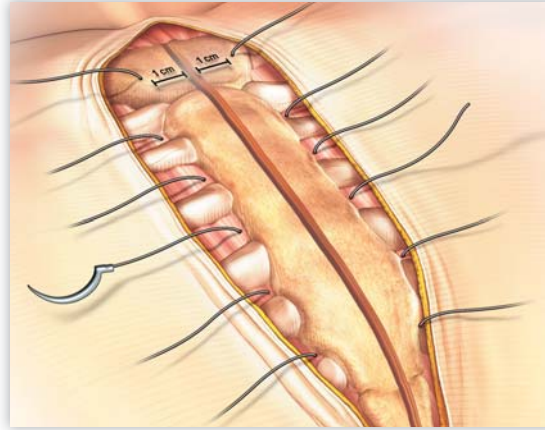


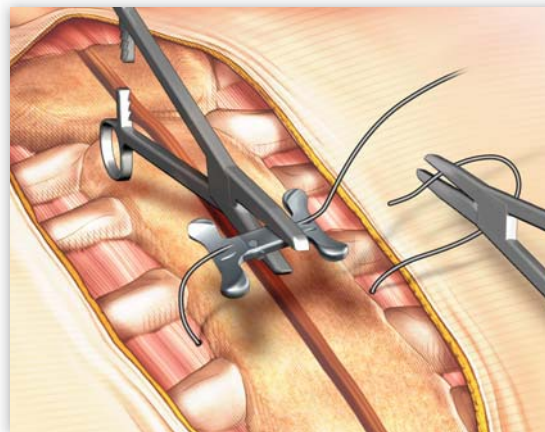
WIRE INSTALLATION

INSTALLATION TECHNIQUE



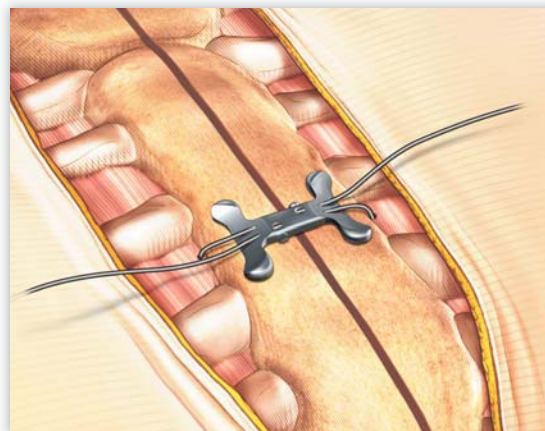
A. Feed #5, 6, or 7 stainless steel wire through or around the sternum making sure that sternum width and/or space between wire penetrations is sufficient to allow room for the plate.

Caution: If the distance between wire penetration is less than the length of the plate (approximately 20mm), adequate closure may not be achieved.



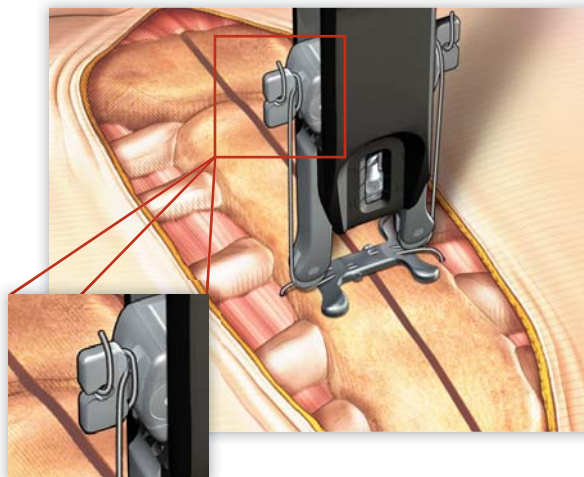
B. Cut the needle off and remove any kinks at the wire ends leaving the wire as long and straight as possible. Feed the wire through the plate as shown.

Caution: Use needle drivers to avoid sharp wire ends and cleats.



C. Lift and pull the loose ends of the wire, approximating the sternum halves and seating the plate centered over the sternotomy.

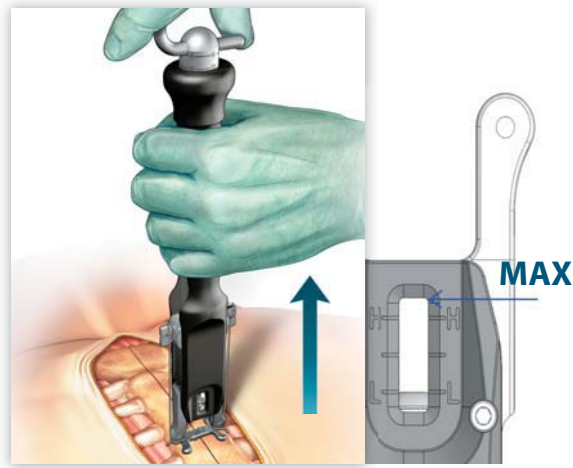
LOADING THE TENSIONER



A. Lower the shuttle all the way toward the distal end. Place the tensioner over the plate perpendicular to the sternum.

B. While keeping the wires contained within the pulleys, wrap the wires once around the groove of the wing, and then through the center slot.

TENSIONING



TENSION RECOMMENDATION TABLE

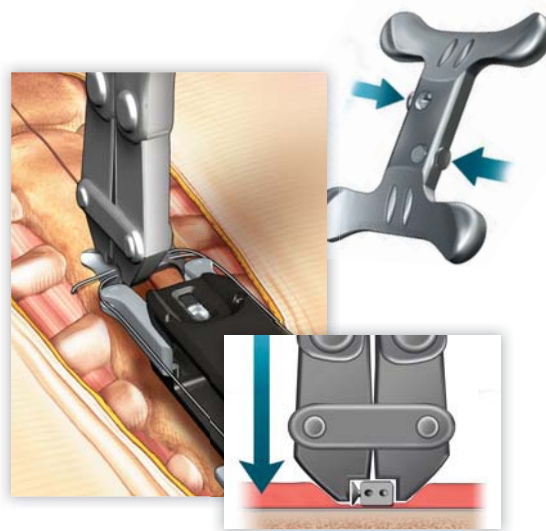
	STERNUM WIDTH		
	very small ($\leq 20\text{mm}$)	small ($20 < x < 24\text{mm}$)	med to large ($24\text{mm} <$)
Wire Size 5 & 6	High to Max	Med to High	Low to Med
Wire Size 7	Max	Med to High	Med

A. Lift up on the tensioner while twisting the crank clockwise to tighten until the plate is well seated on the sternum. The tensioner can be leveraged to help position the plate over the sternotomy. Use tactile feedback and the tension indicators while taking into consideration the individual sternum geometry and bone quality to apply the optimal amount of wire tension.

B. Table 1 outlines the relationship between wire size, sternal width and tension indicator levels as a guide for achieving optimal wire tightness. Narrow sternums and/or use of large wire adds friction to the closure which may require higher readings to achieve the same closure force.

Warning: Recommended settings are meant to assist the surgeon in optimizing the performance of the system, not to replace the surgeon's judgment. Ideal tension may vary with bone quality or geometry. Reduced bone quality may warrant a lower tension than usual.

CRIMPING

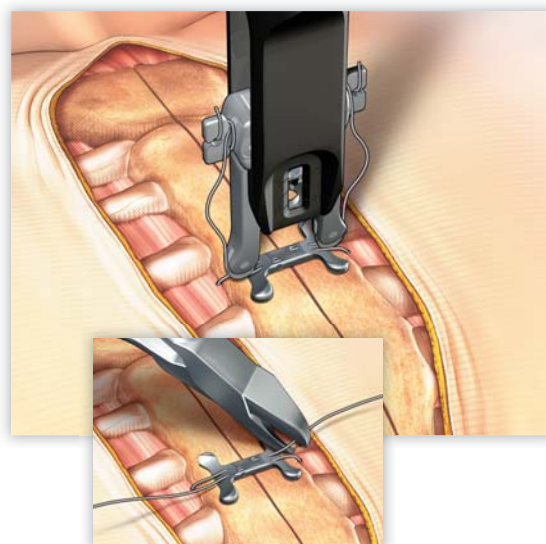


A. Lower the tensioner horizontally allowing access and visibility to the plate.

B. Hold the crimper perpendicular to the plate and **push down against the sternal periosteum to ensure that the crimper can fully engage the buttons.** To lock the wire tension, crimp both buttons of the plate using the crimper tool. Crimp twice to ensure buttons are fully compressed.

C. Confirm each button has been fully compressed; re-crimp if necessary.

CUTTING EXCESS WIRE



A. Prior to cutting the wire, fully lower the shuttle to release the wire tension. Then unwrap the wire from the tensioner. This resets the tensioner for the next use and avoids causing the shuttle to snap back.

B. Cut the free wire end with the supplied wire cutters near the end of the plate and/or bend the cut ends toward the sternum. Take care not to cut the tightened wire loop encircling the sternum.

C. Confirm closure is secure.