DI132B-EN (Rev L)	VIP™ ANTERIOR CERVICAL PLATE SYSTEM

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IMPORTANT INFORMATION ON THE VIP™ ANTERIOR CERVICAL PLATE SYSTEM

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For symbols glossary, please refer to www.globusmedical.com/eIFU

ENGLISH

OUTSIDE THE UNITED STATES ONLY

IMPORTANT INFORMATION ON THE VIP™ ANTERIOR CERVICAL PLATE SYSTEM

DESCRIPTION

The VIP™ Anterior Cervical Plate System consists of plates of various lengths to be used with either variable angle screws or fixed angle screws. Each VIP™ plate attaches to the anterior portion of the vertebral body of the cervical spine (levels C2-C7). VIP™ implants are composed of titanium alloy, as specified in ASTM F136, F1295.

INDICATIONS

The VIP™ Anterior Cervical Plate System is intended for anterior screw fixation to the cervical spine C2-C7 for the following indications: degenerative disc disease (as defined by neck pain of discogenic origin with degeneration of the disc confirmed by patient history and radiographic studies), trauma (including fractures), tumors, deformity (defined as kyphosis, lordosis, or scoliosis), pseudarthrosis, failed previous fusion, spondylolisthesis, and spinal stenosis.

WARNINGS

This device is not approved for screw attachment or fixation to the posterior elements (pedicles) of the cervical, thoracic, or lumbar spine.

The components of this system are manufactured from titanium alloy. Dissimilar metals in contact with each other can accelerate the corrosion process due to galvanic corrosion effects. Mixing of implant components with different materials is not recommended, for metallurgical, mechanical, and functional reasons.

Possible adverse effects which may occur include: failed fusion or pseudarthosis leading to implant breakage; allergic reaction to implant materials; device fracture or failure; device migration or loosening; decrease in bone density; pain, discomfort, or abnormal sensations due to the presence of the device; injury to nerves, vessels, and organs; venous thrombosis, lung embolism and cardiac arrest; and death.

These warnings do not include all adverse effects which could occur with surgery in general, but are important considerations particular to orthopedic implants. General surgical risks should be explained to the patient prior to surgery.

PRECAUTIONS

The implantation of screw and plate systems should be performed only by experienced spinal surgeons with specific training in the use of this system because this is a technically demanding procedure presenting a risk of serious injury to the patient. Preoperative planning and patient anatomy should be considered when selecting screw diameter and length.

Surgical implants must never be reused. An explanted metal implant must never be reimplanted. Even though the device appears undamaged, it may have small defects and internal stress patterns which could lead to breakage.

Correct handling of the implant is extremely important. Contouring of metal implants should be avoided where possible. If contouring is necessary, or allowed by design, the surgeon should avoid sharp bends, reverse bends, or bending the device at a screw hole. The operating surgeon should avoid any notching or scratching of the device when contouring it. These factors may produce internal stresses which may become the focal point for eventual breakage of the implant.

Metallic implants can loosen, fracture, corrode, migrate, cause pain, or stress shield bone even after a fracture has healed, particularly in young, active patients. While the surgeon must have the final decision on implant removal, we recommend that whenever possible and practical for the individual patient, fixation devices should be removed once their service as an aid to healing is accomplished. Implant removal should be followed by adequate postoperative management.

ATTENTION

See Warnings, Precautions and Potential Adverse Events sections of the insert entitled "Suggestions Concerning Orthopaedic Metallic Internal Fixation Devices" for a complete list of potential risks.

MRI SAFETY INFORMATION

MR

VIP™ Anterior Cervical Plate Systems are MR Conditional. A patient with this device can be safely scanned in an MR system meeting the following conditions:

- Static magnetic field of 1.5 Tesla and 3.0 Tesla only
- Maximum spatial field gradient of 3,000 gauss/cm (30 T/m) or less
- Maximum MR system reported, whole body averaged specific absorption rate (SAR) of 2 W/kg (Normal Operating Mode)
- Quadrature Body Coil only

Under the scan conditions defined above, the VIP™ Anterior Cervical Plate Systems are expected to produce a maximum temperature rise of less than or equal to 3.5°C after 15 minutes of continuous scanning.

The image artifact is not expected to extend beyond 55mm from the device when imaged with a gradient echo pulse sequence and a 3.0 Tesla MRI system.

CONTRAINDICATIONS

Certain degenerative diseases or underlying physiological conditions such as diabetes or rheumatoid arthritis may alter the healing process, thereby increasing the risk of implant breakage.

Mental or physical impairment which compromises a patient's ability to comply with necessary limitations or precautions may place that patient at a particular risk during postoperative rehabilitation.

Factors such as the patient's weight, activity level, and adherence to weight bearing or load bearing instructions have an effect on the stresses to which the implant is subjected.

PACKAGING

These implants and instruments may be supplied pre-packaged and sterile, using gamma irradiation. The integrity of the sterile packaging should be checked to ensure that sterility of the contents is not compromised. Packaging should be carefully checked for completeness and all components should be carefully checked to ensure that there is no damage prior to use. Damaged packages or products should not be used, and should be returned to Globus Medical. During surgery, after the correct size has been determined, remove the products from the packaging using aseptic technique.

The instrument sets are provided nonsterile and are steam sterilized prior to use, as described in the STERILIZATION section below. Following use or exposure to soil, instruments must be cleaned, as described in the CLEANING section below.

HANDLING

All instruments and implants should be treated with care. Improper use or handling may lead to damage and/or possible malfunction. Products should be checked to ensure that they are in working order prior to surgery. All products should be inspected prior to use to ensure that there is no unacceptable deterioration such as corrosion, discoloration, pitting, cracked seals, etc. Non-working or damaged instruments should not be used, and should be returned to Globus Medical.

CLEANING

All instruments that can be disassembled must be disassembled for cleaning. All handles must be detached. Instruments may be reassembled following sterilization. The instruments should be cleaned using neutral cleaners before sterilization and introduction into a sterile surgical field or (if applicable) return of the product to Globus Medical.

Cleaning and disinfecting of instruments can be performed with aldehyde-free solvents at higher temperatures. Cleaning and decontamination must include the use of neutral cleaners followed by a deionized water rinse. Note: certain cleaning solutions such as those containing formalin, glutaraldehyde, bleach and/or other alkaline cleaners may damage some devices, particularly instruments; these solutions should not be used.

The following cleaning methods should be observed when cleaning instruments after use or exposure to soil, and prior to sterilization:

1. Immediately following use, ensure that the instruments are wiped down to remove all visible soil and kept from drying by submerging or covering with a wet towel.
2. Disassemble all instruments that can be disassembled.
3. Rinse the instruments under running tap water to remove all visible soil. Flush the lumens a minimum of 3 times, until the lumens flush clean.
4. Prepare Enzol® (or a similar enzymatic detergent) per manufacturer's recommendations.
5. Immerse the instruments in the detergent and allow them to soak for a minimum of 2 minutes.
6. Use a soft bristled brush to thoroughly clean the instruments. Use a pipe cleaner for any lumens. Pay close attention to hard to reach areas.
7. Using a sterile syringe, draw up the enzymatic detergent solution. Flush any lumens and hard to reach areas until no soil is seen exiting the area.
8. Remove the instruments from the detergent and rinse them in running warm tap water.
9. Prepare Enzol® (or a similar enzymatic detergent) per manufacturer's recommendations in an ultrasonic cleaner.
10. Completely immerse the instruments in the ultrasonic cleaner and ensure detergent is in lumens by flushing the lumens. Sonicate for a minimum of 3 minutes.

11. Remove the instruments from the detergent and rinse them in running deionized water or reverse osmosis water for a minimum of 2 minutes.
12. Dry instruments using a clean soft cloth and filtered pressurized air.
13. Visually inspect each instrument for visible soil. If visible soil is present, then repeat cleaning process starting with Step 3.

CONTACT INFORMATION

Globus Medical may be contacted at 1-866-GLOBUS1 (456-2871). A surgical technique manual may be obtained by contacting Globus Medical.

STERILIZATION

These implants and instruments may be available sterile or nonsterile.

Sterile implants and instruments are sterilized by gamma radiation, validated to ensure a Sterility Assurance Level (SAL) of 10^{-6}. Sterile products are packaged in a heat sealed, double foil pouch. The expiration date is provided in the package label. These products are considered sterile unless the packaging has been opened or damaged.

Nonsterile implants and instruments have been validated to ensure an SAL of 10^{-6}. The use of a wrap is recommended, per the Association for the Advancement of Medical Instrumentation (AAMI) ST79, *Comprehensive Guide to Steam Sterilization and Sterility Assurance in Health Care Facilities*. It is the end user's responsibility to use only sterilizers and accessories (such as sterilization wraps, sterilization pouches, chemical indicators, biological indicators, and sterilization cassettes) that are designed for the selected sterilization cycle specifications (time and temperature).

When using a rigid sterilization container, the following must be taken into consideration for proper sterilization of Globus devices and loaded graphic cases:

- Recommended sterilization parameters are listed in the table below.
- Only rigid sterilization containers for use with pre-vacuum steam sterilization may be used.
- When selecting a rigid sterilization container, it must have a minimum filter area of 176 in^2 total, or a minimum of four (4) 7.5in diameter filters.
- No more than one (1) loaded graphic case or its contents can be placed directly into a rigid sterilization container.
- Stand-alone modules/racks or single devices must be placed, without stacking, in a container basket to ensure optimal ventilation.
- The rigid sterilization container manufacturer's instructions for use are to be followed; if questions arise, contact the manufacturer of the specific container for guidance.
- Refer to AAMI ST79 for additional information concerning the use of rigid sterilization containers.

For implants and instruments provided NONSTERILE, sterilization is recommended (wrapped or containerized) as follows:

Method	Cycle Type	Temperature	Exposure Time	Drying Time
Steam	Pre-vacuum	132°C (270°F)	4 minutes	30 minutes
Steam	Pre-vacuum	134°C (273°F)	3 minutes	30 minutes

These parameters are validated to sterilize only this device. If other products are added to the sterilizer, the recommended parameters are not valid and new cycle parameters must be established by the user. The sterilizer must be properly installed, maintained, and calibrated. Ongoing testing must be performed to confirm inactivation of all forms of viable microorganisms.