Ankle Plating System 3

The Acumed Ankle Plating System 3 is designed to provide a variety of fixation options for fractures of the distal tibia and fibula.

Designed in conjunction with Anish Kadakia, MD and Bruce Ziran, MD, the Ankle Plating System 3 is composed of seven plate families designed specifically for the treatment of ankle fractures. Specialized plate features and unique instrumentation address disruption of the syndesmosis. 4.0 mm cannulated screws in lengths of 36 mm, 42 mm, and 48 mm are also included in the tray for the treatment of medial malleolar fractures.

The Ankle Plating System 3 is used in combination with the Acumed Small Fragment Base Set. The Small Fragment Base Set includes One-Third Tubular Plates, as well as cut-to-length and bend-to-fit 2.7 mm L-shaped, T-shaped, and straight Fragment Plates that can also be used to address ankle fractures. The 2.7 mm and 3.5 mm nonlocking, locking, and variable angle hexalobe screws, 4.0 mm fully threaded and partially threaded cancellous hexalobe screws, and universal instrumentation are all housed in the Small Fragment Base Set. A selection of Tension Band Pins and AcuTwist® Compression Screws are also included.

<table>
<thead>
<tr>
<th>Symbol</th>
<th>Definition</th>
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<tbody>
<tr>
<td><img src="image" alt="Symbol" /></td>
<td>Products with this symbol require use of the Acumed Small Fragment Base Set in order to complete surgery following the recommended surgical technique.</td>
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<tr>
<td><img src="image" alt="Symbol" /></td>
<td>Products with this symbol are compatible with Acumed 2.7 mm and 3.5 mm Variable Angle Screws for use in completing surgery following the recommended surgical technique.</td>
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For more information, please visit: go.acumed.net/aps3-1
Comprehensive Ankle Fracture Solutions

- **Lateral Fibula Plates 74–188 mm**
- **Posterolateral Fibula Plates 66–116 mm**
- **4.0 mm Cannulated Screws 36, 42, and 48 mm**
- **Posteromedial Distal Tibia Plates 49 mm**
- **Posterolateral Distal Tibia Plates 48–60 mm**
- **Medial Anti-Glide Plate 70 mm**
- **Hoek Plates 43–57 mm**
- **Locking Peg Hook Plates 45–59 mm**
2.7 mm L-shaped, T-shaped, and Straight Fragment Plates

The 2.7 mm L-shaped, T-shaped, and straight Fragment Plates are housed within the Small Fragment Base Set. They can be cut to the desired length and bent prior to insertion or in situ.

Posterolateral Distal Tibia Plates

The Posterolateral Distal Tibia Plates incorporate a unique contour designed to act as a template and to aid in anatomic fracture reduction. The plates also include a distal cluster of 2.7 mm hexalobe screws that are angled approximately 15° superior to the joint space.

Small Fragment Base Set

Posteromedial Distal Tibia Plate

The Posteromedial Distal Tibia Plate sits beneath the posterior tibial tendon and is designed with a low plate and screw profile. The distal end of the plate is contoured and is designed to act as a buttress to distal fragments. The 2.7 mm screws distally are angled with the intention to avoid the joint space.

Posterolateral Fibula Plates

The Posterolateral Fibula Plates sit under the peroneal tendons and contain three scallops labeled with an “S” that allow for syndesmosis screw fixation adjacent to the plate, targeted between 1 cm and 3 cm above the tibial plafond. The scallops may be targeted freehand or with the adjustable Syndesmosis Targeting Guide included in the set.
**One-Third Tubular Plates**
The One-Third Tubular Plates are housed within the Small Fragment Base Set and range in length from 37 mm to 145 mm (3 hole to 12 hole).

**Medial Anti-Glide Plate**
The Medial Anti-Glide Plate is designed to address vertical shear fractures of the medial malleolus. This plate functions similarly to a one-third tubular plate but is more contoured and includes a distal cluster of 2.7 mm hexalobe screws to capture fragments in cases with distal comminution.

**Lateral Fibula Plates**
The Lateral Fibula Plates include two plate holes labeled with an “S” which have a fixed 30° anterior angle to target the center of the tibia to help optimize syndesmosis screw positioning.¹ ²

**Locking Peg Hook Plates**
The Locking Peg Hook Plates are designed to support an avulsion fragment that may require additional stability and include a 2.3 mm Cortical Peg across the fracture site.

**Hook Plates**
The two prongs at the distal end of the Hook Plate are designed to support an avulsion fragment.

**4.0 mm Cannulated Screws**
4.0 mm cannulated screws are included in the Ankle Plating System 3 tray in lengths of 36 mm, 42 mm, and 48 mm.
Screw Options

Acumed plating systems supported by the Small Fragment Base Set accept the following screws. These screws feature a hexalobe recess and are designed to have greater torsional strength in comparison to similar size hex screws.

2.7 mm and 3.5 mm Variable Angle Hexalobe Screws

- Threaded spherical head shape facilitates angling of the screw up to 15 degrees off axis in any direction
- Cobalt Chrome screw material
- Hexalobe recess
- For use in all locking holes
- Available in lengths ranging from 10 mm to 65 mm

Instrumentation and Design

INNOVATIVE INSTRUMENTATION

The Syndesmosis Targeting Guide attaches to the Posterolateral Fibula Plates and allows the surgeon to target the desired angle for syndesmotic screw fixation. Published literature has shown that the target location for syndesmosis screw fixation should be at the center of the tibia, through the fibula, 1 to 3 centimeters above the tibial plafond.\textsuperscript{1,3,4}
2.7 mm and 3.5 mm Nonlocking Hexalobe Screws
- Designed for fixation in cortical bone
- Rounded screw head for traditional compression and fixation
- For use in locking and nonlocking plate holes
- May be used in cases where angulation is required

2.7 mm and 3.5 mm Locking Hexalobe Screws
- Threaded conical screw head
- Follow predefined locking plate hole angle
- For use in all locking holes

4.0 mm Partially and Fully Threaded Cancellous Hexalobe Screws
- For use in all 3.5 mm plate holes
- Available in partially or fully threaded for metaphyseal bone and lag techniques
- Rounded screw head for traditional compression and fixation

Posterior Malleolus Fracture Fixation
Published literature suggests that ankle fractures with involvement of the posterior malleolus are both underestimated and underdiagnosed. Fractures involving the posterior malleolus lead to poorer outcomes even when the fragment is small, with worse outcomes as fragment size increases. The Ankle Plating System 3 incorporates 4.0 mm cannulated and cancellous screws, one-third tubular plates, fragment plates, and unique plating options for both the posteromedial and posterolateral distal tibia to specifically address these difficult fracture patterns.
1. Needleman, RL. Accurate reduction of an ankle syndesmosis with the “glide path” technique. Foot Ankle Int. 2013;34:1308-1311.
5. Switaj, P, Weatherford, B, Fuchs, D, Rosenthal, B, Pang, E, and Kadakia, AP. Evaluation of posterior malleolar fractures and the posterior pilon variant in operatively treated ankle fractures. Foot Ankle Int. Published online June 18, 2014.

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