

# VersiTomic

## Flexible Reaming System FAQ's

- 1. Are the VersiTomic Flexible Reamers Reusable?** Yes. The reamers are designed to be used multiple times and have had cleaning and sterilization validations completed.
- 2. How many times can the reamers be used before they need to be replaced?** Just like all other reusable reamers the VersiTomic will eventually wear and need to be replaced. Representatives should check frequently with the surgeon and recommend they be replaced when cutting becomes increasingly difficult.
- 3. Can the VersiTomic reamers be run in reverse?** Other flexible reamer designs are constructed of a coil of metal that may unwind in adverse conditions. The unique puzzle piece design allows for forward and reverse drilling.
- 4. What is the cannulation on the reamer?** The reamers are cannulated to 2.2mm. This is why the reamer only fits over the eyelet end of the flexible guide pin and not the trocar tip.
- 5. Why does the VersiTomic reamer only have one cutting flute?** The VersiTomic is designed with an eccentric cutting head that is comprised of 1 cutting flute to help protect the soft tissue and cartilage inside the knee joint.  
  
Specific laser lines on the drill head and shaft base specifically indicate the cutting heads position and should be referenced during insertion through the AM portal.
- 6. If the reamer breaks while drilling, could puzzle pieces scatter throughout the joint?** The reamers are laser cut from a solid piece of stainless steel and are not assembled as individual puzzle pieces. If the reamer breaks it has the potential to disengage at one puzzle piece and break into two pieces.
- 7. What kind of reaming adapter can be used with the VersiTomic?** The VersiTomic is designed to be used with either a Trinkle adapter or a Jacobs Chuck.
- 8. What is the flexible guide pin made out of?** The flexible guide pin is made of a special blend of Nitinol that allows the pin to be flexible but maintain enough stiffness to be drilled.
- 9. Does the pin have a drill or Trocar tip?** The flexible guide pin is equipped with an extremely sharp trocar tip for easier exit out of the thigh musculature.
- 10. Why is the tip of the pin 2.4mm and the body is 2.2mm?** The pin was designed with a slightly larger head to make the pin slide easier in the femur when doing an Anterior Medial Portal drilling technique which requires the pin to be pulled into the joint space and then pulled back out the AM portal.
- 11. Since the guide pin is flexible won't it just keep bending when drilled into the femur?** When supported by bone or a drill sleeve, the nitinol pin can follow an intended trajectory. Care must be taken to avoid large distances between the drill hand piece and a rigid sleeve.
- 12. Why is the starter Awl at 55°?** The starter awl is at 55° to help ensure that the trajectory of the pin exits above the mid-line of the Femur.
- 13. How come the flexible guide pin is disposable?** The flexible guide pin is disposable because if it is sterilized more than once the pin material becomes weaker and there is a greater chance the pin will break.
- 14. Why are there different aimers to position the flexible guide pin?** The aimers in the VersiTomic system were designed specifically for a left and a right knee. The aimer is designed with a side slot to push maneuver the pin toward the lateral femoral wall on both left and right knees.
- 15. What type of fixation is recommended for use with the VersiTomic system?** The VersiTomic drill system is designed for socket creation on the femur. Any standard method of graft fixation may be used.
- 16. How many sizes of the reamers will be available at launch?** Initially in the limited launch set the sizes available will be 4.5, 7.0, 8.0, 9.0 and 10.0mm. These are the most popular sizes ACL reamers and should be sufficient for most cases.

A surgeon must always rely on his or her own professional clinical judgment when deciding whether to use a particular product when treating a particular patient. Stryker does not dispense medical advice and recommends that surgeons be trained in the use of any particular product before using it in surgery.

The information presented is intended to demonstrate the breadth of Stryker product offerings. A surgeon must always refer to the package insert, product label and/or instructions for use before using any Stryker product. Products may not be available in all markets because product availability is subject to the regulatory and/or medical practices in individual markets. Please contact your Stryker representative if you have questions about the availability of Stryker products in your area.

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