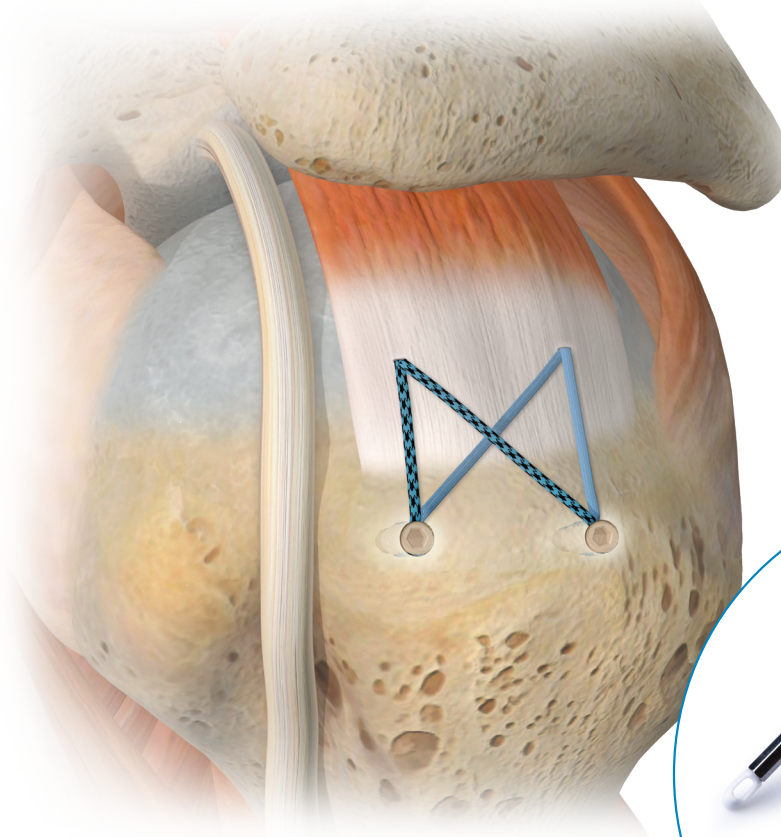


# Rotator Cuff - Knotless Bridge Repair

Genie™ & GenieSP™ Knotless Anchor

Surgical Technique



Genie™ and GenieSP™ knotless anchors are designed for orthopedic procedures, facilitating the fixation of soft tissues such as ligaments, tendons, and articular capsules to bone. These anchors offer a streamlined approach to knotless screw-in fixation, enhancing surgical efficiency. The knotless design eliminates the need for traditional knot tying, enhancing procedural efficiency and minimizing the risk of knot-related complications. This method allows for precise tensioning of the suture, designed for secure fixation and compression to bone. Such techniques are widely utilized in various orthopedic procedures, including rotator cuff repairs, and ligament reconstructions.

- Fully Threaded, Vented, Bioabsorbable, and PEEK Options
- Full Biocomposite Anchor: 70% PLGA with 30%  $\beta$ -TCP
- Fully Cannulated and Vented Design: Provides an opportunity for biologic fixation.
- Compatible with Maxbraid™, BroadBand™
- Biocomposite with Biocomposite Tip: Biocompatible, absorbable, and osteoconductive material
- Biocomposite with Self-Punching PEEK Ideal for certain applications based on bone quality.
- PEEK with Self-Punching PEEK Tip: Ideal for certain applications based on bone quality
- Dual Pitch Thread for Cortical and Cancellous Bone Fixation: Available in 4.75 mm, 5.5 mm, and 6.5 mm sizes
- Accepts Up to 6 Suture Limbs: (#2 MaxBraid™, 1.5 mm BroadBand™ tape; pass 4 suture limbs first, then 2 suture limbs)

## INDICATIONS & CONTRAINDICATIONS

### GENIE™ & GENIESP™ KNOTLESS ANCHOR

**GENIE™ & GENIESP™ PEEK Knotless Anchor** is intended use for fixation of soft tissue to bone, using suture, in the following procedure:

Orthopedic surgery for shoulders, knees, foot/ankle, hand/wrist, and elbow

**GENIE™ & GENIESP™ Bio/PEEK Biocomposite Knotless Anchor** is intended use for fixation of soft tissue to bone, using suture, in the following procedure.

#### Shoulder

- Rotator Cuff Repair
- Bankart Repair
- SLAP Lesion Repair
- Biceps Tenodesis
- Acromio-Clavicular Separation Repair
- Deltoid Repair
- Capsular Shift
- Capsulolabral Reconstruction

#### Foot/Ankle

- Lateral Stabilization
- Medial Stabilization
- Achilles Tendon Repair
- Metatarsal Ligament Repair
- Hallux Valgus reconstruction
- Digital tendon transfers
- Mid-foot reconstruction

#### Knee

- Medial Collateral Ligament Repair
- Lateral Collateral Ligament Repair
- Patellar Tendon Repair
- Posterior Oblique Ligament Repair
- Iliotibial Band Tenodesis

#### Hand/Wrist

- Scapholunate Ligament Reconstruction
- Carpal Ligament Reconstruction
- Repair/Reconstruction of collateral ligaments
- Repair of Flexor and Extensor Tendons
- PIP, DIP and MCP joints for all digits
- Digital tendon transfers

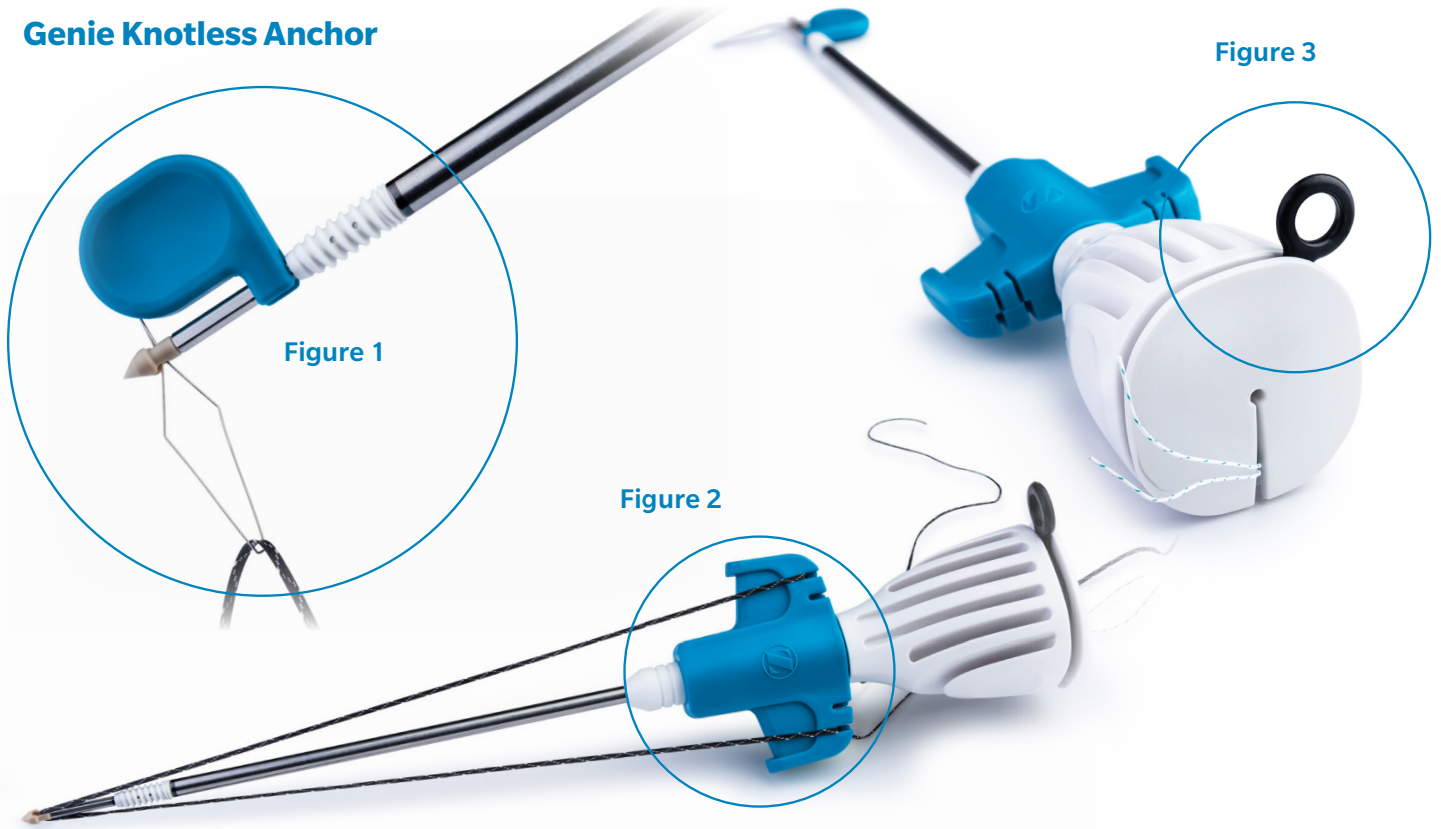
#### Elbow

- Biceps Tendon Reattachment
- Ulnar or Radial Collateral Ligament Reconstruction

### CONTRAINDICATIONS

- If there is active infection or potential infection
- In the case of pathological bone conditions such as severe osteopenia
- Serious defects in bone and soft tissue
- Crushed-bone surface that may prevent secure anchoring
- If the blood supply is insufficient
- If a patient has hypersensitivity to the implant
- In the case of using for unspecified indications
- Patient who has mental or physical difficulty in post-operative treatment

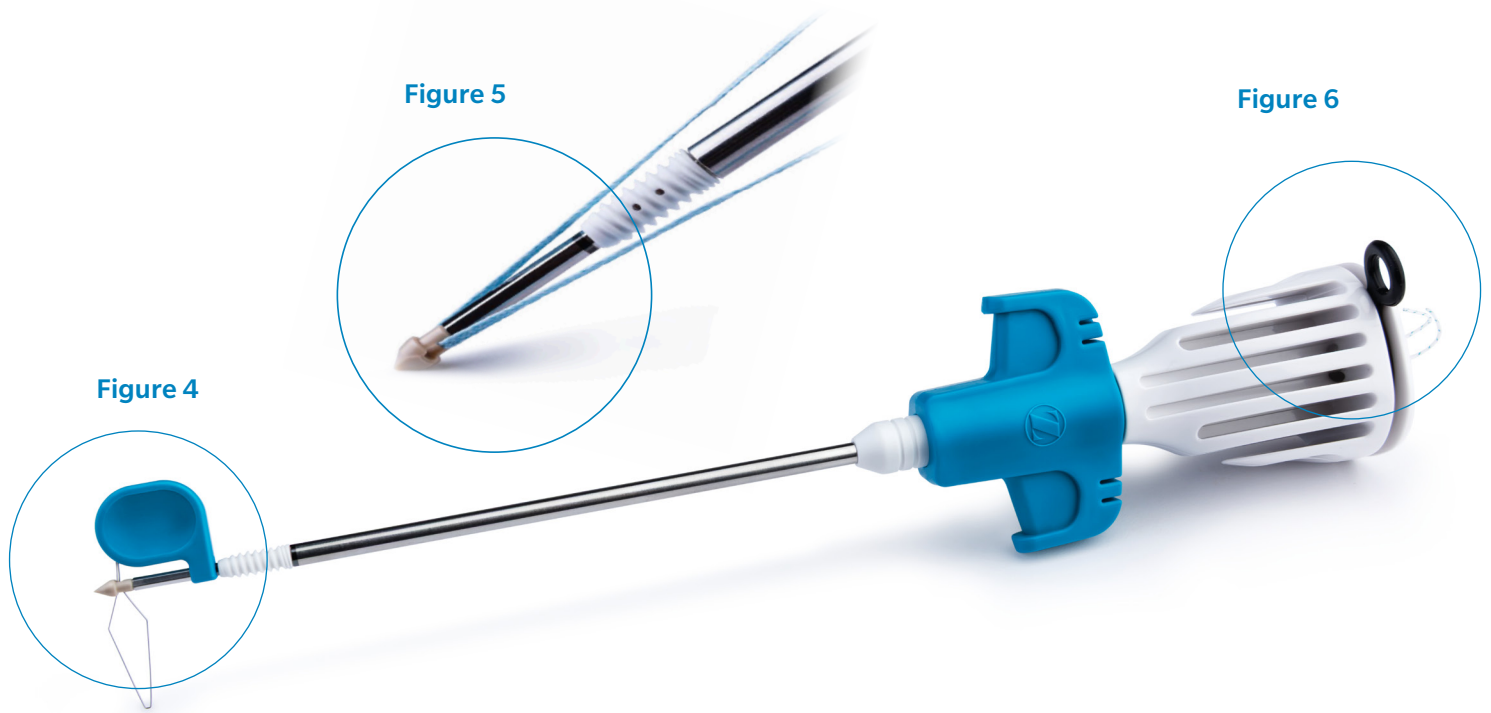
## Genie Knotless Anchor



## Medial Row

1. Prepare medial row bone socket just lateral to articular margin with GENIE™ Bone Awl (first laser line). The procedure is designed to use a Genie or GenieSP Anchor loaded with a suture to create a bridge configuration using the kite tab. Available options include Maxbraid Suture, Broadband Tape. (Figure 1) and lock the suture onto the cleats (Figure 2).
2. Insert medial row Genie or GenieSP Anchor loaded with suture and/or tape into the bone socket until the first thread of the anchor body is below the bone.
3. Hold inserter wings steady and rotate inserter handle clockwise until anchor is flush with bone.
4. Uncleat the suture and/or tape from inserter wings. Remove the black rubber ring and unwind the #2 eyelet retention suture from inserter handle and remove inserter shaft (Figure 3).
5. Repeat steps 1–4 for second medial row Genie or GenieSP knotless Anchor.
6. Individually load the limbs of the suture and/or tape through the Quattro® GTS Side Load or GT Front Load Passer and pass through the rotator cuff tendon.

**Note:** Repeat for additional suture and/or tape limbs.



## Lateral Row

1. Retrieve one suture and/or tape from each medial row anchor and load into the lateral Genie or GenieSP Anchor through the eyelet using the kite tab. (Figure 1).
2. Prepare lateral row bone socket 5mm-10mm lateral to edge of rotator cuff footprint with Genie Bone Awl if using Genie. Mallet Genie Bone Awl down to the first laser line. If using GenieSP you can directly place the self-punching tip against the bone and mallet down directly (Figure 2).

**Note:** For GenieSP if Hard bone use Genie Bone Awl and/or Genie Tap to create the pilot hole.

**Note:** There are 2 etched lines on the AWL. First line for 4.75 mm, second line for 5.5 mm.

**Note:** If a dog-ear needs correction, pass the tail of a BroadBand® Mini Loop through dog-ear and pass tail through loop to create a 'cinch' stitch configuration. Load tail into lateral Genie Anchor.

3. Insert Genie or GenieSP knotless anchor into bone socket until the first screw thread is beneath the bone. Apply counter pressure on inserter wings and tension each tape limb to reapproximate tendon.
4. Ensuring the anchor body is contacting bone, hold inserter wings steady and rotate inserter handle clockwise until anchor is flush with bone. Remove the black rubber ring and unwind the #2 eyelet retention suture from inserter handle and remove inserter shaft (Figure 3).

**Option:** If needed, rotate inserter wings clockwise to retract the inserter shaft and assess anchor depth.

5. Cut suture/tape tails with Suture Cutter.
6. Repeat steps 1-4 for second lateral row Genie Anchor.

## Ordering Information

### Implants – Genie™ & GenieSP™

Description	Part Number
3.75 mm Genie Biocomposite Anchor Vented w/PEEK tip	375BCP
3.75 mm Genie PEEK Anchor Vented w/PEEK tip	375PP
4.75 mm Genie Biocomposite Anchor Vented w/Bio tip	475BCBC
4.75 mm GenieSP Biocomposite Anchor Vented w/PEEK tip	475BCPSP
4.75 mm GenieSP PEEK Anchor Vented w/PEEK tip	475PPSP
5.5 mm Genie Biocomposite Anchor Vented w/Bio tip	550BCBC
5.5 mm GenieSP Biocomposite Anchor Vented w/PEEK tip	550BCPSP
5.5 mm GenieSP PEEK Anchor Vented w/PEEK tip	550PPSP
6.5 mm GenieSP Biocomposite Anchor Vented w/PEEK tip	650BCPSP
6.5 mm GenieSP PEEK Anchor Vented w/PEEK tip	650PPSP

### Implants/Suture/ BroadBand

Description	Part Number
#2 Broadband Black/Blue Tape (1/PK)	110045767
#2 Broadband Black Tape (1/PK)	110045768
(1) #2 Black/Blue BroadBand Tape & (1) #2 BroadBand Black Tape (2/PK)	CM-0322
12/BX #2 Broadband White/Blue Tape	110030427
12/BX #2 Broadband Blue Tape	110030428

### Disposables

Description	Part Number
3.75 mm Genie™ Bone Drill	375DRILL
4.75 mm Genie Disposable AWL	475AD
4.75 mm Genie Bone Drill	475DRILL
5.5 mm Genie Bone Drill	550DRILL
6.5 mm Genie Bone Drill	650DRILL
Quattro® Suture Passer Needle	CM-9011
El Passo™ Cannula 8 mm x 30 mm, Gray	110048000
El Passo™ Cannula 8 mm x 40 mm, Gray	110048001
El Passo™ Cannula 8 mm x 50 mm, Gray	110048002
El Passo™ Cannula 10 mm x 50 mm, Gray	110048004
HydroDam™ Cannula Rigid 7 x 75 mm, w/Disposable Obturator	110025590
HydroDam™ Cannula Rigid 8.5 x 75 mm, w/Disposable Obturator	110025592
HydroDam™ Cannula Rigid 7 x 85 mm, w/Disposable Obturator	110025596
HydroDam™ Cannula Rigid 8.5 x 85 mm, w/Disposable Obturator	110025598

## Ordering Information

### Instrumentation

Description	Part Number
Genie Drill Guide	375PKT
3.75 mm Genie™ Bone Tap	375TAP
4.75 mm Genie Bone AWL	475AWL
5.5 mm Genie Bone AWL	375BKT
4.75 mm Genie Bone Tap	475TAP
Quattro GT Suture Passer	CM-9010GT
Quattro GTS Side Loading Passer	CM-9010GTS

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