



# Zimmer® Unicompartmental Knees

2mm Recutter  
Surgical Technique



For use with the *M/G*® Unicompartmental Knee, the *Zimmer*® Unicompartmental High-Flex Knee, and the *Natural-Knee*® Unicompartmental Knee System

The 2mm Recutter is designed for use with the *M/G*® Unicompartmental Knee, the *Zimmer*® Unicompartmental High-Flex Knee, and the *Natural-Knee*® Unicompartmental Knee System. A single instrument is designed to remove an additional 2mm of bone from either the medial or lateral compartment on the tibia or femur after checking the flexion/extension gaps. If the joint is tight in both flexion and extension, the surgeon may choose to remove additional bone from the proximal tibia. If the joint is tight only in extension, the surgeon may choose to remove additional bone from the distal femoral condyle.

## Recutting the Tibia (medial)

1. Remove any pins/screws from the tibia.
2. Apply the 2mm Recutter to the tibia parallel to the sagittal cut and with the cutting slot facing anteriorly. Ensure that the guide is flat against the resected surface (Fig. 1).



Fig. 1

3. Secure the guide by inserting two 48mm Headed Screws through the holes in the guide (Fig. 2).

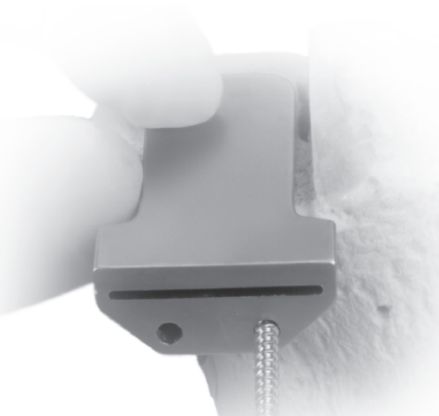


Fig. 2

4. Use an oscillating saw with a 1.27mm (0.050-inch) blade to cut the tibia through the slot in the 2mm Recutter. Check to ensure that the resected surface is flat. If necessary, use a file to remove any high spots (Fig. 3).



Fig. 3

**Note: Be careful to avoid undercutting the sagittal cut.**

5. If an edge remains at the base of the sagittal cut, use a file to remove it.

### Optional

6. Use the Flexion/Extension Gap Spacers to recheck the gaps when using the *Zimmer* Unicompartmental Instrument Set (Fig. 4).



Fig. 4

## Recutting the Femur (medial)

1. Remove any pins/screws from the tibia.
2. Apply the 2mm Recutter to the femoral condyle so it is flat against the resected surface. Position the guide as anterior as possible, and at an angle that will avoid the anterior cruciate ligament, the patellar tendon, and the uninvolved femoral condyle (Fig. 5).

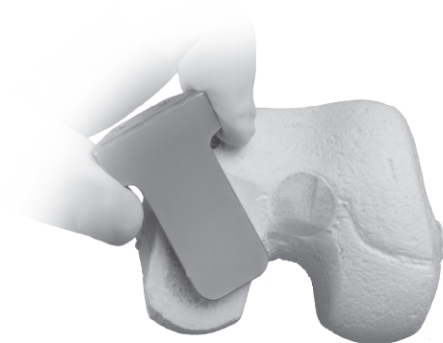


Fig. 5

3. Secure the guide by inserting two 48mm Headed Screws through the holes in the guide (Fig. 6).



Fig. 6

4. Use an oscillating saw with a 1.27mm (0.050-inch) blade to cut the femoral condyle through the slot in the 2mm Recutter. Check to ensure that the resected surface is flat. If necessary, use a file to remove any high spots (Fig. 7).



Fig. 7

### Optional

5. Use the Flexion/Extension Gap Spacers to recheck the gaps when using the Zimmer Unicompartmental Instrument Set (Fig. 8).

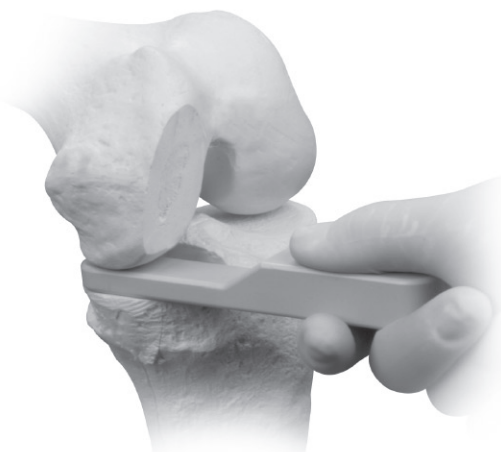


Fig. 8

**Note:** The 2mm recutter is NOT intended for use on a finished femur. This is only intended for recutting the distal condyle, prior to finishing the femur.

Please refer to package insert for complete product information, including contraindications, warnings, precautions, and adverse effects.

Contact your Zimmer representative or visit us at [www.zimmer.com](http://www.zimmer.com)



97-5842-003-00 1.5ML Printed in USA ©2006, 2008 Zimmer, Inc.