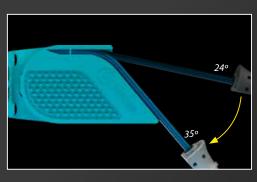
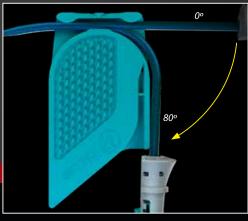
# MENISCUS VERSAFLEX

ALL INSIDE BENDABLE MENISCAL SUTURE SYSTEM









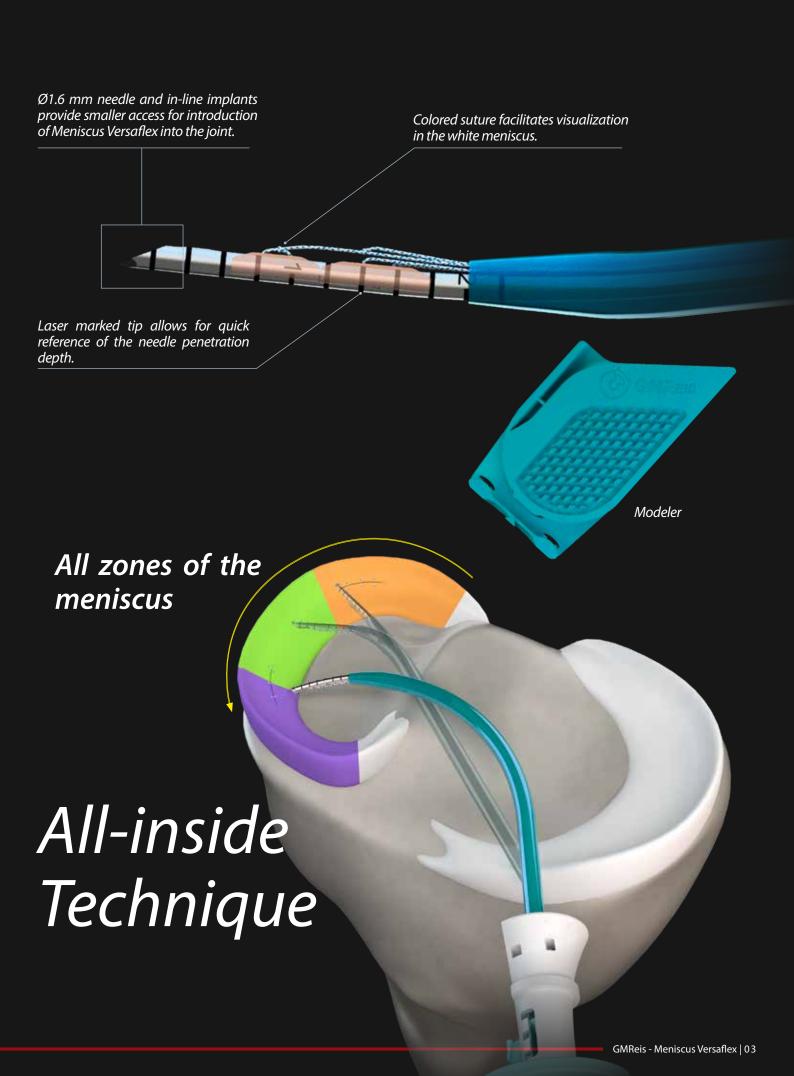




## **MENISCUS VERSAFLEX**

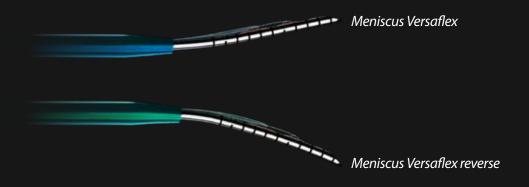
The Meniscus Versaflex was developed by GMReis to provide surgeons all-inside treatment for meniscal lesions, composed of two PEEK buttons and #2-0 knotless suture.

The repair system is guided by a needle with flexible shaft that allows access to meniscus all zones using the standard anterior portal. The application mechanism allows implantation using only one hand. PEEK buttons positioning device Device for adjusting needle depth: 12 mm, 16 mm and 20 mm. Flexible and bendable shaft provides access to all zones of the meniscus using the standard anterior portal Protective tube for the Meniscus Versaflex Inserter developed to facilitate knee joint introduction and removal, eliminating the need for cannulas that would increase access. Meniscus Versaflex Meniscus Versaflex Reverse

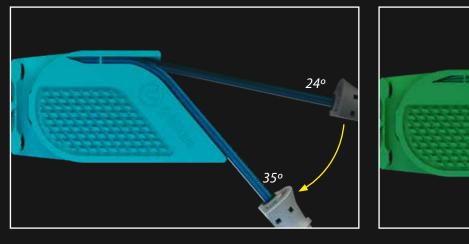


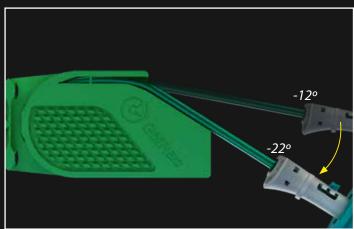
## **SURGICAL TECHNIQUE**

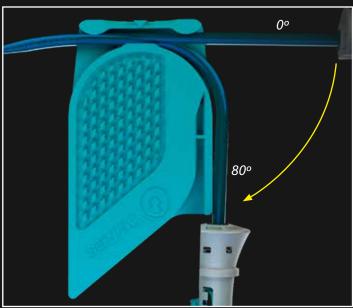
1. Choose which device is best suited to the procedure and patient needs, considering the injury zone, the access, and the bending that will be performed on the device shaft.



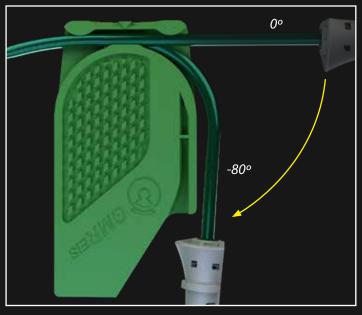
2. Bending: Bend the tip an/or shaft of the Meniscus Versaflex according to the surgical planning.







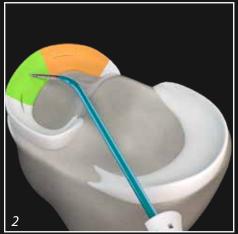
Figs.: The tip of the Meniscus Versaflex allows for bending from the original 24° up to 35°, and the shaft up to 80°.

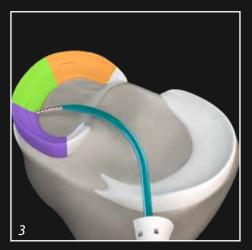


Figs.: The tip of the Meniscus Versaflex Reverse allows bending from the original -12° to -22°, and the shaft up to -80°.

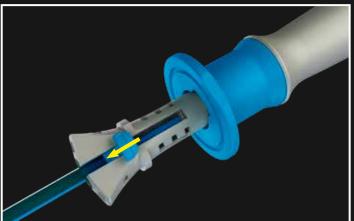
Meniscus Versaflex different zones treatment demonstration: without bending for posterior third (1), with tip bended for middle third (2), and with shaft bended for anterior third (3).

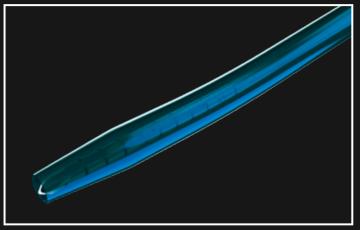




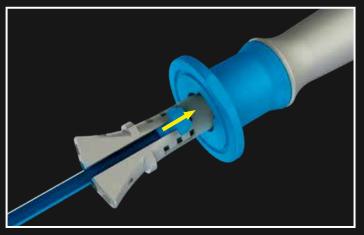


- 3. The repair technique involves the implantation of two PEEK buttons from inside to outside of the meniscus; positioned on the outer edge and connected by a #2-0 knotless suture one on each side of the lesion.
- a. Push the tube through out the needle with the tube to introduce safely in the joint, using the inserter device.





b. After positioning the tip of Meniscus Versaflex in the lesion zone, retract the tube using the same device to expose the needle with the length determined by the surgical planning: 12, 16 or 20 mm.



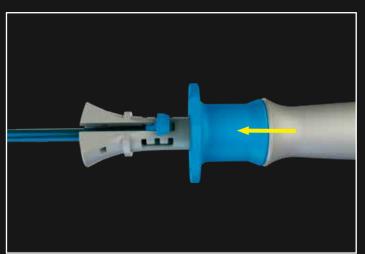


c. Introduce the needle in the edge of the lesion, crossing it to meniscus outside.





d. Push the positioning device of the Meniscus Versaflex inserter until hear a "click" sound, which confirms the correct passage of the first PEEK button.



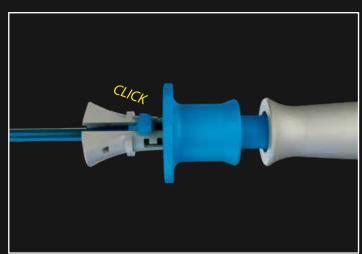




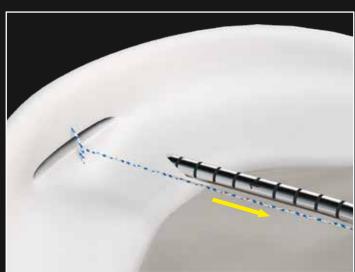
Fig.: First PEEK button implanted outside of the meniscus.

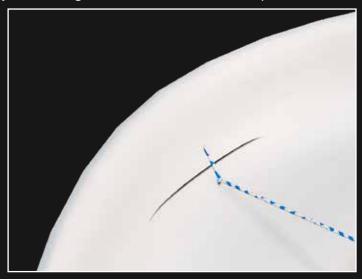
e. After delivering the first button, remove the needle and reintroduce into the other edge of the lesion, repeating the movement to implant the second PEEK button.





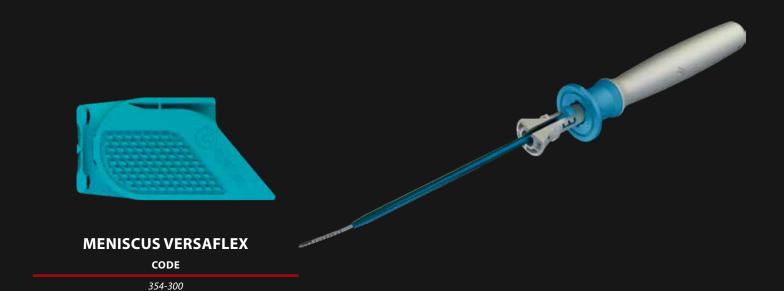
f. Remove the Meniscus Versaflex inserter from the joint, using the knotless suture to repair of lesion.





g. Check repair efficiency through arthroscopy, and cut the suture ends.







### **MENISCUS VERSAFLEX REVERSE**

CODE

354-400

### Note

The Meniscus Versaflex and Meniscus Versaflex Reverse products are presented in a single-use sterile package, and come with their respective disposable modeler.



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