stryker

ProChondrix® CR
Cryopreserved Fresh Osteochondral Allograft

Operative technique

Foot and ankle

Description and indictation

ProChondrix CR is a cryopreserved fresh osteochondral allograft product that may be used in a variety of orthopedic reconstructive procedures to aid in repair of articular cartilage.

Operative technique

Step 1 - Surgical approach

The patient should be placed into the supine position. A mini-open, anterolateral approach to an ankle arthrotomy may provide adequate visualization of the osteochondral defect (Fig 1).

Apply distraction to the tibiotalar joint, if needed, to maintain access and visibility to the osteochondral defect throughout the procedure.

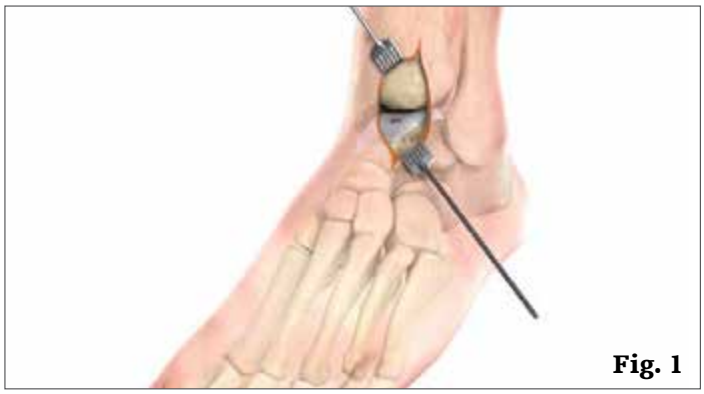


Fig. 1

Step 2 - Defect sizing

The osteochondral defect is identified and marked. ProChondrix sizer set can be utilized to determine the boarders and size of the defect (Fig 2).

Fig. 2

Step 3 - Lesion excision

Using a #15 blade or curette, sharply outline the borders of the osteochondral defect. If possible, use the ProChondrix Instrument set to excise the osteochondral defect including all damaged and loose cartilage (Fig 3). The defect should be debrided to the subchondral bone layer. The native articular cartilage is debrided to perpendicular borders. If further clean up is necessary use a curette to ensure good vertical walls around the defect. In some circumstances, the subchondral bone may require further debridement to allow the ProChondrix CR graft to sit flush with the native cartilage.

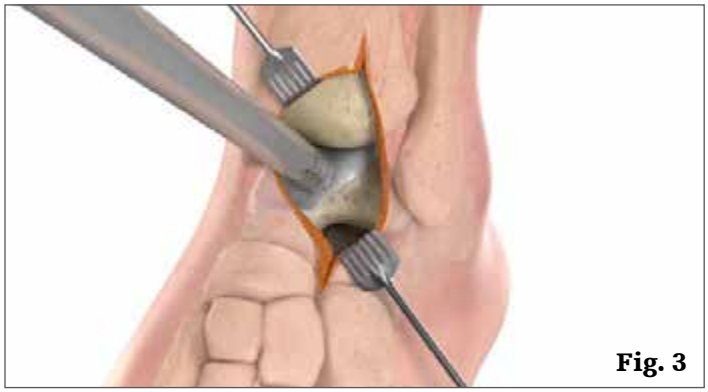


Fig. 3

Step 4 - Graft preparation

Accurately measure the osteochondral defect. If necessary, trim the ProChondrix CR graft to fit the osteochondral defect with scissors or #15 blade (Fig 4). The ProChondrix CR graft will need to be slightly smaller than the osteochondral defect in order for the graft to fit the defect appropriately. Utilizing the corresponding size ProChondrix Instrumentation set should ensure appropriate fit without the need to trim the graft.

Fig. 4

Step 5 - Extend incision

The incision may be extended up to 1.5cm to allow for bone marrow stimulation and graft implantation.

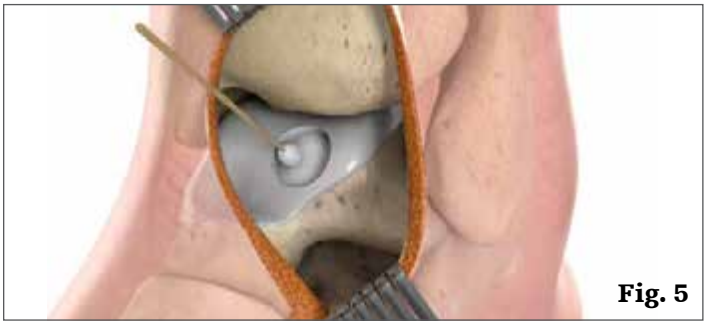


Fig. 5

Step 6 - Prepare surgical site

If desired, bone marrow stimulation (i.e. a micro-fracture) may be performed. The osteochondral defect is then prepared for ProChondrix CR application by completely drying the defect using gauze or cotton tip applicator. Bleeding from the osteochondral defect should be minimized.

Fig. 6

Step 7 - Graft implantation

Implant the ProChondrix CR graft into the prepared osteochondral defect. Ensure the graft does not protrude above the surrounding native articular cartilage surface.

Graft fixation should be performed using the surgeons' preferred material and technique. For example, fibrin sealant fixation (Fig 7b) may be applied according to the manufacturer's approved instructions for use.

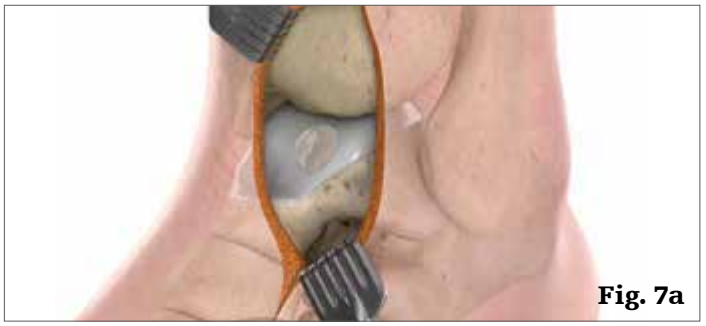


Fig. 7a

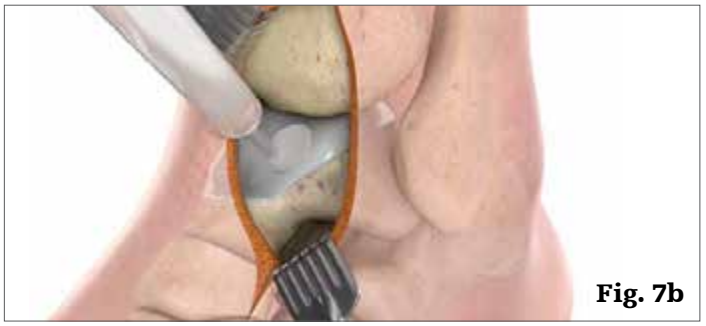


Fig. 7b

Step 8 - Closure

Surgical wound closure is performed using the surgeon's preferred preference (Fig 8).

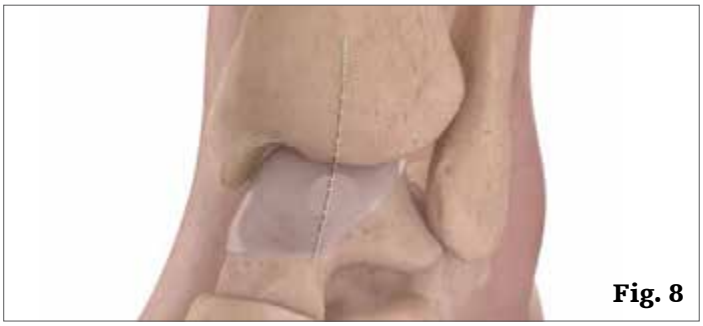
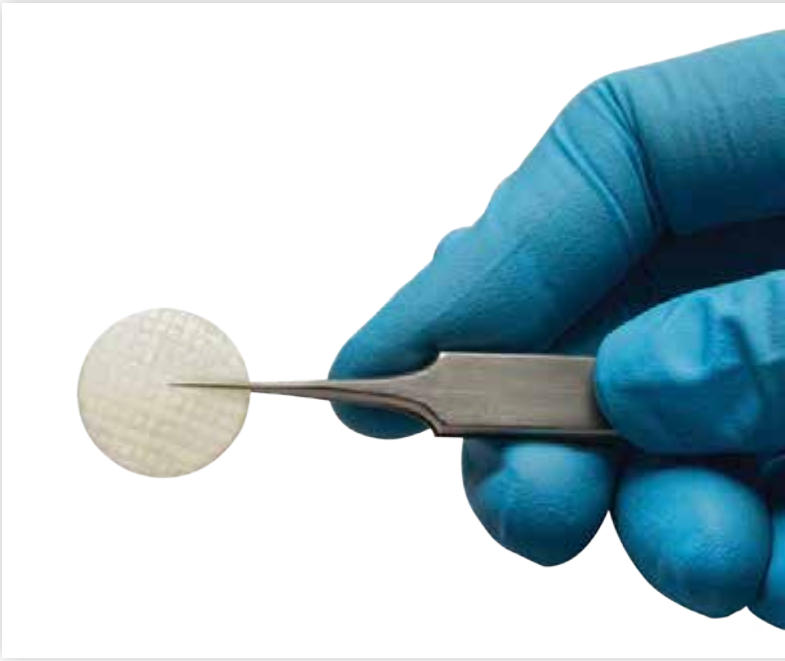


Fig. 8

Product information

Ref #	Product description
3102-2711CR	ProChondrix CR, 11mm
3102-2713CR	ProChondrix CR, 13mm
3102-2715CR	ProChondrix CR, 15mm
3102-2717CR	ProChondrix CR, 17mm
3102-2720CR	ProChondrix CR, 20mm



Trauma & Extremities

Content ID: PCH-STO-2, 10-2018

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