ProDisc-L Surgical Technique

(a) SYNTHES Spine

1. Mark midline

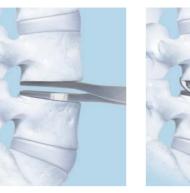




- Confirm midline via AP fluoroscopy.
- Mark midline on vertebral bodies.

2. Perform discectomy and remobilize







- Perform thorough discectomy: free posterolateral corners of disc material.
- Preserve the integrity of the bony endplates: insert spreader(s) to the posterior margin of the vertebral body.
- Remobilize the disc space; continue discectomy as needed.

3. Trial







- Before trial insertion, ensure that the adjustable stop is fully seated.
- Advance trial on midline to the posterior margin. Adjust stop as needed.
- Choose trial that best matches the anatomy (footprint, disc height, lordosis).

4. Chisel



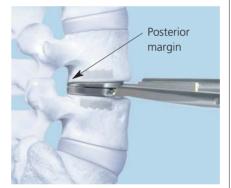




- Ensure the adjustable stop is fully seated on vertebral bodies.
- Advance the chisel over the trial shaft until fully seated on the trial.
- If needed, chisel twice (parallel to each endplate) to ensure adequate chisel depth for implant insertion.

5. Insert endplates





- Align the keels with the chisel cuts.
- Using the mallet, insert the ProDisc-L to the posterior margin of the vertebral bodies.

6. Load poly inlay



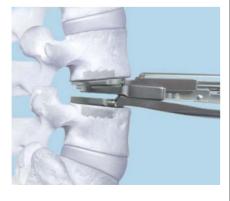


Load the poly inlay into the inserter grooves ("Dome-up, dome-up").

7. Distract







- Assemble the distractor into the inserter and advance with thumbscrew.
- Visually confirm that the posterior edge of the endplates have separated.

8. Seat and lock poly inlay





- Fully seat and lock the poly inlay with the inlay pusher.
- The ONLY way to confirm the poly inlay is locked is to visually and tactilely confirm "NO STEP, NO GAP".

9. Confirm final placement





- Verify final implant position with AP and lateral imaging.

Note: Please refer to technique guide for indications and complete instructions for use.

ProDisc-L Surgical Technique

Spine

1. Mark midline





- Confirm midline via AP fluoroscopy.
- Mark midline on vertebral bodies.

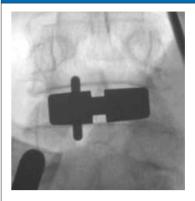
2. Perform discectomy and remobilize

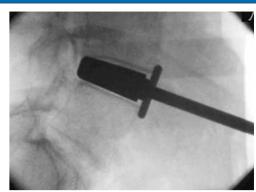




- Perform thorough discectomy: free posterolateral corners of disc material.
- Preserve the integrity of the bony endplates: insert spreader(s) to the posterior margin of the vertebral body.
- Remobilize the disc space; continue discectomy as needed.

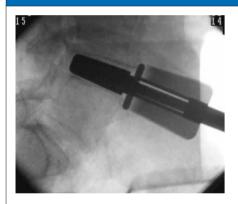
3. Trial





- Before trial insertion, ensure that the adjustable stop is fully seated.
- Advance trial on midline to the posterior margin. Adjust stop as needed.
- Choose trial that best matches the anatomy (footprint, disc height, lordosis).

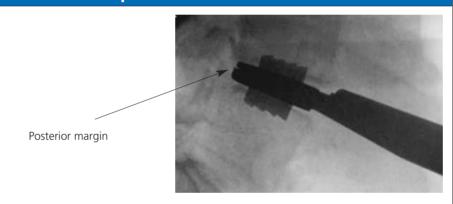
4. Chisel





- Ensure the adjustable stop is fully seated on vertebral bodies.
- Advance the chisel over the trial shaft until fully seated on the trial.
- If needed, chisel twice (parallel to each endplate) to ensure adequate chisel depth for implant insertion.

5. Insert endplates



- Align the keels with the chisel cuts.
- Using the mallet, insert the ProDisc-L to the posterior margin of the vertebral bodies.

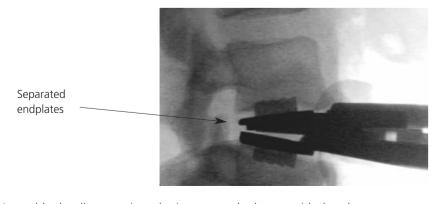
6. Load poly inlay





- Load the poly inlay into the inserter grooves ("Dome-up, dome-up").

7. Distract



- Assemble the distractor into the inserter and advance with thumbscrew.
- Visually confirm that the posterior edge of the endplates have separated.

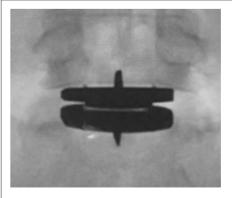
8. Seat and lock poly inlay

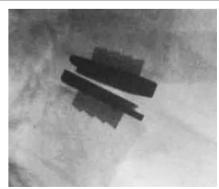




- Fully seat and lock the poly inlay with the inlay pusher.
- The **ONLY** way to confirm the poly inlay is locked is to visually and tactilely confirm "NO STEP, NO GAP".

9. Confirm final placement





– Verify final implant position with AP and lateral imaging.

Note: Please refer to technique guide for indications and complete instructions for use.