

SCORE® REVISION

Revision Total Knee Arthroplasty
Cemented



Surgical
Technique
With Conventional
Instrumentation
Primary cases

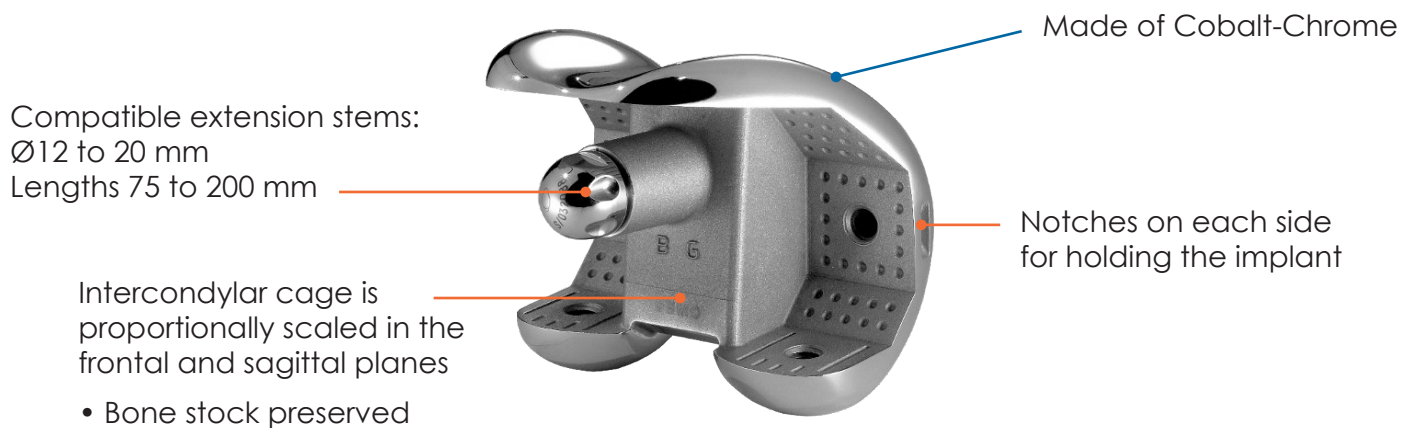
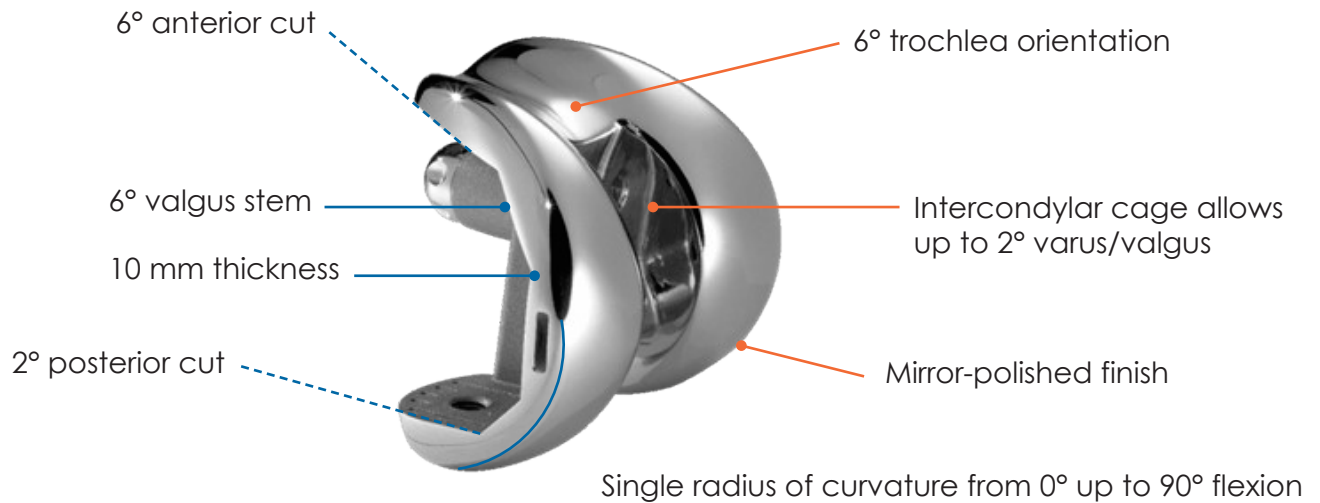
AMPLITUDE®

SCORE® REVISION FOR PRIMARY CASES

- The SCORE® Revision is a revision total knee arthroplasty (TKA) system that can be used in primary cases.
- This revision TKA with mobile bearing is intended to replace and/or reconstruct the knee joint without the PCL for revision of UKA, osteotomy, TKA cases and in primary cases with large deformity.
- Frontal and sagittal joint stability are ensured by:
 - Complete congruency from 0° to 60° flexion
 - Intercondylar cam and cage mechanism
- The SCORE® Revision is available as a cemented implant.

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FEMORAL COMPONENT



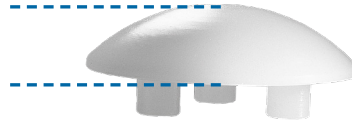
Extension stems and distal wedges:



SCORE® REVISION FOR PRIMARY CASES

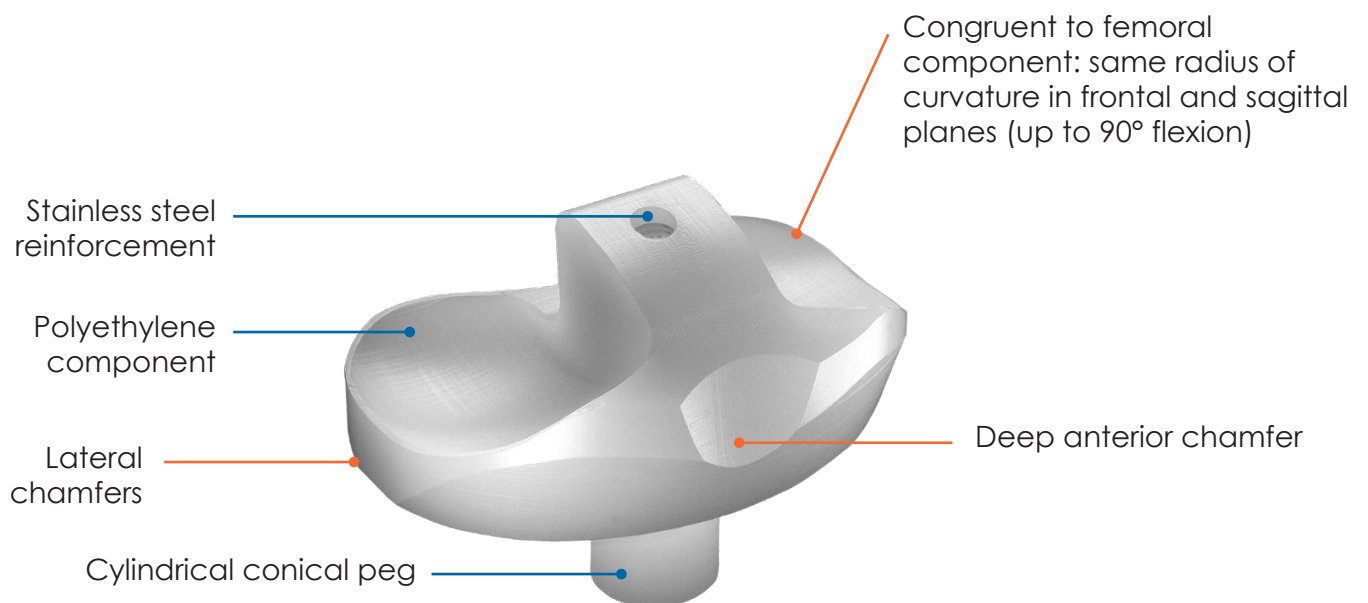
Patellar resurfacing implant - cemented

Thickness: 8 mm



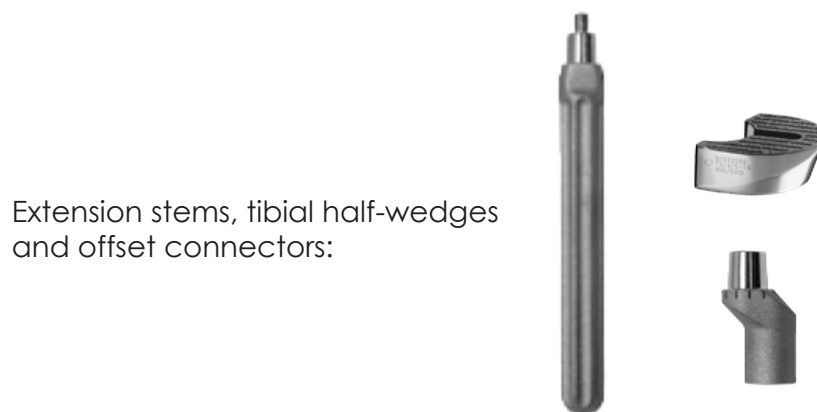
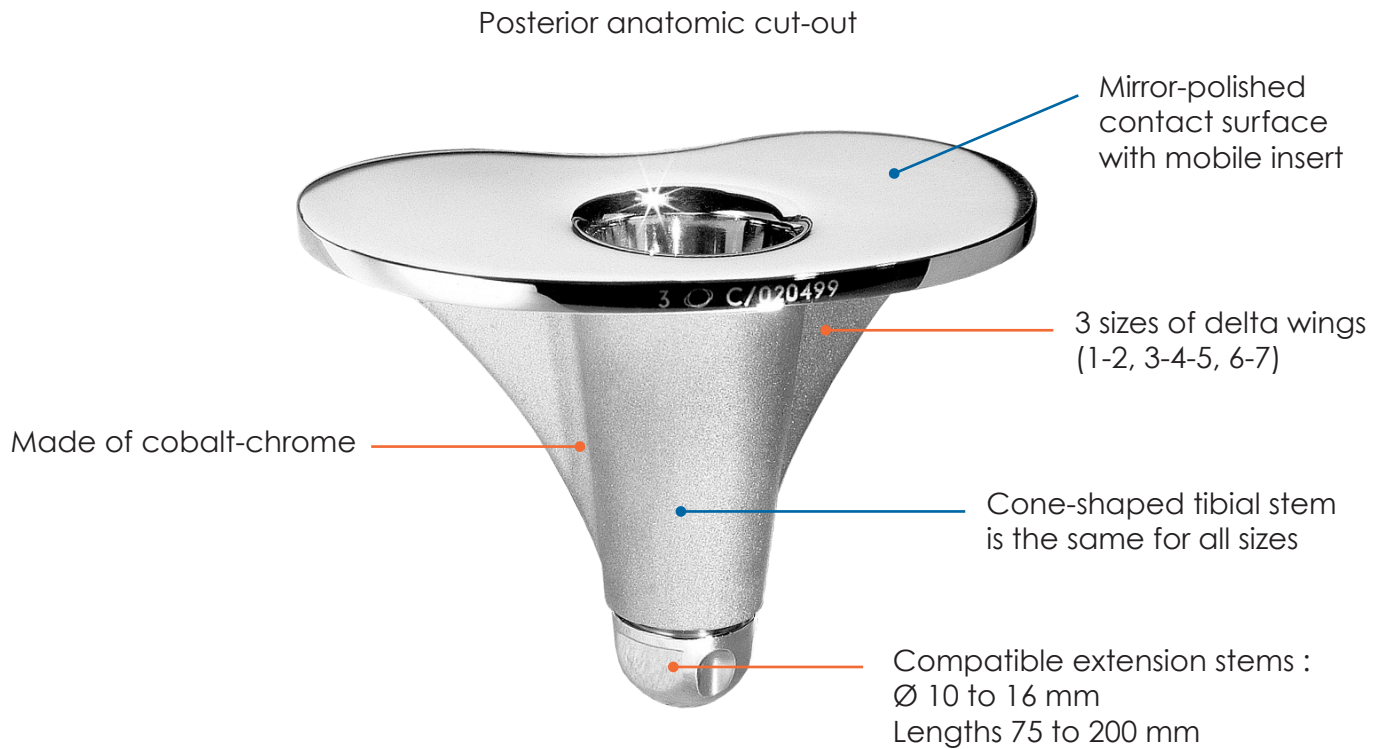
TIBIAL COMPONENTS

Mobile tibial insert:



TIBIAL COMPONENTS

Tibial baseplate



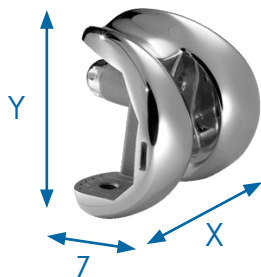
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GAMME

- Femoral components:**

- Cemented: 4 sizes

AP difference between sizes: 5 mm



	A	B	C	D
ML (X)	61.6	67.2	72.8	78.4
AP (Y)	54.8	59.8	64.8	69.8
(Z)	50.6	55.2	59.8	64.4

- Extension stems:

- Ø 12 to 20 mm
- Lengths 75 to 200 mm



- Distal femoral wedges: 4 or 8 mm thickness

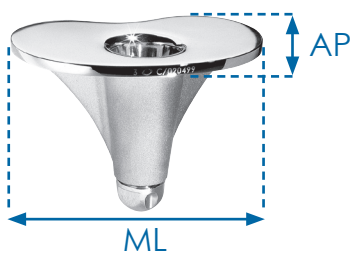


- Patellar components:**

- Patellar resurfacing implant - cemented: Ø 30, 33 and 36 mm

- Tibial components:**

- Cemented Baseplates: 7 sizes



ΔAP: 2.3 mm

ΔML: 3.5 mm

	1	2	3	4	5	6	7
AP	41.4	43.6	45.9	48.2	50.5	52.8	55
ML	63.5	67	70.5	74	77.5	81	84.5

- Extension stems:

- Ø 10 to 16 mm
- Lengths 75 to 200 mm



- Tibial half-wedges: 5, 10 or 15 mm thickness



- Offset connectors: 2, 4 or 6 mm

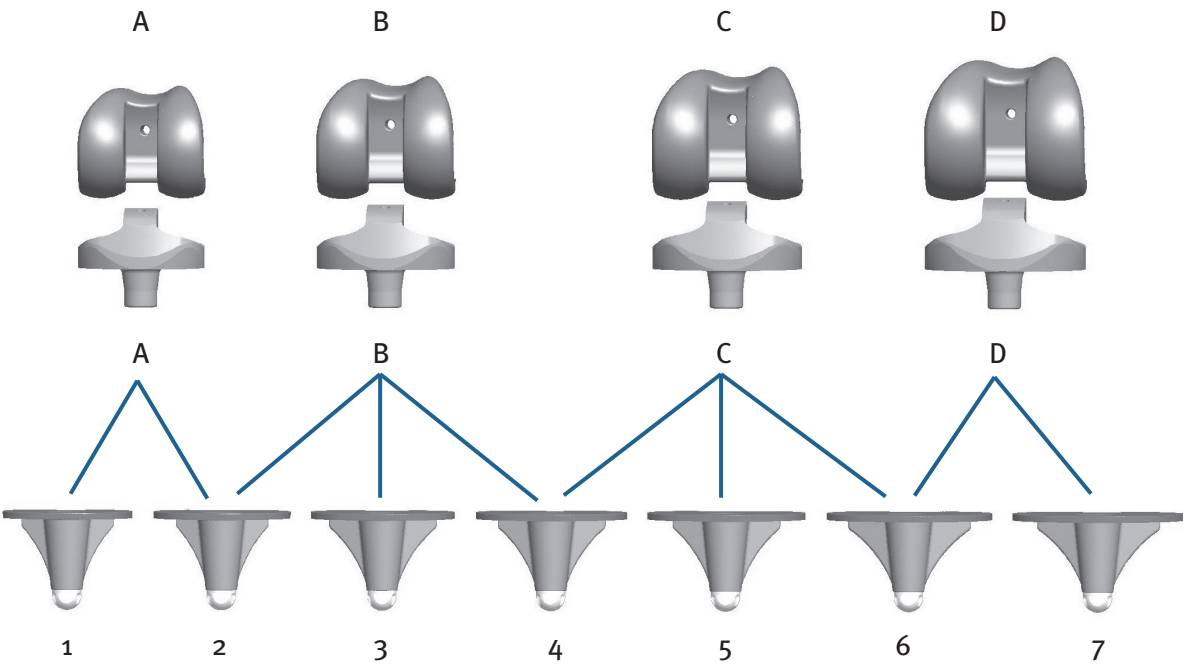


- Inserts: 4 sizes

5 thicknesses (10, 12, 14, 16 and 20 mm)

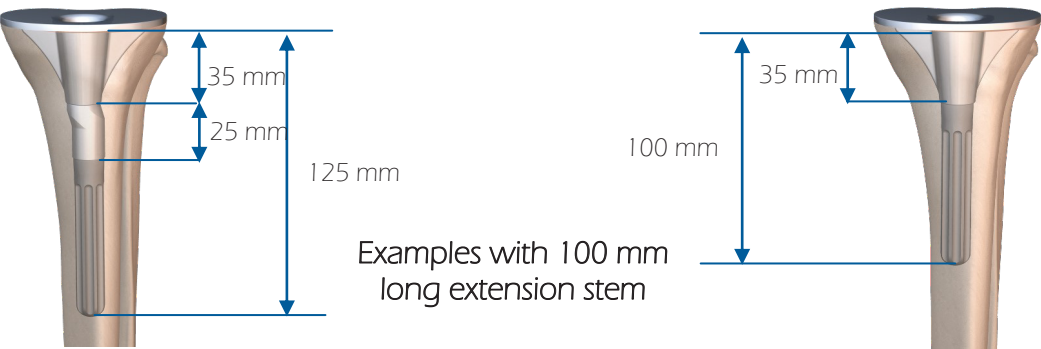


COMPONENT COMPATIBILITY



TIBIAL AND FEMORAL EXTENSION STEMS

Length	Diameter					
	10	12	14	16	18	20
75	10	12	14			
100	10	12	14	16	18	20
150	10	12	14	16	18	20
200		12	14	16	18	20
	Tibia		Tibia and Femur			Femur



Not all devices presented in this surgical technique are necessarily registered in your country. Please contact your Amplitude representative to find out if they are available.

PLANNING

Radiographs and templates are used to determine the following:

On the tibia:

- Choice between intra- or extramedullary alignment method
- Lateral and A/P entry point for the intramedullary alignment guide
- Match between the tibial stem and metaphysis (e.g. following osteotomy)
- Presence of osteophytes
- Magnitude of wear in compartment
- Potential need for a tibial extension stem
- Estimated tibial baseplate size and insert thickness

On the femur:

- Lateral and A/P entry point for the intramedullary alignment guide
- Degree of native femoral valgus
- Presence of posterior osteophytes
- Femoral component size

On the patella:

- Wear in the patellofemoral joint
- Thickness, overall shape, tilt and height of patella
- Level and orientation of patellar bone cut
- ML position of patellar implant

NOTE

The provided templates have a 1:1 scale;
other scaling options are available
upon request

REMINDER

The purpose of this surgical technique description is to provide instructions on how to use the instrumentation properly. The surgeon is fully responsible for choosing and performing the approach and surgical technique

INTRAMEDULLARY TIBIAL AIMING



1. Locating the medullary canal:

- Hyperflex the knee and dislocate the tibia forward. One blunt and two sharp retractors are supplied.
- Based on the preoperative plan, make a hole in the middle of the medullary canal using the step drill bit.
- Place the 400-mm long intramedullary rod on the T-handle and insert it into the canal; the landmark must always be visible.

NOTE

If the rod cannot be inserted, use the 250 mm intramedullary rod instead

NOTE

If a tibial extension stem will be used, the next step is to gradually bore out the medullary canal using reamers assembled with the universal handle

2. Positioning the tibial instrumentation:

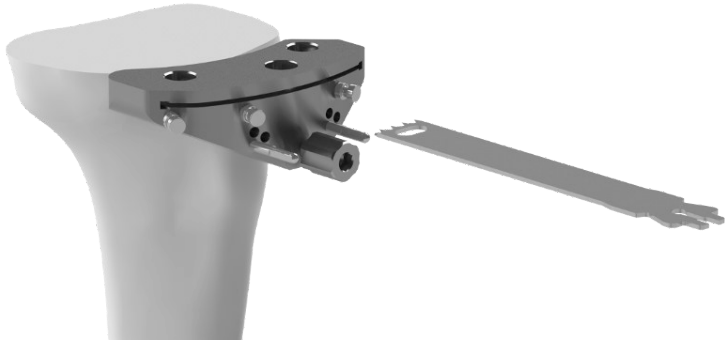
- Attach the aiming column and resection guide (left or right) together onto the bracket.
- Place these components on the intramedullary rod.
- Before impacting the pegs, set the rotation of the bracket on the tibia.
- Set the resection height with the stylus as follows:
 - healthy side (10 mm cut relative to this reference)
 - worn side (same level as exit of saw blade)
 - for other resection heights, use the 2 mm markings on the aiming column.
- Check the level of the bone cut using the resection gauge. This gauge can be used throughout the procedure on different cuts.



NOTE

If a tibial half-wedge will be required, use the revision tibial resection guide (which is not compatible with navigation)

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3. Tibial cut:

- Use a surgical drill to insert two pins in the 0 mm holes.
- The +2 and +4 positions will be used if the tibia needs to be recut.
- Use the slap hammer to remove the intramedullary or extramedullary alignment rod.
- Place the resection guide flush with the anterior tibial cortex.
- Stabilise the guide by inserting three headed pins in the converging holes in the guide.
- Make the tibial cut.
- Remove the headed pins using the pin extractor.
- Slide the resection guide off the pins but leave the pins in place in case recutting is required.



NOTE

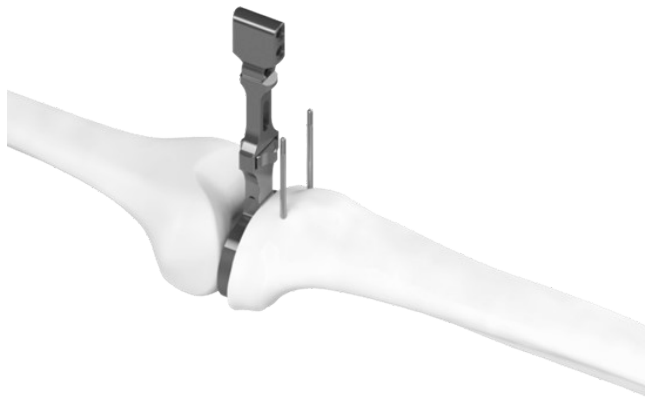
Use a medium AMPLITUDE saw blade to make the tibial cuts and those of the tibial half-wedges (slots at 5/10/15 mm) if needed

NOTE

For the revision tibial resection guide, the headed pins must be placed as close as possible to the main cutting slot. If doing a cut for a half-wedge, use the holes immediately below it

CHECKING THE FLEXION AND EXTENSION GAPS

- Verify the gaps with a 10 mm spacer mounted on the universal handle; the extramedullary alignment rods can be assembled with this handle.
- The 2 mm or 4 mm spacers can be added to the 10 mm spacer to further refine ligament tension.



FEMORAL AIMING

1. Intramedullary femoral aiming:

- Flex knee 90°.
- Remove any peripheral osteophytes.
- Clear out tissues to access the anterior cortex.
- Based on the preoperative planning, locate the entry point on the femoral medullary canal, and drill a hole into it using a step drill bit.
- Place the 400 mm long intramedullary alignment rod on the handle, and insert it into the canal; the landmark must always be visible.

NOTE

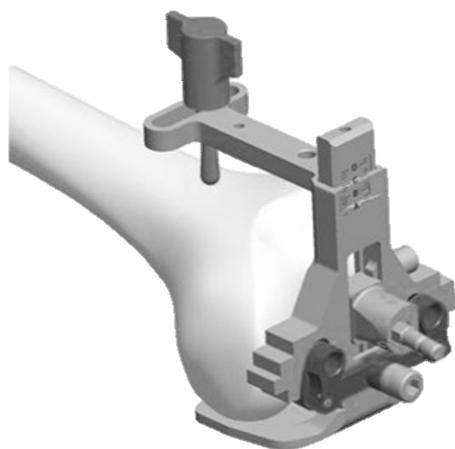
If the rod cannot be inserted, use the 250 mm intramedullary rod instead

NOTE

If an extension stem will be used, gradually ream the medullary canal using reamers mounted on the universal handle

2. Femoral A/P measurement:

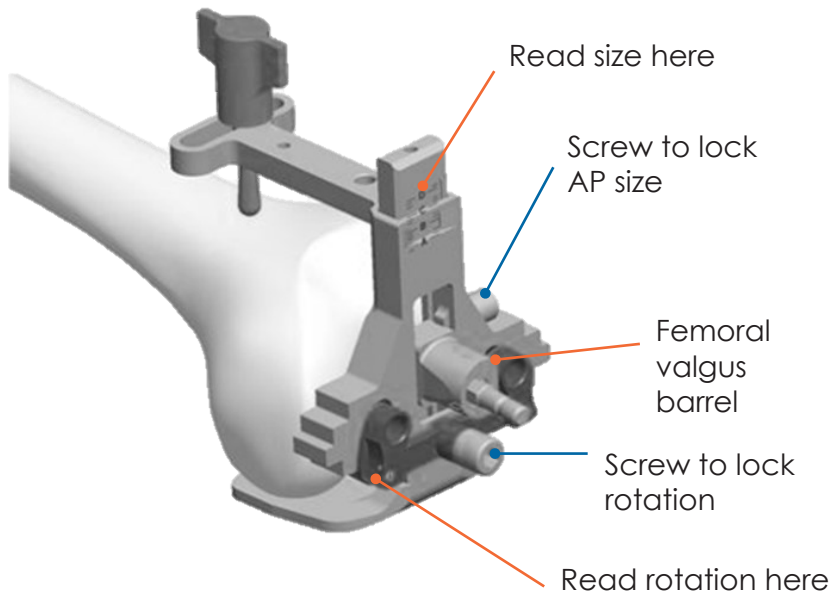
- Position the femoral measurement gauge with the 6° valgus barrel.
- Ensure it touches at least one of the distal condyles.
- Make sure the posterior fork rests against the two posterior condyles.
- Place the femoral stylus on the anterior cortex, moving it side to side as needed to select the desired reference point.
- Lock the AP adjustment by screwing the lateral screw with the H5 screwdriver.
- Place the 7 mm spacer between the gauge's posterior fork (3 mm thick) and the tibial cut to simulate a 10 mm thick tibial cut.
- The 2 mm or 4 mm spacers may be added to the 7 mm spacer to further refine the ligament tension.
- Evaluate the laxity with the knee flexed.



NOTE

In patients with a non-reducible flexion deformity, a **distal femoral precut** can be made (see page 28)

FEMORAL AIMING



3. Femoral component size selection:

- Read the size from the markings.

There are two possible scenarios:

1 : The reading corresponds to an exact size:

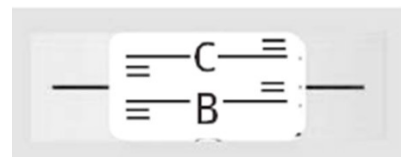
The anterior and posterior reference points will be used simultaneously. The thickness of the bone cut will be equal to the thickness of the implant: 10 mm posteriorly.

- Fully tighten the side screw with the screwdriver

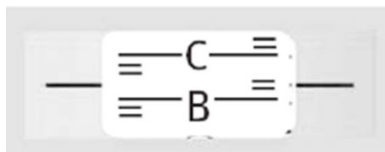
2 : The reading is between two sizes:

The next larger or smaller size can be used with either the anterior or posterior reference point.

Reading is between two sizes



Reading is between two sizes



For an anterior reference point:

- The gauge's posterior fork must rest against the posterior condyles.
- The femoral stylus must touch the anterior cortex.
- The measured gap (mm) is then factored into the posterior condyle cut.

For example, in the scenario on the previous page where the reading corresponds to **Size B + 2 mm** or **Size C - 3 mm**:

- **Smaller size selected** = 12 mm posterior cut (10 mm implant thickness)
Increased flexion gap.
- **Larger size selected** = 7 mm posterior cut (10 mm implant thickness)
Reduced flexion gap.

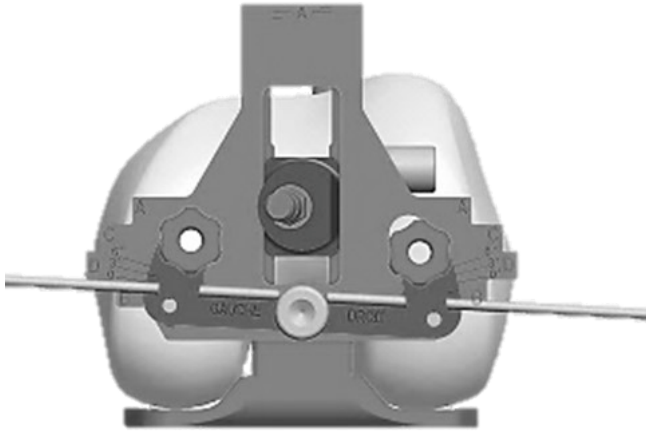
For an posterior reference point:

- Remove the femoral stylus but leave the gauge's posterior fork against the posterior condyles.
- Place the laser marking at the chosen size.
- Fully tighten the side screw with the screwdriver.
- The measured gap (mm) is then factored into the anterior cut.

For example, in the scenario on the previous page where the reading corresponds to **Size B + 2 mm** or **Size C - 3 mm**:

- **Smaller size selected** = 10 mm posterior cut (10 mm implant thickness)
Anterior cut will be 2 mm lower due to the 6° anterior cut.
Flexion gap maintained; loads on patella reduced.
- **Larger size selected** = 10 mm posterior cut (10 mm implant thickness)
Anterior cut will be 3 mm higher.
Flexion gap maintained; loads on patella increased.

FEMORAL AIMING



4. Setting the femoral rotation:

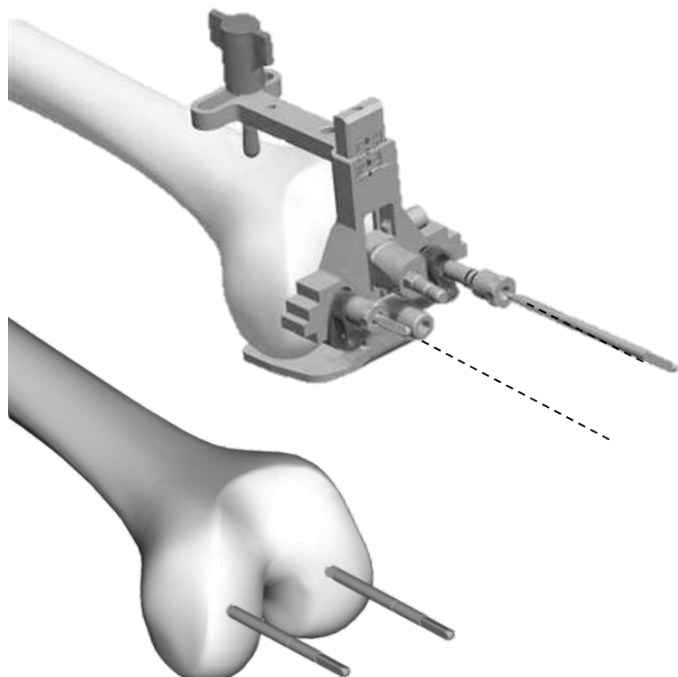
- The rotation can be determined using various anatomical and/or ligament-based landmarks.
- Anatomical landmarks:
 - Transepicondylar axis,
 - Posterior condylar axis,
 - Anteroposterior axis (Whiteside's line).
- Ligament-based landmarks:

NOTE

An optional gap balancing simulator is available upon request (see page 29)

- Once the rotation has been determined, place the drill guides in the sizing guide at the appropriate locations (0°, 3° or 6°) for the operated side).
- Fully tighten front screw with the screwdriver.

FEMORAL CUTS



1. K-wire insertion:

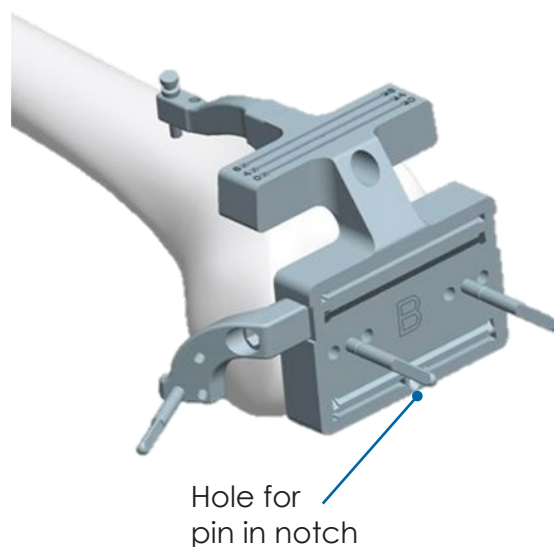
- Use the surgical drill to drive two Ø4 mm K-wires into the drill guides placed on the sizing guide until the landmark is reached.
- Use the universal or AO snap-in connector to connect the K-wires to the drill.
- Remove the two drill guides, the intramedullary rod, and the sizing guide.

NOTE

The universal snap-in connectors can also be used with the universal T-handle

2. Placement of 5-in-1 resection guide and cuts:

- With the H5 screwdriver, secure the anterior stabiliser and at least one of the lateral anchors onto the 5-in-1 resection guide of the selected size.
- Place the resection guide on the K-wires.
- Make sure the guide touches at least one of the distal condyles.
- To secure the construct, put two 50-mm long headed pins into the lateral anchors and one pin (unicortical) into the anterior stabiliser. A threaded K-wire can be used in the notch instead of the anterior stabiliser.
- Make the five cuts:
 - Anterior
 - Posterior
 - Anterior chamfer
 - Posterior chamfer
 - Distal
- Remove the headed pins using the pin extractor, and then remove the resection guide.



NOTE

Distal half-cuts of 4 or 8 mm can be made directly on the 5-in-1 resection guide

CHECKING THE FLEXION AND EXTENSION GAPS

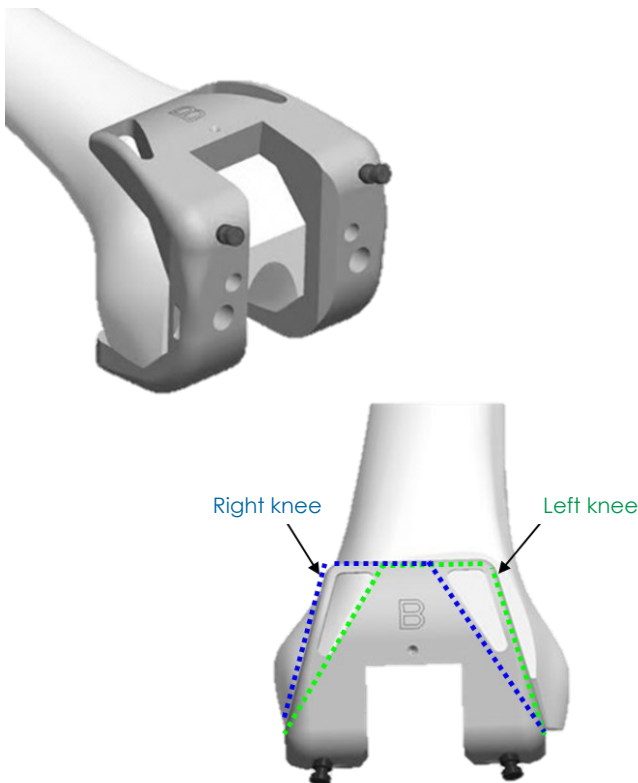


- Verify the flexion and extension gaps with the 20 mm spacer (10 mm for the tibial cut plus 10 mm for the femoral component).
- The 2, 4 and 6 mm spacers can be added to the 20 mm spacer, along with the trial half-wedges when distal femoral half-cuts have been made.

NOTE

To **repeat the distal cut** or **change the size** see page 27

FEMORAL NOTCH PREPARATION



1. Positioning of notch preparation guide:

- Set the femoral notch preparation guide on the femur; if needed, clip the trial distal wedges on the guide.
- The femoral notch preparation guide has the same mediolateral dimensions as the femoral component that will be implanted. Use the two windows on the anterior face of the guide to help position it: the outer (lateral) side of the guide corresponds to the outer edge of the replacement condyle and the inner (medial) side of the window corresponds to the inner edge of the replacement condyle.
- Secure the guide with two headed pins.

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2. Femoral reaming:

- Gradually ream the medullary canal using reamers mounted on the universal T-handle.
- The graduated reamers are used to estimate the most appropriate extension stem length.
- Use progressively larger reamers (10/12/14/16/18/20 mm) until contact is made with the bone cortex and good stability is achieved.

NOTE

The smallest femoral extension stem is 12 mm in diameter

3. Preparation of intercondylar notch:

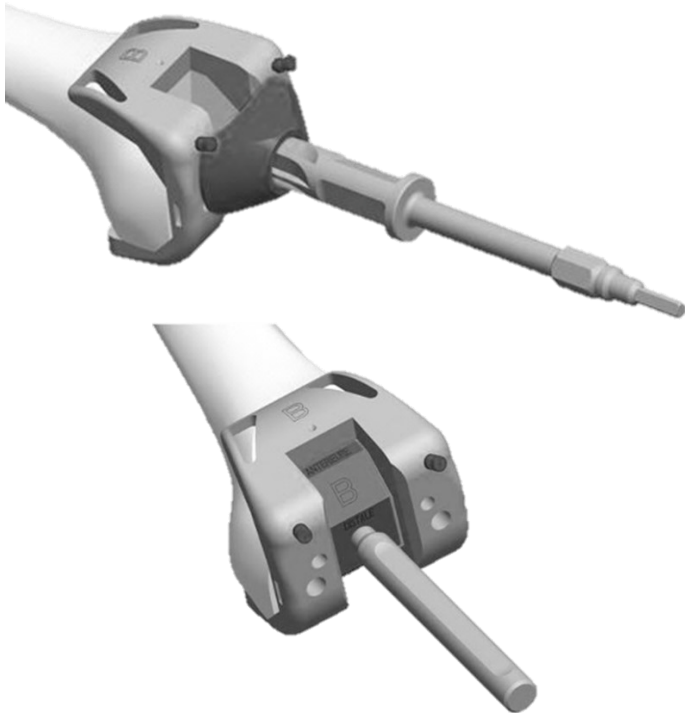
- Use the chisel or a medium saw blade to delicately prepare the intercondylar notch while staying in contact with the notch preparation guide.

NOTE

If the bone is very dense, a medium saw blade can be used to prepare the cut



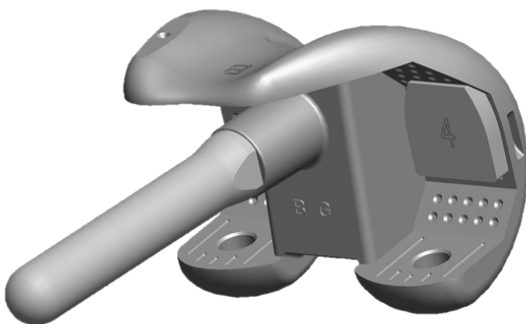
FEMORAL NOTCH PREPARATION



4. Entry point for extension stem:

- Set the femoral reamer guide on the notch preparation guide corresponding to the operated leg.
- Use the surgical drill to insert the femoral reamer for the extension stem entry point until it stops (same for all sizes).
- Verify the depth and quality of the intercondylar notch preparation using the trial intercondylar cage (on which the removable handle for punch guide has been assembled). The trial must fit in the notch perfectly and be level with the distal femoral cut.
- Remove the headed pins using the pin extractor and remove the notch preparation guide.

ASSEMBLY OF TRIAL FEMORAL COMPONENT



- Screw the trial extension stem (same length and diameter as last reamer used) to the trial femoral component using the extension stem wrench and 3.5 mm Hex screwdriver.
- Set the distal femoral half-wedges (4 or 8 mm) on the trial component if needed.

POSITIONING OF TRIAL TIBIAL BASEPLATE

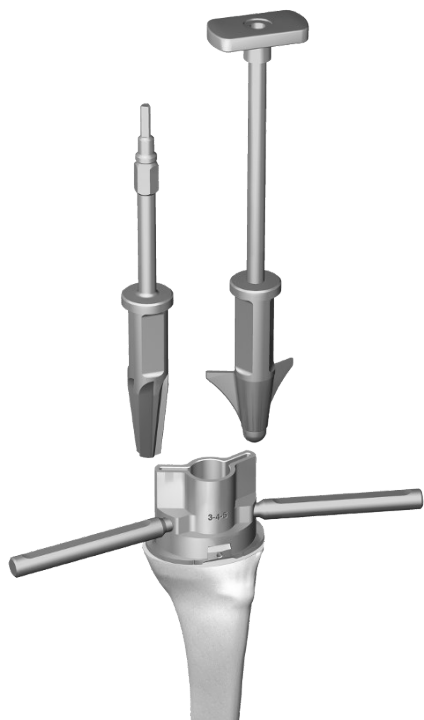
NOTE

Remove the two pins that were left in the tibia



- Gradually ream the medullary canal using reamers mounted on the universal T-handle.
- The graduated reamers are used to estimate the most appropriate extension stem length.
- Use progressively larger reamers (10/12/14/16 mm) until contact is made with the bone cortex and good stability is achieved.
- Leave the last reamer used in place.
- Select the trial tibial baseplate that provides the best possible bone coverage (refer to chart on page 7 for femoral and tibial size compatibility).
- Assemble the 0 mm offset positioner with the trial tibial baseplate.
- Place these two components onto the reamer, against the previously-made tibial cut.
- If the trial baseplate does not fully cover the tibial cut surface when it is centred on the reamer, change to the 2, 4 or 6 mm offset positioner instead.
- Turn the offset positioner until the trial tibial baseplate covers the cut surface completely.
- Make a note of the connector size and its position using the graduations on the connector and the mark on the trial baseplate. This information will be used during the assembly of the trial and final components.
- Secure the unit with two headed pins; the appropriate pin length (30, 50 or 70 mm) depends on the thickness of any tibial half-wedge that is used.
- Remove the reamer and offset positioner.

PREPARATION OF TIBIAL FOOTPRINT



- Position the punch guide for tibial extension stem of the size corresponding to the baseplate.
- Use the surgical drill to insert the reamer for tibial extension stem until it stops (same for all sizes).
- Make the entry point for the delta wing (use an osteotome if the bone is sclerotic or an osteotomy has been performed).

PREPARATION OF TRIAL TIBIAL BASEPLATE

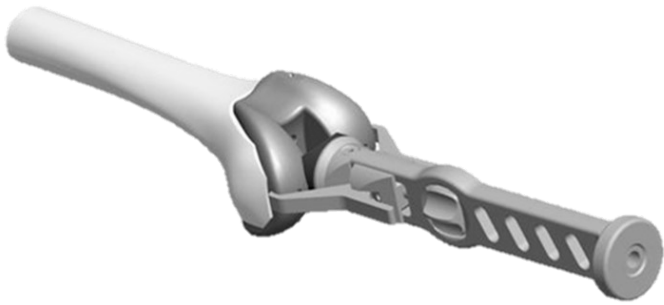


- Screw the trial extension stem (length and diameter correspond to final reamer used) to the trial offset connector corresponding to the selected tibial offset positioner. These components are assembled using the chuck key for offset connector and extension stem wrench.
- With the H5 screwdriver, tightly screw this unit to the delta wing for tibial trials while making sure the position of the trial offset connector previously determined from the trial tibial baseplate is maintained.
- Impact the delta wing/connector (if used)/ extension stem unit through the tibial baseplate into the tibia until it stops.
- Secure the entire unit to the trial baseplate using the thumb knob that connects the baseplate and delta wing. Tests can now be carried out in the same configuration as the final implants.

NOTE

If no connector is used, screw the trial extension stem directly into the delta wing for tibial trials

INSERTION OF TRIAL IMPLANTS



- Assemble the trial femoral component with its holder (trial position).
- Resect any posterior osteophytes with the osteotome.
- Insert the chosen trial tibial insert.
- Verify the joint's motion and stability during flexion and extension.



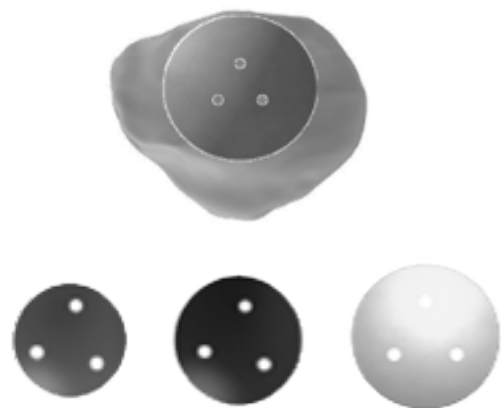
PATELLAR PREPARATION

PATELLAR CUT OPTIONS

- Remove the osteophytes.
- Use the calliper to measure the thickness of the patella.
- Place the clamp so the two lugs are on the anterior side of the patella.
- With the clamp jaws open, bring the 8 mm probe into contact with the articular surface using the adjustment knob.
- Lock the clamp.
- Read how much bone remains.
- Make the cut.
- Use the drilling templates to determine the size of patellar implant needed: 30, 33 or 36 mm in diameter.
- Centre and impact the drilling template.
- Make the pilot holes for the three pegs.



- Use the clamp for trial patella to set the trial patellar implant in place.
- Check the patellar tracking over the entire flexion/extension range.
- Make sure the patellar surface is clean and dry.
- Apply a layer of cement to the implant.
- Insert the chosen patellar implant.
- Remove any excess cement.
- Use the impactor to hold the patellar implant while the cement sets.



INSERTION OF CHOSEN IMPLANTS



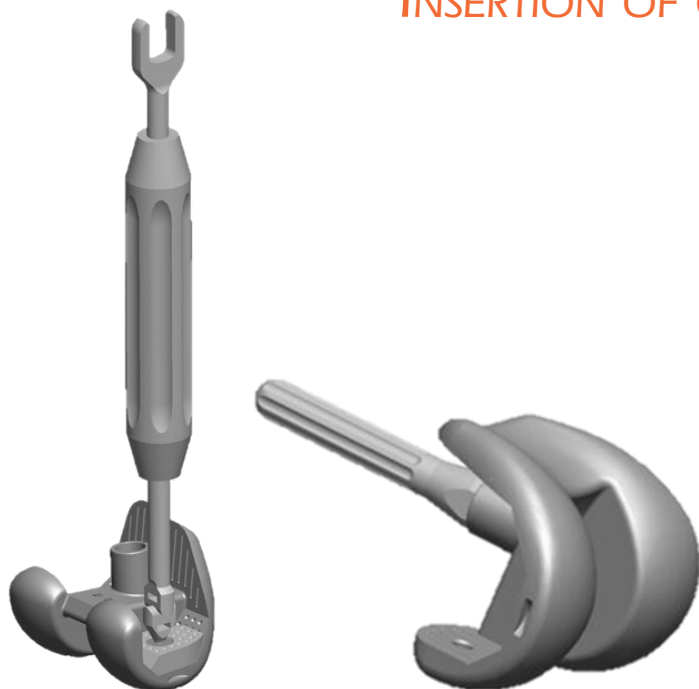
1. Assembly of chosen tibial implants:

- Screw the tibial extension stem to the offset connector that corresponds to the validated tibial offset positioner. These components are assembled using the chuck key for offset connector, extension stem wrench and 3.5 mm Hex screwdriver. If no offset connector is used, screw the extension stem directly into the tibial baseplate.
- Impact the whole unit into the tibial baseplate while matching the position determined during tibial preparation (laser markings can be found on the edge of the delta wing).
- Place the tibial baseplate impactor into the female side of the baseplate taper and lock to the anterior edge of the tibia.
- Using the H5 screwdriver, tighten the screw of the insertion instrument. As a result, the offset connector is pulled into the cone of the tibial implant.

2. Insertion of chosen tibial implants:

- Carefully lavage the implantation site to clean it out.
- Prepare the bone cement and apply it to the tibial cut surface or under the tibial baseplate.
- If using a tibial half-wedge, apply a thin layer of cement between the half-wedge and tibial baseplate.
- Impact the final components into the tibia using the trial baseplate impactor and make sure the half-wedge is perfectly positioned relative to the tibial baseplate and tibial cut.
- Tighten the tibial impactor with offset connector one last time before removing it completely.
- Remove any excess cement.
- Place a tibial insert of the size corresponding to the femur and thickness validated during the trials.

INSERTION OF CHOSEN IMPLANTS



3. Assembly of chosen femoral component:

- If necessary, screw the femoral half-wedges (4 or 8 mm) using the extension stem wrench and 3.5 mm Hex screwdriver.
- Screw the femoral extension stem directly into the revision femoral component using the extension stem wrench and 3.5 mm Hex screwdriver.

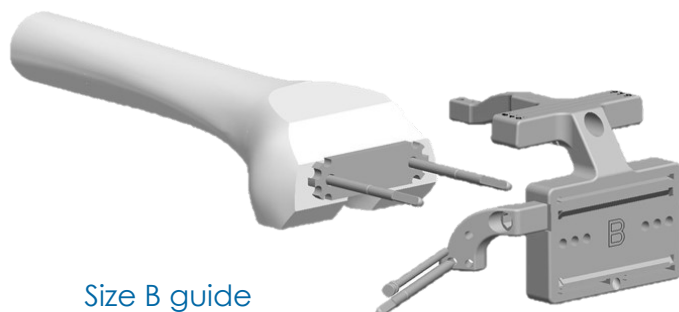
NOTE

If using a large femoral extension stem, make sure it does not contact the anterior cortex

4. Insertion of chosen femoral component:

- Assemble the femoral component with its holder.
- Carefully lavage the implantation site to clean it out.
- Prepare the cement and apply it to the femoral implant or bone surfaces.
- Do not put too much cement on the posterior aspect.
- Hyperflex the knee.
- Set the femoral component on the femur.
- Remove the femoral condyle holder and then impact the implant using the femoral component impactor.
- Carefully remove any excess cement.
- Fully extend the knee to maintain pressure while the cement sets.

REPEATING THE DISTAL FEMORAL CUT

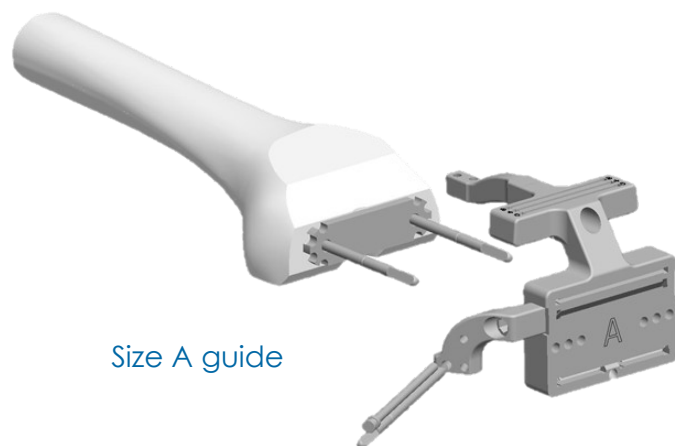


Size B guide

- Put the two Ø4 mm K-wires back into place.
- Position the appropriate femoral recutting wedges on these K-wires.
 - 8 mm thick wedge: 2 mm recut
 - 6 mm thick wedge: 4 mm recut
 - 4 mm thick wedge: 6 mm recut
- Set the 5-in-1 resection guide that was initially used (with the anterior stabiliser and at least one lateral anchor) against the wedge.
- To secure the guide, put two 70-mm long headed pins into the lateral anchors and one pin (unicortical) into the anterior stabiliser.
- Remove the two distal K-wires and the wedge.
- Make the cuts.

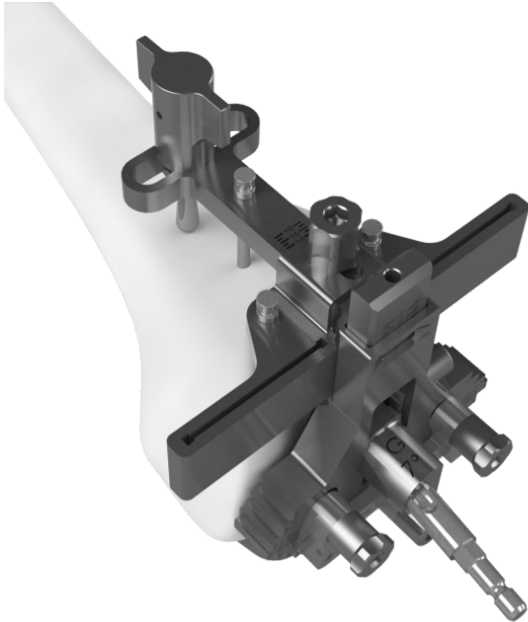
CHANGING SIZES

- Put the two Ø4 mm K-wires back into place.
- Place the 4 and 6 mm wedges on these two Ø4 mm K-wires.
- Set the 5-in-1 resection guide of the next size down (with the anterior stabiliser and at least one lateral anchor) against the wedge.
- To secure the guide, put two 70-mm long headed pins into the lateral anchors and one pin (unicortical) into the anterior stabiliser.
- Remove the two Ø4 mm K-wires and the wedge.
- Make the cuts.



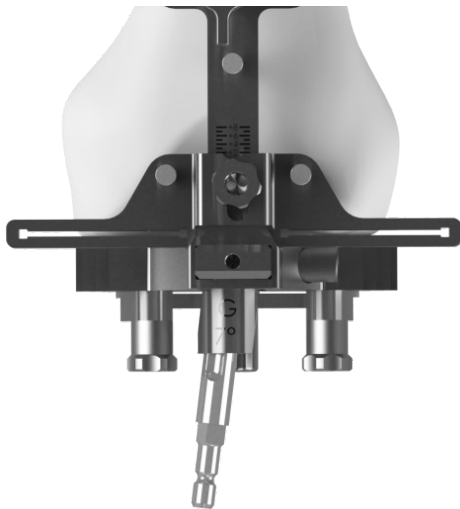
Size A guide

OPTIONAL: DISTAL FEMORAL PRECUT



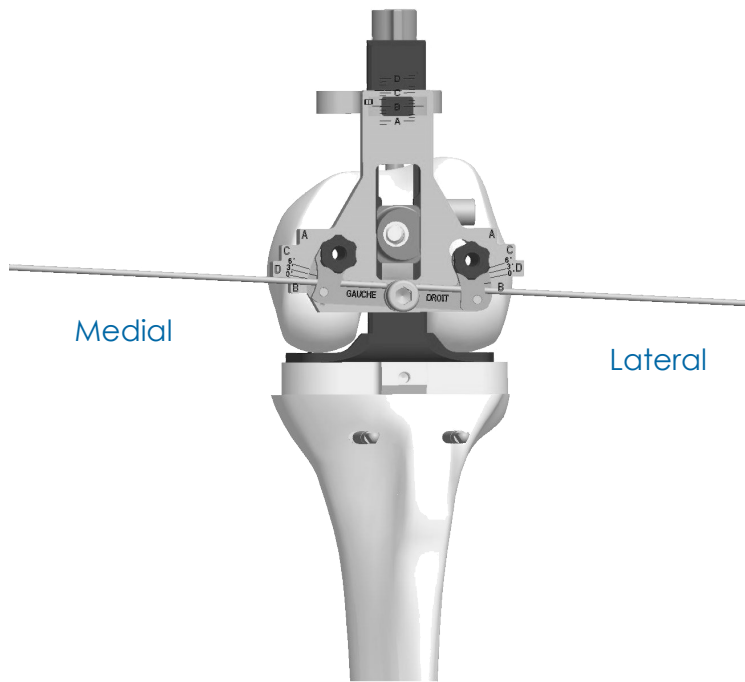
In patients with a significant preoperative flexion deformity, a 2 or 4 mm distal femoral precut can be made.

- Secure the pre-cutting guide onto the front part of the measurement gauge and transfer the chosen value.
- Insert two headed pins.
- Once the cut has been made, put the sizing guide back into place so it touches the distal condyles.



SCORE® REVISION FOR PRIMARY CASES

OPTIONAL: SIMULATED GAP BALANCING BEFORE FEMORAL CUTS



- Place the femoral sizing guide and the valgus barrel on the intramedullary alignment rod.
- Simulate gap balancing with 0°, 3° or 6° external rotation by using the appropriate spacer.
- Once the rotation has been determined, fully tighten the front screw with the screwdriver.

NOTE

This gap balancing simulator is optional

INSTRUMENTATION

The SCORE® Revision primary instrumentation consists of 6 trays:

- Commun Set
- Stem and Wedge Set
- Femur and Tibia Trials Set
- Patella and Impaction Set
- Tibial Preparation/Cutting Set
- Femoral Preparation/Cutting Set

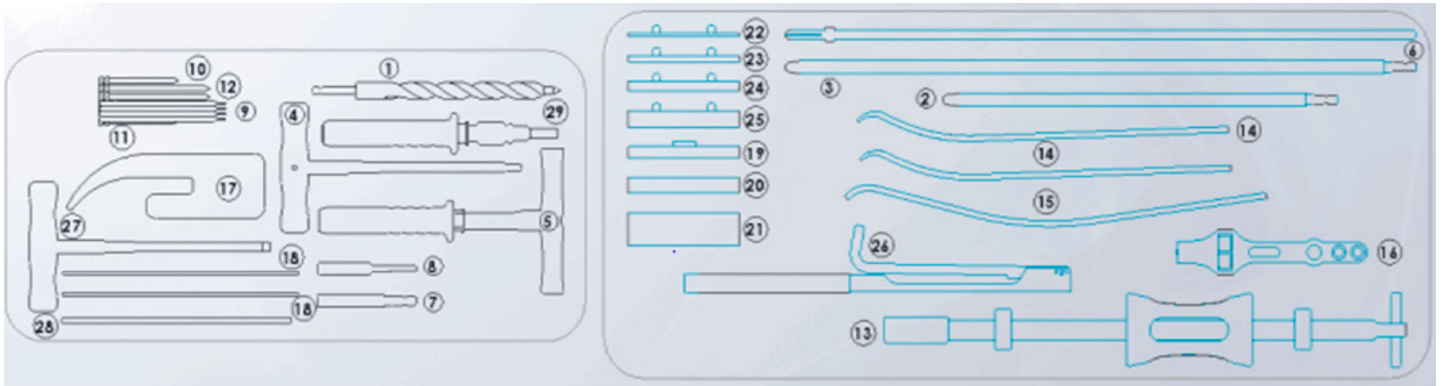
In addition:

- Sterile medium saw blades

INSTRUMENTATION

SCORE® REVISION : Common set

2-0299926

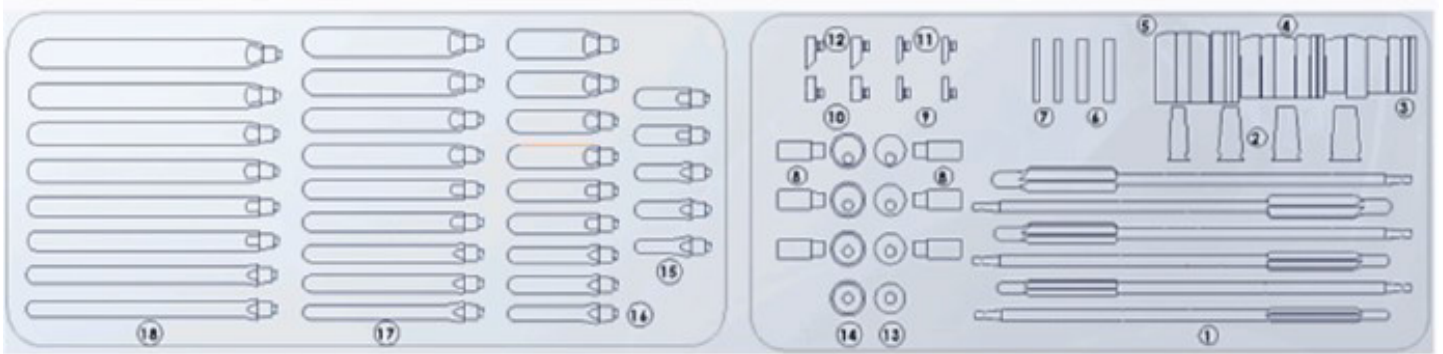


Item	Name	Product No.	Qty
1	Intramedullary 10 mm drill bit	2-0200100	1
2	Intra-medullary rod length 250 mm	2-0200200	1
3	Intra-medullary rod length 400 mm	2-0200300	1
4	H5 Screwdriver	2-0200800	1
5	T wrench	2-0200400	1
6	Extramedullary alignment rod	2-0200600	2
7	Universal quick release adaptor for pin	2-0201100	1
8	AO quick release adaptor for pin	2-0201200	1
9	Headless pin length 80 mm	2-0201400	4
10	Headed pin length 30 mm	2-0201301	3
11	Headed pin length 50 mm	2-0201303	6
12	Headed pin length 70 mm	2-0201302	6
13	Slap hammer	2-0206900	1
13	Slap hammer tip	2-0214800	1
14	Hohmann retractor 240 mm 18 mm	2-0207100	2
15	Hohmann retractor 265 mm 24 mm	2-0207200	1
16	Universal handle	2-0216400	1
17	Resection gauge	2-0204500	1
18	Ø 2 headless pin	2-0103000	2
19	Spacer thickness 7 mm	2-0200707	1
20	Spacer thickness 10 mm	2-0200710	1
21	Spacer H 20 mm	2-0200720	1
22	Spacer thickness 2 mm for spacer	2-0207002	1
23	Spacer thickness 4 mm for spacer	2-0207004	1
24	Wedge thickness 6 mm for spacer	2-0207006	1
25	Wedge thickness 10 mm for spacer	2-0207010	1
26	Pin extractor	2-0201500	1
27	Extractor for offset connector	2-0214300	1
28	Drill bit D3.2 length 145 mm	2-0102400	1
29	AO / Tripan universal connector	2-0211700	1

INSTRUMENTATION

SCORE® REVISION : Stem and wedge set

2-0299926



Item	Name	Product No.	Qty
1	Reamer diam. 10	2-0210510	1
1	Reamer diam. 12	2-0210512	1
1	Reamer diam. 14	2-0210514	1
1	Reamer diam. 16	2-0210516	1
1	Reamer diam. 18	2-0210518	1
1	Reamer diam. 20	2-0210520	1
2	Sleeve 10/15	2-0211400	1
2	Sleeve 12/19	2-0211401	1
2	Sleeve 14/21	2-0211402	1
2	Sleeve 16/23	2-0211403	1
3	Trial tibial half-wedge - Size 1/2 thickness 5 mm	2-0210311	2
3	Trial tibial half-wedge - Size 1/2 thickness 10 mm MED.R / LAT.L	2-0210321	1
3	Trial tibial half-wedge - Size 1/2 thickness 15 mm MED.R / LAT.L	2-0210331	1
3	Trial tibial half-wedge - Size 1/2 thickness 10 mm LAT.R./MED.L	2-0210341	1
3	Trial tibial half-wedge - Size 1/2 thickness 15 mm LAT.R./MED.L	2-0210351	1
4	Trial tibial half-wedge - Size 3/4/5 thickness 5 mm	2-0210313	2
4	Trial tibial half-wedge - Size 3/4/5 thickness 10 mm MED.R / LAT.L	2-0210323	1
4	Trial tibial half-wedge - Size 3/4/5 thickness 15 mm MED.R / LAT.L	2-0210333	1
4	Trial tibial half-wedge - Size 3/4/5 thickness 10 mm LAT.R./MED.L	2-0210343	1
4	Trial tibial half-wedge - Size 3/4/5 thickness 15 mm LAT.R./MED.L	2-0210353	1
5	Trial tibial half-wedge - Size 6/7 thickness 5 mm	2-0210316	2
5	Trial tibial half-wedge - Size 6/7 thickness 10 mm MED.R / LAT.L	2-0210326	1
5	Trial tibial half-wedge - Size 6/7 thickness 15 mm MED.R / LAT.L	2-0210336	1
5	Trial tibial half-wedge - Size 6/7 thickness 10 mm LAT.R./MED.L	2-0210346	1
5	Trial tibial half-wedge - Size 6/7 thickness 15 mm LAT.R./MED.L	2-0210356	1
6	Femoral half-wedge thickness 4 mm	2-0212308	2
7	Femoral half-wedge thickness 8 mm	2-0212304	2

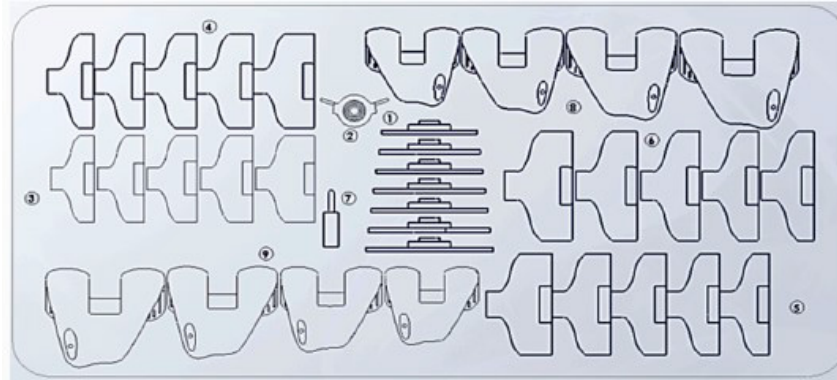
INSTRUMENTATION

Item	Name	Product No.	Qty
8	Trial offset connector 2 mm	2-0214102	2
8	Trial offset connector 4 mm	2-0214104	2
8	Trial offset connector 6 mm	2-0214106	2
9	Trial posterior femoral wedge thickness 4 mm	2-0214004	2
10	Trial posterior femoral wedge thickness 8 mm	2-0214008	2
11	Trial distal femoral wedge thickness 4 mm	2-0213904	2
12	Trial distal femoral wedge thickness 8 mm	2-0213908	2
13	Offset positioner for trial tibial baseplate - 0 mm	2-0213300	1
13	Offset positioner for trial tibial baseplate - 2 mm	2-0213302	1
13	Offset positioner for trial tibial baseplate - 4 mm	2-0213304	1
13	Offset positioner for trial tibial baseplate - 6 mm	2-0213306	1
14	0 mm offset adaptator for femoral resection guide	2-0213000	1
14	2 mm offset adaptator for femoral resection guide	2-0213002	1
14	4 mm offset adaptator for femoral resection guide	2-0213004	1
14	6 mm offset adaptator for femoral resection guide	2-0213006	1
15	Trial extension stem - Ø 10 length 75	2-0209021	2
15	Trial extension stem - Ø 12 length 75	2-0209022	2
15	Trial extension stem - Ø 14 length 75	2-0209023	2
16	Trial extension stem - Ø 10 length 100	2-0209013	1
16	Trial extension stem - Ø 12 length 100	2-0209001	2
16	Trial extension stem - Ø 14 length 100	2-0209004	2
16	Trial extension stem - Ø 16 length 100	2-0209007	2
16	Trial extension stem - Ø 18 length 100	2-0209010	1
16	Trial extension stem - Ø 20 length 100	2-0209015	1
17	Trial extension stem - Ø 10 length 150	2-0209014	1
17	Trial extension stem - Ø 12 length 150	2-0209002	2
17	Trial extension stem - Ø 14 length 150	2-0209005	2
17	Trial extension stem - Ø 16 length 150	2-0209008	2
17	Trial extension stem - Ø 18 length 150	2-0209011	1
17	Trial extension stem - Ø 20 length 150	2-0209016	1
18	Trial extension stem - Ø 12 length 200	2-0209003	2
18	Trial extension stem - Ø 14 length 200	2-0209006	2
18	Trial extension stem - Ø 16 length 200	2-0209009	2
18	Trial extension stem - Ø 18 length 200	2-0209012	1
18	Trial extension stem - Ø 20 length 200	2-0209017	1

INSTRUMENTATION

SCORE® REVISION : Femur and tibia trials set

2-0299926



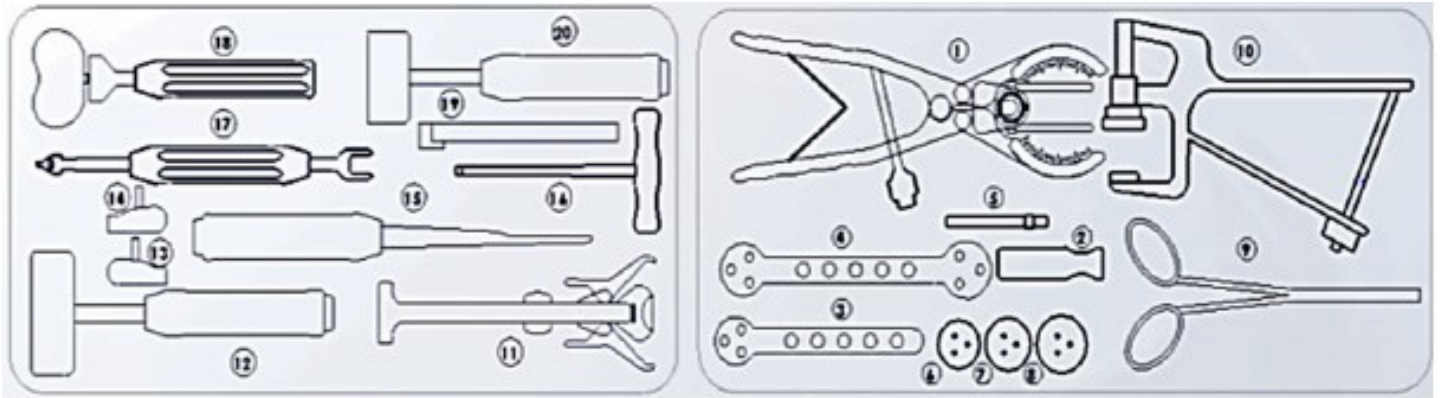
Item	Name	Product No.	Qty
1	Trial baseplate navigated Size 1	2-0208601	1
1	Trial baseplate navigated Size 2	2-0208602	1
1	Trial baseplate navigated Size 3	2-0208603	1
1	Trial baseplate navigated Size 4	2-0208604	1
1	Trial baseplate navigated Size 5	2-0208605	1
1	Trial baseplate navigated Size 6	2-0208606	1
1	Trial baseplate navigated Size 7	2-0208607	1
2	Delta wing for tibial trials	2-0213401	1
3	Trial revision insert - Size A thickness 10	2-021421A	1
3	Trial revision insert - Size A thickness 12	2-021422A	1
3	Trial revision insert - Size A thickness 14	2-021423A	1
3	Trial revision insert - Size A thickness 16	2-021424A	1
3	Trial revision insert - Size A thickness 20	2-021425A	1
4	Trial revision insert - Size B thickness 10	2-021421B	1
4	Trial revision insert - Size B thickness 12	2-021422B	1
4	Trial revision insert - Size B thickness 14	2-021423B	1
4	Trial revision insert - Size B thickness 16	2-021424B	1
4	Trial revision insert - Size B thickness 20	2-021425B	1
5	Trial revision insert - Size C thickness 10	2-021421C	1
5	Trial revision insert - Size C thickness 12	2-021422C	1
5	Trial revision insert - Size C thickness 14	2-021423C	1
5	Trial revision insert - Size C thickness 16	2-021424C	1
5	Trial revision insert - Size C thickness 20	2-021425C	1

INSTRUMENTATION

Item	Name	Product No.	Qty
6	Trial revision insert - Size D thickness 10	2-021421D	1
6	Trial revision insert - Size D thickness 12	2-021422D	1
6	Trial revision insert - Size D thickness 14	2-021423D	1
6	Trial revision insert - Size D thickness 16	2-021424D	1
6	Trial revision insert - Size D thickness 20	2-021425D	1
7	Thumb knob to connect baseplate / delta wing	2-0215400	1
8	Trial revision femoral component - Size A Right - with or without navigation	2-02232DA	1
8	Trial revision femoral component - Size B Right - with or without navigation	2-02232DB	1
8	Trial revision femoral component - Size C Right - with or without navigation	2-02232DC	1
8	Trial revision femoral component - Size D Right - with or without navigation	2-02232DD	1
9	Trial revision femoral component - Size A Left - with or without navigation	2-02232GA	1
9	Trial revision femoral component - Size B Left - with or without navigation	2-02232GB	1
9	Trial revision femoral component - Size C Left - with or without navigation	2-02232GC	1
9	Trial revision femoral component - Size D Left - with or without navigation	2-02232GD	1

INSTRUMENTATION

SCORE® REVISION : Patella and impaction set 2-0299926

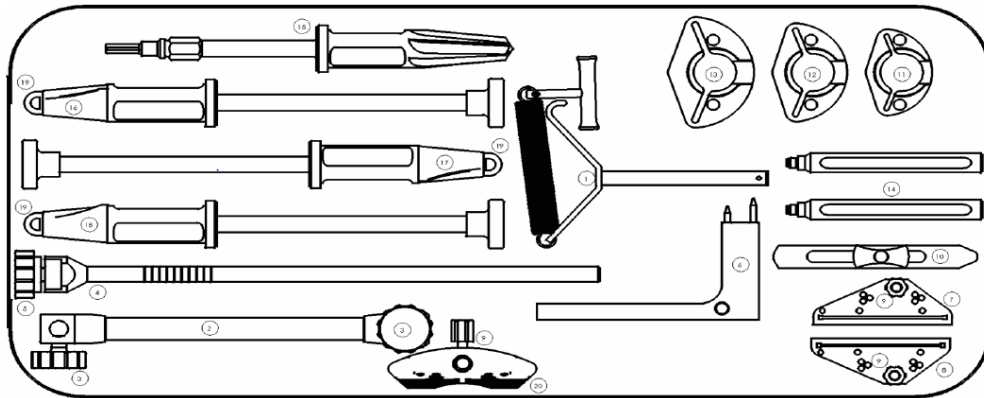


Item	Name	Product No.	Qty
1	Patellar resection forceps	2-0206700	1
2	Patellar resection gauge	2-0208400	1
3	Drilling template Ø 30	2-0204900	1
4	Drilling template Ø 33 and Ø 36	2-0205000	1
5	Drill bit for resurfacing patella	2-0205100	1
6	Trial resurfacing patella Ø 30	2-0205330	1
7	Trial resurfacing patella Ø 33	2-0205333	1
8	Trial resurfacing patella Ø 36	2-0205336	1
9	Clamp for trial patella or locking ring	2-0104600	1
10	Patellar clamping forceps	2-0206100	1
11	Femoral condyle holder	2-0204400	1
12	Femoral component impactor	2-0204300	1
13	Offset connector left femoral impactor	2-021360G	1
14	Offset connector right femoral impactor	2-021360D	1
15	Cutting gauge	2-0206500	1
16	H5 Screwdriver	2-0200800	1
17	Stem spanner and universal joint screwdriver H3.5	2-0215100	1
18	Tibial impactor with offset connector	2-0213700	1
19	Chuck key for offset connector	2-0213500	1
20	Baseplate impactor	2-0203000	1

INSTRUMENTATION

SCORE® REVISION : Tibial preparation/cutting set

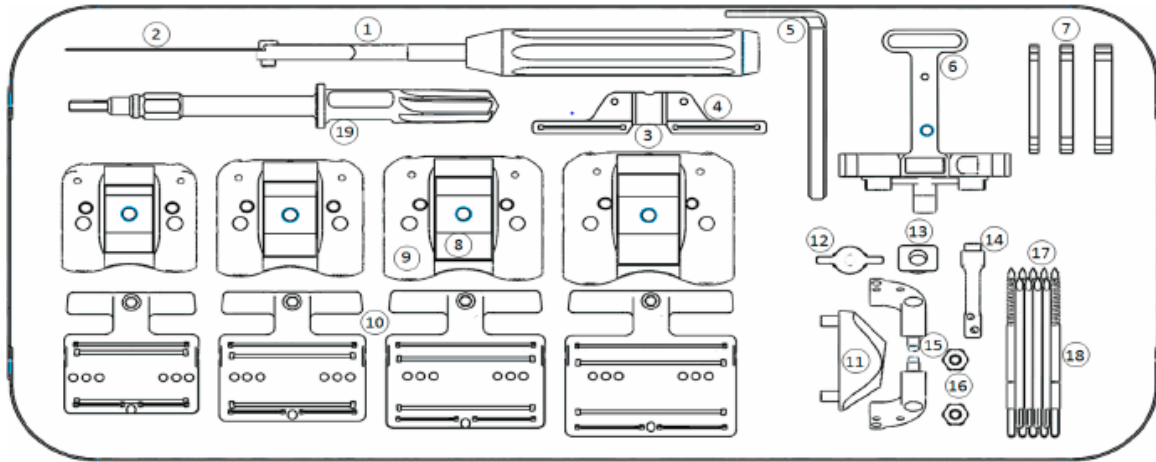
2-0299927



Item	Name	Product No.	Qty
1	Malleolar clamp	2-0201600	1
2	Extramedullary aiming column	2-0201700	1
3	Wheel for extramedullary aiming column	2-0201800	2
4	Tibial slide bar	2-0201900	1
5	Wheel for tibial bracket	2-0202100	1
6	Tibial bracket	2-0202000	1
7	Tibial resection guide - Right	2-0202200	1
8	Tibial resection guide - Left	2-0202300	1
9	Wheel for resection guide	2-0203800	3
10	Tibial stylus	2-0202400	1
11	Punch guide for tibial baseplate size 1/2	2-0202612	1
12	Punch guide for tibial baseplate size 3/4/5	2-0202635	1
13	Punch guide for tibial baseplate size 6/7	2-0202667	1
14	Removable handle for punch guide	2-0206200	2
15	Reamer for tibial extension stem	2-0202700	1
16	Punch for tibial extension stem - size 1/2	2-0202812	1
17	Punch for tibial extension stem - size 3/4/5	2-0202835	1
18	Punch for tibial extension stem - size 6/7	2-0202867	1
19	Standard trial stem	2-0208900	3
20	Revision tibial resection guide	2-0210600	1

INSTRUMENTATION

SCORE® REVISION : Femoral preparation/cutting set 2-0299927



Item	Name	Product No.	Qty
1	Chisel blade handle	2-0214600	1
2	Chisel blade	2-0214500	1
3	Wheel for resection guide	2-0203800	1
4	Additional distal resection guide	2-0203700	1
5	Posterior measuring plate for revision sizing guide	2-0222700	1
6	Revision Sizing guide	2-0222600	1
7	Femoral recutting wedge - 4 mm	2-0206004	1
7	Femoral recutting wedge - 6 mm	2-0206006	1
7	Femoral recutting wedge - 8 mm	2-0206008	1
8	Inter-condylar box trials Size A	2-021530A	1
8	Inter-condylar box trials Size B	2-021530B	1
8	Inter-condylar box trials Size C	2-021530C	1
8	Inter-condylar box trials Size D	2-021530D	1
9	Resection guide for the inter-condylar notch preparation Size A	2-022300A	1
9	Resection guide for the inter-condylar notch preparation Size B	2-022300B	1
9	Resection guide for the inter-condylar notch preparation Size C	2-022300C	1
9	Resection guide for the inter-condylar notch preparation Size D	2-022300D	1

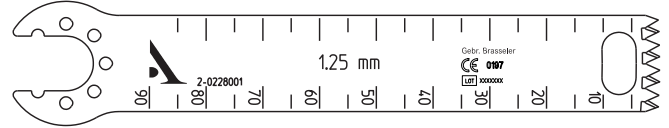
INSTRUMENTATION

Item	Name	Product No.	Qty
10	5-in-1 Revision femoral resection guide - Size A	2-022280A	1
10	5-in-1 Revision femoral resection guide - Size B	2-022280B	1
10	5-in-1 Revision femoral resection guide - Size C	2-022280C	1
10	5-in-1 Revision femoral resection guide - Size D	2-022280D	1
11	Femoral Reamer Guide	2-0214900	1
12	Anterior Femoral Stylus	2-0203400	1
13	6° femoral valgus barrel	2-0203306	1
14	Femoral resection guide stabilizer	2-0217800	1
15	Left-Medial or Right-Lateral bracket for 5 in 1 Revision Femoral resection guide	2-0222901	1
15	Right-Medial or Left-Lateral bracket for 5 in 1 Revision Femoral resection guide	2-0222902	1
16	Drill guide for K-wire Ø 4	2-0203500	2
17	Headless pin length 80 mm	2-0201400	4
18	Threaded K-wire Ø4 length 90 mm	2-0200901	5
19	Femoral reamer	2-0215000	1

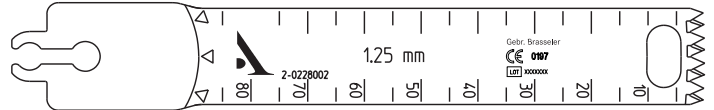
INSTRUMENTATION

MEDIUM SAW BLADES

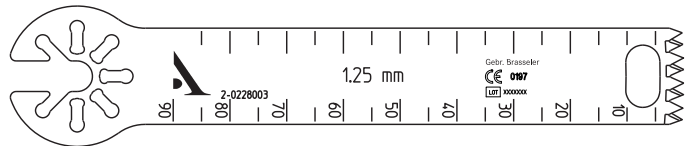
SYNTHES AO / SODEM medium Saw Blade
Sterile Product No. 2-0228001



STRYKER medium Saw Blade
Sterile Product No. 2-0228002



ZIMMER / HALL / LINVATEC medium Saw Blade
Sterile Product No. 2-0228003





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