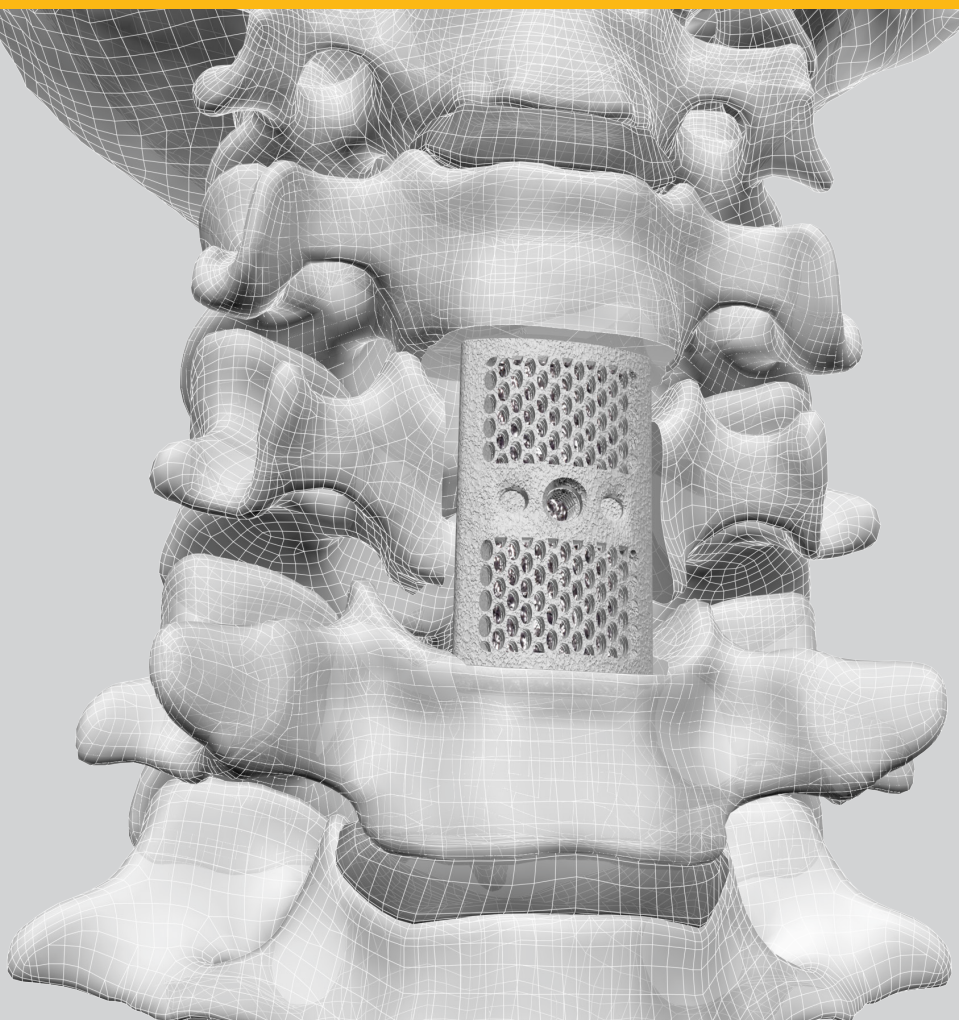
CoreLink
The Source for Spine™

F3D CORPECTOMY SYSTEM

Surgical Technique Guide



THE F3D CORPECTOMY ADVANTAGE

The CoreLink F3D Corpectomy (Vertebral Body Replacement) System incorporates Mimetic Metal® 3D printing technology. The single construct device combines lattice scaffolding with an open-pore architecture. The trabecular pores are present on the endplate portion of the device and throughout the entire implant, allowing for blood flow from endplate to endplate.

The F3D Corpectomy System offers a wide range of footprint, height, and lordotic options to fit varying patient anatomies in the cervical and lumbar spine. To compliment this diverse system offering, an array of ergonomic instrumentation is available to assist in sizing and placement of the implant.

This combination of quality instrumentation and industry-leading implant design provide an easy-to-use and effective Corpectomy (VBR) System.

TABLE OF CONTENTS

PRODUCT OVERVIEW

The F3D Corpectomy System features a wide range of implant size options with intuitive instrumentation. It is designed with safety in mind to assist in the steps prior to and during implant placement.

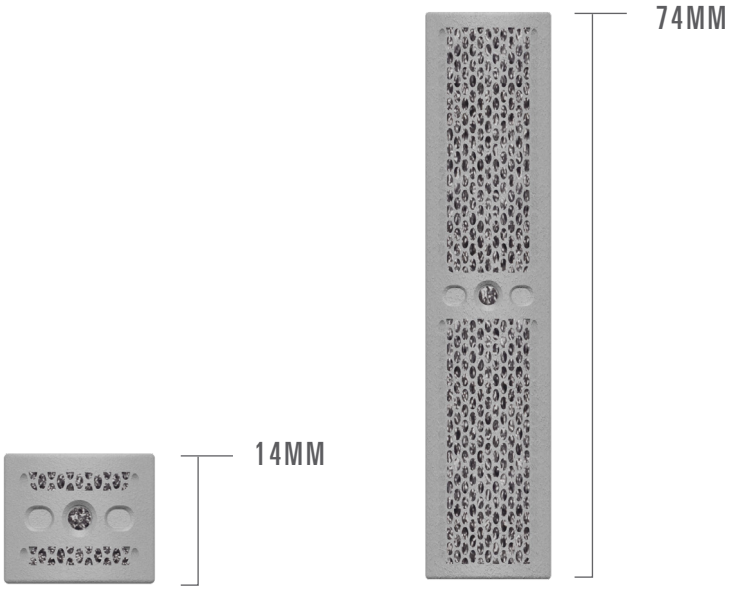
SYSTEM FEATURES

- Patented Mimetic Metal® technology emulates key characteristics of natural bone and is designed to provide an optimal structure and environment for healing
- Unique lattice scaffolding design to reduce stress shielding
- Large, open graft window through the implant for increased graft volume
- A wide array of sizing instruments to cater toward varying surgical strategies

HEIGHT OPTIONS

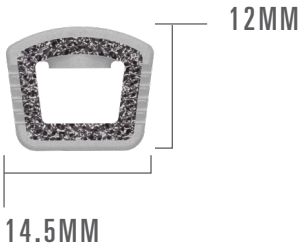
Heights available in 14mm - 50mm (2mm increments)

Special Order: Heights 52mm - 74mm (2mm increments)



PRODUCT OVERVIEW (CONTINUED)

WIDTH/LENGTH OPTIONS



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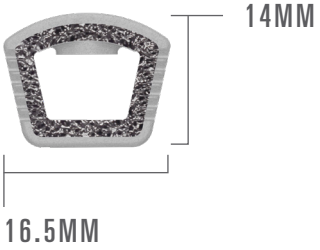

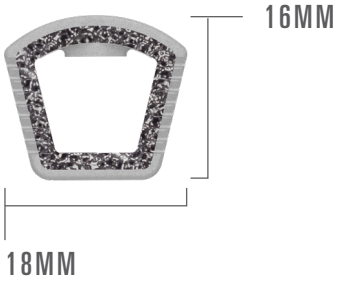

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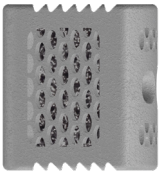
LORDOSIS OPTIONS



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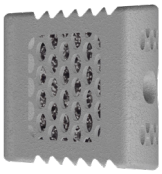


7°

12°

*Special Order

PATIENT POSITIONING AND APPROACH

The patient is placed under anesthesia and positioned supine. The operative area is then prepared and draped in the standard fashion. An incision is made at the appropriate level(s) of the cervical, thoracic, or lumbar spine. Radiographic guidance, such as C-arm fluoroscopy, should be considered throughout the procedure to ensure correct placement of the implant(s).

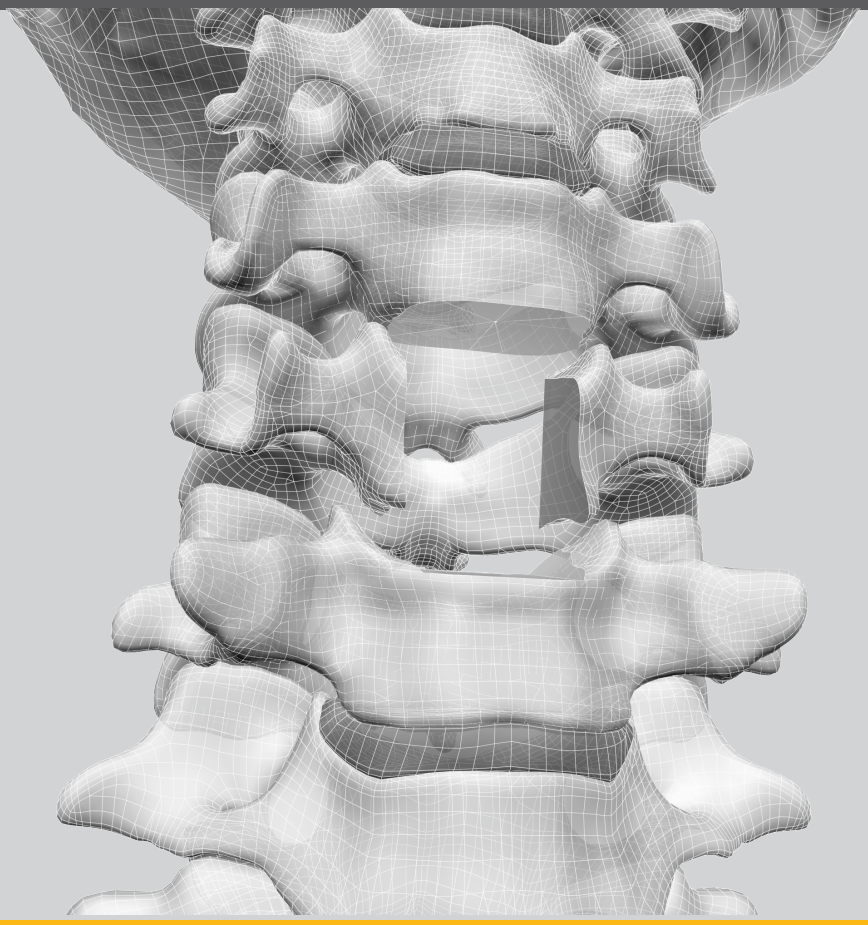
DISCECTOMY AND ENDPLATE PREPARATION

The affected vertebral body is exposed through the appropriate anterior approach as preferred by the surgeon.

Expose the midline of the intervertebral disc above and below the intended vertebrectomy (or corpectomy site) and remove the appropriate amount of disc and vertebral body. Remove the superficial layers of the cartilaginous endplates to expose bleeding bone using curettes, rasps, osteotomes, and scrapers, as necessary.

The surgeon may distract across the surgical site as required.

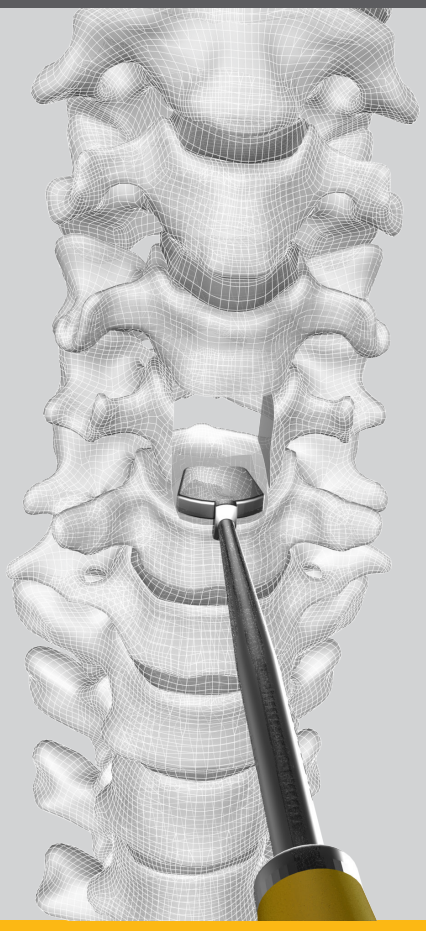
CERVICAL SPINE PREPARATION



IMPLANT SIZING

Before a height has been chosen, use the supplied appropriate Footprint Sizer to determine the optimal width and depth to fit the surgical site. A Footprint Sizer is available for each footprint offered in the set. By placing the Footprint Sizer firmly up against the superior and inferior endplate an accurate determination can be made.

FOOTPRINT SIZER



FOOTPRINT SIZER OPTIONS

DESCRIPTION	CATALOG NUMBER
14.5MM X 12MM	02C00210
16.5MM X 14MM	02C00212
18MM X 16MM	02C00214

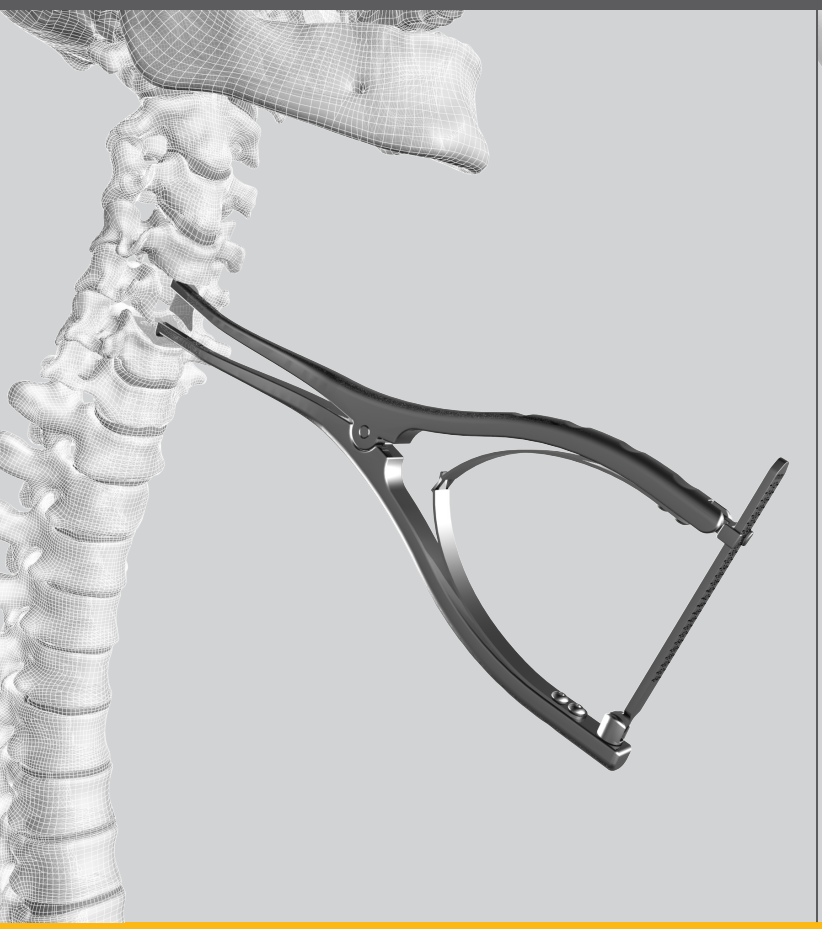
HEIGHT MEASUREMENT OPTIONS

OPTION 1: VBR CALIPER

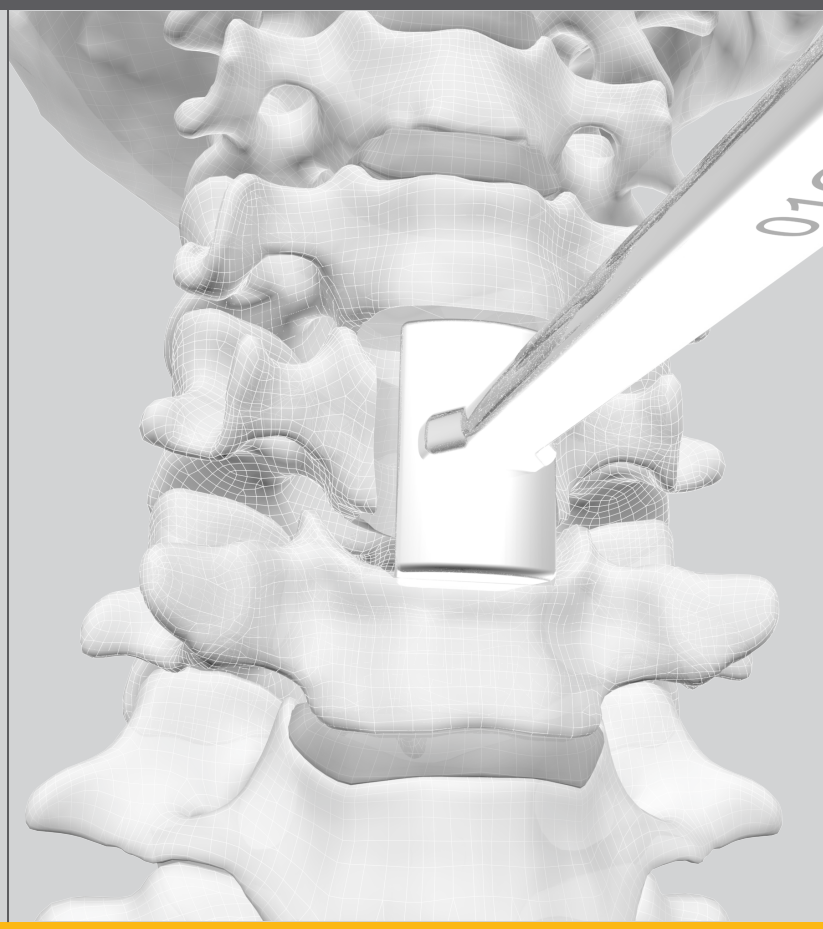
After the endplates are prepared, the VBR Caliper (20C00003) is used to approximate the appropriate height of the implant to be inserted. The Caliper also provides the surgeon with tactile feedback as it relates to the distraction of the vertebral space. Determine the appropriate height by squeezing the handle to expand the Caliper tips at the distal end of the instrument and observe the laser marked height on the proximal end of the instrument's sliding bar.

The Fixed VBR Trials can be used to approximate the height of the implant. Using the Cervical Inserter (01C00003) in the set, thread the estimated size Trial of choice located in the Trial caddy, onto the Handle. Place the Trial into the disc space. The Small Mallet (08C00019) supplied in the set can be used to mallet the Trial into the disc space.

VBR CALIPER



FIXED VBR TRIALS



HEIGHT MEASUREMENT OPTIONS (CONTINUED)

OPTION 2: TELESCOPING VBR MEASURING TOOL

The Telescoping VBR Measuring Tool can be used for a quick, yet accurate, measurement of the disc height.

The Telescoping Tool is available in available in Small (20C00008), Medium (20C00009), Large (20C00010), and X-Large (20C00011) sizes. The footprint is 14.5mm x 12mm, our smallest implant footprint size.

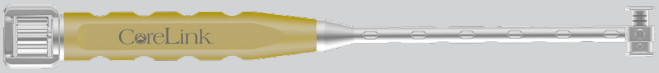
Rotate the knob on the proximal end of the Telescoping Tool counterclockwise to unlock the telescoping arms. Manually compress the pieces down to their shortest height. Once this is done, tighten the knob on the proximal end in a clockwise motion to lock the tool in the shortest height possible.

Next, place the Telescoping Tool inside of the endplate. Be sure that the end caps are positioned superior and inferior in the endplate. Once positioned in the middle of the vertebral body, loosen the telescoping knob on the proximal end with a counterclockwise turn. This will release the telescoping arms and the Trial will expand to the desired height. Retighten the knob to lock the arms.

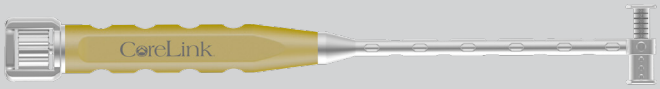
Remove the device from the disc space in its locked height and place onto the Measuring Block included in the set.

Be sure to place it firmly against the edge and note the indicated height from end piece to end piece.

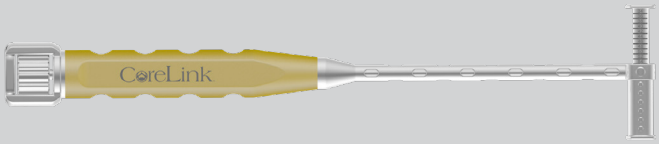
TELESCOPING MEASUREMENT TOOL OPTIONS



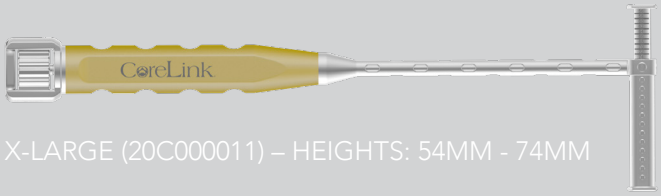
SMALL (20C00008) – HEIGHTS: 14MM - 20MM



MEDIUM (20C00009) – HEIGHTS: 20MM - 32MM



LARGE (20C00010) – HEIGHTS: 32MM - 54MM



X-LARGE (20C000011) – HEIGHTS: 54MM - 74MM

TELESCOPING TOOL IN MEASURING BLOCK

GRAFT PACKING

Using the F3D Corpectomy VBR Graft Packer Block (20C00001), place the chosen implant securely into the corresponding footprint slot. Use the corresponding VBR Graft Packer Tamp (20C00002) included in the set to the fill the implant with bone graft.

IMPLANT INSERTION

After the appropriate F3D Corpectomy device has been packed with graft, thread the implant onto the system's Cervical Inserter (01C00003). Ensure that the Inserter is firmly engaged with the implant.

Note, the Cervical Inserter used for implanting a Corpectomy device in the cervical spine should also be used to implant a Corpectomy device in the Lumbar spine.

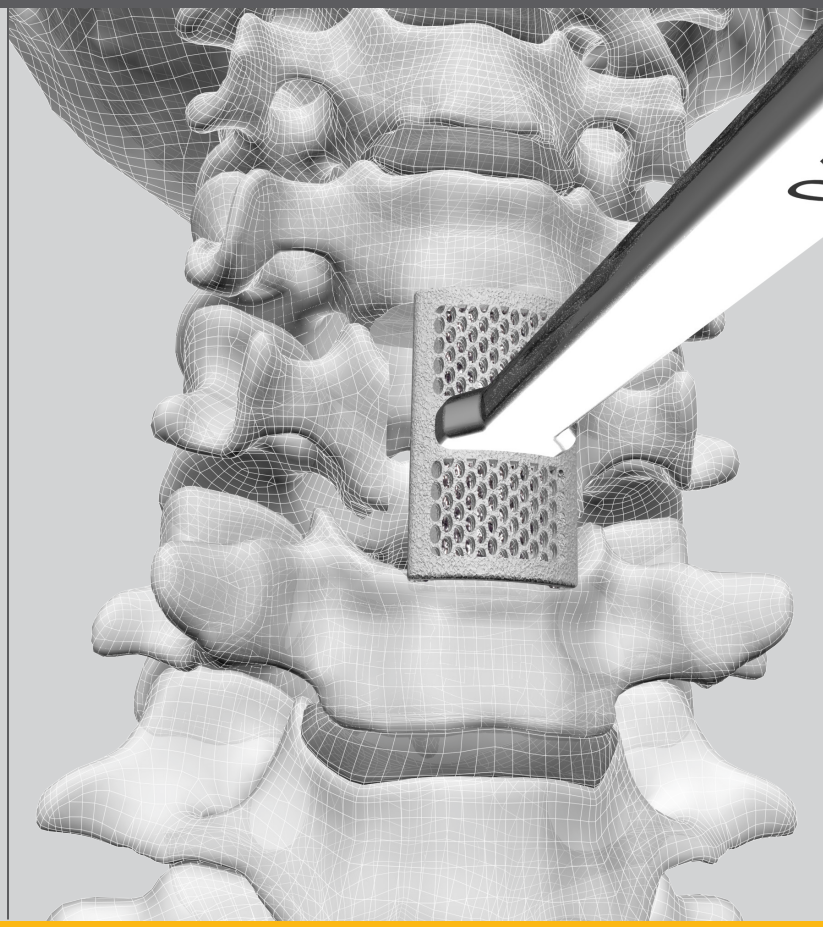
Insert the implant into the prepared intervertebral space. The use of a Small Mallet (08C00019) can be used to gently seat the implant. The implant may be inserted flush with the anterior rim of the adjacent vertebral bodies or may be countersunk past the anterior rim at the physician's discretion.

GRAFT PACKING TOOLS

VBR GRAFT PACKER TAMP

VBR GRAFT PACKER BLOCK

IMPLANT INSERTION



IMPLANT INSERTION (CONTINUED)

It is recommended that intraoperative fluoroscopy or other radiographic techniques be used to verify implant size and placement. Additional bone graft may be placed outside the implant at the surgeon's discretion.

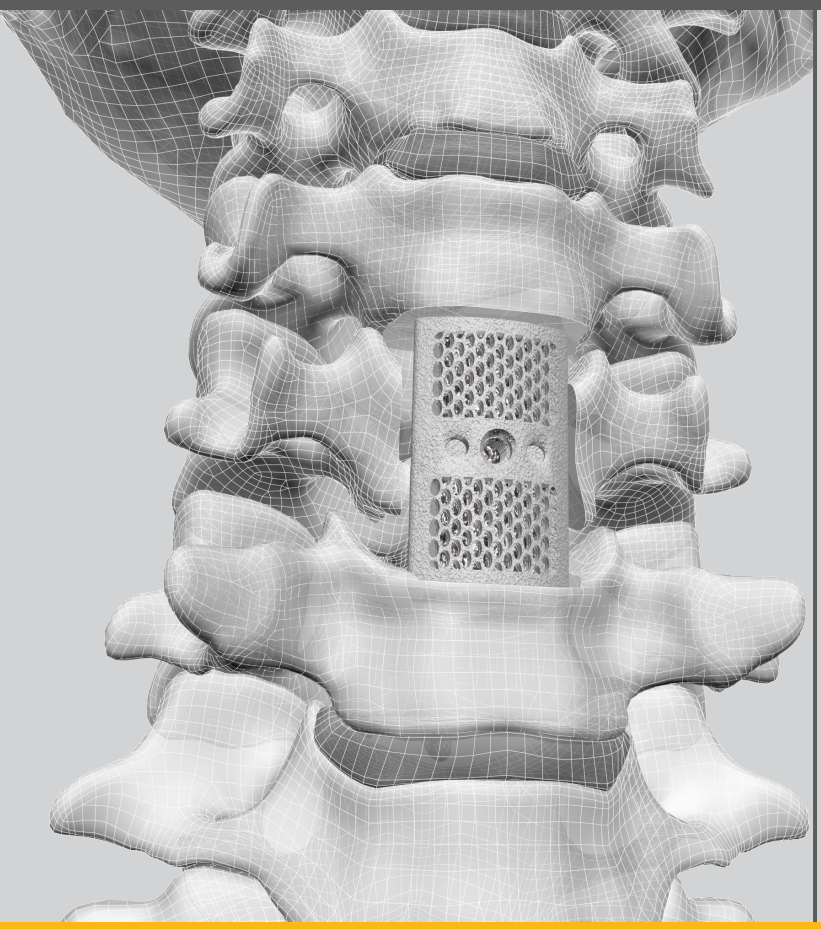
IMPLANT TAMP & FIXATION

If the implant needs additional adjustment after implantation there are two tamp options offered in the set.

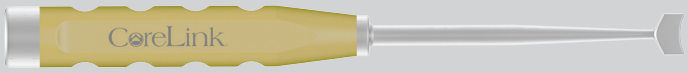
- The Curved Tamp (07C00037) can be used to adjust the implant at a specific angle. Tamping can be done from any point on the anterior portion of the implant.
- The Straight Tamp - Delrin Tip (07C00038) can also be used to adjust the implant.

After final placement of the implant is confirmed, apply appropriate FDA cleared supplemental fixation for the operative region of the spine (e.g., cervical, thoracic, or lumbar fixation devices). When used at more than two levels, supplemental fixation should include posterior fixation.

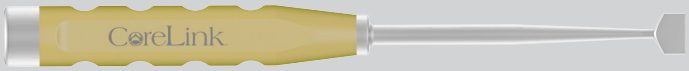
FINAL IMPLANT PLACEMENT



TAMP OPTIONS



CURVED TAMP

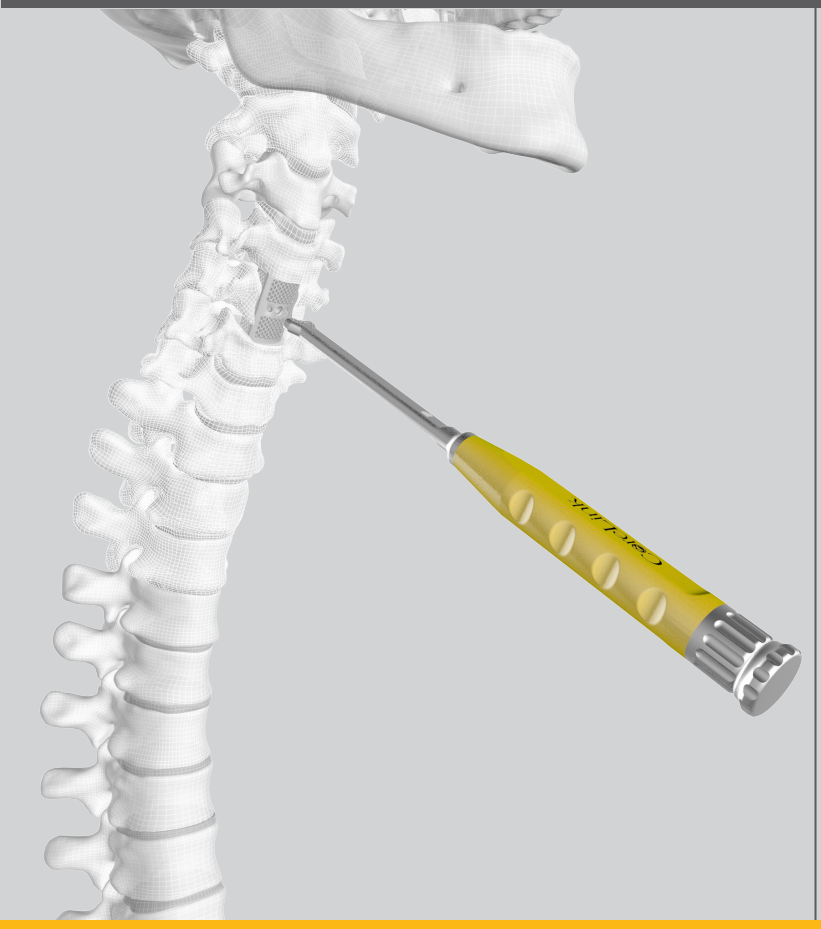


STRAIGHT TAMP - DELRIN TIP

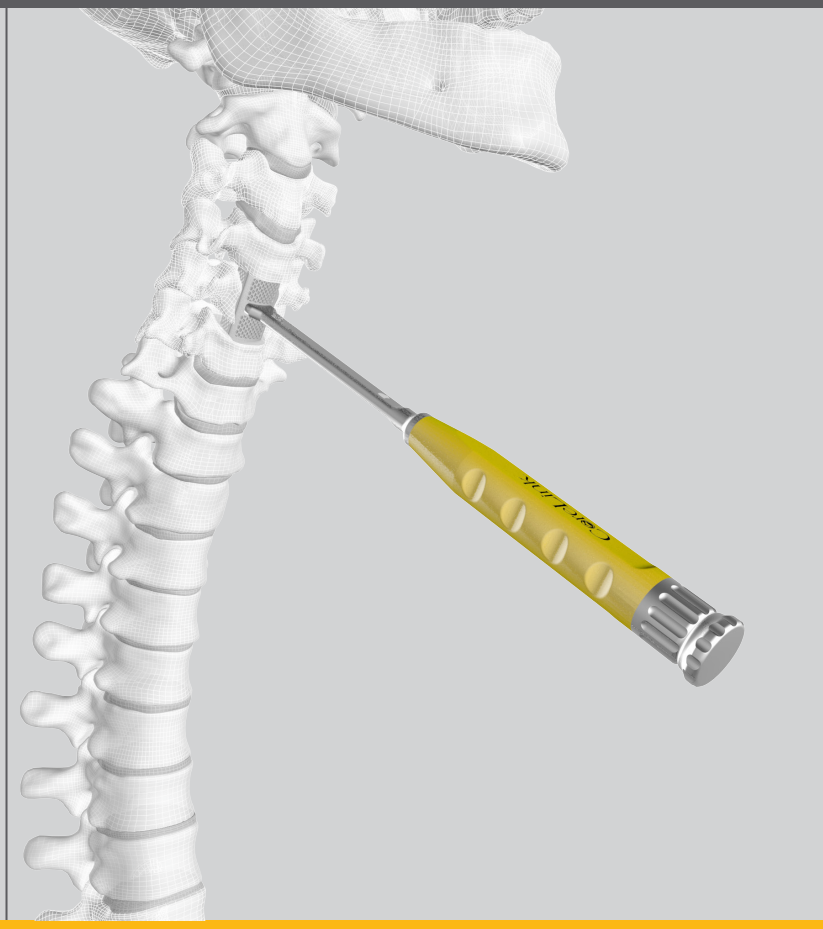
IMPLANT REMOVAL

To remove a F3D Corpectomy implant, thread the system's Cervical Inserter (01C00003) onto the implant and remove it from the vertebral space. Ensure the Inserter is firmly attached before attempting removal. Failure to do so may result in implant or Inserter damage.

RETHREAD THE INSERTER INTO THE IMPLANT



INSERTER RETHREADED



INSTRUCTIONS FOR USE

F3D CORPECTOMY SYSTEM

IMPORTANT NOTE: The user of this system must read and acknowledge the conditions of this insert prior to use.

Consult the product electronic instructions for use for all current languages and latest document revision at corelinksurgical.com/ifu or by scanning the barcode on the product labeling.

DESCRIPTION

The F3D Corpectomy System is available in a variety of different heights, footprints, and lordotic options to suit the individual pathology and anatomical conditions of the patient. The F3D Corpectomy System consists of a static, single-piece vertebral body replacement cage. The F3D Corpectomy System consists of vertebral body replacement devices intended for use in the cervical (C2-T1) and thoracolumbar spine (T1-L5). They are designed to provide mechanical support to the spine while arthrodesis occurs.

Implants in the F3D Corpectomy System are manufactured from the following materials:

- Medical grade titanium alloy (Ti6AL4V ELI as per ASTM F-3001)

Do not use any of the F3D Corpectomy System with components from any other manufacturer or system unless specifically allowed to do so in this or any other CoreLink document. None of the F3D Corpectomy System implants or implant components should be reused under any circumstances. The instruments provided with the F3D Corpectomy System are provided specifically for the implantation of the F3D Corpectomy System implants.

Please refer to the applicable F3D Corpectomy System Surgical Technique for additional important information about specific CoreLink implants, in addition to the information described herein.

This product is marked for the specific indications described in its labeling. The use of this product for other than its intended purpose(s) is either contraindicated (see CONTRAINDICATIONS) or is without evidence to support the safety and effectiveness of such use. For the information of individuals and institutions contemplating use of this product for other than labeled indications (i.e., off-labeled use). Such use may be experimental and may be the subject of restrictions under applicable laws and regulations.

INDICATIONS

The F3D Corpectomy System devices are vertebral body replacement devices intended for use in the cervical (C2-T1) and thoracolumbar spine (T1-L5).

When used in the cervical spine (C2-T1), F3D Corpectomy System devices are intended for use in skeletally mature patients to replace a diseased or damaged vertebral body caused by tumor fracture or osteomyelitis, or for reconstruction following corpectomy performed to achieve decompression of the spinal cord and neural tissues in cervical degenerative disorders. These spacers are intended to restore the integrity of the spinal column even in the absence of fusion for a limited time period in patients with advanced stage tumors involving the cervical spine in whom life expectancy is of insufficient duration to permit achievement of fusion, with bone graft used at the surgeon's discretion.

When used in the thoracolumbar spine (T1-L5), F3D Corpectomy System devices are intended for use to replace a collapsed, damaged, or unstable vertebral body due to tumor or trauma (i.e., fracture). These spacers are designed to provide anterior spinal column support even in the absence of fusion for a prolonged period.

The interior of the spacers can be packed with autograft or allogenic bone graft comprising cancellous and/or corticocancellous bone graft and/or demineralized allograft bone with bone marrow aspirate as an adjunct to fusion.

These devices are intended to be used with FDA-cleared supplemental spinal fixation systems that have been labeled for use in the cervical, thoracic, and/or lumbar spine (i.e., posterior screw and rod systems, anterior plate systems, and anterior screw and rod systems). When used at more than two levels, supplemental fixation should include posterior fixation.

CONTRAINDICATIONS

Contraindications of the F3D Corpectomy System include:

- Active systemic infection.
- Local infection at the site of surgery.
- Allergy or foreign body sensitivity to any of the implant materials.
- Severe osteoporosis as it may prevent adequate fixation and lead to collapse of the vertebral bodies around this and any other orthopedic implant.
- Presence of fracture or tumor of the vertebral body.
- Prior fusion at the level(s) to be treated.
- Any condition not described in the Indications for Use.

Other relative contraindications include:

- Conditions that place great stress on the implant or the interface with the endplates of the vertebral bodies, such as severe obesity, may lead to collapse of the vertebral bodies around the device. The treating surgeon must weigh the benefits versus risks of using the device in order to device what is in the best interest of the patient.
- A patient's occupation or activity level or mental capacity. Specifically, patients who because of their occupation or lifestyle, or because of conditions such as mental illness, alcoholism, or drug abuse, may place undue stresses on the implant during bony healing and may be at higher risk for implant failure.

COMPLICATIONS AND POSSIBLE ADVERSE EFFECTS

Use and/or misuse of this system may result in the following list of complications and potential adverse effects:

- Bending and/or breakage of any or all devices.
- Inadequate fixation.
- Non-union, delayed union or mal-union.
- Allergic reaction to implant material, debris, corrosion products including metallosis, staining, tumor formation, and/or autoimmune disease.
- Infection.
- Wound healing disorders or hematomas.
- Fracture, damage, or penetration of any spinal bone.
- Post-operative change in normal spinal curvature, loss of correction, height.
- Pain, skin penetration, irritation, fibrosis caused by skin pressure by implant components.
- Bursitis.
- Fracture, microfracture, resorption, damage, or penetration of any spinal bone at, above, and/or below the level of surgery.
- Herniated nucleus pulposus, disc disruption or disc degeneration at, above or below the level of surgery.
- Dural tears, pseudomeningocele, fistula, persistent CSF leakage, meningitis.
- Loss of sensory and/or motor function including paralysis (complete/incomplete), dysesthesia, hyperesthesia, paresthesia, radiculopathy, pain, numbness, spasms, sensory loss, tingling sensation and/or visual deficit.
- Neuropathy, paraplegia, paraparesis, reflex deficit, irritation, neurological deficit (transient or permanent) and/or muscle loss.
- Scar formation possibly causing neurological compromise or compression around nerves and/or pain.
- Damage to the urological, gastrointestinal, and/or reproductive systems resulting in compromises including urinary retention, loss of bladder control, gastritis, bowel obstruction, loss of bowel control, sterility, consumption, sexual dysfunction etc.
- Decrease in bone density potentially caused by stress shielding.
- Cessation of any potential growth of the operated portion of the spine.
- Loss of or increase in spinal mobility or function.
- Hemorrhage, hematoma, occlusion, seroma, edema, hypertension, embolism, stroke, excessive bleeding, phlebitis, wound necrosis, wound dehiscence, damage to blood vessels, or other types of cardiovascular system compromise.
- Reproductive system compromise, including sterility, loss of consortium, and sexual dysfunction.
- Limited ability to perform daily activities.
- Continuation of symptoms that were to be treated for by the implantation.
- Change in mental status.
- Development of respiratory problems, e.g., pulmonary embolism, bronchitis, pneumonia, etc.
- Death.

Additional surgery might become necessary to correct adverse effects and/or outcomes.

USE OF IMPLANT COMPONENTS

WARNING: The safety and effectiveness of the F3D Corpectomy System has been established only in skeletally mature patients to replace a diseased or damaged vertebral body caused by tumor fracture or osteomyelitis, or for reconstruction following corpectomy performed to achieve decompression of the spinal cord and

INSTRUCTIONS FOR USE (CONTINUED)

neural tissues in cervical degenerative disorders. These spacers are intended to restore the integrity of the spinal column even in the absence of fusion for a limited time period in patients with advanced stage tumors involving the cervical spine in whom life expectancy is of insufficient duration to permit achievement of fusion, with bone graft used at the surgeon's discretion. When used in the thoracolumbar spine (T1-L5), F3D Corpectomy System devices are intended for use to replace a collapsed, damaged, or unstable vertebral body due to tumor or trauma (i.e., fracture). These spacers are designed to provide anterior spinal column support even in the absence of fusion for a prolonged period.

The safety and effectiveness of these devices for any other conditions are unknown.

Patients must be informed that implants cannot be made to last indefinitely, and the purpose of the implant is to provide temporary internal support while the fusion mass about the implant is developing. Without solid biological support provided by sufficient fusion mass, the implants will fail in any of several modes. These modes may include bone-implant interface failure, implant fracture, or bone failure. Spinal implants of this type are more likely to fail if no bone graft is used, if a pseudarthrosis develops, or if patients have severe or multiple preoperative curves.

Spinal implants, like other implants, have a limited life. The life of the implant is directly impacted by the level of activity of the patient. Inform the patient that any activity increases the risk that the implant components may become loose, bend, or break. Instruct patients about restrictions to their activity levels in the postoperative period. Examine patients postoperatively to evaluate the condition of implant components and the development of the fusion mass about the implant components. Instruct the patient that implant components may bend, break, or loosen even though restrictions in activity are followed and even if fusion mass about the implant component sufficiently develops.

This device is not intended or expected to be the only mechanism of support of the spine. Regardless of the spinal pathology for which implantation of this device was chosen, solid biological support is anticipated but is not always obtained. Without solid biological support provided by bony fusion, the device cannot be expected to support the spine indefinitely and will lose effectiveness.

Potential risks associated with the use of this system, which may require additional surgery, include: device component fracture, loss of fixation, non-union, fracture of the vertebra, neurological injury, vascular or visceral injury, neurological complications, over-distraction, trauma to nerve root or dura, incorrect implant positioning, implant migration, pseudarthrosis, disc height loss, adjacent level disc degeneration, allergy or inflammation, general adverse effects related to surgical procedures (e.g., anesthesia, infection), subsidence, and expulsion. Risks and potential benefits must be provided to patients for whom this treatment modality is suggested. The decision to remove a broken implant must be made by the physician who must consider the risks associated with the presence of the broken implant and the condition of the patient.

This device must not be reused. Reuse may result in patient injury or other complications including but not limited to component fracture and/or deformation, breakage, difficulty with implantation, incompatibility with mating components and infection. It is the physician's responsibility to discard all damaged or mishandled implants.

Altering an implant may reduce its strength from fatigue and cause its fracture or deformation. If spinal implants are damaged during insertion or adjustment, they may not remain implanted and must be replaced. Refer to the F3D Corpectomy System surgical technique manual for descriptions of appropriate implant handling and insertion techniques.

Fusion devices cannot withstand activity and loads equal to those placed on normal healthy bone. Until maturation of the fusion mass is confirmed, do not subject this device to the stress of full weight bearing, or implant fracture or deformation may result.

In addition to the warnings and precautions discussed above, patients must be informed about general surgical risks prior to surgery.

PRECAUTIONS: The implantation of the F3D Corpectomy System is a technically demanding procedure that presents a risk of serious injury to the patient. Accordingly, such a procedure must be performed only by experienced spinal surgeons with specific training in the use of this vertebral body replacement system. The surgeon must be thoroughly knowledgeable in the medical and surgical aspects of the implant procedure, and the surgeon must be thoroughly knowledgeable of the mechanical and metallurgical limitations of the implant. It is the surgeon's responsibility to ensure that the operating procedure is performed correctly. The Surgical Technique can be requested from CoreLink by calling the phone number at the end of this document. No manufacturer can be responsible for complications resulting erroneous indication, wrong choice of implant size, incorrect operating procedure, and incorrect implant component combination. Fusion devices such as the F3D Corpectomy System rely upon individual patient physiological response, and proper use of the device does not guarantee any result.

Use of the system off-label is forbidden by CoreLink.

The F3D Corpectomy System have not been evaluated for safety and compatibility in the MR environment. The F3D Corpectomy System has not been tested for heating, migration, or image artifact in the MR environment. The safety of the F3D Corpectomy System in the MR environment is unknown. Scanning a patient who has this device may result in patient injury.

PREPARATION AT POINT OF USE

The implants of the F3D Corpectomy System are provided sterile. The surgical instruments provided with the F3D Corpectomy System are supplied non-sterile and must be thoroughly decontaminated, cleaned, and sterilized prior to surgical use. Instruments must be cleaned using validated methods before sterilization and introduction into the surgical field. Instrument sets are provided with a system specific tray suitable for transportation and steam sterilization. Remove all packaging that individual instruments may be provided in prior to cleaning. Clean instruments may be placed in the supplied instrument tray, then into an approved sterilization wrap or container.

All instruments that are partially dismantlable must be disassembled prior to cleaning. This includes the following:

- Removal of all detachable handles from each instrument
- Removing the inner shaft from the outer shaft of the Inserter
- Ensure that the Trial Tips are removed from the Distraction VBR Measuring Tool and the Telescoping VBR Measuring Tool after use.

Failure to disassemble a soiled device may lead to inadequate reprocessing, which poses a risk of infection to patients. Instruments must be placed into their respective locations in the sterilization tray to ensure proper steam sterilization. Prior to use, instruments must be inspected for signs of wear, damage, and proper function. If an instrument is suspected to be damaged it must not be used and CoreLink contacted for a replacement. This includes the following:

- Inspect the threads of the inner shaft of the inserter which threads into the outer shaft of the inserter. Ensure that the threads fully thread into the trials and implants easily
- Inspect the Distraction and Telescoping VBR Measuring Tool and ensure that the Trial Tips fully seat onto the Measuring Tools. Ensure that the post on the Distractor and the Telescoping VBR Measuring Tool is unobstructed and interacts with the Trial Tips correctly.
- Ensure that the Distraction VBR Measuring Tool can fully expand and return to its fully closed position.
- Ensure that the Telescoping VBR Measuring Tool instruments can fully expand once the non-detachable knob on the proximal end is loosened. Ensure that the instrument can remain at a fixed position once the knob on the proximal end of the device is tightened.
- Ensure that the Caliper can expand and return to its fully closed position.
- Ensure that the Ring Handle Inserter can fully open and close around a trial or implant as intended

All instruments should be reassembled following cleaning, prior to sterilization. This includes the following:

- Reassemble the inner shaft with the outer shaft of the inserter.

Follow the Cleaning and Sterilization procedures below.

CLEANING AND STERILIZATION

Instruments exposed to tissue must be thoroughly cleaned after use. Dried residues from surgery will make the cleaning process more difficult and/or ineffective. Maximum recommended time between use and cleaning is 4 hours. Instruments should not be exposed to elevated air temperatures (>100 °F). Certain cleaning solutions such as those containing fixatives, alcohols, aldehydes, chlorides, and/or excessive amounts of basic detergents can cause degradation of stainless-steel surfaces and laser marking. Use a cleaning and disinfecting agent that is compatible with aluminum, stainless steel, plastics, and silicone according to the manufacturer's instructions.

Manual Cleaning Instructions:

1. Completely submerge the instrument in a lukewarm neutral pH enzyme solution and allow it to soak for a minimum of 10 minutes. Use a soft-bristled brush to gently clean the instrument (particular attention must be given to crevices, cannulations, hinges, mated surfaces and other hard-to clean areas) until all visible soil has been removed. Brushing steps should be performed while submerged to prevent aerosols. A lumen brush must be used to clean cannulations. The enzyme

solution should be changed on a regular basis in order to ensure its effectiveness.
2. Remove the instrument from the enzyme solution and rinse in purified water (from one or any combination of the following processes: ultra-filter, RO, DI and/or distilled). Thoroughly flush cannulations, holes, and other difficult to reach areas with a syringe or equivalent tool.
3. Prepare a neutral pH cleaning solution according to the manufacturer's instructions and place in an ultrasonic cleaning unit.
4. Completely submerge device in cleaning solution and sonicate for minimum of 14 minutes.
5. Rinse instrument in running purified water (from one or any combination of the following processes: ultra-filter, RO, DI and/or distilled) thoroughly for at least one minute. There must be no sign of detergent, blood, or soil in the rinse stream.
6. Dry the instrument with a clean, disposable, absorbent, lint-free wipe. Instruments that require reassembly should be done so after drying.
7. Visually inspect instruments to ensure they are clean and in working order. If the device is found to not be visually clean, the previous cleaning steps must be repeated.

NOTE: Instrument cases, trays, and caddies must be thoroughly cleaned according to the above instructions. Inspect the containment devices and if found to not be visually clean, repeat the previous cleaning steps.

Automated Cleaning Instructions:

1. Rinse devices under running tap to remove gross soils. Particular attention must be given to crevices, lumens, mated surfaces, and other hard-to-clean areas. Use a syringe or jetted water to flush difficult to reach areas.
2. Place instruments in a suitable washer basket and process through a standard instrument washer. The table below represents the minimum parameters required for proper cleaning and disinfection.

Typical Automated Washer Cycle for Surgical Instruments

Step	Description
1	2-minute prewash with cold tap water
2	1-minute enzyme spray with hot tap water
3	2-minute detergent wash with hot tap water (64-66°C/146-150°F)
4	15-second hot tap water rinse
5	2-minute thermal rinse (80-93°C/176-200°F)
6	10-second purified water rinse (64-66°C/146-150°F)
7	7 to 30-minute heated air dry (116°C/240°F)

Notes:

- The washer manufacturer's instructions should be strictly adhered to.
- Avoid impact, scratching, bending or surface contact with any material that might affect the instrument surface or configuration.
- Pay particular attention to recesses as chemicals and rinse water may be entrapped in the recess after rinsing.
- Visually inspect all devices after cleaning to ensure cleanliness and function.

Sterilization Instructions

- **Sterile Implants:** Implants of the F3D Corpectomy System are provided "STERILE" via gamma irradiation and intended for single patient use only. DO NOT RESTERILIZE THIS PRODUCT. Sterility can only be assured if packaging is intact.
- **Non-sterile Implants and Instruments:** Instruments of the F3D Corpectomy System are provided non-sterile. Titanium bone screw implants may be provided in a non-sterile configuration. The non-sterile condition is conspicuously set forth on the product label. ISO 8828 or AORN recommended practices for in-hospital sterilization should be followed for all components.

Sterilization: In a properly functioning calibrated steam sterilizer, testing has shown that effective sterilization may be achieved as follows:

Sterilizer type:	Pre-vacuum
Preconditioning Pulses:	3
Minimum Temperature:	132°C (270°F)
Full Cycle Time:	4 Minutes
Minimum Dry Time:	30 Minutes (allow for cool-down)

Instruments should be sterilized in the steam sterilization cases provided by CoreLink. Instrument sets must be wrapped in in two layers of 1-ply polypropylene wrap (Kimguard KC600 – 510(k) K082554 or similar wrap) using sequential envelope techniques. Only wraps validated to maintain sterility after processing are to be used. Saturated steam with a quality of 97-100% must be used.

REUSABLE RIGID STERILIZATION CONTAINERS

The F3D Corpectomy System Instruments, provided in a perforated steam sterilization case, may be placed directly into Aesculap™ SterilContainers™. Testing has demonstrated the System, when processed in Aesculap SterilContainer System JK440, JK442, JK444, JK446 rigid containers (with corresponding JK series lid and re-usable JK series filter assembly), can be sterilized to a 10-6 sterility assurance level (SAL) in a Dynamic Air Removal (pre-vacuum) steam sterilization cycle when processed using the required sterilization cycle.

Required Sterilization Cycle

Sterilizer type:	Pre-vacuum
Preconditioning Pulses:	3
Minimum Temperature:	132°C (270°F)
Full Cycle Time:	4 Minutes
Minimum Dry Time:	30 Minutes (allow for cool-down)

CoreLink does not recommend the use of gravity displacement steam cycles for sterilization in Aesculap rigid container systems. Ensure that the supplied reusable rigid sterilization container is in proper working order prior to sterilization. Aesculap SterilContainer System has been validated ONLY with Aesculap reusable filters. For more information on the use of the Rigid Sterilization Containers please consult the Instructions for Use of the Manufacturer (https://www.aesculapusa.com/products/instructions-for-use).

THE STERILIZATION PARAMETERS PROVIDED IN THIS INSTRUCTIONS FOR USE SUPERCEDE THOSE LISTED IN THE AESCULAP INSTRUCTIONS FOR USE. ALL OTHER USAGE, CARE AND MAINTENANCE INSTRUCTIONS SPECIFIED IN AESCULAP DOCUMENTATION REMAIN APPLICABLE.

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 have been cleared by the US FDA for the selected sterilization cycle.

Flash sterilization of the F3D Corpectomy System is not recommended.

IMPORTANT SYSTEM CONSIDERATIONS AND WARNINGS

1. **Corrosion from Mixed Metals.** Damage from corrosion may occur following surgical implantation of metals. All implanted metals and alloys display general or uniform corrosion, and the rate of corrosion implanted metals and alloys is typically low due to the presence of passive surface films on the implanted metals and alloys. The F3D Corpectomy System devices are available in titanium alloy. It is imperative that the F3D Corpectomy System devices do not come into contact in-vivo with other dissimilar metals. Accelerated corrosion may occur when two dissimilar metals are in contact within the body environment. Corrosion may accelerate failure of implants. Corrosion also causes metal compounds to be released into the body.
2. **Failure of Implants Due to Excessive Demands in Connection with Delayed Union or Nonunion.** Implants of this type are temporary devices that are used to obtain disc height restoration until normal healing occurs and bone fusion mass is developed. If healing is delayed, or does not occur, the implant may fail over time due to metal fatigue. The useful life of the implant will be in part affected by the degree or success of implant to bone union, loads produced by weight bearing, and activity levels. The useful life of the implant will be also in part affected by notches, scratches or bending of the implant which may occur during the surgical procedure. Please inform patients of the risks of implant failure.
3. **Implant Selection.** Appropriate implant selection and placement are critical factors that affect implant life. Strict adherence to the indications, contraindications, precautions, and warnings for this product is essential to maximize implant longevity. Implants cannot withstand activity levels equal to those placed on normal healthy bone. As mentioned above, implants of this type are temporary and should not be expected to withstand indefinitely the unsupported stress of full weight bearing. Care must be taken to protect the components from being marred, nicked, or notched. Alterations will product defects which may become the point for eventual implant breakage. Inspection and trial assembly are recommended to determine proper working order of the system. If any components are damaged in any way, do not use them, and return them to CoreLink.
4. **Patient Considerations.** The following should be considered when evaluating whether a patient is a candidate for such a procedure:

- **Weight.** An overweight or obese patient can produce loads on the device that may lead to failure of the implant component.
- **Lifestyle or activity.** If the patient is involved in an occupation or activity that includes heavy lifting, muscle strain, twisting, repetitive bending, stooping, running, substantial walking, or manual labor, he/she should not return to these activities until the bone is fully healed. Even after the bone is fully healed, the patient may not be able to resume these activities.
- **Alcoholism, drug abuse, or mental conditions.** These conditions, among others, may cause the patient to ignore certain necessary limitations and precautions leading to implant failure or other complications.
- **Degenerative diseases.** In some cases, the progression of a degenerative disease may be so advanced at the time of implantation that it may substantially decrease the expected useful life of the implant component. In these cases, the use of the implant may only postpone potential outcomes and/or be of a temporary nature.
- **Implant sensitivity.** No preoperative test can completely exclude the possibility of sensitivity or allergic reaction. A patient may develop sensitivity or allergy after implants have been in the body.
- **Smoking.** Smoking has been linked to a higher rate of pseudarthrosis following surgical procedures where bone graft is used. Additionally, smoking has been shown to cause diffuse degeneration of intervertebral discs. Smoking can also lead to progressive degeneration of adjacent segments and late clinical failure (recurring pain) even after successful fusion and initial clinical improvement.

ADDITIONAL PRECAUTIONS

1. **Patient Instructions.** Instructions for the patient's postoperative care, and the patient's ability and willingness to follow such instructions are extremely important for successful bone healing. In addition to the instructions described previously, please instruct the patient on the limitations of the implant, and to limit and restrict physical activities, especially lifting and twisting motions and sports-related activities. Inform the patient that an implant is not as strong as normal healthy bone, and that the implant could loosen, bend, and/or break if excessive demands are placed on the implant, especially in the absence of complete bone mass fusion. Inform the patient that improper activities may cause the implants to become displaced or damaged and may cause the implant to migrate and damage nerves or blood vessels. As mentioned above, a patient having certain conditions, such as alcoholism, drug abuse, or other mental conditions may not properly use weight-supporting devices and may be particularly at risk during postoperative rehabilitation. Although the physician is the expert intermediary between the company and the patient, the important medical information given in this document must be conveyed to the patient.
2. **Implant Location.** Because vascular and neurological structures are located near to the implantation site, there are risks of serious or fatal hemorrhage and risks of neurological damage during and after implantation procedure. Serious or fatal hemorrhage may occur if: (1) the great vessels are eroded or punctured during implantation or are subsequently damaged due to breakage or migration of implants; or (2) pulsatile erosion of the vessels occurs due to the placement of the implants adjacent to the vessels.
3. **Implant Removal.** Spinal implants of this type may require removal if the desired clinical and surgical outcomes are not obtained. The surgeon should carefully weigh the risks versus benefits when deciding whether to remove the implant. When the implant is removed, the surgeon should provide postoperative management to avoid refracture. If the patient is older and has a low activity level, the surgeon may choose not to remove the implant thus eliminating the risks involved with a second surgery. Although uncommon, permanent implantation of this device may result in the following: (1) Corrosion, with localized tissue reaction or pain; (2) Possible increased risk of infection; (3) Bone loss due to stress shielding (4) Bending, loosening, and/or breakage, which could make removal impractical or difficult; (5) Pain, discomfort, or abnormal sensations due to the presence of the device; (6) Migration of implant position resulting in injury; and (7) Risk of additional injury from postoperative trauma.
4. **Do Not Reuse Implants.** An implant previously implanted must never be reused. An implant previously implanted may have small defects that are not readily visible that may lead to early breakage, and compromise device performance and patient safety. Reuse may also lead to cross contamination and patient infection.

CAUTION: Under federal law, this device may only be sold by or on the order of physician.

LIMITED WARRANTY AND DISCLAIMER

CORELINK PRODUCTS ARE SOLD WITH A LIMITED WARRANTY TO THE ORIGINAL PURCHASER AGAINST DEFECTS IN WORKMANSHIP AND MATERIALS. ANY OTHER EXPRESS OR IMPLIED WARRANTIES, INCLUDING WARRANTIES OF MERCHANTABILITY OR FITNESS, ARE HEREBY DISCLAIMED.

IF MORE THAN TWO YEARS HAVE ELAPSED BETWEEN THE DATE OF ISSUE/ REVISION OF THIS INSERT AND THE DATE OF CONSULTATION, CONTACT CORELINK CUSTOMER SERVICE FOR CURRENT INFORMATION AT 888-349-7808.

For further information contact:

CoreLink, LLC
2072 Fenton Logistics Park
St. Louis, MO 63026
(888) 349-7808

SYMBOLS GLOSSARY

Symbol	Description	ISO 15223 Reference
Rx Only	Prescription Required – Federal Law restricts this device to sale by or on the order of a licensed practitioner.	N/A
	Manufacturer - Indicates the medical device manufacturer as defined in EU Directives 90/385/ EEC, 93/42/EEC and 98/79/EC.	5.1.1
	Use-by-Date – Indicates the date after which the medical device is not to be used.	5.1.4
LOT	Lot Number – Indicates the manufacture's batch code so that the batch or lot can be identified.	5.1.5
REF	Reference Number – Indicates manufacture's catalogue number so that the medical device can be identified	5.1.6
STERILE R	Sterilized via Irradiation – Indicates a medical device has been sterilized using irradiation	5.2.4
NON STERILE	Non-Sterile – Indicates a medical device that has not been subject to a sterilization process.	5.2.7
	Do not re-use - Indicates a medical device that is intended for one use, or for use on a single patient during a single procedure.	5.4.2
	Consult instructions for use - Indicates the need for the user to consult the instructions for use.	5.4.3
	Caution – Indications the need for the user to consult the instructions for use for important cautionary information such as warnings and precautions that cannot, for a variety of reasons, be presented on the medical device itself.	5.4.4

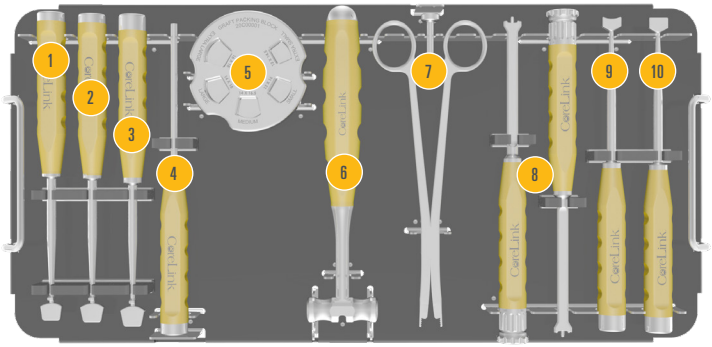
INSTRUMENT STANDARD PRODUCT LISTING

KIT ORDER #K5000445

F3D CORPECTOMY		
QTY	CATALOG NUMBER	DESCRIPTION
1	02C00210	FOOTPRINT SIZER - 14.5MM X 12MM
1	02C00212	FOOTPRINT SIZER - 16.5MM X 14MM
1	02C00214	FOOTPRINT SIZER - 18MM X 16MM
2	01C00003	INSERTER - CERVICAL
1	01C00004	RING HANDLE INSERTER - CERVICAL TISSUE
1	07C00038	TAMP - STRAIGHT - DELRIN TIP
1	07C00037	TAMP - CURVED
1	20C00001	VBR GRAFT PACKER – BLOCK
1	20C00002	VBR GRAFT PACKER - TAMP
1	20C00003	VBR CALIPER
1	08C00019	MALLET - SMALL
1	20C00008	VBR MEASURING TOOL- TELESCOPING, SMALL
1	20C00009	VBR MEASURING TOOL- TELESCOPING, MEDIUM
1	20C00010	VBR MEASURING TOOL- TELESCOPING, LARGE
1	20C00011	VBR MEASURING TOOL- TELESCOPING, XL
1	14C00644	VBR TELESCOPING TOOL MEASURING BLOCK

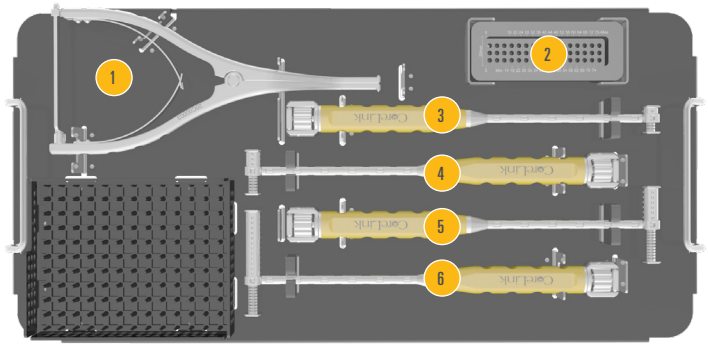
TOP TRAY

1. Footprint Sizer - 14.5mm x 12mm
2. Footprint Sizer - 16.5mm x 14mm
3. Footprint Sizer - 18mm x 16mm
4. VBR Graft Packer - Tamp
5. VBR Graft Packer Block
6. Mallet
7. Ring Handle Inserter
8. Cervical Inserters
9. Curved Tamp
10. Straight Tamp



BOTTOM TRAY

1. VBR Caliper
2. Measuring Block
3. VBR Measuring Tool, Small
4. VBR Measuring Tool, Medium
5. VBR Measuring Tool, Large
6. VBR Measuring Tool, X-Large



CONTACT CORELINK CUSTOMER SERVICE FOR SPECIAL ORDER ITEMS

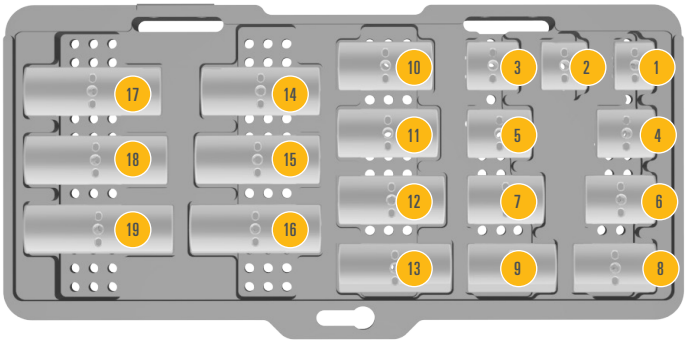
TRIALS 16.5MM X 14MM

QTY	CATALOG NUMBER	DESCRIPTION
1	02C02332	16.5MM X 14MM X 14MM, 7 DEG
1	02C02334	16.5MM X 14MM X 16MM, 7 DEG
1	02C02336	16.5MM X 14MM X 18MM, 7 DEG
1	02C02338	16.5MM X 14MM X 20MM, 7 DEG
1	02C02340	16.5MM X 14MM X 22MM, 7 DEG
1	02C02342	16.5MM X 14MM X 24MM, 7 DEG
1	02C02344	16.5MM X 14MM X 26MM, 7 DEG
1	02C02346	16.5MM X 14MM X 28MM, 7 DEG
1	02C02348	16.5MM X 14MM X 30MM, 7 DEG
1	02C02350	16.5MM X 14MM X 32MM, 7 DEG
1	02C02352	16.5MM X 14MM X 34MM, 7 DEG
1	02C02354	16.5MM X 14MM X 36MM, 7 DEG
1	02C02356	16.5MM X 14MM X 38MM, 7 DEG
1	02C02358	16.5MM X 14MM X 40MM, 7 DEG
1	02C02360	16.5MM X 14MM X 42MM, 7 DEG
1	02C02362	16.5MM X 14MM X 44MM, 7 DEG
1	02C02364	16.5MM X 14MM X 46MM, 7 DEG
1	02C02366	16.5MM X 14MM X 48MM, 7 DEG
1	02C02368	16.5MM X 14MM X 50MM, 7 DEG
1	14C00627	TRIAL CADDY

Heights 52mm - 74mm Special Order

CADDY - 7 DEGREE

1. 16.5mm x 14mm x 14mm
2. 16.5mm x 14mm x 16mm
3. 16.5mm x 14mm x 18mm
4. 16.5mm x 14mm x 20mm
5. 16.5mm x 14mm x 22mm
6. 16.5mm x 14mm x 24mm
7. 16.5mm x 14mm x 26mm
8. 16.5mm x 14mm x 28mm
9. 16.5mm x 14mm x 30mm
10. 16.5mm x 14mm x 32mm
11. 16.5mm x 14mm x 34mm
12. 16.5mm x 14mm x 36mm
13. 16.5mm x 14mm x 38mm
14. 16.5mm x 14mm x 40mm
15. 16.5mm x 14mm x 42mm
16. 16.5mm x 14mm x 44mm
17. 16.5mm x 14mm x 46mm
18. 16.5mm x 14mm x 48mm
19. 16.5mm x 14mm x 50mm



CONTACT CORELINK CUSTOMER SERVICE FOR SPECIAL ORDER ITEMS

IMPLANT STANDARD PRODUCT LISTING

KIT ORDER #K5000441

IMPLANTS 16.5MM X 14MM, 0 DEGREES				
QTY	CATALOG NUMBER	WIDTH (MM)	LENGTH (MM)	HEIGHT (MM)
2	3CM1614-0014	16.5	14	14
2	3CM1614-0016	16.5	14	16
2	3CM1614-0018	16.5	14	18
2	3CM1614-0020	16.5	14	20
2	3CM1614-0022	16.5	14	22
2	3CM1614-0024	16.5	14	24
2	3CM1614-0026	16.5	14	26
2	3CM1614-0028	16.5	14	28
2	3CM1614-0030	16.5	14	30
2	3CM1614-0032	16.5	14	32
2	3CM1614-0034	16.5	14	34
2	3CM1614-0036	16.5	14	36
2	3CM1614-0038	16.5	14	38
2	3CM1614-0040	16.5	14	40
2	3CM1614-0042	16.5	14	42
2	3CM1614-0044	16.5	14	44
2	3CM1614-0046	16.5	14	46
2	3CM1614-0048	16.5	14	48
2	3CM1614-0050	16.5	14	50

Heights 52mm - 74mm Special Order

KIT ORDER #K5000447

IMPLANTS 16.5MM X 14MM, 7 DEGREES				
QTY	CATALOG NUMBER	WIDTH (MM)	LENGTH (MM)	HEIGHT (MM)
2	3CM1614-0714	16.5	14	14
2	3CM1614-0716	16.5	14	16
2	3CM1614-0718	16.5	14	18
2	3CM1614-0720	16.5	14	20
2	3CM1614-0722	16.5	14	22
2	3CM1614-0724	16.5	14	24
2	3CM1614-0726	16.5	14	26
2	3CM1614-0728	16.5	14	28
2	3CM1614-0730	16.5	14	30
2	3CM1614-0732	16.5	14	32
2	3CM1614-0734	16.5	14	34
2	3CM1614-0736	16.5	14	36
2	3CM1614-0738	16.5	14	38
2	3CM1614-0740	16.5	14	40
2	3CM1614-0742	16.5	14	42
2	3CM1614-0744	16.5	14	44
2	3CM1614-0746	16.5	14	46
2	3CM1614-0748	16.5	14	48
2	3CM1614-0750	16.5	14	50

Heights 52mm - 74mm Special Order

CONTACT CORELINK CUSTOMER SERVICE FOR SPECIAL ORDER ITEMS
SUCH AS ADDITIONAL LORDOSIS AND HEIGHTS, INCLUDING ODD HEIGHTS

IMPLANT SPECIAL ORDER PRODUCT LISTING

IMPLANTS 16.5MM X 14MM, 12 DEGREES

QTY	CATALOG NUMBER	WIDTH (MM)	LENGTH (MM)	HEIGHT (MM)
2*	3CM1614-1214*	16.5	14	14
2*	3CM1614-1216*	16.5	14	16
2*	3CM1614-1218*	16.5	14	18
2*	3CM1614-1220*	16.5	14	20
2*	3CM1614-1222*	16.5	14	22
2*	3CM1614-1224*	16.5	14	24
2*	3CM1614-1226*	16.5	14	26
2*	3CM1614-1228*	16.5	14	28
2*	3CM1614-1230*	16.5	14	30
2*	3CM1614-1232*	16.5	14	32
2*	3CM1614-1234*	16.5	14	34
2*	3CM1614-1236*	16.5	14	36
2*	3CM1614-1238*	16.5	14	38
2*	3CM1614-1240*	16.5	14	40
2*	3CM1614-1242*	16.5	14	42
2*	3CM1614-1244*	16.5	14	44
2*	3CM1614-1246*	16.5	14	46
2*	3CM1614-1248*	16.5	14	48
2*	3CM1614-1250*	16.5	14	50

**Special Order*
Heights 52mm - 74mm Special Order

IMPLANTS 14.5MM X 12MM, 0 DEGREES

QTY	CATALOG NUMBER	WIDTH (MM)	LENGTH (MM)	HEIGHT (MM)
2*	3CM1412-0014*	14.5	12	14
2*	3CM1412-0016*	14.5	12	16
2*	3CM1412-0018*	14.5	12	18
2*	3CM1412-0020*	14.5	12	20
2*	3CM1412-0022*	14.5	12	22
2*	3CM1412-0024*	14.5	12	24
2*	3CM1412-0026*	14.5	12	26
2*	3CM1412-0028*	14.5	12	28
2*	3CM1412-0030*	14.5	12	30
2*	3CM1412-0032*	14.5	12	32
2*	3CM1412-0034*	14.5	12	34
2*	3CM1412-0036*	14.5	12	36
2*	3CM1412-0038*	14.5	12	38
2*	3CM1412-0040*	14.5	12	40
2*	3CM1412-0042*	14.5	12	42
2*	3CM1412-0044*	14.5	12	44
2*	3CM1412-0046*	14.5	12	46
2*	3CM1412-0048*	14.5	12	48
2*	3CM1412-0050*	14.5	12	50

**Special Order*
Heights 52mm - 74mm Special Order

CONTACT CORELINK CUSTOMER SERVICE FOR SPECIAL ORDER ITEMS
SUCH AS ADDITIONAL LORDOSIS AND HEIGHTS, INCLUDING ODD HEIGHTS

IMPLANT SPECIAL ORDER PRODUCT LISTING (CONTINUED)

IMPLANTS 14.5MM X 12MM, 7 DEGREES

QTY	CATALOG NUMBER	WIDTH (MM)	LENGTH (MM)	HEIGHT (MM)
2*	3CM1412-0714*	14.5	12	14
2*	3CM1412-0716*	14.5	12	16
2*	3CM1412-0718*	14.5	12	18
2*	3CM1412-0720*	14.5	12	20
2*	3CM1412-0722*	14.5	12	22
2*	3CM1412-0724*	14.5	12	24
2*	3CM1412-0726*	14.5	12	26
2*	3CM1412-0728*	14.5	12	28
2*	3CM1412-0730*	14.5	12	30
2*	3CM1412-0732*	14.5	12	32
2*	3CM1412-0734*	14.5	12	34
2*	3CM1412-0736*	14.5	12	36
2*	3CM1412-0738*	14.5	12	38
2*	3CM1412-0740*	14.5	12	40
2*	3CM1412-0742*	14.5	12	42
2*	3CM1412-0744*	14.5	12	44
2*	3CM1412-0746*	14.5	12	46
2*	3CM1412-0748*	14.5	12	48
2*	3CM1412-0750*	14.5	12	50

**Special Order*
Heights 52mm - 74mm Special Order

IMPLANTS 14.5MM X 12MM, 12 DEGREES

QTY	CATALOG NUMBER	WIDTH (MM)	LENGTH (MM)	HEIGHT (MM)
2*	3CM1412-1214*	14.5	12	14
2*	3CM1412-1216*	14.5	12	16
2*	3CM1412-1218*	14.5	12	18
2*	3CM1412-1220*	14.5	12	20
2*	3CM1412-1222*	14.5	12	22
2*	3CM1412-1224*	14.5	12	24
2*	3CM1412-1226*	14.5	12	26
2*	3CM1412-1228*	14.5	12	28
2*	3CM1412-1230*	14.5	12	30
2*	3CM1412-1232*	14.5	12	32
2*	3CM1412-1234*	14.5	12	34
2*	3CM1412-1236*	14.5	12	36
2*	3CM1412-1238*	14.5	12	38
2*	3CM1412-1240*	14.5	12	40
2*	3CM1412-1242*	14.5	12	42
2*	3CM1412-1244*	14.5	12	44
2*	3CM1412-1246*	14.5	12	46
2*	3CM1412-1248*	14.5	12	48
2*	3CM1412-1250*	14.5	12	50

**Special Order*
Heights 52mm - 74mm Special Order

CONTACT CORELINK CUSTOMER SERVICE FOR SPECIAL ORDER ITEMS
SUCH AS ADDITIONAL LORDOSIS AND HEIGHTS, INCLUDING ODD HEIGHTS

IMPLANTS 18MM X 16MM, 0 DEGREES

QTY	CATALOG NUMBER	WIDTH (MM)	LENGTH (MM)	HEIGHT (MM)
2*	3CM1816-0014*	18	16	14
2*	3CM1816-0016*	18	16	16
2*	3CM1816-0018*	18	16	18
2*	3CM1816-0020*	18	16	20
2*	3CM1816-0022*	18	16	22
2*	3CM1816-0024*	18	16	24
2*	3CM1816-0026*	18	16	26
2*	3CM1816-0028*	18	16	28
2*	3CM1816-0030*	18	16	30
2*	3CM1816-0032*	18	16	32
2*	3CM1816-0034*	18	16	34
2*	3CM1816-0036*	18	16	36
2*	3CM1816-0038*	18	16	38
2*	3CM1816-0040*	18	16	40
2*	3CM1816-0042*	18	16	42
2*	3CM1816-0044*	18	16	44
2*	3CM1816-0046*	18	16	46
2*	3CM1816-0048*	18	16	48
2*	3CM1816-0050*	18	16	50

**Special Order*
Heights 52mm - 74mm Special Order

IMPLANTS 18MM X 16MM, 7 DEGREES

QTY	CATALOG NUMBER	WIDTH (MM)	LENGTH (MM)	HEIGHT (MM)
2*	3CM1816-0714*	18	16	14
2*	3CM1816-0716*	18	16	16
2*	3CM1816-0718*	18	16	18
2*	3CM1816-0720*	18	16	20
2*	3CM1816-0722*	18	16	22
2*	3CM1816-0724*	18	16	24
2*	3CM1816-0726*	18	16	26
2*	3CM1816-0728*	18	16	28
2*	3CM1816-0730*	18	16	30
2*	3CM1816-0732*	18	16	32
2*	3CM1816-0734*	18	16	34
2*	3CM1816-0736*	18	16	36
2*	3CM1816-0738*	18	16	38
2*	3CM1816-0740*	18	16	40
2*	3CM1816-0742*	18	16	42
2*	3CM1816-0744*	18	16	44
2*	3CM1816-0746*	18	16	46
2*	3CM1816-0748*	18	16	48
2*	3CM1816-0750*	18	16	50

**Special Order*
Heights 52mm - 74mm Special Order

CONTACT CORELINK CUSTOMER SERVICE FOR SPECIAL ORDER ITEMS
SUCH AS ADDITIONAL LORDOSIS AND HEIGHTS, INCLUDING ODD HEIGHTS

IMPLANT SPECIAL ORDER PRODUCT LISTING (CONTINUED)

IMPLANTS 18MM X 16MM, 12 DEGREES				
QTY	CATALOG NUMBER	WIDTH (MM)	LENGTH (MM)	HEIGHT (MM)
2*	3CM1816-1214*	18	16	14
2*	3CM1816-1216*	18	16	16
2*	3CM1816-1218*	18	16	18
2*	3CM1816-1220*	18	16	20
2*	3CM1816-1222*	18	16	22
2*	3CM1816-1224*	18	16	24
2*	3CM1816-1226*	18	16	26
2*	3CM1816-1228*	18	16	28
2*	3CM1816-1230*	18	16	30
2*	3CM1816-1232*	18	16	32
2*	3CM1816-1234*	18	16	34
2*	3CM1816-1236*	18	16	36
2*	3CM1816-1238*	18	16	38
2*	3CM1816-1240*	18	16	40
2*	3CM1816-1242*	18	16	42
2*	3CM1816-1244*	18	16	44
2*	3CM1816-1246*	18	16	46
2*	3CM1816-1248*	18	16	48
2*	3CM1816-1250*	18	16	50

**Special Order*
Heights 52mm - 74mm Special Order

CONTACT CORELINK CUSTOMER SERVICE FOR SPECIAL ORDER ITEMS
SUCH AS ADDITIONAL LORDOSIS AND HEIGHTS, INCLUDING ODD HEIGHTS

INSTRUMENT SPECIAL ORDER PRODUCT LISTING

TRIALS 14.5MM X 12MM		
QTY	CATALOG NUMBER	DESCRIPTION
1*	02C01966	14.5MM X 12MM X 14MM, 7 DEG
1*	02C01968	14.5MM X 12MM X 16MM, 7 DEG
1*	02C01970	14.5MM X 12MM X 18MM, 7 DEG
1*	02C01972	14.5MM X 12MM X 20MM, 7 DEG
1*	02C01974	14.5MM X 12MM X 22MM, 7 DEG
1*	02C01976	14.5MM X 12MM X 24MM, 7 DEG
1*	02C01978	14.5MM X 12MM X 26MM, 7 DEG
1*	02C01980	14.5MM X 12MM X 28MM, 7 DEG
1*	02C01982	14.5MM X 12MM X 30MM, 7 DEG
1*	02C01984	14.5MM X 12MM X 32MM, 7 DEG
1*	02C01986	14.5MM X 12MM X 34MM, 7 DEG
1*	02C01988	14.5MM X 12MM X 36MM, 7 DEG
1*	02C01990	14.5MM X 12MM X 38MM, 7 DEG
1*	02C01992	14.5MM X 12MM X 40MM, 7 DEG
1*	02C01994	14.5MM X 12MM X 42MM, 7 DEG
1*	02C01996	14.5MM X 12MM X 44MM, 7 DEG
1*	02C01998	14.5MM X 12MM X 46MM, 7 DEG
1*	02C02000	14.5MM X 12MM X 48MM, 7 DEG
1*	02C02002	14.5MM X 12MM X 50MM, 7 DEG
1*	14C00618	TRIAL CADDY

**Special Order*
Heights 52mm - 74mm Special Order

CONTACT CORELINK CUSTOMER SERVICE FOR SPECIAL ORDER ITEMS
SUCH AS ADDITIONAL LORDOSIS AND HEIGHTS, INCLUDING ODD HEIGHTS

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