ProChondrix® CR
Cryopreserved Fresh Osteochondral Allograft

Operative technique
Metatarsophalangeal joint
Description and indication

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 standard dorsal incision of the metatarsophalangeal joint is created (Fig. 1a). Complete exposure of the metatarsophalangeal joint is performed (Fig 1b). Manual distraction or external fixation device may be utilized to maintain access to the osteochondral defect throughout the procedure.

**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).
**Step 3 - Lesion excision**
Using a #15 blade or curette, sharply outline the borders of the osteochondral defect. Using the ProChondrix Instrument set 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](image3.png)

**Step 4 - Graft preparation**
Accurately measure the osteochondral defect. Trim the ProChondrix CR graft to fit the osteochondral defect with scissors or #15 blade. The ProChondrix CR graft will need to be slightly smaller than the osteochondral defect in order for the graft to fit the defect appropriately (Fig 4).

![Fig. 4](image4.png)

**Step 5 - Implantation**
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.

Implant the ProChondrix CR graft into the prepared osteochondral defect. Graft fixation should be done using the surgeon’s preferred material and technique. Ensure the graft does not protrude above the surrounding native articular cartilage surface (Fig 5).

![Fig. 5](image5.png)

**Step 6 - Closure**
Wound closure is performed per the surgeon’s preference (Fig 6).

![Fig. 6](image6.png)
### Ordering information

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**Trauma & Extremities**

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