OSTEO-CLAGE™
CERCCLAGE
CABLE
SYSTEM

Surgical Technique
OSTEO-CLAGE™ Implantation Technique

1. CABLE PASSER: Pass cable amount the bone using the cable passer. If cable is being passed through bone, use a drill that is 7/64’ or 3mm.

![Image of cable passer](image1)

#1 PASSING THE CABLE AROUND THE BONE

#2 MAKE SURE SLEEVE IS TAPERED SIDE DOWN "WRITING ON SLEEVE, BONE SIDE DOWN"

2. INSERTING THE SLEEVE ON THE CABLE: The sleeve has tapered sides and should always be placed on the cable with the tapers narrowing toward the bone. As a second check, writing on one side of the sleeve is always “bone side down”. This correct positioning of the sleeve will assure the crimping tool properly crimps the sleeve.

![Image of sleeve insertion](image2)

#3 TENSION THE CABLE

3. TENSIONING THE CABLE: Pulling the cable through the sleeve, snug around the bone by hand. Turn the tensioning handle counter clockwise until the cam arm is fully seated against the “Y” of the tensioner. Insert the cable through the channels of the tensioner and into the cam locks by opening the cams via the thumb release shafts. Once cable is inserted in both sides of the tensioner cams, turn the handle clockwise to begin tensioning the cable. CAUTION: Do not over tension the cable.

![Image of tensioning](image3)

#4 CRIMP THE SLEEVE (2 TIMES)

4. CRIMPING THE SLEEVE: Insert the jaws of the crimping tool over the center of the sleeve and crimp. This should be done two (2) times to insure a tight interface between the sleeve and the cable. After crimping, inspect to assure a tight lock.

![Image of crimping](image4)

#5 CUT THE ENDS OF THE CABLE

5. CUTTING THE ENDS OF THE CABLE: The cable cutter is designed to cut the ends of the cable as flush and cleanly as possible without the risk of nicking the other cable. All diameters of cable up to 2mm can be inserted into the single hole. This insures a close cut with a minimal amount of residual cable protruding from the sleeve.