

General operating technique for all Scanos femoral components

After a classical pre-operative planning approach in correlation with the type of stem to be used use data in order to determine head centre, intramedullary axis and materialize resection level. Estimate required rasp and implant size.

Femoral neck resection

Resect neck at 45° some 6-8mm above defined final resection level.

Opening up the canal

Open up the femoral canal with standard instrumentation or using the optional Scanos starter reamers if you have requested these.

Ream and/or rasp

When in a neutral alignment ream (if reaming technique is used) or rasp the diaphyseal canal advancing down the canal increasing rasp size until good cortical contact is encountered.

Rasp used as the trial prosthesis

Still using the rasp handle attached fully seat the last rasp used tapping it into full contact with a small mallet. Remove the rasp handle. Fit the provisional neck adaptor to the rasp and place on modular adaptor head the best match trial head.

Perform a trial reduction in order to determine correct neck length. Then remove the trial head and neck adaptor. Reattach the rasp handle and remove the rasp.

Cemented components

In the case of use of a cemented Scanos femoral stem component (CEMTIV™, REACTIV® or X-TENSIV™ cemented stems) apply cement in conformity to manufacturer's product instructions for use leaflet.

Stem insertion

Attach the stem inserter to the implant. With an adequately prepared canal the implant will only require a few slight impaction taps in order to seat the implant correctly and obtain perfect stability. In the case of a cementless component: should the implant block remove it carefully and reapply the last rasp used to remove a little additional bone or bone that might have obstructed the canal during rasp withdrawal. Reintroduce the stem component.

Checking

Once the stem has been implanted or re-implanted remove the stem carrier instrument and mount the appropriate provisional trial head. Reduce to check stability and range of motion. Remove provisional head.

Femoral head

Drive definite femoral head onto the femoral stem taper using the Scanos head driver.

IMPORTANT

Information: Surgeons should be familiar with the implants and instrumentation before performing surgery. The above protocol only explains a general surgical technique for guidance purposes and the surgeon should be aware that Scanos is only an implant manufacturer and does not practice medicine in any way or manner. Consequently as there are numerous variations of techniques available only the surgeon who performs an implant procedure is apt to determine both the intended use and aim of the surgery and the most appropriate technique to be used and should therefore use the technique he or she deems to be best and prove most reliable with his or her usual technique.