

for Medial Row Fixation in Rotator Cuff Repair

Surgical Technique





Quattro X Suture Anchor with BroadBand Tape

Quattro X Suture Anchors are made of PEEK (PolyEther-EtherKetone) and available in 5.5 mm and 6.5 mm sizes.

"Non-sliding" and "Sliding" BroadBand Tape options are also available.

"Non-sliding" Quattro X Anchors (CM-9255BG and CM-9265BG) are double-loaded with one (1) non-sliding (blue) and one (1) sliding (white/green) BroadBand Tape. The "Sliding" Quattro X Anchors (CM-9255BGS and CM-9265BGS) are double-loaded with two (2) sliding BroadBand Tape strands (blue and white/ green).

Potential "Non-Sliding" Anchor Techniques:

- Double Row Knotless Repairs
- Medial Pulley Technique
- Medial Rip Stop Technique

Potential "Sliding" Anchor Techniques:

- Single Row Repairs
- Double Row Knotted Repairs

Instructions for Use

Quattro X Anchor instruments should be used to ensure the proper insertion of the Quattro X Anchor.

Quattro X Suture Anchor Instruments

Soft Bone	5.5/6.5mm Quattro X Awl (CM-9200), Purple Handle	CHECK ARE CHATTED SHIPSE ANCHOR LIFE from
Hard Bone	5.5mm Quattro X Tap (CM-9201), Purple Handle	CHARGE "AR CHATTED. SITURE ANCHORS SON
	6.5mm Quattro X Tap (CM-9202), Purple Handle	CM 200 "AS CHATTRO" SITURE ANCHORES SITU



Site Preparation

Step 1

Use a shaver/burr/rasp to remove soft tissue directly overlying the insertion site.

Create Pilot Hole

Step 2

Place the Quattro X Anchor Awl (5.5/6.5mm) perpendicular to the bone at the medial edge of the anatomic footprint. Mallet the awl until the first horizontal laser-etch line is flush with the bone for the 5.5mm anchor and the second horizontal laser-etch line for the 6.5mm anchor.

Note: For hard bone, use the appropriate Quattro X Anchor Tap (5.5mm or 6.5mm) to create the pilot hole.



Insert Quattro X Anchor

Step 3

Insert the tip of the Quattro X Anchor into the prepared hole. Screw the Quattro X Anchor clockwise until the horizontal laser-etch line on the inserter shaft is flush with the bone surface.

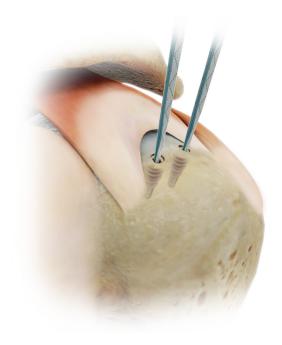
■ Note: For proper suture orientation, confirm that the vertical laser-etch line on the inserter shaft is facing or adjacent to the edge of the tissue.

Release Sutures

Step 4

Pull the tape strands completely out of the inserter handle and release from cleat.





Remove Inserter

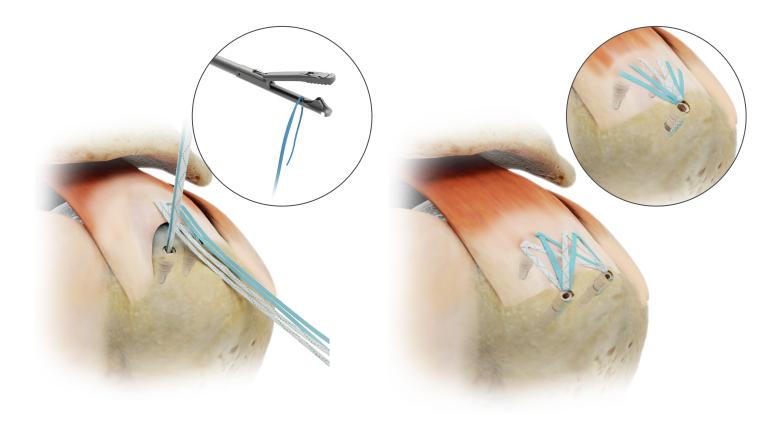
Step 5

Pull back slowly on the inserter handle to disengage the inserter shaft from the anchor.

Insert Second Medial Row Anchor (Optional)

Step 6

Repeat steps 1-5 to insert a second medial row Quattro X Anchor (if desired).



Pass Suture

Step 7

Pass the BroadBand Suture Tape limbs through the tissue using a Quattro GT Suture Passer (CM-9010GT).

Finalize Repair

Step 8

Complete the repair with the preferred technique.

For Arthroscopic Knot Tying:

Always tie the blue tape strand first when using the "sliding" anchors to allow both BroadBand tape strands to slide easily.

For Double Row Repairs:

Load up to six (6) BroadBand Tape limbs into a Ventix™ Link or Quattro Link Knotless Anchor to finalize the repair (refer to the Ventix Link and Quattro Link Anchor Surgical Techniques for complete implantation surgical instructions)

Ordering Information

Quattro X Suture Anchors with BroadBand Tape

Part Number	er Description	
CM-9255BG	5.5mm Quattro X Suture Anchor Double-Loaded with BroadBand Tape (Non-Sliding)	
CM-9265BG	6.5mm Quattro X Suture Anchor Double-Loaded with BroadBand Tape (Non-Sliding)	
CM-9255BGS	5.5mm Quattro X Suture Anchor Double-Loaded with BroadBand Tape (Sliding)	
CM-9265BGS	5BGS 6.5mm Quattro X Suture Anchor Double-Loaded with BroadBand Tape (Sliding)	

Quattro X Suture Anchor Reusable Instruments (Non-Sterile)

Part Number	Description
CM-9200	Awl, 5.5/6.5mm Quattro X Suture Anchor
CM-9201	Tap, 5.5mm Quattro X Suture Anchor
CM-9202	Tap, 6.5mm Quattro X Suture Anchor

Indications & Contraindications

INDICATIONS

The Quattro X Suture Anchors with BroadBand Tape are intended to be used for the reattachment of soft tissue to bone in rotator cuff repair.

CONTRAINDICATIONS

- Surgical procedures other than those listed in the INDICATIONS section.
- 2) Presence of infection.
- 3) Patient conditions including insufficient or immature hone
- 4) Insufficient blood supply or previous infections which may hinder the healing process.
- 5) Foreign body sensitivity. If material sensitivity is suspected, testing should be completed prior to device implantation.
- 6) The physician should carefully assess the device within immature bone.
- 7) The placement of this device should not impact or disrupt the growth plate.
- 8) Conditions which may limit the patient's ability or willingness to follow postoperative care instructions.

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