



IMPLANTS

INSTRUMENTS

- TITANIUM**
 FX221.200 Flex nail Ø2.0mm L=450mm
 FX221.250 Flex nail Ø2.5mm L=450mm
 FX221.300 Flex nail Ø3.0mm L=450mm
 FX221.350 Flex nail Ø3.5mm L=450mm
 FX221.400 Flex nail Ø4.0mm L=450mm
 FX221.500* Flex nail Ø5.0mm L=450mm

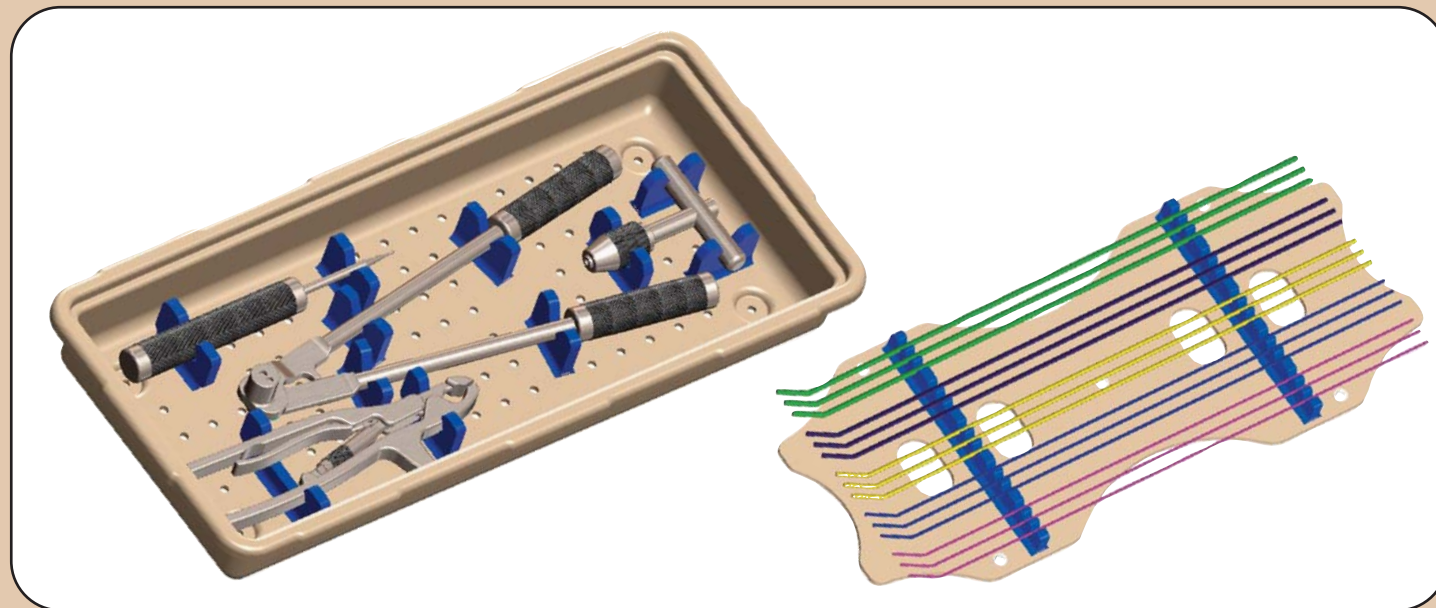
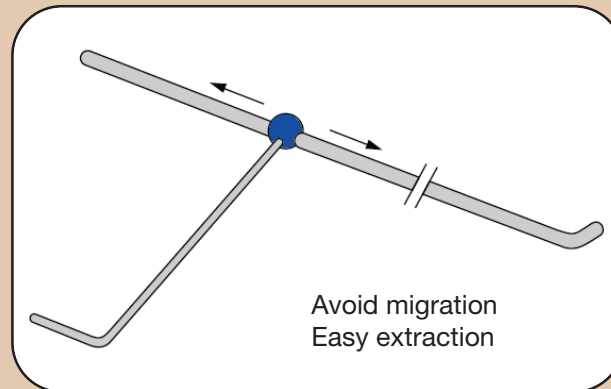
- STAINLESS STEEL**
 FX220.200 Flex nail Ø2.0mm L=450mm
 FX220.250 Flex nail Ø2.5mm L=450mm
 FX220.300 Flex nail Ø3.0mm L=450mm
 FX220.350 Flex nail Ø3.5mm L=450mm
 FX220.400* Flex nail Ø4.0mm L=450mm
 FX220.500* Flex nail Ø5.0mm L=450mm

- BLOCK STOP***
 FX213.000 Blockstop Ø2.0mm Sterile
 FX213.002 Blockstop Ø2.5mm Sterile
 FX213.004 Blockstop Ø3.0mm Sterile
 FX213.006 Blockstop Ø3.5mm Sterile
 FX213.008 Blockstop Ø4.0mm Sterile
 FX213.010 Blockstop Ø5.0mm Sterile

* on request

- FX622.124 T-handle chuck inserter
 FX622.126 Locking pliers
 FX622.125 Nail cutter
 FX622.127 Triangular awl

 FX622.114 Upper implant tray
 FX622.110 Complete instrumentation set



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FLEX NAIL™

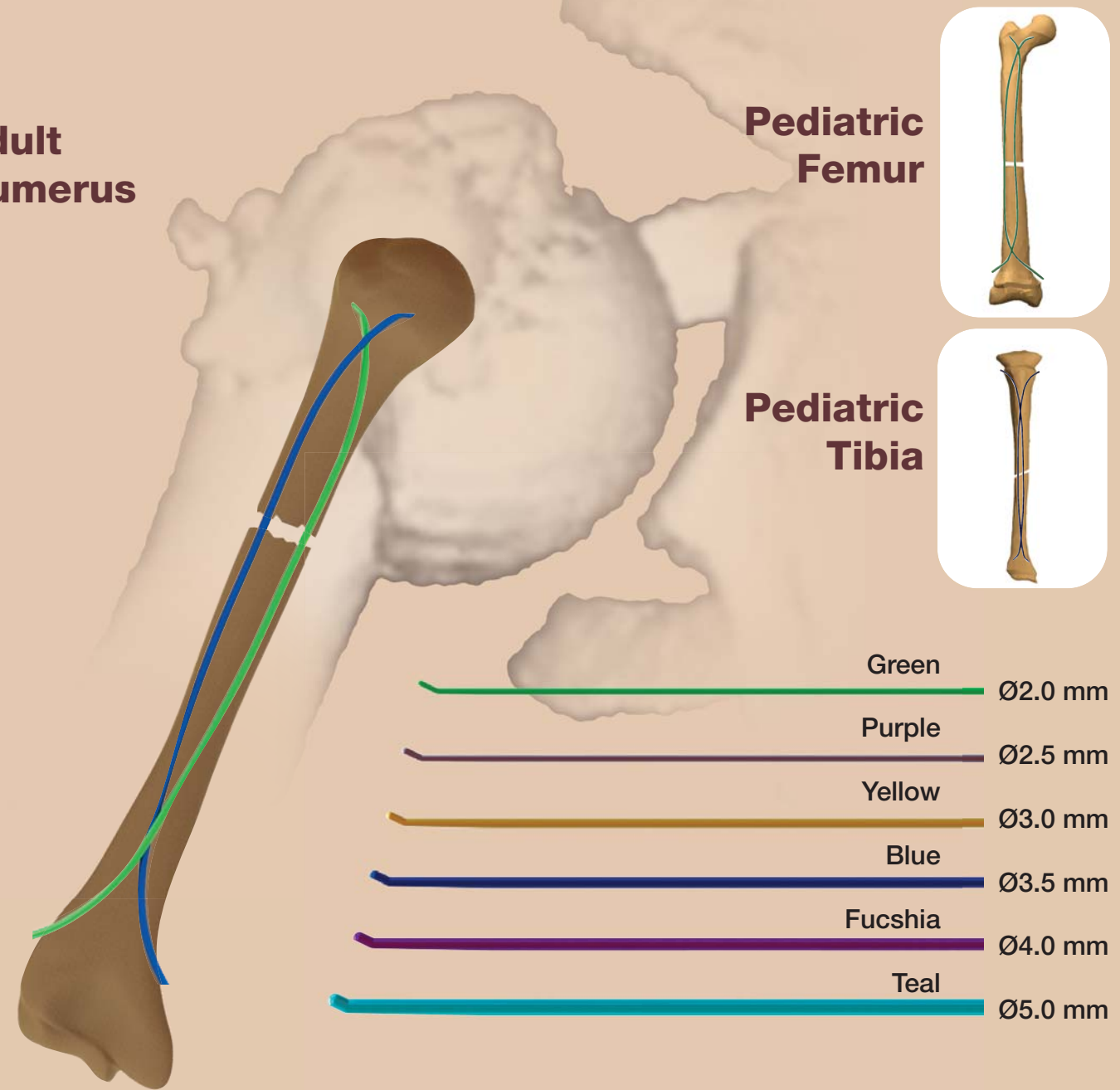
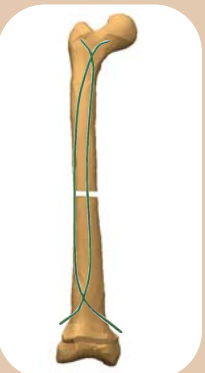
TITANIUM / STAINLESS STEEL

Flexible nails are designed for fixation of diaphyseal fractures

Adult Humerus

Pediatric Femur

Pediatric Tibia



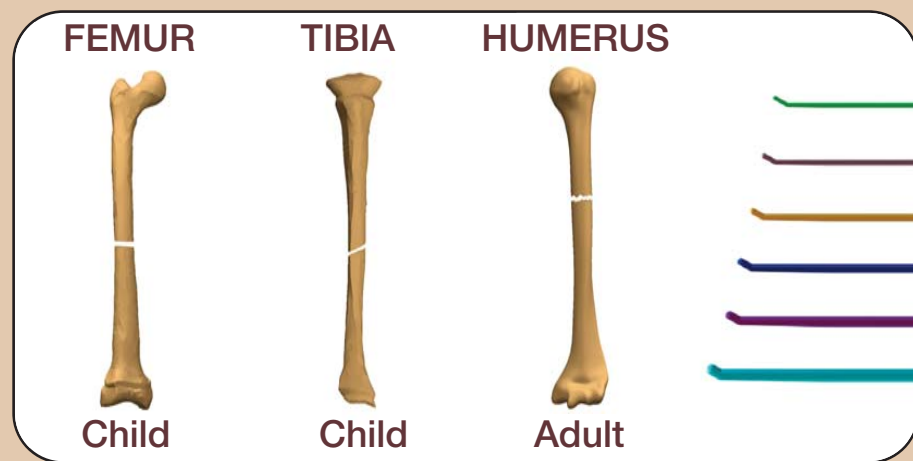


INDICATIONS

FLEX NAIL™ are specifically designed for fixation of diaphyseal fractures when the medullary canal is narrow or flexibility of the implant is paramount:

- **Pediatric upper and lower long bones**
Femur, Tibia, Humerus
- **Adult upper long bones**
Humerus

SURGICAL TECHNIQUE



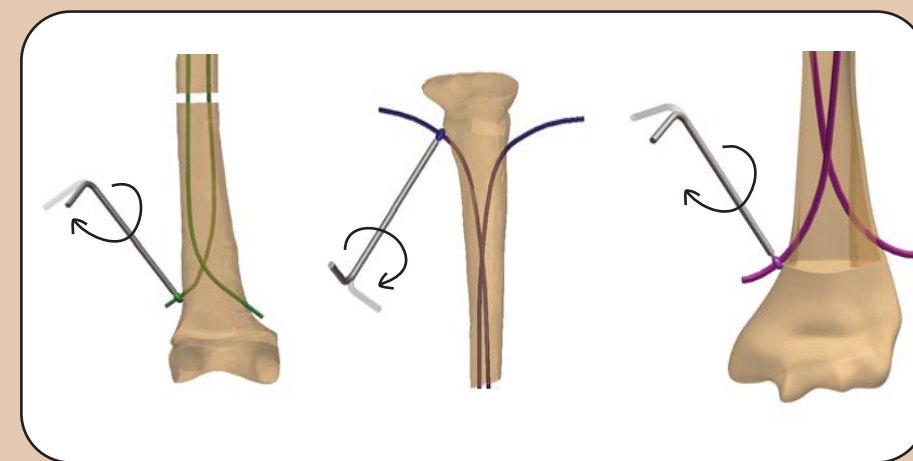
Preparation:

Reduce the fracture.
Choose appropriate nails.
Bend the nails in the same direction as the spatula's curve.



Second nail positioning:

A minimum of two nails are required to stabilize the fracture. Repeat the same procedure to insert a second nail through the opposite cortex with an opposite curve pattern.



Blockstop*:

Place the appropriate blockstop on the exposed nail tip. Once the blockstop is placed, screw the key until it breaks.



Metaphyseal incision:

Make the incision at the metaphyseal cortex.
Using the square awl, drill a hole with oblique angle approximately 1 cm above.



Nail cutting:

Bend the exposed portion of the Flex Nail until it is perpendicular to the bone.
Use the pin cutter, cut the exposed nail near the surface of the bone, or near the blockstop.



Nail introducing:

Use the T-handle chuck to introduce the nail into the medullary canal as far as the fracture site.
Push the nail after the fracture site and continue to the opposite part.



Nail extraction:

Once the fracture has healed, remove the blockstop and extract the Flex Nail using the locking pliers.