Non-locking plates

1. Manufacturer:
   Astrolabe – Fabricação de Implantes Médicos
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   Portugal

2. Presentation and Clinical Indications

Non-locking plates are as shown in the illustration below:

Table 1 – Astrolabe non-locking plates.

<table>
<thead>
<tr>
<th>Non-Locking Plates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard</td>
</tr>
<tr>
<td>Self-Compressing</td>
</tr>
</tbody>
</table>

Non-locking standard plates are indicated for the stabilisation of fractures and osteosynthesis in general. Holes are perpendicular, preventing the movement of the plate relative to the bone.

The models of plates available are as follows:

Table 2 – Types of Astrolabe non-locking standard plates available.

<table>
<thead>
<tr>
<th>Non-locking standard plates (Std plates)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Straight - Superior Extremity (SE)</td>
</tr>
<tr>
<td>Rectangular (Rectang) – Superior Extremity (SE)</td>
</tr>
<tr>
<td>Condyle – Superior Extremity (SE)</td>
</tr>
<tr>
<td>“T” – Superior Extremity (SE)</td>
</tr>
<tr>
<td>“Y” – Superior Extremity (SE)</td>
</tr>
<tr>
<td>2 x 2 + 2 – Superior Extremity (SE)</td>
</tr>
</tbody>
</table>

Non-locking self-compressing plates are applied when setting fractures with an axial compression effect created by the eccentric insertion of screws at the ends of the fracture line. Plates contain oblong-shaped orifices which have angled seats to allow for the insertion of screws. This way the screw head slides in because of the angle, allowing the bone fragment to move against the plate, resulting in the compression of the fracture.
The models of plates available are as follows:

Table 3 – Types of Astrolabe non-locking self-compressing plates available.

<table>
<thead>
<tr>
<th>Self-compressing plates (SC plates)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Straight - Superior Extremity (SE) – 1.0 mm Thickness</td>
</tr>
<tr>
<td>Straight - Superior Extremity (SE) – 1.3 mm Thickness</td>
</tr>
<tr>
<td>Condyle – Superior Extremity (SE) – 1.0 mm Thickness</td>
</tr>
<tr>
<td>“T” – Superior Extremity (SE) – 1.0 mm Thickness</td>
</tr>
<tr>
<td>“T” – Superior Extremity (SE) – 1.3 mm Thickness</td>
</tr>
<tr>
<td>“L” – Superior Extremity (SE) – 1.0 mm Thickness</td>
</tr>
<tr>
<td>“L” – Superior Extremity (SE) – 1.3 mm Thickness</td>
</tr>
<tr>
<td>“Y” – Superior Extremity (SE) – 1.0 mm Thickness</td>
</tr>
</tbody>
</table>

Both standard and self-compressing plates and straight and rectangular plates are for use in bone shafts. Other formats however are to be applied to the epiphysis or metaphysis of the bone or possibly even the shaft when fractures require a support for extremities.

If the removal of the implants is necessary, the surgical instruments also manufactured by ASTROLABE must be used.

3 Contraindications

- Patients with an active or suspected infection; immunocompromised patients.
- Patients with certain metabolic disorders, degenerative diseases, circulatory diseases and/or systemic disorders.
- Patients with a tumour in the treatment area
- Known or suspected intolerance to the foreign bodies (products) to be applied.
- Patients who, based on their physical or mental condition, would not be capable of performing the post-operative care needed.
- Instances of severe damage to bone structure as well as degenerative processes which can interfere with the healing process.
- Addiction to drugs, alcohol or medication.
- For patients performing activities involving walking or running or which would otherwise incite excessive muscular strain, the effort produced may cause the implant to fail.

4 Possible adverse effects

- Infection
- Pain
- Allergic reactions to the materials the implants are made out of
- Nerve damage, vascular injury and healing disorders
- Restricted movement
- Insufficient and/or delayed bone healing
- Risk of the implant breaking, warping, loosening or migrating in the event of excessive strain and/or weight

5 Warnings and Precautions

- The healthcare professional in charge of the surgical procedure is responsible for the proper assessment of
patients and providing them with suitable training and information with respect to selecting and inserting implants, as well as taking the final decision to leave or remove implants post-operation. Implants must be removed following completion of bone consolidation on a case-by-case basis wherever possible.

- The surgeon must be specifically trained, experienced and fully familiar with the use of internally attached rigid devices, surgical procedures and post-operative care. Patients must strictly follow the post-operative instructions given by their surgeon. The patient must be made aware of the limitations of their metallic implants and given guidance on tolerable loads prior to the complete consolidation of the fracture.

- All implants and instruments may be required for each surgery. The non-use of specific tools for each step of the implantation procedure may compromise the integrity of the implanted device, resulting in premature failure and subsequent injury to the patient. Failed implant devices may require additional surgery and removal.

Moreover, surgical instruments may be damaged or broken if not used adequately during handling, the surgical procedure or reprocessing.

- Do not mix implants made of dissimilar metals within the same structure. Different metals in contact with each other may accelerate the corrosion process owing to galvanic corrosion.

- The use of implants from multiple manufacturers is not recommended owing to possible incompatibilities of the metals, mechanics and the design of the implant.

- Repeated bending can weaken the plate and may lead to its fracture and failure of the implant. If the implant needs to be moulded, it should not be bent at acute angles, bent in the opposite direction, scratched or warped. It can only be moulded once.

- Osteosynthesis devices are recommended for use in patients whose bones are strong enough to sustain the effectiveness and benefits of rigid fixation.

- Implants are designed for temporary use, i.e. until osteogenesis occurs.

- Only clean and sterilised devices may be implanted or used when applying the products. Cleaning and sterilisation instructions must be carefully followed.

- Personal protective equipment must always be used when handling or working with contaminated or potentially contaminated surgical implants.

- The correct selection of the implant is very important. The successful fixation of the fracture increases with the adequate selection of the shape, size and design of the implant. The shape and size of the human bone and soft tissues place restrictions on implant sizes and resistances. The selection of the wrong product (such as undersized implants in areas with high levels of functional stress) may result in the loosening, warping or breaking of the product, as well as the possibility of a bone fracture.

- Supporting the body’s weight is not recommended until bone fusion has occurred.

- Implants must be applied in a sterile environment.

- Implants are for single use only. Reuse entails an increased risk of contamination. This may result in possible cross-infection/contamination risks when used with other devices that have not been sufficiently cleaned and/or sterilised.

- The use, reuse or reprocessing of explanted, contaminated, used or damaged implants (e.g. as a result of
scratches) is prohibited. This also applies to contact with bodily fluids. Reusing implants may result in potential mechanical failure and an increased risk of infection. Apparently undamaged implants may present signs of fatigue as a result of unknown previous stress which may result in premature failure or the shortening of the life of the implant.

- Only instruments suitable for inserting ASTROLABE products must be used. Combining our products with other manufacturers’ products may entail severe risks for patients, users and third parties.

**Exception:** The use of our products in combination with motorised or drive systems. However, in this case the instructions of the manufacturer of such equipment for combined use with other products must be strictly followed.

### 6 – Recommendations and Instructions

#### 6.1 - Recommendations

- The patient must be duly informed, prior to surgery, of all the risks and side effects arising from use of the products in question as well as the expected outcome of the surgery (such as temporary restrictions on movement). Moreover, doctors must inform patients that medical monitoring and follow-up is crucial for the success of the operation. Doctors must instruct their patients to immediately notify them of any changes in the region where the operation was performed, so that suitable measures may be taken for continuation of the treatment.

- The product and surgical procedure selected should be based on the type of bone defect, anatomical location, indications for surgery and accepted medical standards as well as the patient’s weight, physical condition, activity level and co-operation.

- Carefully inspect and verify the implants prior to use.

- Follow standard practice for rigid fixation (i.e. the typical AO procedure) when inserting implants.

- Only trained, experienced medical professionals must handle the devices.

#### 6.2 – Instructions for plate-screw systems

The implants are designed to properly adapt to the bone being treated. Each system is designed based on the area it is most likely to be used. However, the plates can be adjusted to the bone to fit them perfectly to its anatomy, if necessary.

**Careful plate bending is possible, to a limited degree** (in line with the anatomy proper of the bone), provided it is done with due care, the appropriate plate has been selected and an appropriate instrument is used. Multiple deformations however should be avoided. Multiple bending of the plate without following the indications, as well as bending it to acute angles, bending it backwards and forwards, scratching it or warping it can weaken the plate and lead to fracture or failure of the implant as well as the reduction of its life.

Once an implant is moulded it cannot be moulded back to its original shape, as this may lead to breakage and subsequent failure of the system.

For fixed-angle implants, the drill guide must be placed in the screw hole closest to the bending area before curvature occurs. This prevents damage to the screw thread.
In the event of **shortening the bone plate**, cut surfaces must be trimmed using the appropriate instruments. The surgeon must ensure stability and load capacity are maintained and the plate is set properly.

Prior to insertion of the screw an appropriately sized drill bit must be used for pre-drilling. The drilling depth is determined by a gauge, in order to establish the length of screw. For fixed angle implants with unidirectional screws, drilling must be performed with the drilling cannula screwed to the plate.

Generally speaking the use of a tap is not required except where the procedure involves particularly tough bone.

The insertion and removal of the screw with a screwdriver must occur with sufficient pressure and at an angle that is exactly perpendicular to avoid any risk of damage. Some resistance is to be expected at the end of tightening. The screw must be carefully tightened right to its limit to prevent damage to the bone or products.

The surgeon must carefully insert the bone screws, as excessive torque may lead to implant failure.

### 7 – Packaging and Storage

The implants are supplied non-sterile, as stated on the label.

Non-sterile implants must be stored in a cool, dry place in their original packaging with no exposure to light until they are sent off for sterilisation. They must not be exposed to ionising radiation.

So as to keep products from corroding they must be kept away from chemical products.

The implants must not be stored directly on the floor. Storage on shelves at least 10cm above floor level is recommended.

There are no special transport conditions to be considered.

The label on the packaging contains the batch information for the product. It is recommended that the batch data is recorded in the patient’s records for traceability purposes.

### 8 – Cleaning and Sterilisation

All **non-sterile products** must be cleaned and sterilised prior to use in the operating theatre. The user is responsible for ensuring the correct performance and validation of these processes. Only trained, experienced professionals capable of assessing potential risks and subsequent effects must handle the devices.

The following cleaning and sterilisation instructions must be incorporated into the validated procedures in place in the institution. National standards, regulations and/or restrictions must also be included in this process.

The use of demineralised water helps keep stains from appearing on medical devices and also prevents corrosion. Use cleaning solutions and detergents with low foaming action.

#### 8.1 Cleaning
ASTROLABE products must be washed with alkaline or enzymatic cleaning agents. Only chemical and cleaning agents approved by the manufacturer for titanium/titanium alloy surgical products must be used. Highly alkaline cleaning solutions may stain surfaces.

The instructions provided by the manufacturer of the cleaning agent with respect to operations and loads, water temperature, concentration of the solution, application time, rinsing and drying must be complied with.

8.1.1 Manual Cleaning

The automatic mechanical washing of devices is preferred to manual washing as a standard process is achieved. This procedure must only be performed as a last resort when an automatic washer is not available.

When carrying out wholly manual washing procedures the methodology set out by the hospital must be complied with, particularly with respect to immersion in cleaning solution, the washing support materials and recommended products. The cleaning solution must be prepared in accordance with the manufacturer’s recommendations.

Non-fibrous sponges with soft bristles and nylon brushes are recommended for manual cleaning procedures so as not to damage implant surfaces and coating.

Water temperature cannot be higher than room temperature as this facilitates the detachment of organic and chemical residues.

To keep contaminants from spreading the implants must be scrubbed with a brush when fully immersed in the cleaning solution.

Rinse thoroughly to ensure there is no detergent residue left and dry using medical air or disposable absorbent wipes that do not shed fibres.

8.1.2 Automatic Washing

In the case of mechanical cleaning, the implants must be arranged in the washing baskets in a manner that does not cause damage.

Washing baskets must not be overloaded to ensure all materials are properly exposed to the water jets. The heavier items must be placed at the bottom of the containers.

Only implants made from the same metallic alloy should be placed in each washing load, to prevent corrosion.

The instructions provided by the manufacturer of the washing machine or cleaning agent regarding the respective operation and loads, water temperature, disinfectants or solution concentration, application time, rinsing and drying phases and times must be complied with for optimal cleaning results and to prevent damage to materials.

Use indicators where possible, which allow cleaning action efficiency to be monitored.

Implants must be dried following washing.

8.1.3 Ultrasonic Cleaning
Use an ultrasonic cleaning device suitable for medical applications. The manufacturer’s instructions must be followed.

Implants that are cleaned in ultrasonic equipment must first be washed with the specific auxiliary means available, prior to immersion in the cleaning solution.

The level of cleaning solution must never exceed the maximum limit indicated inside the tank. Temperatures must not exceed 40ºC.

The basket of the ultrasonic device must be large enough to ensure that all the instruments are completely submerged in the cleaning solution.

Only implants made out of the same metallic alloy should be placed in each load to prevent any corrosion risk.

The devices are rinsed with running, preferably demineralised, water so no detergent residue is left and then dried using disposable absorbent wipes that do not shed fibres or with medical air.

8.1.4 Visual and Functional Inspection

The visual and functional inspection must be performed after cleaning (manual or automatic).

Implants must be verified with respect to cleaning, operation and integrity. All traces of detergent used must have been removed during cleaning. If any contamination is found, the cleaning cycle must be repeated.

The products must be inspected for mechanical damage (breakage, deformation, corrosion, etc.) and fault-free operation. Products which are damaged or are not fully functional may never be used in patients. They must be sent off for repair by a qualified agent or, where necessary, disposed of and replaced.

8.2 - Sterilisation

The recommended sterilisation method is by fractionated steam (≥ 132°C; 3 bar, ≥ 5 min) followed by drying (≥ 10 min).

**Warnings**

Sterilisation must be carried out before using ASTROLABE products. Only completely clean and dry products can be sterilised. Products must be placed in suitable storage systems for sterilisation. Baskets, trays and implant kits must be sterilised in their recommended sterilisation containers.

The sterilisation package will vary based on the method used. The products must be packaged in accordance with current applicable guidelines and the requirements in place for the chosen sterilisation method.

When using implant storage containers for sterilisation we recommend stacking a maximum of two titanium plates one on top of the other to ensure implants are properly sterilised.

Contact with other objects which may damage implants or scrape their surface finish must be avoided.

The sterilisation processes for the various load and packaging settings as well as storage time must be established by the professional in charge of the sterilisation process.
Multiple medical devices may be sterilised in an autoclave during one cycle, although it is recommended that the maximum load indicated by the manufacturers is not exceeded. Heavier items must be placed at the bottom of the load.

Condensation must be avoided to reduce the chances of subsequent corrosion and/or contamination.

Following sterilisation, the packaging must be inspected for signs of damage. The sterilisation indicators must also be checked.

Any sterile product packaging found to be damaged or damp when removed from the sterilisation chamber must be deemed non-sterile and cannot be used. Sterilised packages must not show any signs of damage which could affect their functioning, so they must undergo regular visual checks. Defective sterilisation containers must be taken out of service and may not be used for sterilisation and/or the storage of sterilised products.

9 – Warranty

ASTROLABE products are manufactured using the highest quality materials and are subject to quality assurance controls prior to delivery.

The user is under obligation to inspect the product prior to application, to ensure its adequacy and use for the intended purpose.

As a product manufacturer, ASTROLABE may not be held liable for any direct or indirect damage arising from failure to follow the above-stated instructions, misuse, incorrect handling or preparation, sterilisation, care and maintenance. The repair of the products by companies or individuals who have not been authorised for such by ASTROLABE shall void all claims made under the guarantee.

For any queries please contact us on +351 219672298.

10 – Product disposal

Medical devices must be delivered to a professional disposal company for this type of waste or to a recycling system, once their useful life has ended.

Used implants must be destroyed. They must be shredded or deformed, at a suitable location where possible, to avoid contaminating humans or the environment. In this way, the implant is clearly made inappropriate for use. It is recommended that the legal requirements regarding potentially contaminating products apply.

Implants are single-use products and must not be reused.

11 – Packaging symbols

<table>
<thead>
<tr>
<th>REF</th>
<th>Catalogue number</th>
<th>LOT</th>
<th>Batch</th>
</tr>
</thead>
<tbody>
<tr>
<td>0086</td>
<td>Marking of Class Iib Implants</td>
<td>✗</td>
<td>Do not reuse</td>
</tr>
<tr>
<td>Icon</td>
<td>Instructions for Use</td>
<td>Manufacturer</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>☀</td>
<td>Avoid contact with water</td>
<td>Avoid direct exposure to sunlight</td>
<td></td>
</tr>
<tr>
<td>℃</td>
<td>Temperature limit</td>
<td>Do not use if packaging has been opened or is damaged</td>
<td></td>
</tr>
<tr>
<td>📜</td>
<td>See Instructions for Use</td>
<td>Fragile</td>
<td></td>
</tr>
</tbody>
</table>