ACTIV ANKLE

DISTAL FIBULA PLATES

The ACTIV ANKLE products offer a solution for the fixation of simple and complex distal fibular fractures following two approaches:

**LATERAL APPROACH**
- **STANDARD PLATE**
  - Fixation of osteoporotic bone and complex fractures with or without syndesmosis injuries.
- **NARROW PLATE**
  - Fixation of simple fractures with or without syndesmosis injuries.

**POSTEROLATERAL APPROACH**
- **POSTEROLATERAL PLATE**
  - Fixation of short oblique fractures (Type B, as defined by the AO and Weber Classifications)

**TECHNICAL FEATURES**

→ **ANGULAR RANGE**: ± 10° POLYAXIAL LOCKING FIXATION

Newclip Technics plates combine both polyaxial and locking technologies to create a fixed-angle construct to use for poor bone quality and/or multifragmentary fractures.

→ **PRECONTOURED IMPLANT**

The anatomical design of the head of the plate matches the shape of the distal lateral fibula. The thickness of the plate is minimized to prevent soft tissue irritation.

→ **A COMPREHENSIVE RANGE OF PLATES**

**LATERAL STANDARD**
- Syndesmosis areas
- Bendable sections
- Oblong slots for cortical Ø3.5 mm screws
- Polyaxial holes for locking (green) and non-locking (yellow) Ø2.8 mm screws

**LATERAL NARROW**
- Syndesmosis areas
- Polyaxial holes for locking (blue) and non-locking (pink) Ø3.5 mm screws

**POSTEROLATERAL**
- Syndesmosic screws Ø3.5 mm or Ø4.0 mm (non-locking)

**ALSO AVAILABLE**

for diaphyseal simple fractures
**SURGICAL TECHNIQUE**

**PLACEMENT OF THE LATERAL PLATE**

- Lock the fast guide onto the plate with the screwdriver (ANC082E).
- The plate can be temporarily held in position with K-wires (K-WIRE-Ø1.4-L120).
- Drill (ANC089C) using the guide gauge (ANC191). The screw length can be directly read on the guide gauge.
- Insert a cortical screw (CT3.5Lxx) into the oblong slot with the screwdriver (ANC083C). For optimal positioning, slide the plate using the oblong slot and tighten the cortical screw.

For the epiphyseal fixation, use the guide gauge (ANC268C) for polyaxial fixation (a) or guide gauge (ANC046C) (b) for monoaxial fixation using the pre-angled fast guide. The screw length can be directly read on the guide gauge.

- Insert a Ø2.8 mm locking screw (SDT2.8Lxx) through the fast guide using the screwdriver (ANC082E).
- Repeat the whole procedure to insert the remaining distal locking screws (SDT2.8Lxx).

For the diaphyseal fixation, use the guide gauge (ANC186) and insert a Ø3.5 mm locking screw (SOT3.5Lxx) using the screwdriver (ANC083C). Repeat the procedure to insert the remaining locking screws. Then use the guide gauge (ANC191) and insert the remaining cortical screws (CT3.5Lxx) using the screwdriver (ANC083C).

**FINAL RESULT**

Drill (ANC089C) using the guide gauge (ANC191). The screw length can be directly read on the guide gauge.

**Note:**
The fixation steps remain unchanged for Narrow (RTSLNx) or Posterolateral (RTxQ1) plates.

**INNOVATION MEANS MOTION**
SYNDESMOTIC FIXATION

Drill (ANC259M) through the holes designed for syndesmotic screws using the guide gauge (ANC261M). The screw length can be directly read on the guide gauge.

Insert (ANC083C) a syndesmotic screw (CT3.5Lxx or QT4.0Lxx) into the appropriate oblong slot and/or standard hole designed for that purpose.

Note:
The syndesmotic screws must be removed (using the ANC107 safety key) once the syndesmosis has healed, usually after six weeks.

OPTION: PRELIMINARY REDUCTION OF THE FRACTURE WITH A SCREW

Example of preliminary reduction of the fracture using an obliquely angled screw:

Reduce and temporarily maintain the fracture with bone reduction forceps, making sure not to hinder the subsequent positioning of the screw.

Drill with the Ø2.7 mm drill bit (ANC089C) using the guide gauge (ANC191). The drilling should be perpendicular to the line of fracture.

**NB:** The screw length can be directly read on the guide gauge. Always ensure that the guide gauge sits flush against the bone surface.

When a lag effect is necessary, over-drill the anterior cortex only using the Ø3.5 mm drill bit (ANC542).

Insert (ANC083C) a syndesmotic screw (CT3.5Lxx or QT4.0Lxx) into the appropriate oblong slot and/or standard hole designed for that purpose.

If a lag effect is necessary, over-drill the anterior cortex only using the Ø3.5 mm drill bit (ANC542).

Insert the cortical screw (CT3.5Lxx) through the line of fracture. In the case of osteoporotic bone, add a compression washer (WASH-T4) under the screw head so as to obtain optimal compression.

**NB:** As an osteosynthesis screw used alone cannot bear weight and resist shear stresses, a plate should be used to allow early mobilisation.

FINAL RESULT
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**ACTIV ANKLE : IMPLANTS**

### PLATES

#### LATERAL FIBULA PLATES

<table>
<thead>
<tr>
<th>Ref.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>RTGLS1</td>
<td>Lateral distal fibula plate - Standard - Left - Size 1 - L75 mm</td>
</tr>
<tr>
<td>RTDLS1</td>
<td>Lateral distal fibula plate - Standard - Right - Size 1 - L75 mm</td>
</tr>
<tr>
<td>RTGLS2</td>
<td>Lateral distal fibula plate - Standard - Left - Size 2 - L97 mm</td>
</tr>
<tr>
<td>RTDLS2</td>
<td>Lateral distal fibula plate - Standard - Right - Size 2 - L97 mm</td>
</tr>
<tr>
<td>RTGLS3</td>
<td>Lateral distal fibula plate - Standard - Left - Size 3 - L128 mm</td>
</tr>
<tr>
<td>RTDLS3</td>
<td>Lateral distal fibula plate - Standard - Right - Size 3 - L128 mm</td>
</tr>
<tr>
<td>RTGLS4</td>
<td>Lateral distal fibula plate - Standard - Left - Size 4 - L158 mm</td>
</tr>
<tr>
<td>RTDLS4</td>
<td>Lateral distal fibula plate - Standard - Right - Size 4 - L158 mm</td>
</tr>
<tr>
<td>RTGLS5</td>
<td>Lateral distal fibula plate - Standard - Left - Size 5 - L187 mm</td>
</tr>
<tr>
<td>RTDLS5</td>
<td>Lateral distal fibula plate - Standard - Right - Size 5 - L187 mm</td>
</tr>
</tbody>
</table>

#### LATERAL NARROW PLATES

<table>
<thead>
<tr>
<th>Ref.</th>
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</tr>
</thead>
<tbody>
<tr>
<td>RTSLN1</td>
<td>Lateral distal fibula plate - Narrow - Size 1 - L76 mm</td>
</tr>
<tr>
<td>RTSLN2</td>
<td>Lateral distal fibula plate - Narrow - Size 2 - L102 mm</td>
</tr>
</tbody>
</table>

#### POSTEROLATERAL PLATES

<table>
<thead>
<tr>
<th>Ref.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>RTGQ1</td>
<td>Posterolateral distal fibula plate - Left - Size 1 - L73 mm</td>
</tr>
<tr>
<td>RTDQ1</td>
<td>Posterolateral distal fibula plate - Right - Size 1 - L73 mm</td>
</tr>
</tbody>
</table>

#### DIAPHYSEAL PLATE

<table>
<thead>
<tr>
<th>Ref.</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>FTS1</td>
<td>Diaphyseal fibula plate - Size 1 - L65 mm</td>
</tr>
</tbody>
</table>

### SCREWS

- QT2.8Lxx 10-24 mm (2 mm increments)
- CT2.8Lxx 10-24 mm (2 mm increments)
- QT3.5Lxx 10-24 mm (2 mm increments)
- CT3.5Lxx 10-24 mm (2 mm increments)
- QT4.0Lxx 40-70 mm (5 mm increments)
- CT4.0Lxx 40-70 mm (5 mm increments)

### SYNDENSMOTIC SCREWS

- CT3.5Lxx (5 mm increments)
- QT4.0Lxx (5 mm increments)

### COMPRESSION WASHER, OPTIONAL

WASH-T4

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The information presented in this brochure is intended to demonstrate a NEWCLIP TECHNICS product. Always refer to the package insert, product label and/or user instructions before using any NEWCLIP TECHNICS product. Surgeons must always rely on their own clinical judgment when deciding which products and techniques to use with their patients. Products may not be available in all markets. Product availability is subject to the regulatory or medical practices that govern individual markets. Please contact your NEWCLIP TECHNICS representative if you have questions about the availability of NEWCLIP TECHNICS products in your area.