

# Hammertoe

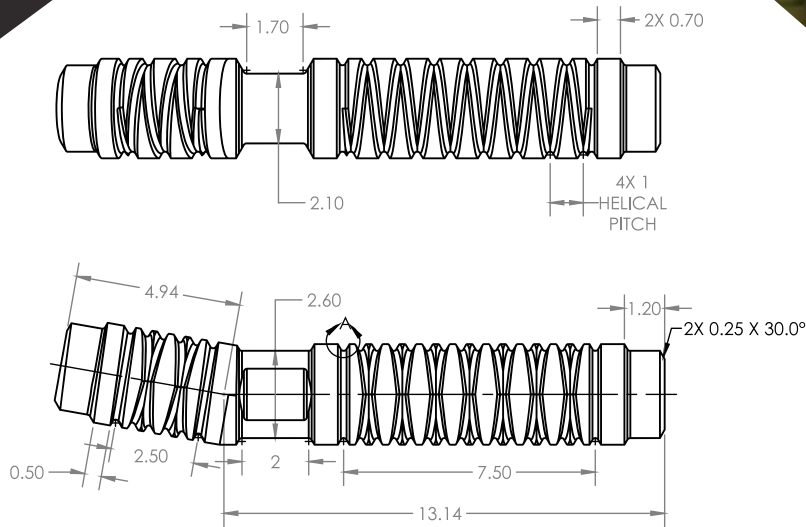
PUT YOUR BEST FOOT FORWARD

## Overview

The SLR Hammertoe has been designed to provide a biological solution to the hammertoe pathology. The Hammertoe is made from Cortical bone and comes package sterile in normal saline. There is no need for any post-operative hardware removal. There are four configurations to choose from (2.5 x 16 straight and 10 degree angled and 3.0 x 18 straight and angled). The graft is easily trimmed to meet various anatomy, and can be used in other small bone osteotomies. The Hammertoe offers flexibility while maintaining strength. It does not come as a kit, which allows the surgeon to decide how to insert the device, and keeps costs down for small ASC and rural hospitals. The concept is to provide future configuration options if the surgeon desires for other uses.

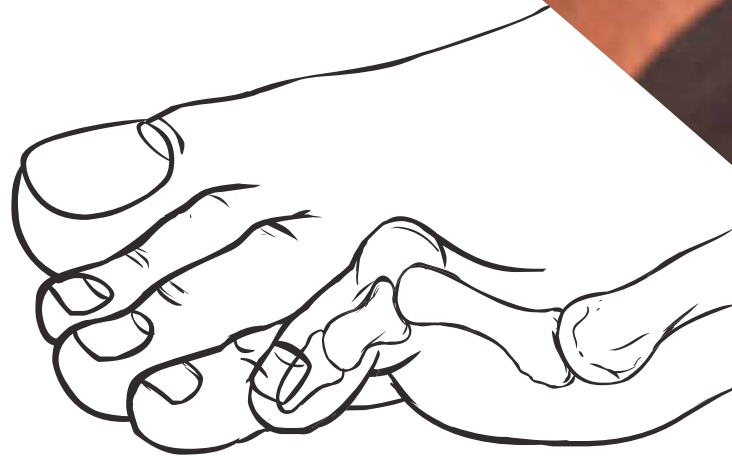
The Hammertoe has a designed in Depth Stop feature which allows the surgeon to understand where the implant is. Raised ridges allow for 360° contact with the inner walls of the canal.





## Surgical Technique

Surgical technique is at the discretion of the surgeon. The implant itself does not demand a special technique for a standard PIP fusion. The PIP joint is prepared by using 0.3mm undersized drill bit in order to secure a press fit of the implant into the canal. The 2.5mm implant should use a 2.2 drill bit, and the 3.0mm implant should use a 2.7mm drill bit. Solid or cannulated drill bits do not alter the canal or alter the insertion of the implant. The implant can be inserted with Straight or Kocher forceps. The forceps should be parallel with the implant for proximal insertion, and then adjusted to grab the implant at 90° for approximation of the distal toe.



## Follow-Up

The SLR Hammertoe sterile allograft product does not allow for immediate return to normal activity. Normal weight bearing and activity level must be determined by the surgeon, giving enough time for the fusion and healing time to have completed.