



MIS PRECISION CHEVRON BUNION SYSTEM

RELJA MIS Precision Chevron Bunion System

- The MIS Precision Chevron Bunion System allows surgeons to perform a Chevron bunion surgery through a small 1 cm incision
- “familiar” to the way surgeons perform a chevron bunionectomy now
- Uses a traditional sagittal saw blade

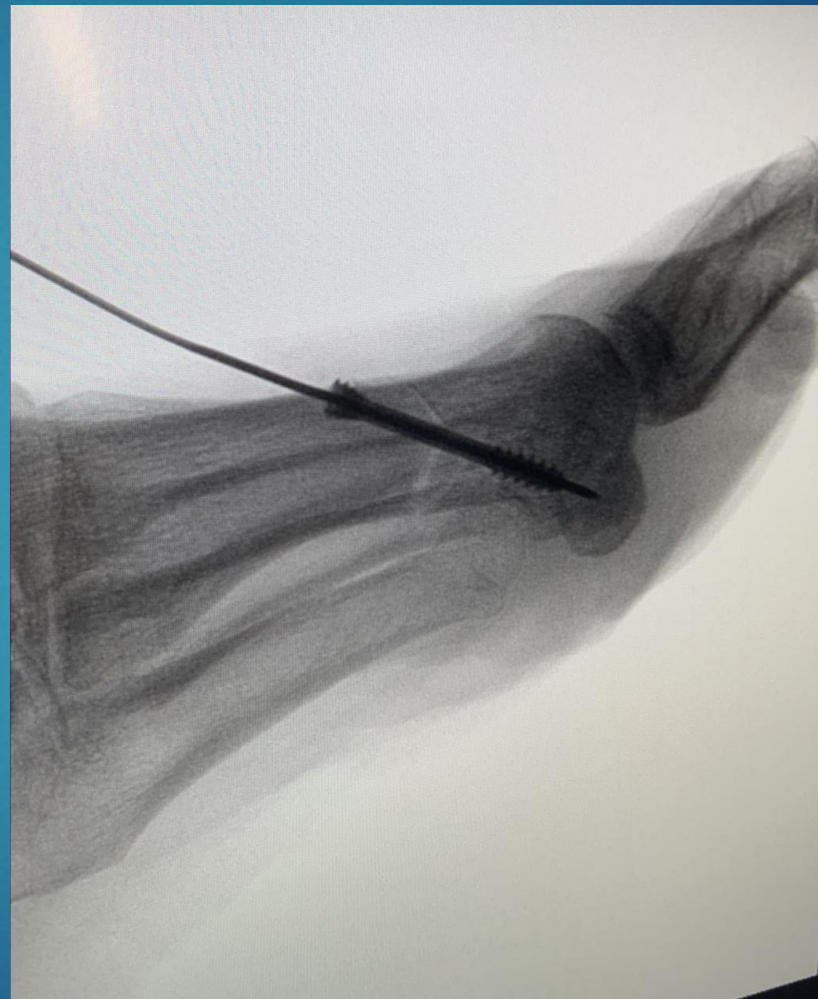


RELJA MIS Precision Chevron Bunion System

- Precision aiming guide for placement of a cannulated screw.
- Quick, accurate and repeatable
- Sterile packed kit with precision osteotomy guide, all instrumentation, and 2 screws



RELjA



MIS Precision Chevron Bunion System

- Targeted, sterile procedure kit (One SKU)
- 1cm incision
- Indication for use:
 - Mild to Moderate bunion deformity
 - Limited hypermobility of the 1st ray
 - Limited frontal plane rotation
- 50-70% of bunions performed today are still chevron procedures



MIS PRECISION CHEVRON TECHNIQUE

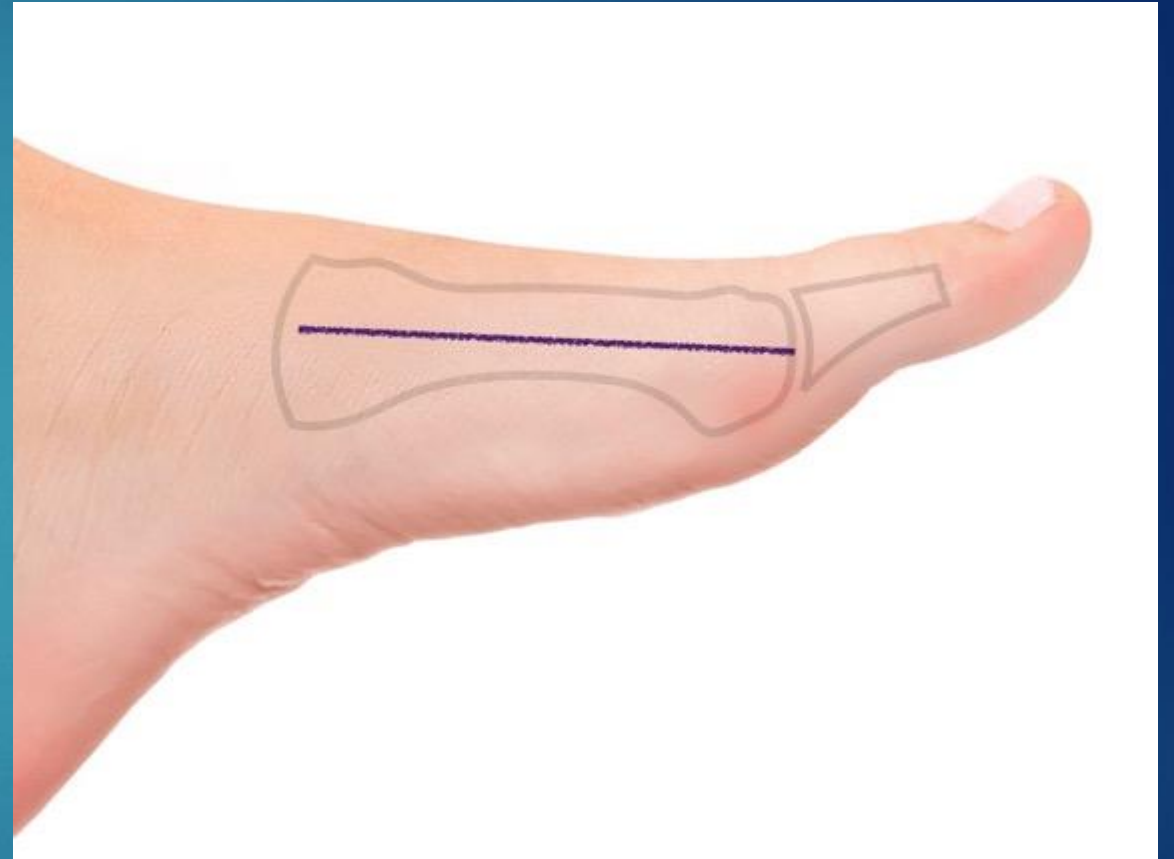
MIS Lateral Release:



Mark the middle of
the 1st Metatarsal at
the incision site



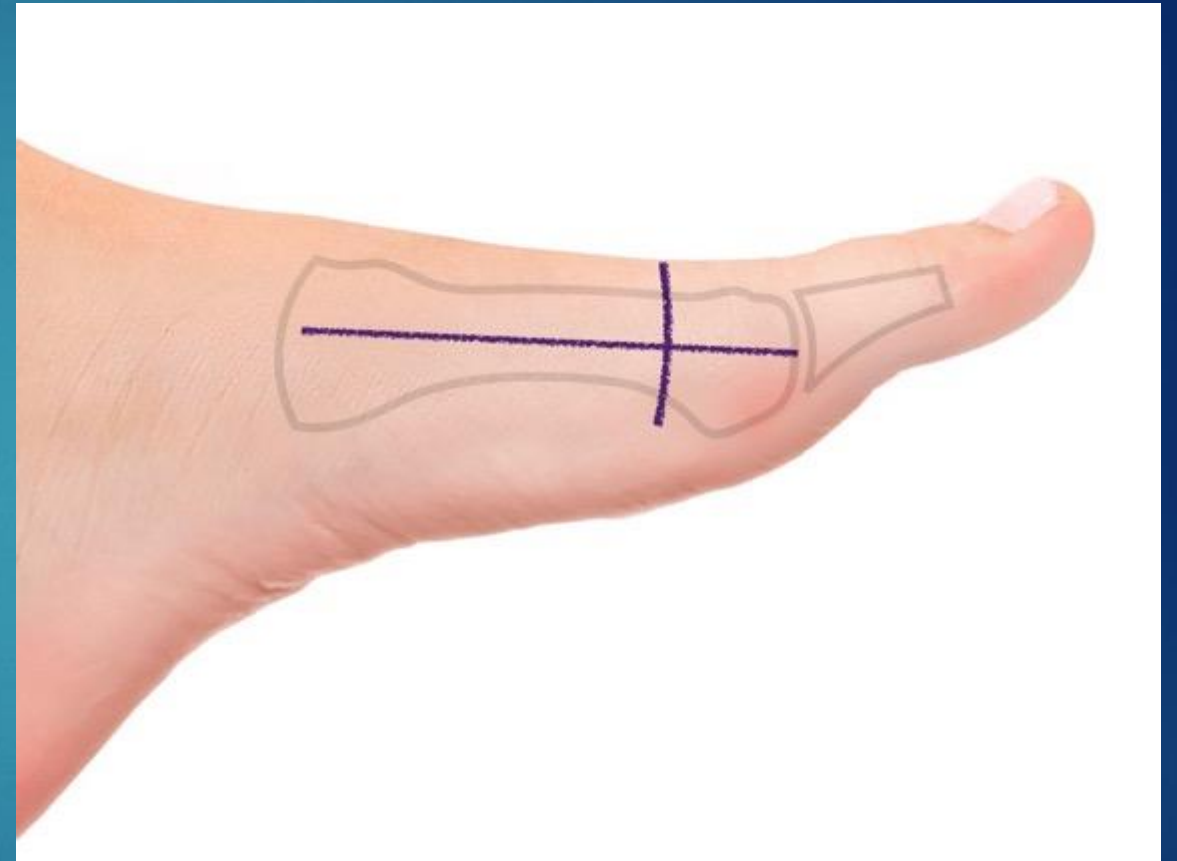
- ▶ Use a k wire with flouroscopy to confirm the medial midline of the first metatarsal.
 - ▶ Standard Lateral
 - ▶ WB Lateral
 - ▶ Metatarsal sesamoid articulation



WB Lateral



- ▶ Mark the location of the proximal portion of medial eminence with a line perpendicular to the midline.



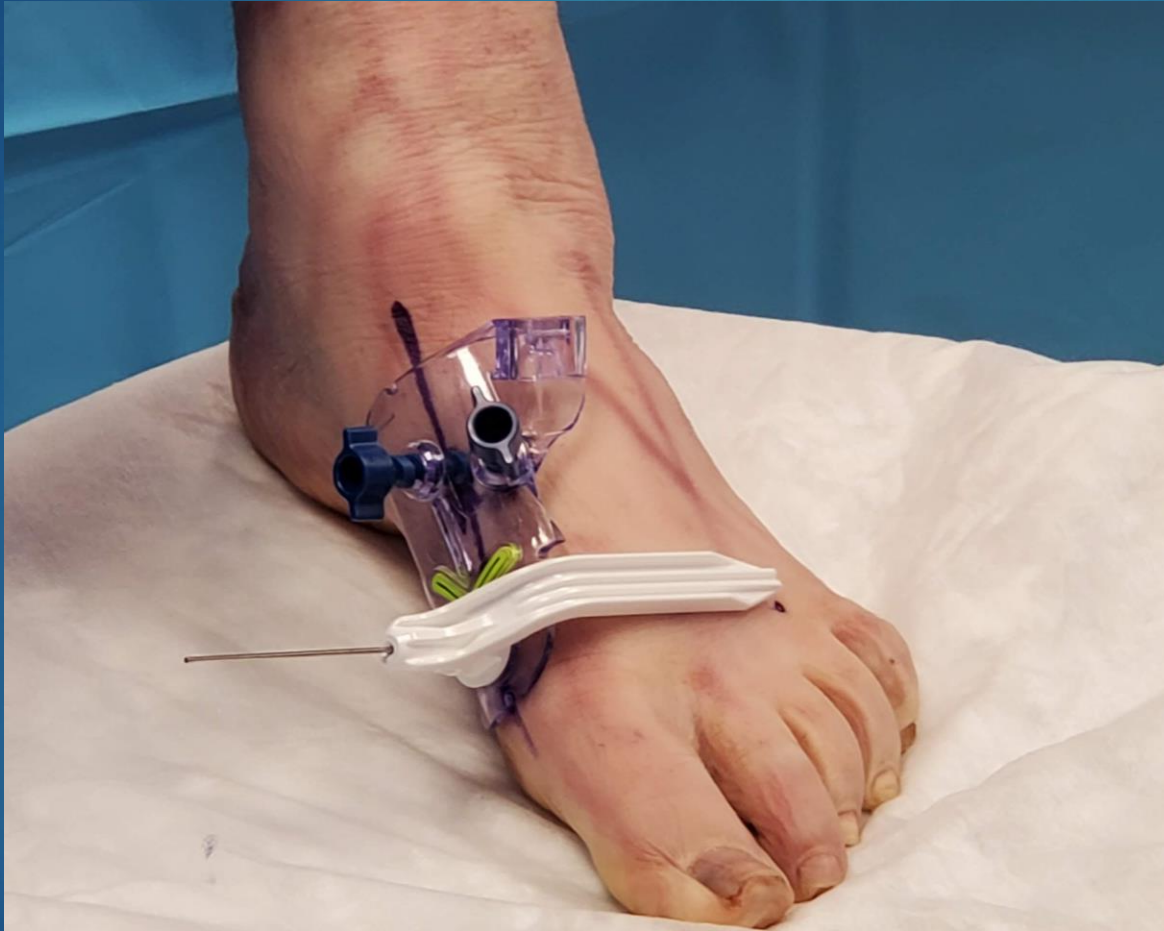
No more proximal than this.



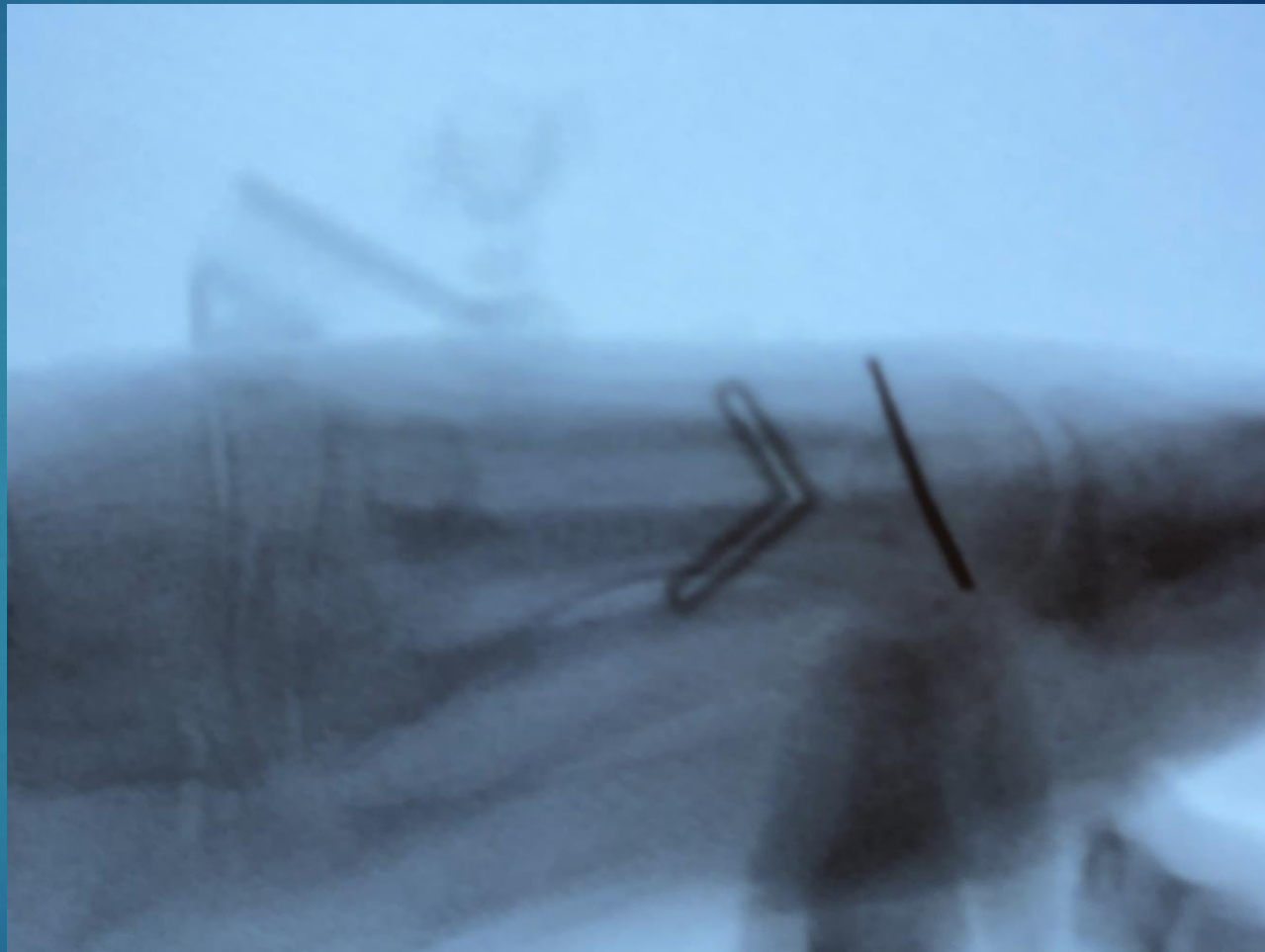
- Place the Osteotomy Guide on the foot in line with the first metatarsal markings



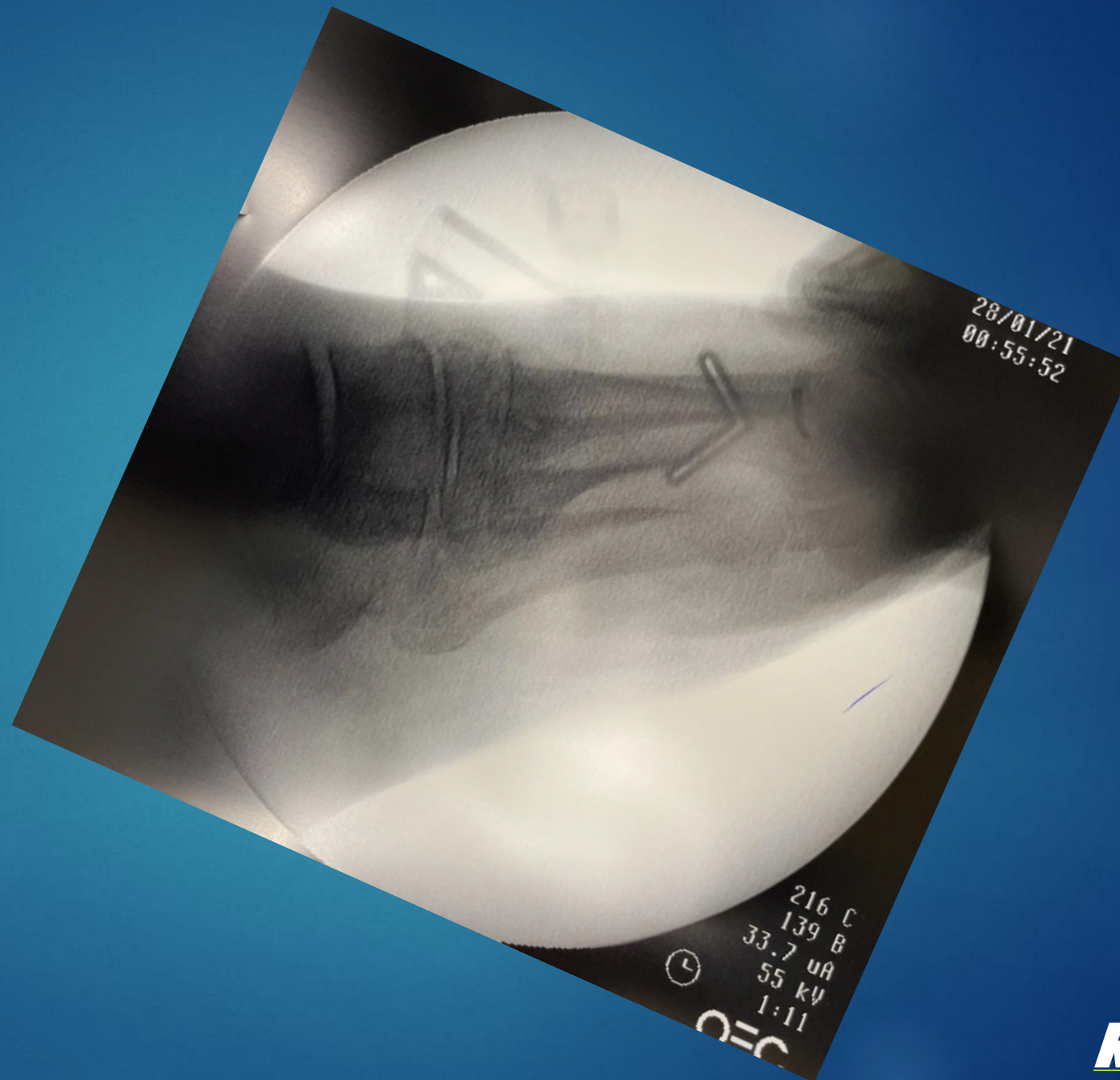
- ▶ Utilize the Targeting Guide to assist with alignment. Insert K wire #1



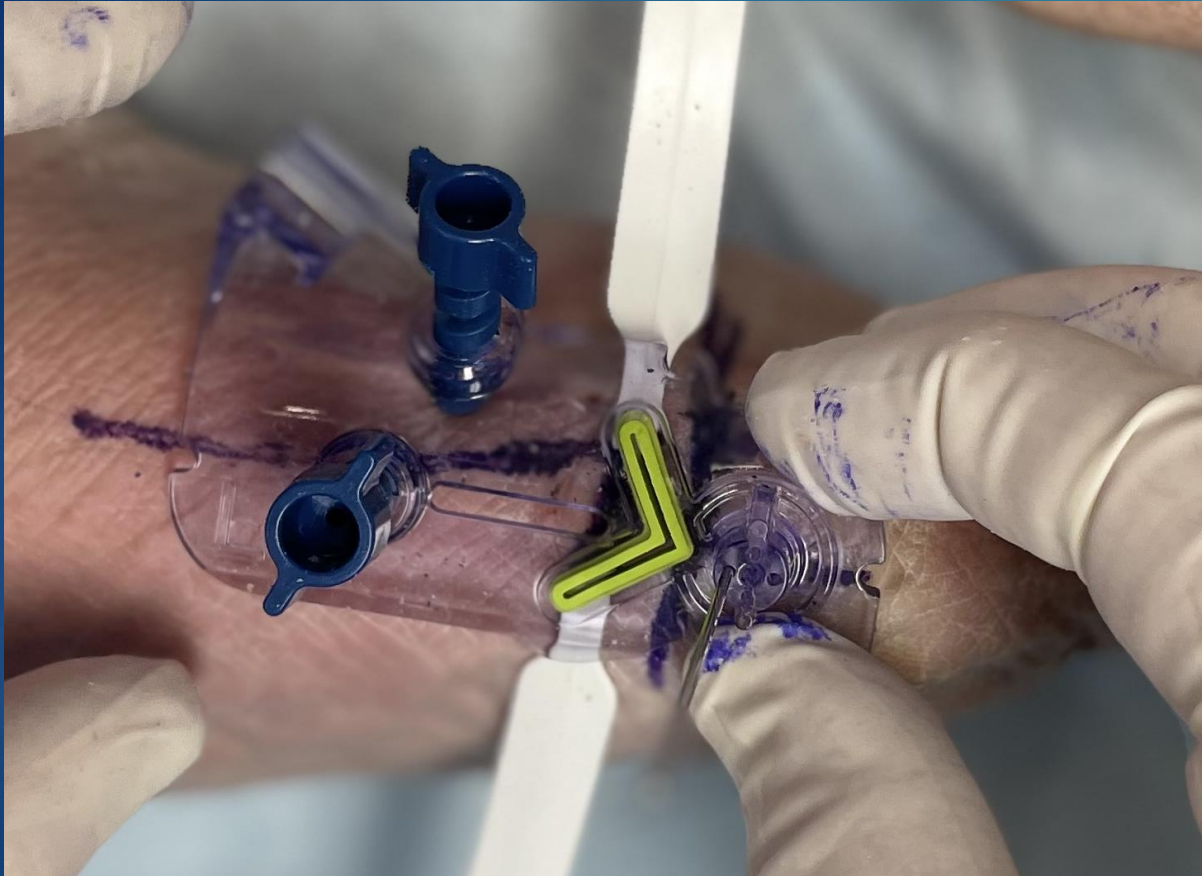
Confirm Position of
Osteotomy Guide with
Fluoroscopy



Confirm Position of
Osteotomy Guide with
Fluoroscopy



Adjustment holes - allows fine adjustment of the guide on K-Wire #1.



- Rotate the CHEVRON Osteotomy Guide and mark the incision
- Make an incision
 - Vertical or horizontal
- Perform dissection



Insert the Dorsal Retractor (longer) to protect the soft tissues and EHL.

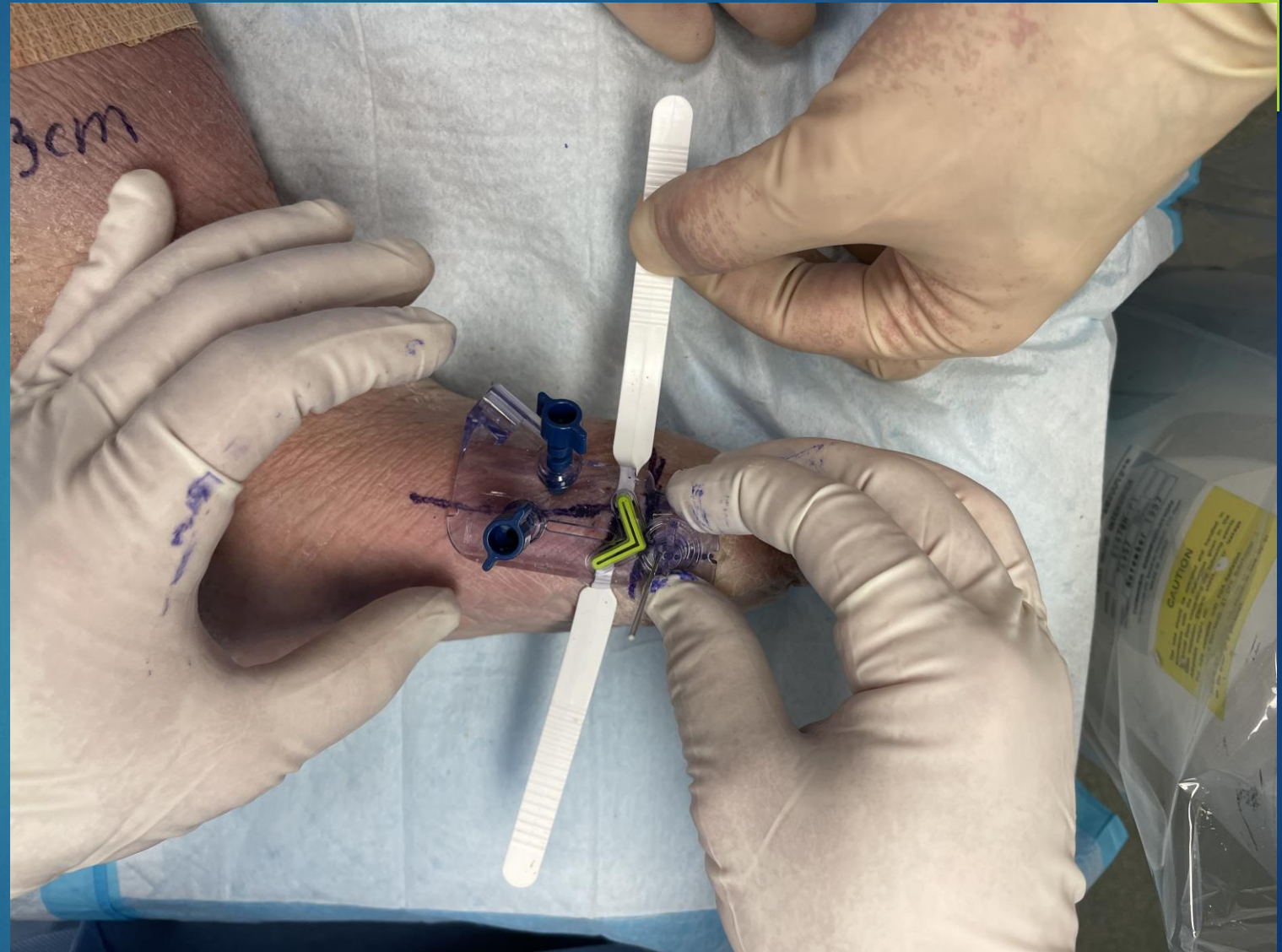
Insert the Plantar Retractor (shorter) to protect the soft tissues.



While retracting the skin, utilize a freer to confirm that K wire #1 is midline of the metatarsal



Rotate Guide back into position



- ▶ Insert K Wires 2 and 3
- ▶ Insert the Screw Guide



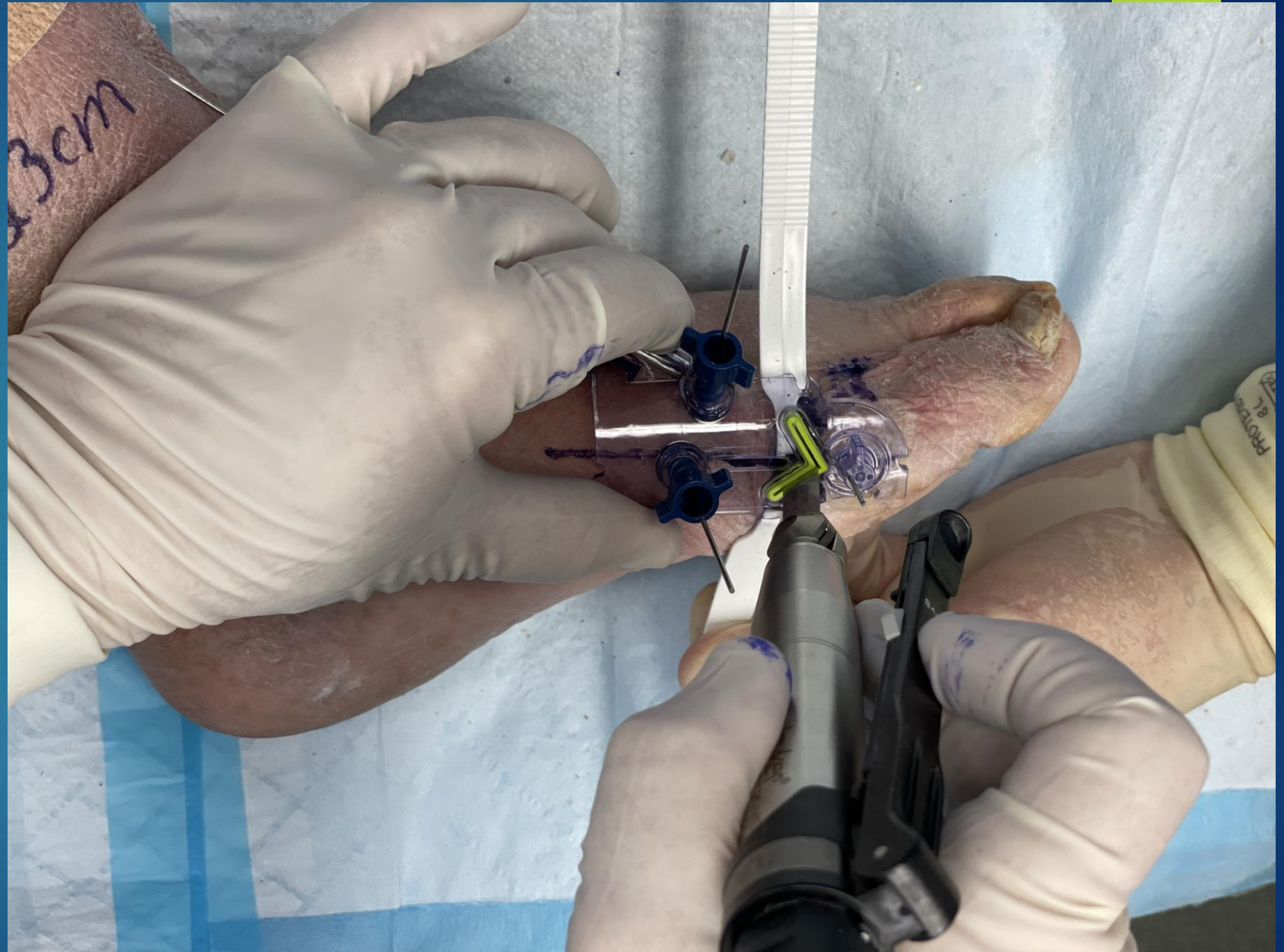
- Insert the 1.1mm Guide Wire through the Screw Guide



- ▶ Measure the screw length
- ▶ After measuring, retrograde the Guide Wire to the 10mm proximal mark on the Screw Guide.

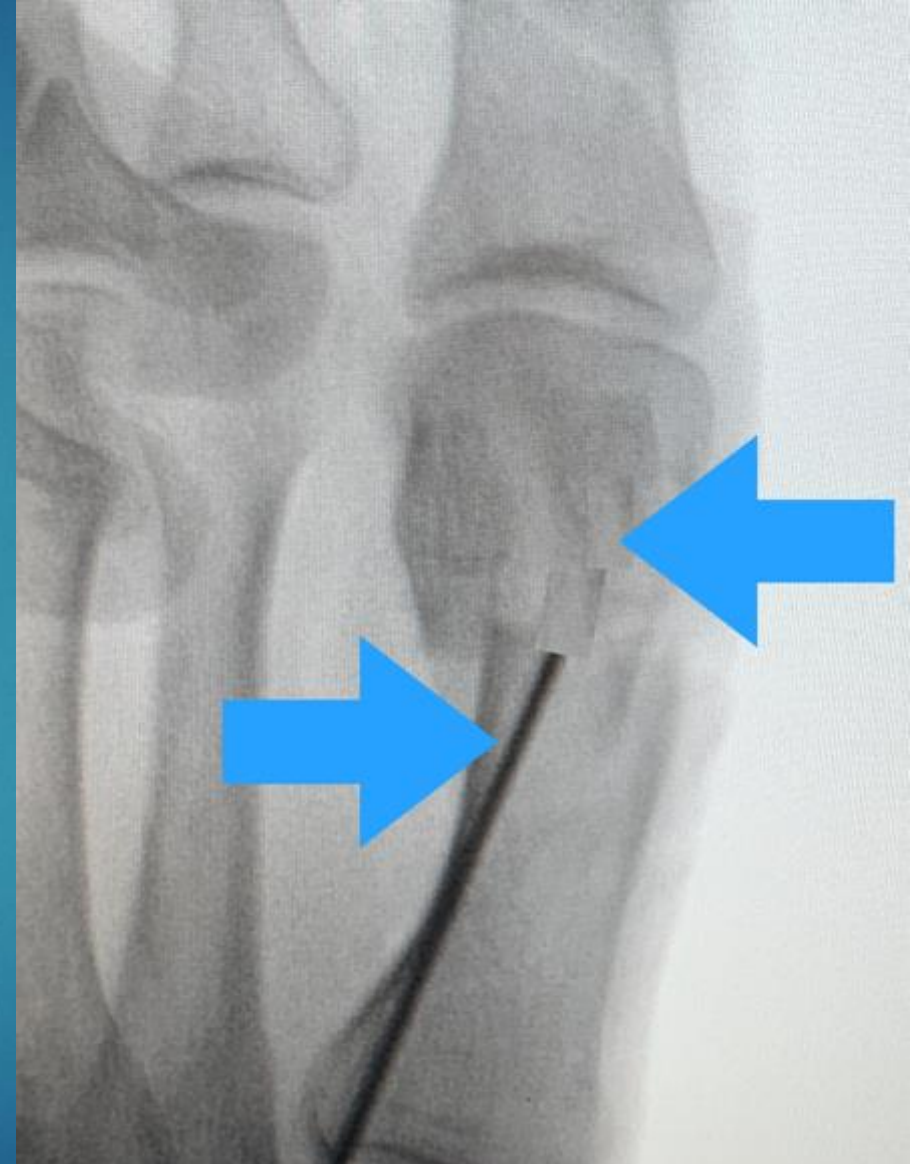


- Retract the skin
- Perform osteotomy

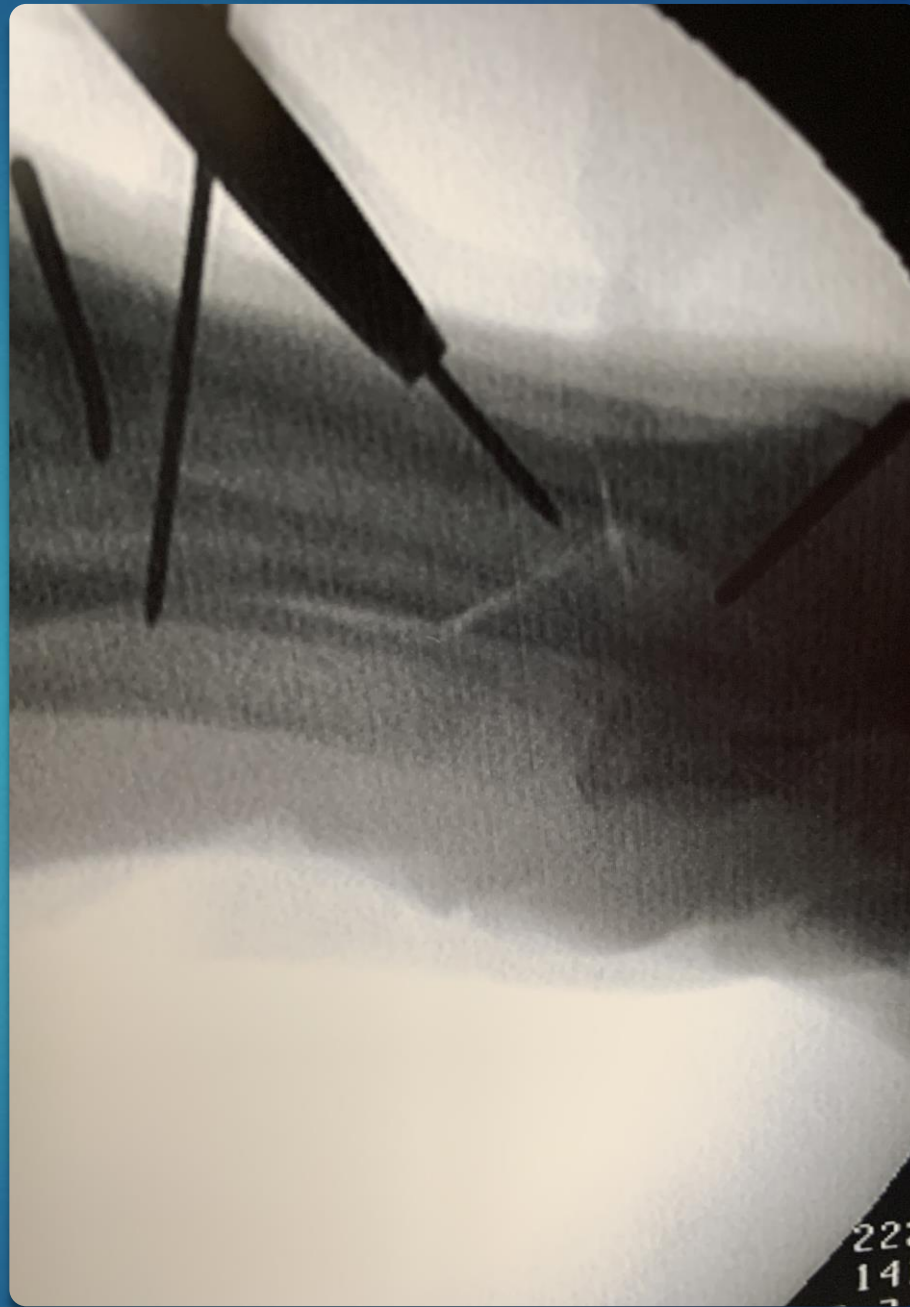




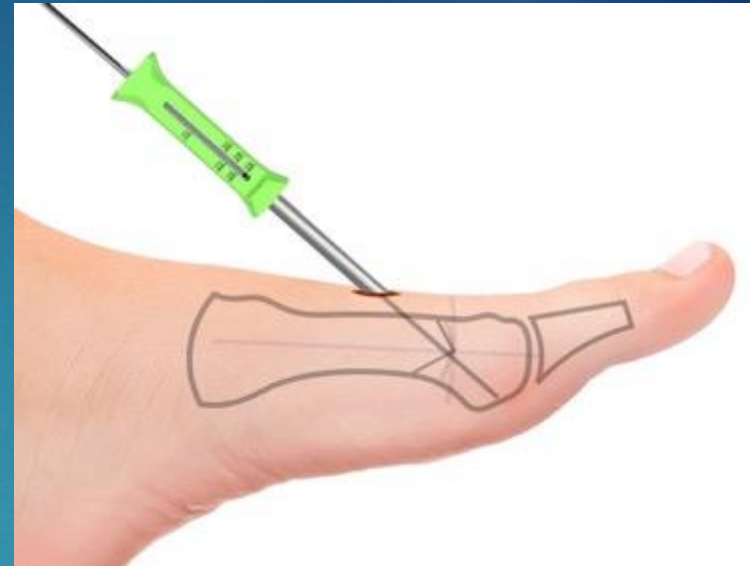
- ▶ Correct the deformity by distracting the hallux and moving the 1st metatarsal head lateral while at the same time pushing medially on the midshaft of 1st metatarsal
- ▶ Confirm desired position under fluoroscopy.



Confirm no gapping of the Osteotomy



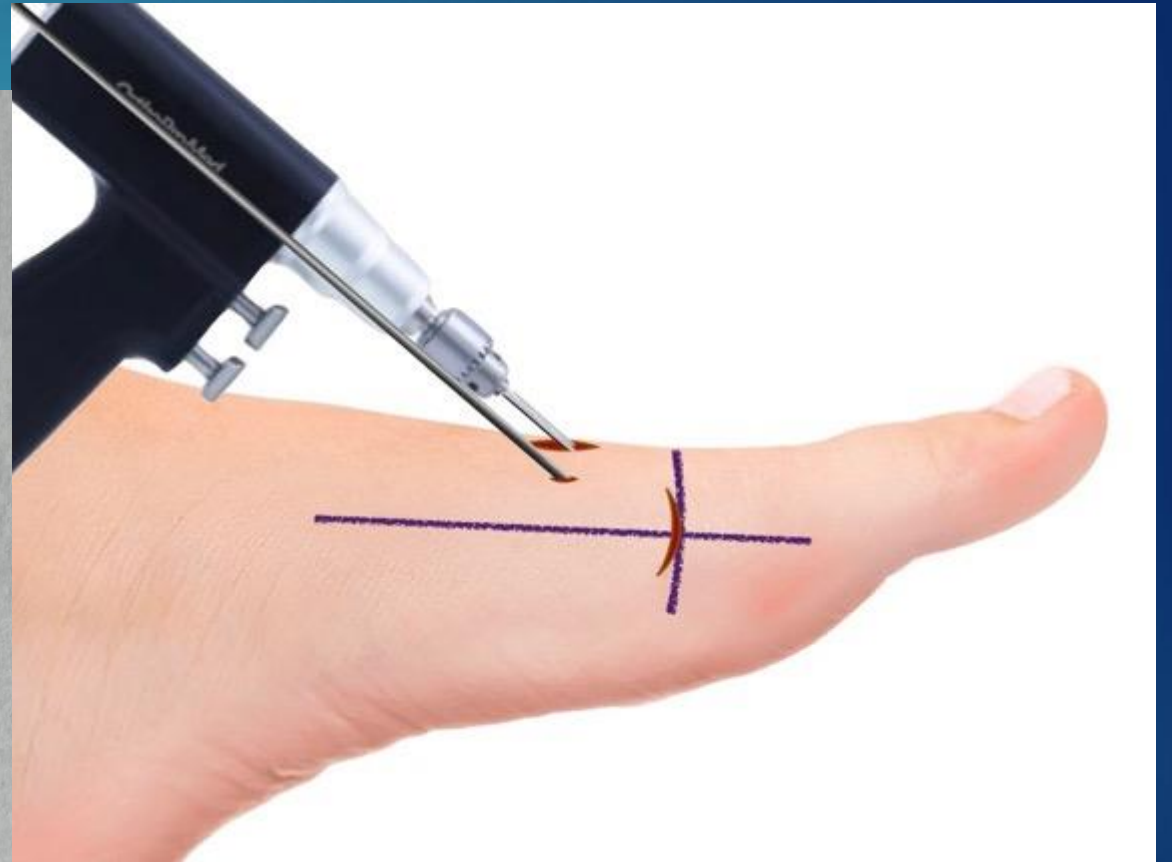
- ▶ Advance the Guide Wire to the length previously measured.



- ▶ Insert temporary fixation



► Drill/Countersink



- Insert a 3.5mm screw
- Confirm the screw position with fluoroscopy









- ▶ Resect the medial bone shelf.
- ▶ Remove the Guide Wire and temporary fixation.
- ▶ Flush and close incisions.



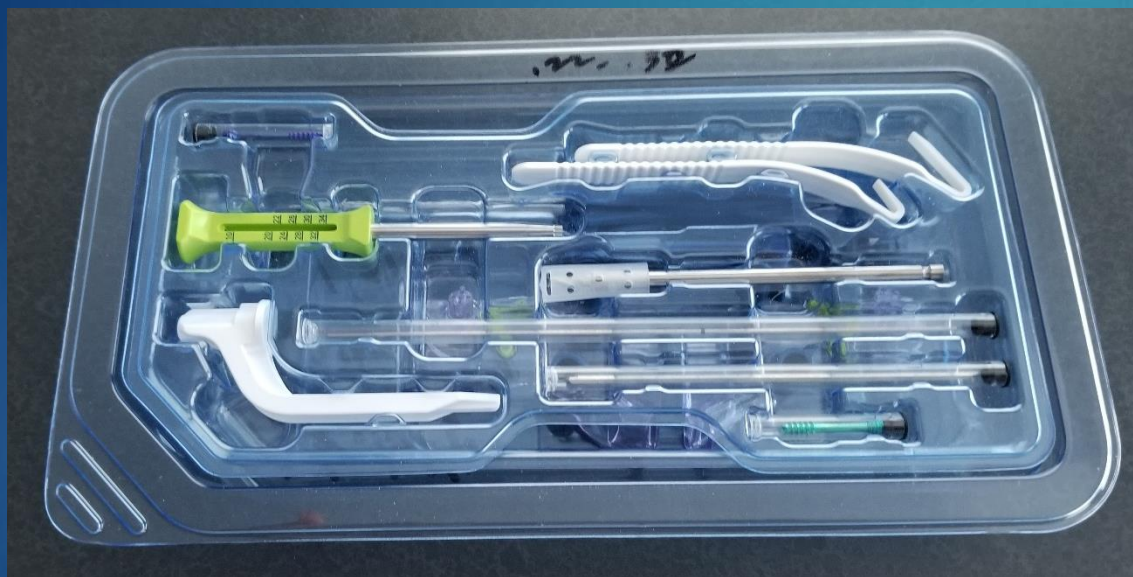
Surgeon Testimonials



- “The best part is the guide incorporates the osteotomy and guide pin for screw all in one”
- R. Lemmenes, DPM
- “Docs will use it. Patients will love it.” - J. Hilario, DPM
- “MIS is a big market. This is better than any other system out there.” - M. Rivera, DPM
- “The Guide will solve precision problems.” - E. So, DPM
- “A simple reproducible instrument guided MIS hallux valgus system.” - A. Ferguson, MD
- “Really like the product; it's very innovative.” - T. Holmes, DPM
- “Like the sagittal saw. Like the targeting guide.” - J. Shih, DPM

Packaging

Single SKU: RI-2427-C for left and right feet, any size foot



Outer tray = 10" L x 5.3" W x 1.75" H

Bottom inner tray – two osteotomy guides (L and R), cannulated T10 screwdriver



Upper inner tray – screw guide, targeting guide, retractors, implants, 3 K-wires, guidewire, drill bit

