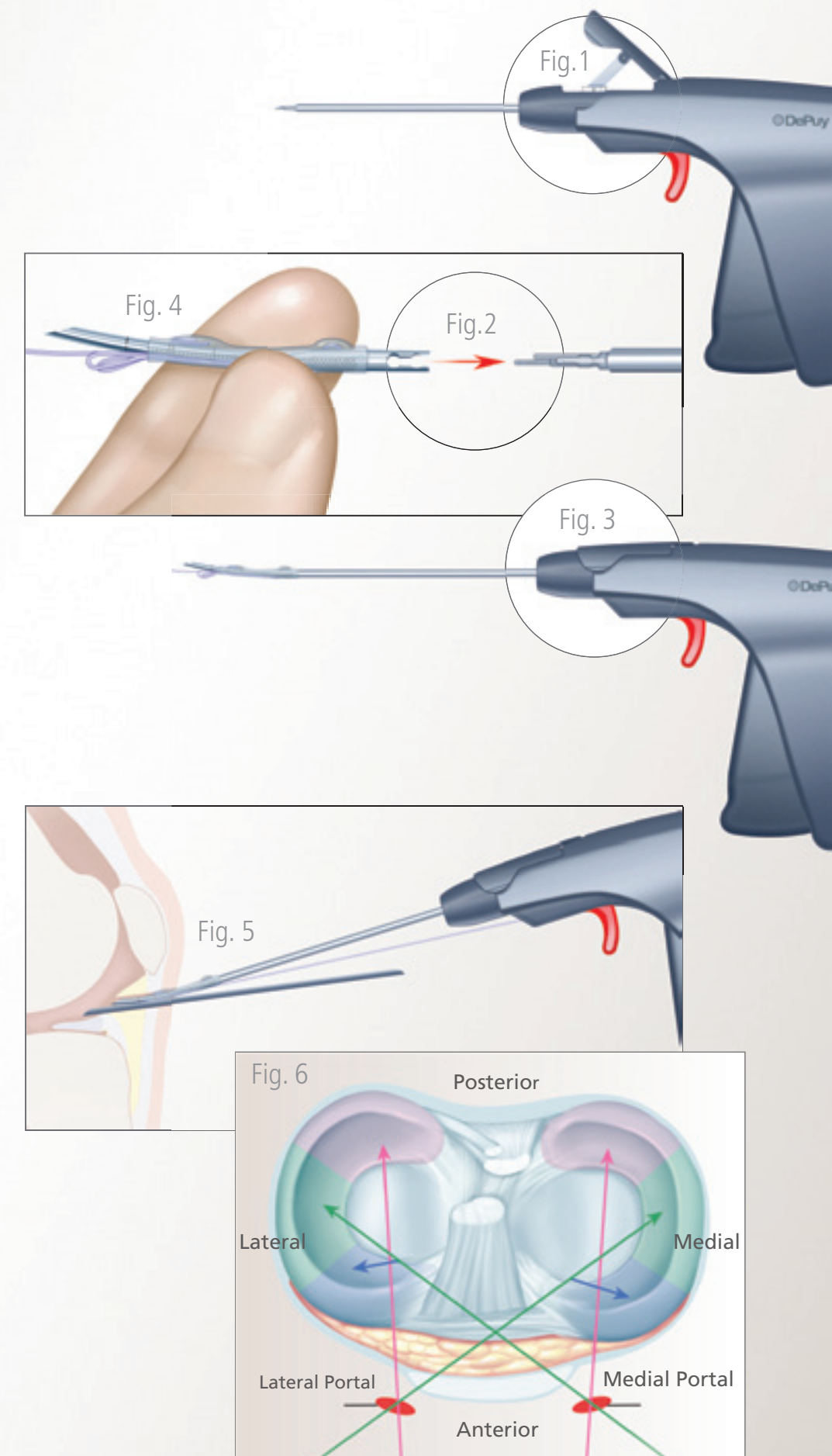


Meniscal Repair System

The OMNISPAN™ Meniscal Repair System consists of a single-patient, multi-use applicator and needles with pre-loaded implants in 0° (straight), 12°, and 27° options.

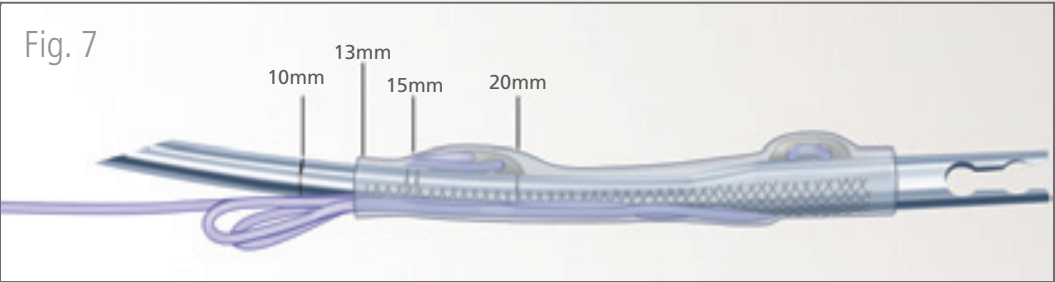
Surgical Technique

- 1 Select the needle most appropriate for the tear you are repairing. Attach the needle to the OMNISPAN applicator by lifting the lock lever on top of the applicator to expose the connector (figure 1).
- 2 Push the proximal end of the needle onto the connector until it clicks on securely (figure 2).
- 3 Close the lock lever to secure the connection (figure 3).
- 4 Needle must always be connected to the applicator with the needle slot facing up (figure 4).
- 5 Use the Malleable Graft Retractor packaged with the applicator to protect the implants and suture from getting caught on soft tissue and the fat pad, during insertion into the knee. Once inside the joint space, remove the Malleable Graft Retractor (figure 5).
- 6 **TIP:** When completing repairs in the posterior 1/3 of the meniscus, use the arthroscopic portal on the same side. When completing repairs in the middle and anterior 1/3 of the meniscus, use the arthroscopic portal on the opposite side (figure 6).

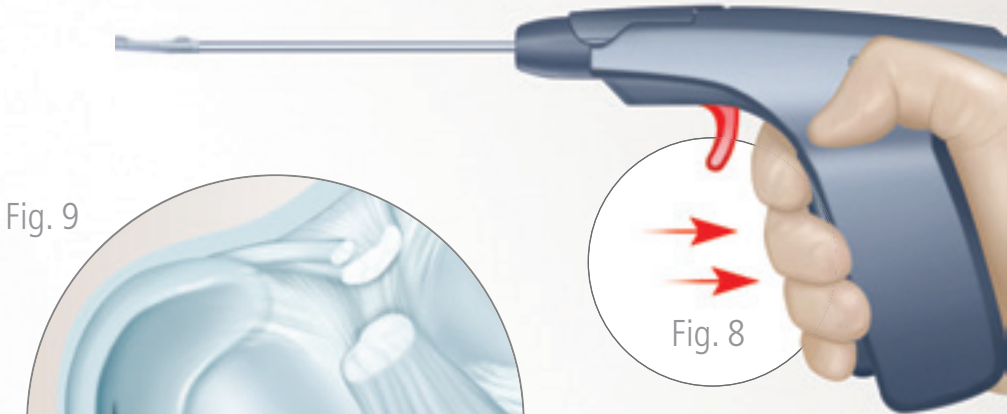


Surgical Technique (Cont.)

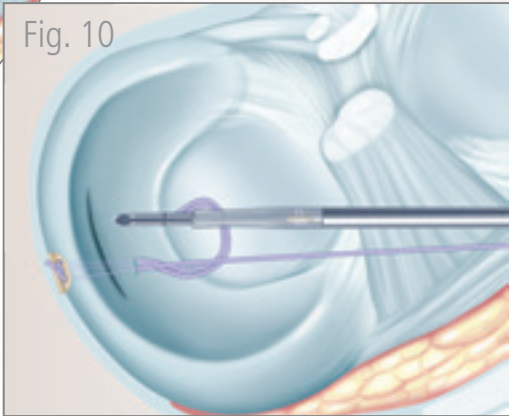
7 Penetrate the meniscal tissue to the desired depth. The silicone tube on the needle provides a “soft stop” at approximately 13mm. The OMNISPAN™ needle is also laser marked at 10mm, 15mm (double line), and 20mm (figure 7).



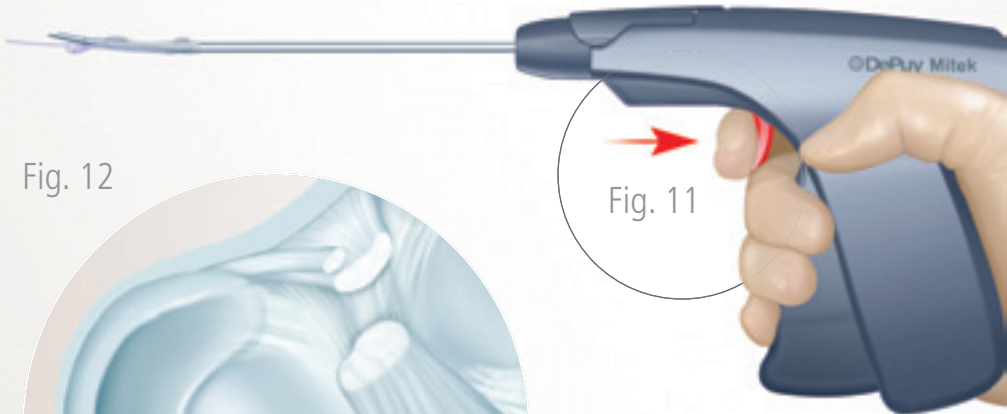
8, 9 Once at the desired depth, squeeze the large dark gray lever to deliver the first implant to the back of the meniscus (figures 8 and 9).
NOTE: There will be a slight pushback on the deployment gun while the implant goes through the tissue. Provide the necessary counter resistance to ensure that needle depth is maintained.



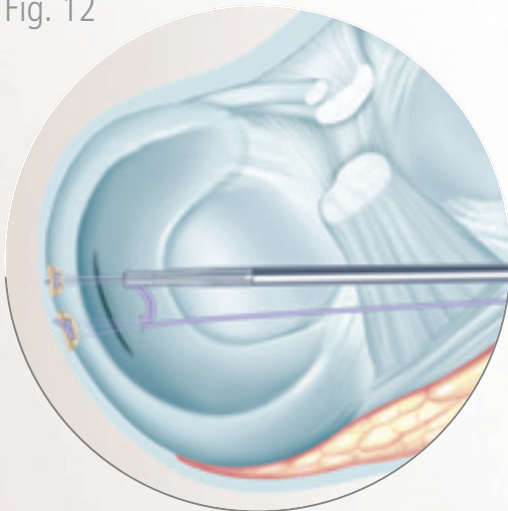
10 Keeping the large grey lever squeezed when exiting the tissue will help to ensure that the suture stays out of the barrel of the needle, and the second implant remains in its intended position. Remove the needle from the tissue and maintain visualization of the tip of the needle to ensure the second implant maintains the proper position (figure 10).



11 Pull the small red loading trigger until you hear a click. This will move the second implant into a position on the needle from which it can be deployed (figure 11). If needed, you can pull the red trigger multiple times to ensure the second implant is in the firing position.



12 Maintain a span of 6-10mm between the first and second implants. Repairs can be done in horizontal, vertical, or oblique configurations. Penetrate the meniscal tissue to the desired depth and squeeze the large, dark grey lever to deliver the second implant to the back of the meniscus (figure 12).

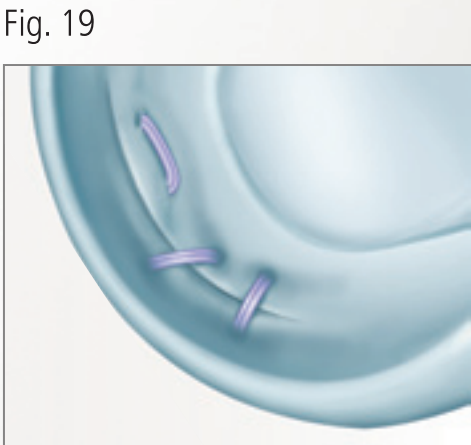
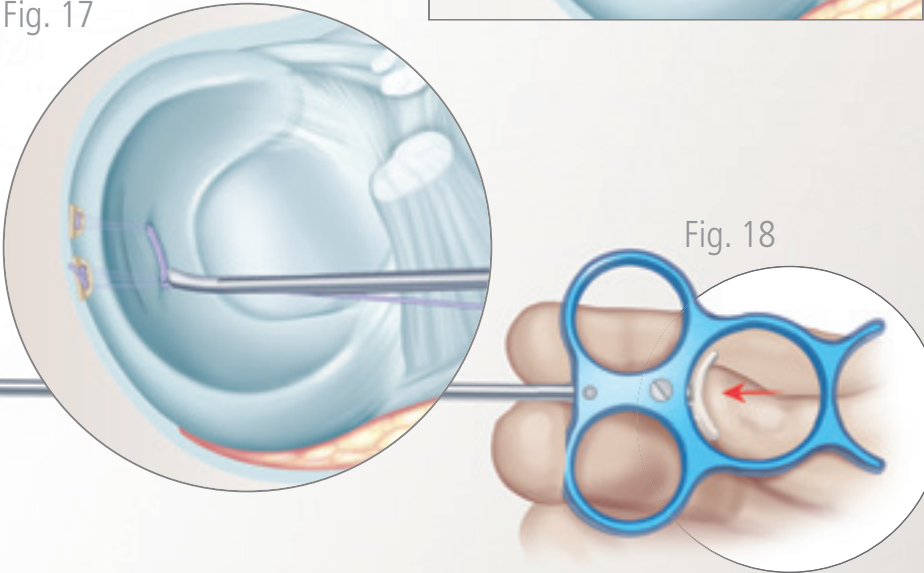
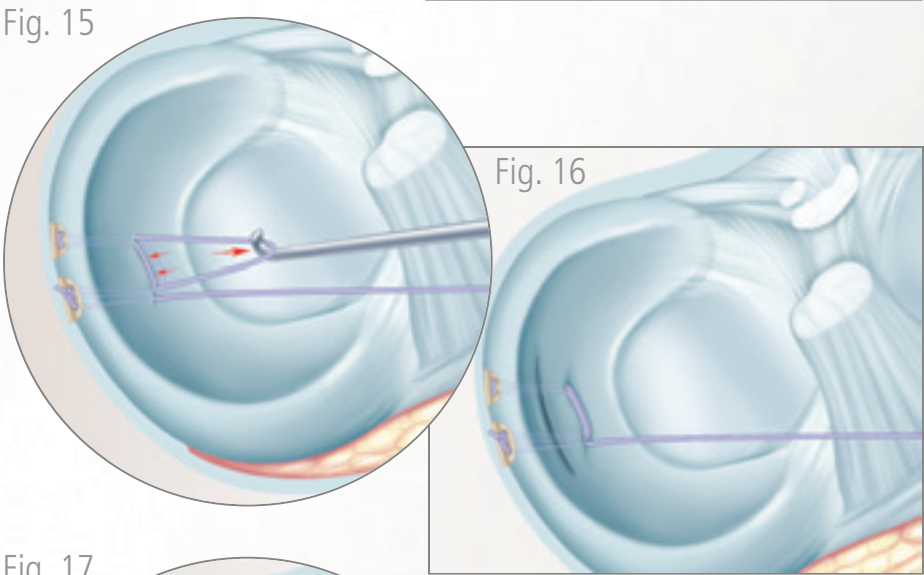
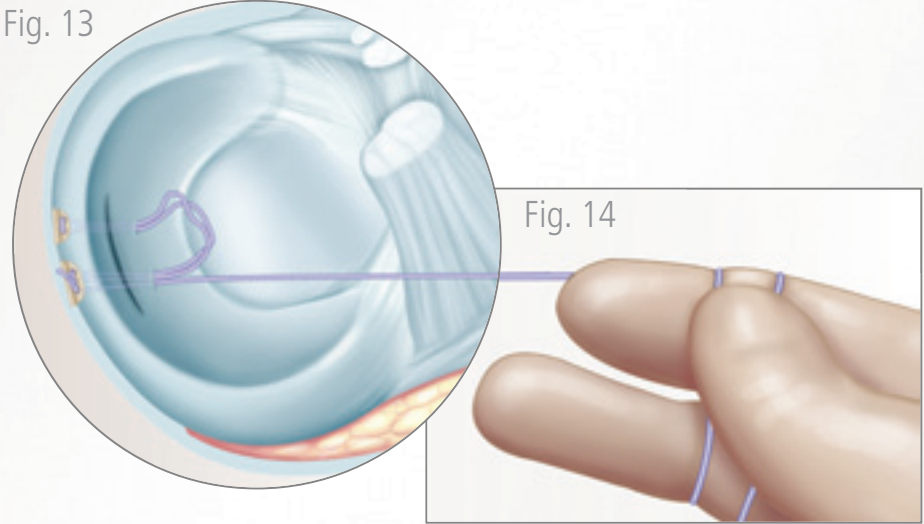


13 Release the lever and remove the applicator and needle from the joint space (figure 13).

14, 15, 16 Keeping the free suture leg as perpendicular to the repair as possible, pull the free suture leg slightly to identify the first loop that moves. Capture that loop with the probe and pull until the other loop lies tight against the meniscus. Remove the probe and pull the free suture leg to tighten the second loop. Then complete the repair until the desired tension is achieved against the tissue surface (figures 14, 15, and 16).

17, 18 Continue to implant devices as determined by the tear. Cut each suture leg with the DePuy Mitek Arthroscopic Pusher/Cutter by advancing the Pusher/Cutter until flush with the surface of the repair, maintaining moderate tension on the free suture leg, and pressing the silver cutting trigger on the Pusher/Cutter (figures 17 and 18).

19 Final repair showing vertical horizontal and oblique repairs (figure 19).



A Range of Additional Solutions for Meniscal Repair



Meniscal Rasp Up 45° 253110



Meniscal Rasp Up 90° 253111



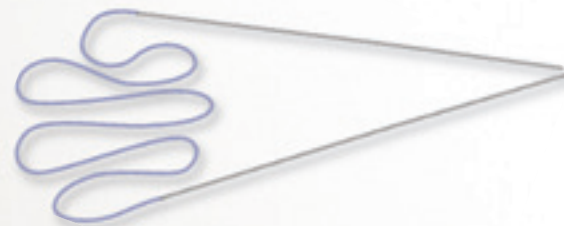
Meniscal Rasp Straight 90°, calibrated 253112



Meniscal Probe 253113



Arthroscopic Pusher/Cutter 228302



#2/0 ORTHOCORD® with Double-arm Meniscal Needles 228144



#2/0 ORTHOCORD (three free strands) with Meniscal Needle 228145



CHIA PERCPASSER® 214101

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