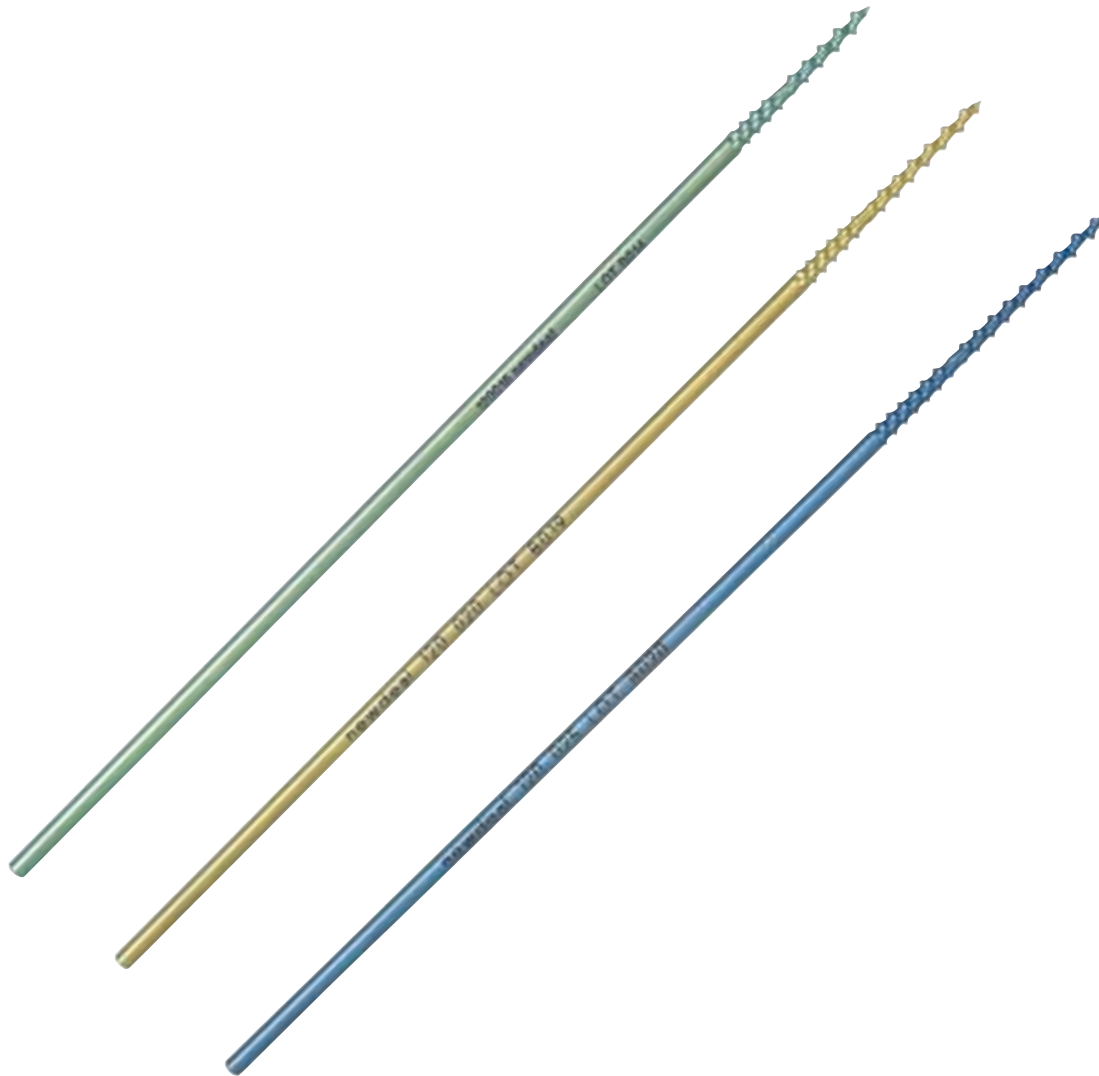


T.A.C.' PIN™

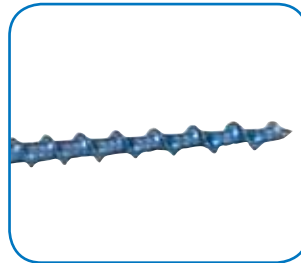
THREADED COMPRESSION PIN



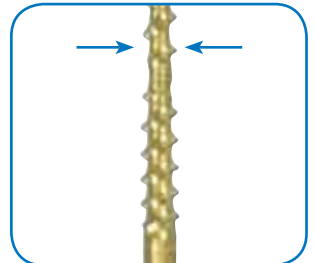
- **Functionality - Small Bone Fragment Fixation**
- **Flexibility - Comprehensive Product Portfolio**
- **Stability - Titanium**

**LOWER
EXTREMITY
SOLUTIONS**

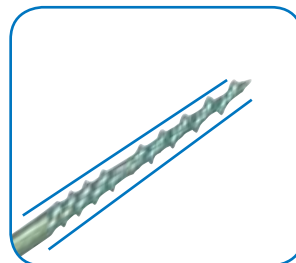
T.A.C.' COMP R



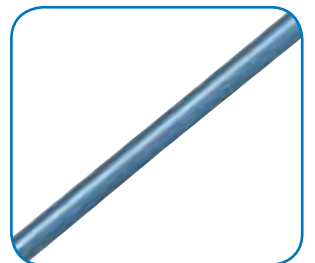
Self-tapping tip.



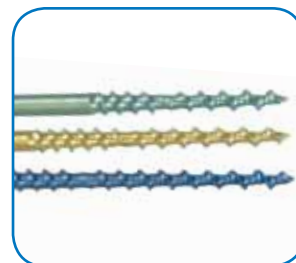
Depth reference mark.



Conical body.



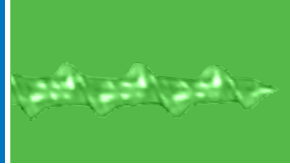
Diameter: 1.6 mm.



Color coded for size identification.



Lot number and reference marking for easier product traceability.



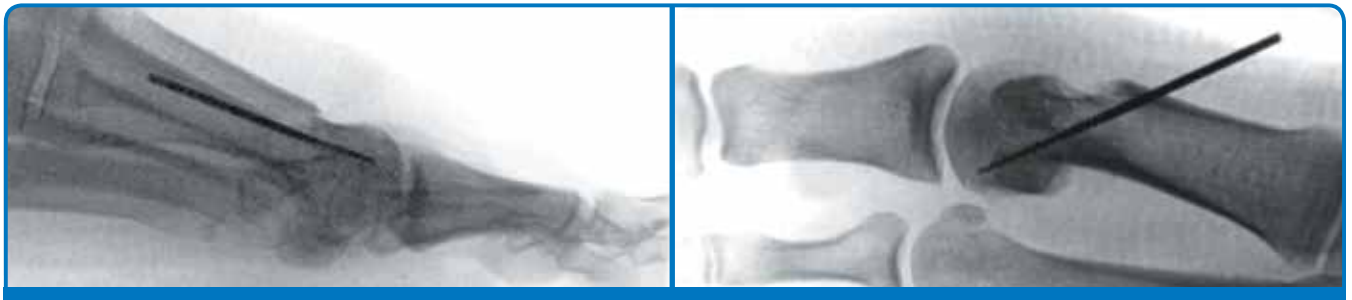
Description

Titanium pin with compression thread

- Variable thread pitch for true and adapted compression.
- Direct bone implantation.

Note: According to the bone quality, a pre-drill may be required.

- 3 length of threads: 15, 20 and 25 mm.
- Material: titanium alloy
TiAl6V4 ISO 5832-3 ASTM F136.
- Patented implant.



INDICATIONS

- Akin osteotomy.
- First MTP arthrodesis.
- Phalangeal arthrodesis.
- Small bones osteosynthesis requiring compression.

OTHER POSSIBLE INDICATIONS

- Arthrodesis in hand surgery.
- Mono or bi-cortical osteotomies in the hand.
- Distal or proximal metacarpal osteotomies.

IMPLANT SELECTION

The choice of the implant depends on the osteosynthesis performed. The ideal choice is the implant which offers most threads at both sides from the osteotomy or fracture with the short non-threaded lag part at least at the level of the osteotomy / fracture. The diameter at the non-threaded part is 1.2 mm.

T.A.C.' PIN™

THREADED COMPRESSION PIN

TECHNIQUE AS SUGGESTED



As the manufacturer of this device, Integra does not practice medicine and does not recommend this or any other surgical technique for use on a specific patient. The surgeon who performs any implant procedure is responsible for determining and using the appropriate techniques for implanting the device in each patient.

The tools needed for setting a T.A.C.'pin™ are:

- a wire driver accepting a 1.6 mm diameter pin
- an optional universal pin cutter

The pin should be inserted with the wire driver in a speed as slow as possible, as corresponding to manual drilling. High speed and/or fixed speed drills are not advised.

No angular force should be applied on the pin in order to prevent malpositioning of the same fragments or bending of the T.A.C.'pin.

According to the bone quality, a drilling of the cortex with a 1 mm K-wire may be required for easier setting of the T.A.C.'pin.

It is recommended to control and assist the ideal location and the formal setting of the T.A.C.'pin by fluoroscopy or X-rays. The non-threaded part should be ideally at the level of the fracture / osteotomy. It may pass this level, but the whole threads should not be only in the distal bone fragment.

The pin may be cut off with a sharp wire cutter without bending the remaining implanted part of the pin. A percutaneous T.A.C.' pin would indeed be removed with a wire driver only as it is guaranteed to be straight. Removal of a bent pin may cause dislocation of the bone structures or fracture of the pin itself.

T.A.C.' Pin Diam. 1.6 mm Threaded Compression Pin

| Catalog Number | Length |
|----------------|--------|
| 120 015ND | 15mm |
| 120 020ND | 20mm |
| 120 025ND | 25mm |

The T.A.C.'pin is to be implanted thanks to the use of standard surgical power tool equipment

- The products are manufactured and referenced within the frame of the standards in force.
- Non-contractual document. The manufacturer reserves the right, without prior notice, to modify the products in order to improve their quality.
- WARNING: Federal law (USA) restricts this device to sale by or on the order of a physician.



INTEGRA™
Extremity Reconstruction

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