

Distal & Posterior Augments for Triathlon® PS Implant

Surgical Protocol Addendum

Femoral Augment Assembly:

- ▶ Assemble the 1/8" Hex Drive into the Slip Torque Handle.
- ▶ Place the Femoral Augment on the appropriate (distal or posterior) surface of the Femoral Component.
- ▶ Assemble the Augment Screw through the Femoral Augment into the threaded hole in the Femoral Component.
- ▶ Torque the Augment Screw until the torque driver slips at which time you will hear an audible click. Repeat this sequence on all required femoral augments.



Distal & Posterior Femoral Augment Assembly

If distal and/or posterior augments are required when using the Triathlon PS:

Instruments Needed:

- ▶ Slip Torque Handle (6541-4-825).
- ▶ 1/8" Hex Drive (6541-4-802).
 - Both are located in the Triathlon Miscellaneous Instrument Kit.

Implants Needed:

- ▶ Triathlon TS Distal & Posterior Femoral Augments.

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General Total Knee Arthroplasty (TKR)

Indications include:

- Painful, disabling joint disease of the knee resulting from non-inflammatory degenerative joint disease (including osteoarthritis, traumatic arthritis or avascular necrosis) or rheumatoid arthritis.
- Post-traumatic loss of knee joint configuration and function.
- Moderate varus, valgus, or flexion deformity in which the ligamentous structures can be returned to adequate function and stability.
- Revision of previous unsuccessful knee replacement or other procedure.
- Fracture of the distal femur and/or proximal tibia that cannot be stabilized by standard fracture management techniques.

Additional Indications for Posterior Stabilized (PS) and Total Stabilizer (TS)

Components:

- Ligamentous instability requiring implant bearing surface geometries with increased constraint.
- Absent or non-functioning posterior cruciate ligament.
- Severe anteroposterior instability of the knee joint.

Additional indications for Total Stabilizer (TS)

Components:

- Severe instability of the knee secondary to compromised collateral ligament integrity or function.

Indications for Bone Augments:

- Painful, disabling joint disease of the knee secondary to degenerative arthritis, rheumatoid arthritis, or post-traumatic arthritis, complicated by the presence of bone loss.
- Salvage of previous unsuccessful total knee replacement or other surgical procedure, accompanied by bone loss.

Contraindications

- Any active or suspected latent infection in or about the knee joint.
- Distant foci of infection which may cause hematogenous spread to the implant site.
- Any mental or neuromuscular disorder which would create an unacceptable risk of prosthesis instability, prosthesis fixation failure, or complications in post-operative care.
- Bone stock compromised by disease, infection or prior implantation which cannot provide adequate support and/or fixation to the prosthesis.
- Skeletal immaturity.
- Severe instability of the knee joint secondary to the absence of collateral ligament integrity and function.
- Obesity. An overweight or obese patient can produce loads on the prosthesis which can lead to failure of the fixation of the device or to failure of the device itself.

See package insert for warnings, precautions, adverse effects and other essential product information.

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