







Complete set of sizes for open, mis and deformity procedures

Self-tapping screw for insertion even without tapping

Great mechanical properties

Double thread for improved sealing

Sophisticated yet compact instrumentation

Cannulated screw for injection of cement or bone substitute

Sterile packaging

# Stabilization system thoracolumbar vertebral

Misano is the first stabilization system thoracolumbosacral, totally made of titanium, which allows the use of a single pedicle screw for the treatment of all degenerative, traumatic, and deformity pathologies. The self-tapping screw can be inserted without the aid of the tap, has a specific two-principle thread at the distal level that ensures rapid implantation, which then transitions to four-principles while also ensuring a high pedicle seal. The screws are also always cannulated to allow insertion with the aid of a guide wire and fenestrated to allow cementing.

The Misano thoracolumbosacral stabilization system from Clover Orthopedics consists of single- and polyaxial pedicle screws, clamping nuts, straight and pre-curved titanium and cobalt-chrome bars, a wide range of hooks, offsets, connectors and cross-links, and is used to facilitate a solid arthrodesis of the treated portion of the spine.









Appropriately used, the Misano thoracolumbar-sacral stabilization system from Clover Orthopedics is indicated to promote the development of solid thoracic, lumbar and sacral arthrodesis.

It is recommended in cases of spinal deformity, degenerative disc pathology, traumatic vertebral fractures, vertebral tumors, spinal stenosis, spondylolisthesis, pseudoarthrosis, and previous unsuccessful attempts at vertebral arthrodesis.

Any surgical decisions other than those recommended by the manufacturer are at the discretion and responsibility of the surgeon.

Do not use 4.5 mm diameter screws in the lumbar and lumbosacral spine, and do not couple 4.5 mm diameter screws with CoCr rods.

### **Features**









## #LESSISMORE



#### INSTRUMENTS



Clover has invested heavily in instrument design and care with the goal of creating ergonomic, functional, and compact instrumentation. Designed for the surgeon and his team.

TRAY 1



1 CEMENT NEEDLE ADAPTER	MSN-KOSSOO200S	8 TISSUE DISSECTOR	MSN-TOSS00000S
2 DUAL LEAD CAP SCREWDRIVER	MSN-I155285255	9 PIPE CLEANER	MSN-J2SS00000S
3 REAMING AWL	MSN-A1SS03507S	10 TULIP ALIGNMENT	MSN-KOSS00055S
4 SCREW TAB REMOVER	MSN-Z2SS00002S	11 RATCHETING T HANDLE	MSN-H155001005
5 GUIDE WIRE TROCAR	MSN-KONT00500S	12 RATCHETING HANDLE	MSN-H0SS00100S
6 TAP 4.5MM	MSN-JOS S00045S	13 DINAMOMETRIC T HANDLE 9NM	MSN-H155000905
TAP 5.5MM	MSN-JOSS00055S	14 PIVOT 2	MSN-Z15S000025
TAP 6.5MM	MSN-J0SS00065S	15 PIVOT 1	MSN-Z1SS00001S
TAP 7.5MM	MSN-JOSS000755	16 SUPERIOR RING	MSN-K2SS00015S
7 COUNTER TORQUE HANDLE	MSN-H255000005	17 SLIDING RING	MSN-K2SS00025S



#### INSTRUMENTS

TRAY 2



18 MIS GAUGE	MSN-K3SS00138S	24 DILATOR N.2	MSN-L2SS14409S
19 MIS ROD PUSHER	MSN-P155000015	25 DILATOR N.1	MSN-L0SS20002S
20 MIS TROCAR	MSN-A155029225	26 DILATOR N.3	MSN-L2SS11514S
21 MIS COMPRESSOR	MSN-N0SS00002S	27 MIS CALIPER	MSN-M1SS00000S
22 ROD BENDER	MSN-F0SS00000S	28 DUAL LEAD MIS SCREWDRIVER	MSN-1255235205
23 MIS ROD HOLDER	MSN-D15500000	29 CAP HOLDER	MSN-10SS30025S



#### **INSTRUMENTS**

CEMENT NEEDLE ADAPTER	MSN-KOSS00200S	CAP SCREWDRIVER	MSN-I155285255	
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DUAL LEAD MIS SCREWDRIVER	MSN-12SS23520S	GUIDE WIRE TROCAR	MSN-KONT00500S	
COUNTER TORQUE HANDLE	MSN-H2SS00000S	TAP 4.5MM	MSN-JOSS00045S	
	C			
TAP 5.5MM	MSN-JOSS00055S	TAP 6.5MM	MSN-JOSS00065S	
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TAP 7.5MM	MSN-JOSS00075S	TAP 8.5MM	MSN-JOSS00085S	
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#### **INSTRUMENTS**





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#### **INSTRUMENTS**

 PIVOT 1
 MSN-Z1SS00001S
 PIVOT 2
 MSN-Z1SS00002S

 SCREW TAB REMOVER
 MSN-Z2SS0002S
 MSN-Z2SS0002S







#### Preparation of the pedicle

After locating the access point, position the **trocar** and through radiographic control proceed to the inside of the pedicle.

Once the appropriate depth has been reached remove the core and handle, and insert the **guide wire** ensuring that it intercepts the vertebral body to ensure minimum anchorage to the vertebral body.

Then remove the trocar making sure not to move the guide wire.

Continue with the insertion of **dilator tube no. 1** and then **dilator tube no. 2** and **dilator tube no. 3**, which, thanks to the toothed termination allows anchorage to the articular process to prevent unwanted translation or displacement during manoeuvres.





Then remove **dilator tube No. 1**, checking that the guide wire remains in place, and should the operator wish to do so, prepare the screw housing with the **tapping tool**, which should be one size undersized in diameter from that of the screw you intend to place.

In case it is deemed appropriate, after removing **dilator tube No. 2** use the **reaming awl** to enable better positioning of the screw.



#### Screw assembly

Next proceed to the assembly of the screw.

Hook the **MIS screwdriver** onto the **ratcheting handle**.

Next assemble the screw to the **screwdriver** by inserting it inside the tulip and turn the ferrule clockwise to make the final tightening.



#### Screw insertion

Proceed to insert the screw inside the stalk following the **guide wire** and tighten.

Then slide out the **screwdriver**, turning counterclockwise the ferrule previously used to tighten the screw, remove the **guide wire** and **dilator tube No. 3**.

Insert the **sliding ring** along the tulip of the screw to prevent premature breakage of the screw, and if deemed appropriate, also insert the **superior ring** to prevent the screws from interfering with each other during subsequent operations.

Repeat the same operations for the insertion of subsequent screws.





#### Cementing

Connect the **cement needle adapter** by inserting its tip inside the screw, and then turn the guide ring clockwise to make the final tightening.

After checking that the two elements are firmly seated together, proceed to introduce the disposable bone filler to cement the screw.

Before injecting the cement, make sure that the bone filler has come to rest against the screw stem.







#### Rod insertion

After positioning the screws, perform the measurement of the distance between them using appropriate **MIS caliper** in order to choose the appropriate bar.

Please note that the gauge shows the actual measurement between the screw heads, so it is recommended to insert a bar with a length at least 5 mm longer than that shown on the **MIS caliper**.

If it is considered appropriate, use the **tissue dissector** to create the necessary space for inserting the bar.

Connect the bar to the **MIS rod holder** by inserting the hexagonal part of the bar into the appropriate hole on the gauge and secure it to the gauge by turning the locking crown clockwise.

If necessary, the bar can be bent and shaped using the **bar bending pliers**.

Then insert the bar by passing inside the tulips previously aligned according to a hypothetical sagittal plane.





#### Inserting the tightening nut

Using the **rod pusher** you can both check that the rod is seated correctly and push the rod down.

When you are certain that the bar has been properly seated in all screws, insert the nuts with the appropriate nut locators.





Once the nuts are in place, attach the **ratcheting handle** to the **cap screwdriver** and tighten the locknuts until the rod is pushed into the tulips.

Once the rod is secured to the screws, pull the rings out of the tulips.

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#### Compression and distraction

Cover the tulips with **MIS gauge** and use **pivot 1** or **pivot 2** as the fulcrum of action in the center of the cannulas-after securing them to a handle.

To perform a compression, use the **MIS compressor** and compress below the **pivot**.

To perform a distraction, use the **MIS compressor** and compress above the **pivot**.





#### Final tightening

With the help of the **counter torque handle** connected to the **MIS gauge** make the final closure with the **9Nm dynamometric T-handle** assembled to the **cap screwdriver**.

Pull the **MIS gauge** out of the tulips and then unscrew the **rod holder** using the locking crown and then remove the gauge.

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#### Tulip removal

Using the **screw tab removal** coupled with a **handle**, hook each individual tulip and then pry it loose from the screw cup.

To avoid displacements or small deformations of the system caused by the force required to break the tulips, a **counter torque** coupled with a handle can be used.

MONOAXIAL SCREW CANNULATED - FENESTRATED	D5.5 D6.5 D7.5 D8.5		FROM L30 TO L55 FROM L30 TO L55 FROM L30 TO L55 FROM L30 TO L55		EV04EN 4 02 25
POLIAXIAL SCREW CANNULATED - FENESTRATED	D4.5 D5.5 D6.5 D7.5 D8.5 D9.5		FROM L25 TO L40 FROM L30 TO L55 FROM L30 TO L55 FROM L30 TO L90 FROM L30 TO L90 FROM L45 TO L90	misano monza	
TITANIUM PRECURVED ROD	D5.5		FROM L25 TO L100	11101120	
TITANIUM ROD	D5.5		FROM L110 TO L500	evo	E
CO-CR ROD	D5.5		FROM L110 TO L500		
CLAMPING CAP FOR SCREWS AND HOOKS				dixi	
DOMINOES				٥	
LONGITUDINAL CONNECTION ELEMENT				recon-l	
MODULAR CROSSLINK			S - M - L - XL		
ANGLED OFFSET			FROM L20 TO L60	rally	
OFFSET			FROM L20 TO L60		
LUMBAR WIDE HOOK			FROM SIZE 7 TO SIZE 11		
PEDICLE HOOK			FROM SIZE 5 TO SIZE 9		
TORACHIC LAMINAR HOOK			FROM SIZE 5 TO SIZE 9		
OLBIQUE HOOK - DX/SX					
OFFSET HOOK - DX/SX					
LUMBAR NARROW HOOK			FROM SIZE 7 TO SIZE 11		



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