Exodus Revision Hip System for Femoral Stem Removal

Designed for **Minimal BONE LOSS** with **Minimal EFFORT** and **Minimal DAMAGE** to the proximal femur compared to an extended trochanteric osteotomy



Stem Extraction in Revision Hip Arthroplasty

Recent projection models predict up to a **70% increase in revision THA case volume by 2030**¹ yet there have been few recent major advancements in femoral extraction instrumentation.

Revising a stem frequently requires an extended trochanteric osteotomy (ETO) for removal because the calcar region is difficult to access with straight-lined instrumentation and commonly blocked by the femoral neck and overall exposure.

While ETO is a common method for stem extraction, it may result in the following disadvantages:²

- Inherently damages bone
- May require greater distal exposure and extended procedure time
- Longer implant required to bypass the osteotomy site
- May require additional time for the osteotomy site to heal
- Non-union or distraction can cause complications or lead to additional surgery

The Exodus Hip System facilitates stem bone interface disruption that is significantly improved over traditional techniques enabling:

- Minimal bone loss
- Extraction with **minimal** effort
- Minimal damage to the proximal femur
- Helps to prevent damage to the greater trochanter

THE EXODUS HIP SYSTEM FOR FEMORAL STEM REMOVAL

Oversized Strike-Plate

Designed to provide protection from the mallet and enable impaction and extraction without having to change instruments.



Strike-Plate Undersurface

Curvature designed to enable a firm grip between the palm and fingertips while back-striking during extraction.

Silicone Grip

ODUS

Designed to reduce fatigue while providing grip, ergonomics and comfort during use.

Hudson Quick-Connect with Rotational Control

Quick-connect feature designed to provide rotational control and enable efficiency when changing between blades.

Pre-sterilized convenience in single-use sets

The Exodus blades are pre-sterilized for convenience to reduce clinic sterilization costs and processing burdens. Single-use ensures that the blades are sharp and free of damage.

Stem Contouring Medial Blade

Designed with a slot that allows the device to work around the neck geometry and access the bone interface at the medial calcar. The gouge shape is designed to contour the implant and the proximal to distal radius helps follow along the medial calcar distally.





Curved Lateral Blade

Designed with a gouge shape to contour the lateral shoulder of the implant and a radius to help follow the implant and tuck under the greater trochanter.

A/P Chisel

The thin A/P chisel is designed to follow along the implant surface with adequate stiffness to reduce the risk of bending.



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