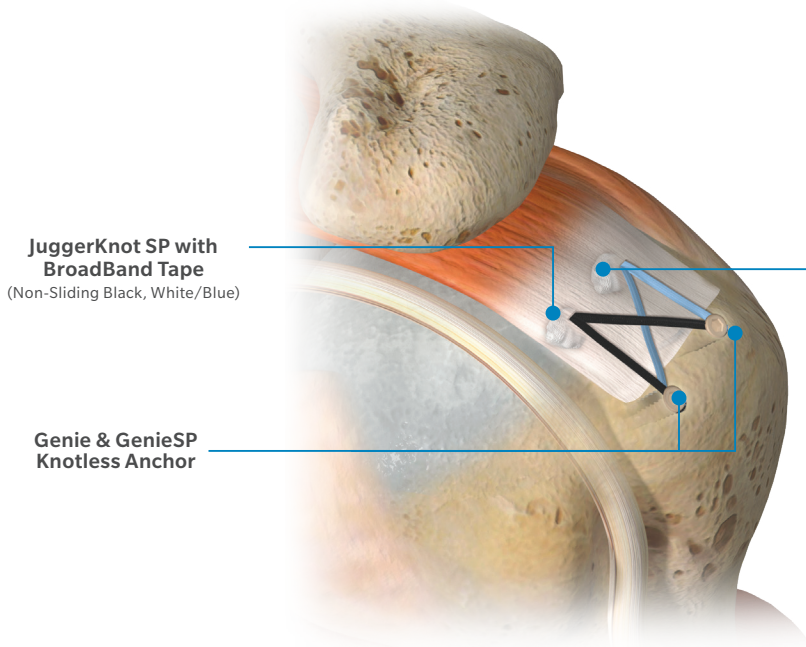


# Rotator Cuff Repair- Knotless Bridge Repair JuggerKnot<sup>®</sup> SP with BroadBand<sup>®</sup> Tape and Genie<sup>™</sup> & GenieSP<sup>™</sup> Anchor

## Surgical Technique



**JuggerKnot SP with BroadBand Tape**  
(Non-Sliding Blue, Sliding White/Black)



## Indications and Contraindications

### JuggerKnot® Soft Anchors

(Riverpoint Medical, part numbers: SP99329B, SP99429B)

#### INDICATIONS

JuggerKnot Soft Anchors are intended for use in soft tissue to bone fixation for the following indications:

##### Shoulder

- Biceps Tenodesis
- Shoulder Instability
- Rotator Cuff

##### Knee

- MPFL
- Patellar tendon repair
- MCL
- Quadriceps tendon repair

##### Foot and Ankle

- Achilles tendon repair
- Medial/lateral repair and reconstruction
- Plantar plate repair
- Mid- and forefoot repair
- Metatarsal ligament/tendon repair or reconstruction

##### Elbow

- Lateral epicondylitis repair
- Biceps tendon reattachment

#### CONTRAINDICATIONS

- Infection
- Patient conditions including blood supply limitations and insufficient quantity or quality of bone or soft tissue.
- Foreign body sensitivity. Where material sensitivity is suspected, testing is to be completed prior to implantation of the device.
- Inadequate bone quantity at implantation site.
- Patients with mental or neurologic conditions who are unwilling or incapable of following postoperative care instructions or patients who are otherwise unwilling or incapable of doing so.

### GENIE™ & GENIESP™ Knotless Anchor

#### GENIE™ & GENIESP™ PEEK Knotless Anchor

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 at the PIP, DIP, and MCP joints for all digits, digital tendon transfers

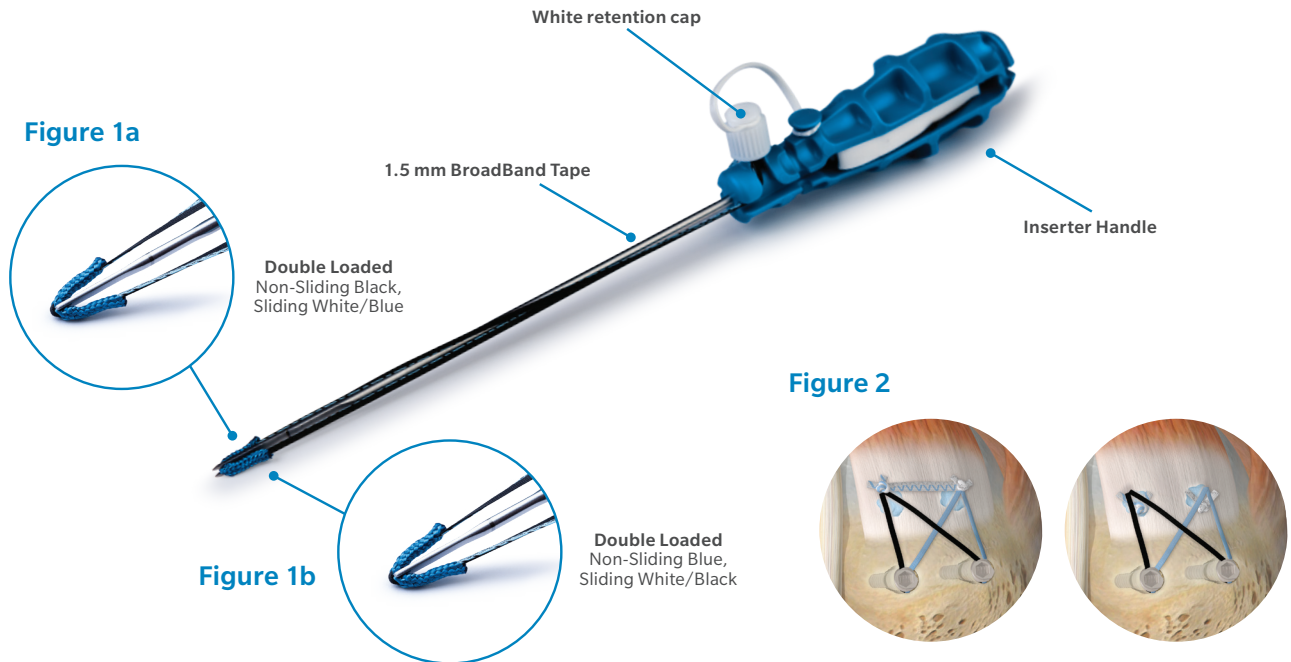
##### Elbow

- 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

## JuggerKnot SP with BroadBand Tape

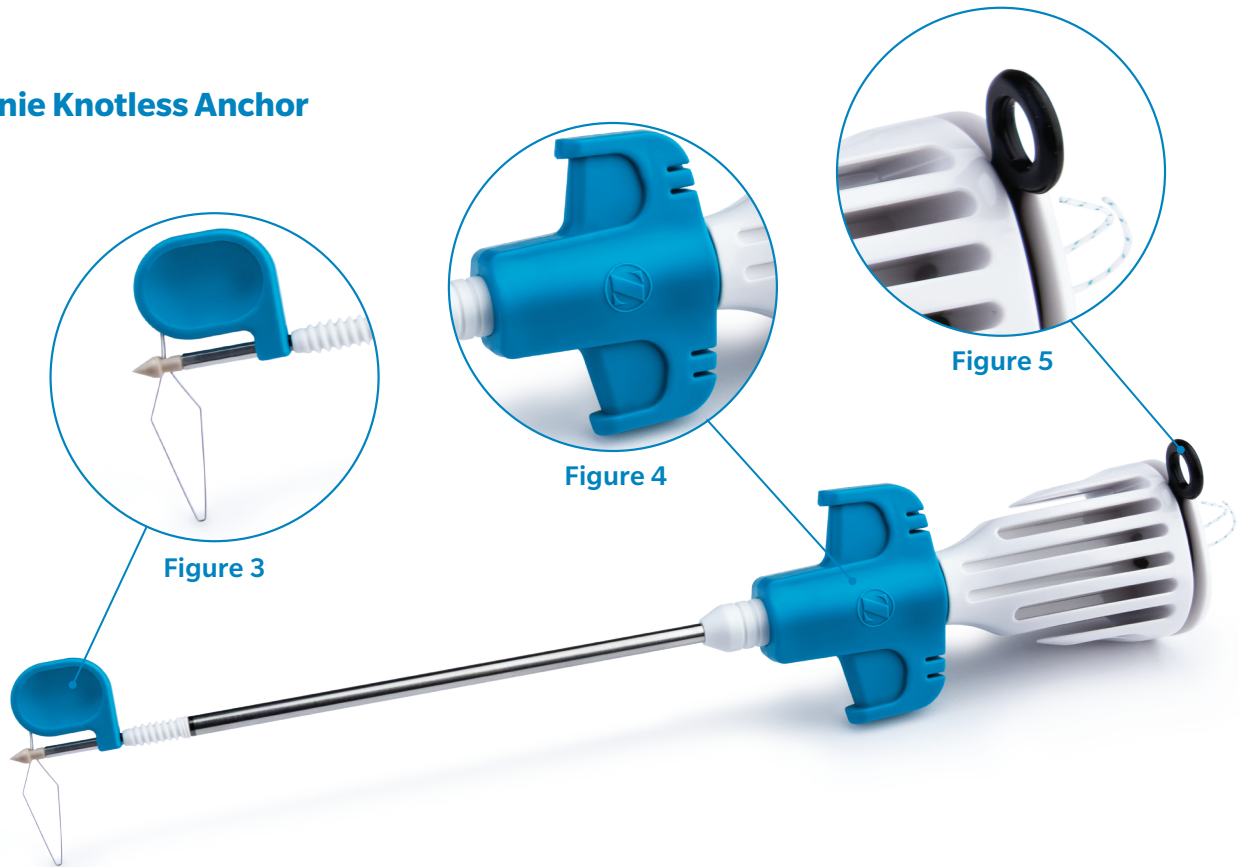


### Medial Row

1. Place the JuggerKnot SP (Self-Punching) forked inserter tip securely and perpendicular to the bone at desired surgeon's anchor location. Carefully stabilize the forked tip on the bone and lightly mallet the back of the anchor inserter to slowly advance the soft anchor directly into bone (Figure 1a).
2. Advance anchor until laser etch line on inserter is buried at the level of the bone. **Note:** If the sutures/tapes on the soft anchor are preventing the visualization of the laser etch line, then mallet the anchor until the JuggerKnot soft anchor sleeve "wings" are buried 2-3 mm into bone.
3. Once anchor is fully seated in to the bone, lightly pull back on the inserter to set anchor.
4. Release the suture/tape from the inserter handle by removing the white retention cap.
5. Carefully remove anchor SP inserter handle at the same angle as insertion without using twisting motion, slightly pull up on the sutures and/or tapes limbs to set anchor and confirm anchor is fully deployed under cortex.
6. Repeat steps 1 through 5 for second JuggerKnot SP 2.9 mm Anchor (Non-Sliding Blue, Figure 1b).
7. Load BroadBand Tape tails into Quattro® GT or Quattro® GTS Side Load Passer and pass through the rotator cuff tendon. Repeat for additional BroadBand Tape limbs (Figure 2).

**Note:** If using a JuggerKnot SP 2.9 mm with Non-Sliding BroadBand Tape, verify all cobraid sutures slide. the solid sutures will not slide since they are fixed within the anchor.  
**Option:** Discard sliding sutures or retain to incorporate into repair via medial seal or additional medial knot-tying.

## Genie Knotless Anchor



## 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 in Figure 3.
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.

**Note:** For GenieSP in 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 (Figure 4) and rotate inserter handle clockwise until anchor is flush with the bone. Remove the black rubber ring (Figure 5) and unwind the #2 eyelet retention suture from inserter handle and remove inserter shaft.

**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 GenieSP Biocomposite Anchor w/Vented PEEK tip	550BCPSP
5.5 mm Genie Biocomposite Anchor Vented w/Bio tip	550BCBC
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
JuggerKnot 2.9 mm, Double Loaded with BroadBand Tape (Non-Sliding Black, Sliding White/Blue)	SP99329B
JuggerKnot 2.9 mm, Double Loaded with BroadBand Tape (Non-Sliding Blue, Sliding White/Black)	SP99429B
#2 Black/Blue Tape (1/PK)	110045767
#2 Black Tape (1/PK)	110045768
(1) #2 Black/Blue Tape & (1) #2 Black Tape (2/PK)	CM-0322
12/BX #2 White/Blue Tape	110030427
12/BX #2 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

## Instrumentation

Genie Drill Guide	375PKT
3.75 mm Genie Bone Tap	375TAP
4.75 mm Genie Bone AWL	475AWL
5.5 mm Genie Bone Tap	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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