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Stryker Trauma
& Extremities |
VariAx Distal Radius
Locking Plate System
| Cadaver

~~Demonstration of a
Locking Plate Distal
Radius (Modified
Henry's Approach)~~

*AO distal radius
intraarticular fracture
fixation using double*

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*column volar plate
'Atlas of distal radius
fractures', booktrailer
(EN) Distal radius
fractures: what to look
for on radiographs
VariAx Distal Fibula
Fracture Distal Radius
Fracture Repair -
Volar Plate Arthrex®
Distal Radius Plate
Surgical Technique
Volar plates are not
always suitable for*

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*patients with distal
radius fractures ORIF
DISTAL RADIUS
WITH BIOMET DVR*

~~Live Surgery:~~

~~Ganglion Cyst Volar
Wrist Rockwood and
Wilkins Fractures in
Children Sample~~

~~Video Post-distal
radius fracture - cons
ervatively-managed~~

~~Broken wrist: Should
you remove your~~

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~~metal plate and
screws/pins?~~ Ixos®
Radius plate system
P4 Wave – Surgical
technique *What to
expect after distal
radius/wrist fractures*
*Distal Radius
Fracture: One Year
After Surgery* **Distal
radius or Wrist
Fracture - 4 months
After surgery and
rehab sessions**

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**Ixos® Radius plate
system P4 –**

Surgical technique

~~ePAK Single-Use~~

~~Delivery System–~~

~~MDEA 2014 Finalist~~

~~AO trauma Distal~~

~~radius fracture~~

~~reverse Barton, plate~~

~~fixation~~

Tibial Bone Transport

Over an

Intramedullary Nail

Using Cable and

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~~Pulleys Bone Grafting
Live Current Trends in
Ankle Fracture~~

~~Management~~

~~Precontoured Clavicle
Plate Fixation~~

**Medartis Solidarity
Webinar -**

**Olecranon: Dorsal
plating vs. bilateral
plating** *Open*

*Reduction Internal
Fixation (ORIF) of a
2-Part Proximal*

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Humerus Fracture

Video Minimally

Invasive

Percutaneous Plate

Osteosynthesis for

Ankle Fractures

Arthrex Distal Radius

Fracture Fixation Acu

Loc® 2 Volar Distal

Radius Plate Live

Surgery with Dr

Cardon Variax Distal

Radius

The VariAx 2 Distal

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Radius Plating System provides you with a comprehensive range of anatomic plating options that work with a common instrument and screw platform. Plates utilize SmartLock technology which permits polyaxial screw placement.

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Radius | Stryker

fractures of the distal
radius.

Reconstruction of the
distal radius. The

VariAx Distal Radius
Plating System

represents the Next
Generation of Bone

Fixation for your

Distal Radius Fracture
Needs. System

Features: •

Comprehensive

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Plating System •
Providing Anatomical
Volar and Dorsal,
Universal Volar and
Fragment Specific
Solutions.

*VariAx Distal Radius
Locking Plate System*
The VariAx Distal
Radius Plating
System represents
the Next Generation
of Bone Fixation for

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your Distal Radius
Fracture Needs.
Precautions Stryker
Osteosynthesis
systems have not
been evaluated for
safety and use in MR
environment and have
not been tested for
heating or migration in
the MR environment,
unless specified

Distal Radius Locking
Page 14/80

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Plate System -

Stryker MedEd

The VariAx Distal
Radius Plating

System represents
the Next Generation
of Bone Fixation for
your Distal Radius
Fracture Needs.

Intended Use The
VariAx Distal Radius
Locking System incl.
the XXL Volar Distal
Radius Plates is

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intended for use in internal fixations of the small bone fractures, primarily including distal radius fractures. Indications

*VariAx - Rontis
Medical*

The VariAx 2 Xpress Distal Radius Locking Plate System is a single-use, disposable instrument and

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implant system created to treat distal radius fractures. The system is comprised of kitted anatomic volar plates and self-tapping screws, both locking and non-locking.

*VariAx 2 Xpress
Distal Radius Locking
Plate System*
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Distal Radius Radius
Plating System
represents the Next
Generation of Bone
Fixation for your
Distal Radius Fracture
Needs. It is designed
to offer a
comprehensive
selection of plates,
screws, pegs and
instrumentation
necessary to maintain
the stability of the

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distal radius lesion,
while providing your
surgical staff a VariAx
Distal Radius Page
7/22

*Variax Distal Radius -
engineeringstudymate
rial.net*

The VariAx Distal
Lateral Plate and the
VairAx Fibula Straight
Plates are intended
for use in internal

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fixation of the distal fibula. Reproducible results With its patented polyaxial locking technology, VariAx brings something new to surgeons: convenience.

*VariAx Distal Fibula |
Stryker*

euk-var2-wrist-3
940278 volar distal

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radius plate insert, left
variax2 item nr. #

description qty qty out
qty in lotnr. order qty

54-25375 1 volar

smartlock distal radius
plate, narrow,

left,long, 12 holes1

54-25677 2 volar

smartlock distal radius
plate 1 54-25377 3

volar smartlock distal
radius plate, standard,

left,long, 14 holes1

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54-25374 4 volar
smartlock distal radius
plate, narrow, left ...

*940213 UPPER
TRAY, DEDICATED
WRIST VARIAX2*

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Recognizing the
showing off ways to
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The VariAx 2 Distal Radius Plating System is a distal radius fracture treatment from Stryker. To learn more, click the link below to visit Stryker.

*Stryker VariAx 2
Distal Radius Plating
System | MEDcraze*
The Variable Angle
LCP Two-Column

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Volar Distal Radius Plate 2.4, featuring variable angle locking technology, is indicated for intra- and extra-articular fractures and osteotomies of the distal radius. All implants are available in stainless steel and titanium.

Variable Angle LCP
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*Two-Column Volar
Distal Radius Plate 2*

...

The VariAx Distal Radius Locking System including the XXL Volhr Distal Radius Plates is intended for internal fixation of small bone fractures, primarily including distal radius fractures....

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JUL 18 2014 -

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The Stryker VariAx 2 Compression Plating System is indicated for internal fixation of fractures in the radius, ulna, humerus, clavicle, and distal fibula, in patients with normal bone density and osteopenic bone, for the following indications: •

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Osteotomies, mal-unions and non-unions • Single, segmental and comminuted fractures

*VariAx Compression
Plating System*

DOTmed.com is a medical and hospital equipment classified advertising site for new and used medical equipment for

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sale or wanted, we also list refurbished medical equipment. We also offer a ...

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Medical Equipment,
Hospital Equipment ...*

The complex variation in axial loads in the distal radius and during length change and dynamic wrist motion were studied

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and discussed. There was no correlation between native variance and distal loads.

*"The Effect of Radial
and Ulnar Length
Change on Distal ...
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PEEK biomaterials are currently used in hundreds of thousands of spinal fusion patients around the world every year. Durability, biocompatibility, and excellent resistance to aggressive sterilization procedures make PEEK a polymer of

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choice, replacing metal in orthopedic implants, from spinal implants and knee replacements to finger joints and dental implants. The new edition of this authoritative work sees the book expand from 17 chapters to 26 chapters to match the expansion in applications in

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PEEK—from spinal cages to spinal rods and disc replacements; hip and knee joint replacement; dental; trauma; and sports medicine. New PEEK formulations have been developed incorporating hydroxyapatite, additives to combat infection, and surface

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grafted polymers to improve lubrication. The book also covers additive manufacturing, which has made significant inroads with PEEK in the past 5 years as well by introducing the prospect of patient-specific implants. Like the 1st edition, the updated Handbook brings together

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experts in many different facets related to PEEK clinical performance as well as in the areas of materials science, tribology, and biology to provide a complete reference for specialists in the field of plastics, biomaterials, medical device design, and surgical applications.

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Useful for materials scientists and biomedical engineers, both in industry and academia, the book is a one-stop shop for information on PEEK as a biomaterial—including in-depth coverage of materials properties—while also providing cutting-edge information on

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applications and combinations of the material. Presents a complete reference work covering PEEK, the leading polymer for spinal implants and a range of other biomedical applications Covers a range of new formulations and applications, including in-depth coverage of

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the additive
manufacturing of
PEEK Provides a vital
source of supporting
information for
materials selection
decisions and
regulatory
submissions

Biomechanics is often
overlooked when
dealing with
orthopedic injuries,

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whether regarding prevention or treatment, and practicing surgeons and surgeons-in-training may feel overwhelmed when referring to a book with a more complicated basic science approach. In order to make the subject clinically relevant to orthopedic

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trauma surgery, this unique text presents numerous clinical case examples to demonstrate clearly and effectively the principles biomechanics of injury, fixation and fracture healing. Divided into five sections, the opening chapters cover the essentials of stress

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and strain relevant to bone and joints and how this relates to fractures and their healing, complete with illustrative case material. This case-based approach is carried throughout the book, with part two discussing biomechanical principles of external fixation for diaphyseal

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and periarticular fractures, limb lengthening and deformity correction. Tension band wiring for both olecranon and patella fractures are covered in part three, and both locking and nonlocking plates are illustrated in part four. The final section describes

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biomechanical
principles of
intramedullary nails
for a variety of
fractures and
nonunions, as well as
arthrodesis and
lengthening.

Generous radiological
images and
intraoperative photos
provide a helpful
visual enhancement
for the clinical

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material. Making the
sometimes esoteric
topic of biomechanics
more clinically
relevant to the
practicing clinician,
Essential
Biomechanics for
Orthopedic Trauma
will be an excellent
resource not only for
orthopedic surgeons,
sports medicine
specialists and

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trauma surgeons, but also medical and biomedical engineering students and residents.

The first edition of this text was published by the American Society for Surgery of the Hand in 1994.

Focussing on developments from 1994 to 1999, the 45

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chapters of this second edition are authored by experienced clinicians in orthopaedic surgery, plastic surgery, oncology, and other hand-related disciplines. The text is organized into sections on: hand fractures and joint injuries; distal radius and carpus; tendons;

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nerve; skin and soft
tissues; vascular;
arthritis; tumors;
paediatric hand.

The German edition
of our book entitled
"Operative Frakturen
behandlung" by M. E.
MÜLLER, M.
ALLGÖWER and H.
WILLENEGGER
(Springer, Berlin .
Göttingen .

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Heidelberg, 1963) has been out of print now for more than three years. We are planning a new edition which will deal with the collective experience of 14,000 new cases, all treated by internal fixation, and will include the newest developments in the field of internal fixation. However, it

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will be some time before this new edition can be published. Increasing demands for a description of the AO technique of internal fixation has stimulated us to publish this manual. In it we shall describe in a comprehensive but somewhat apodictic manner the principles

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and techniques of the AO methods of fracture treatment and reconstructive surgery, which in our hands, have stood the test of time. The book is written in a somewhat abbreviated style. It corresponds in subject matter to the teaching given at the AO courses in Davos,

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but deals with each subject more thoroughly. We have dispensed with pictures of the instruments, as these may be found in the Synthes Catalogue *. This manual should be regarded as the product of collective experiencce, containing new thoughts and new

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discoveries from basic research. In considering the risks of mistakes and dangers, we can only reiterate what we have already stated in "Technique of Internal Fixation of Fractures": "Open treatment of fractures is a valuable but difficult method which involves much responsibility.

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Presenting an in-depth discussion of the surgical management of fractures and dislocations of the talus and calcaneus, this text utilizes both an up-to-date review of the literature, providing a broad understanding of the topic, and a case-

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based approach, delving into the finer details of how to care for these injuries and providing an outline of the specific surgical techniques that make anatomic repair of these injuries possible. Beginning with a review of the general principles of foot trauma care, the chapters then

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proceed thematically to cover various fractures of the talus, tarsal dislocations, fractures of the calcaneus, and post-traumatic care and reconstruction. There is a focus throughout on the care of the post-traumatic sequelae of these injuries, as these frequently lead to

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chronic issues about the foot and ankle. Amply illustrated with figures, radiographs and intra-operative photographs, Fractures and Dislocations of the Talus and Calcaneus will be an excellent resource for orthopedic, podiatric and trauma surgeons and residents.

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This book covers diagnostic images of common and rare fractures for nearly every part of the human body, based on a large number of clinical cases. The highlight of this book is that both of three-dimensional X-ray images and CT/MRI images of thousands

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of fracture cases are presented for comparison and further discussion, according to the framework of AO classification. The first chapter gives a general introduction of various diagnostic imaging techniques for fractures, with attention to their advantages and

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disadvantages. The following chapters present detailed radiological images of upper extremity fractures, lower extremity fractures, axial skeleton fractures, and epiphyseal lesions. It helps readers to recognize the difference between various diagnostic

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techniques, and to select optimal imaging techniques. With the illustrative figures, this book is a valuable tool to orthopaedist, radiologists, trauma surgeons, emergency room doctors, professional clinical staff, and medical students. Yingze Zhang is a Professor and Director of the

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orthopaedic surgery
department, the Third
Hospital of Hebei
Medical University,
Shijiazhuang, China.
Professor Zhang is an
academician of the
Chinese Academy of
Engineering (Division
of Medicine and
Health), and current
President of Chinese
Orthopedic
Association (COA).

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He is also the author
of Clinical
Classification in
Orthopaedics
Trauma, Springer,
2018.

Emergency
Musculoskeletal
Imaging in Children is
a practical, concise,
and easy-to-read
guide to the radiologic
workup of acute

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musculoskeletal injuries and conditions in children. The book is conveniently organized by anatomic site and covers all acute injuries and conditions of the upper and lower extremities encountered in the emergency room, outpatient clinic, and office. Close attention

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is also given to normal findings and anatomic variants that can mimic pathology. More than 600 MR, CT, ultrasound, and radiographic images complement the text.

Parallel robots are closed-loop mechanisms presenting very good performances in

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terms of accuracy, velocity, rigidity and ability to manipulate large loads. They have been used in a large number of applications ranging from astronomy to flight simulators and are becoming increasingly popular in the field of machine-tool industry. This book presents a

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complete synthesis of the latest results on the possible mechanical architectures, analysis and synthesis of this type of mechanism. It is intended to be used by students (with over 150 exercises and numerous internet addresses), researchers (with over 650 references and

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access to the code of
some algorithms
presented in this
book) and engineers
(for which practical
results, mistakes to
avoid, and
applications are
presented). Since the
publication of the first
edition (2000) there
has been an
impressive increase in

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terms of study and use of this kind of structure that are reported in this book. This second edition has been completely overhauled. The initial chapter on kinematics has been split into Inverse Kinematics and Direct Kinematics. A new chapter on calibration was added. The other

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chapters have also been rewritten to a large extent. The reference section has been updated to include around 45% new works that appeared after the first edition.

The history of the origin and development of the new Classification of

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Fractures was described in the preface to the French edition. The history of the acceptance of this new concept dates back to 1986, when the Swiss Association for the Study of the Problems of Internal Fixation (AO) accepted the new Classification of Fractures. In the

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same year, the Trustees of the AO/ASIF Foundation, at their annual meeting in Montreux, adopted the new AO Classification as the basis for fracture classification to be used in the planned third edition of the AO/ASIF Manual. In August 1987, the French edition of "The

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Comprehensive
Classification of
Fractures of Long
Bones" made its first
appearance,
coincident with the
Congress of the
International Society
of Orthopaedic
Surgery (SICOn in
Munich. This
precipitated a great
deal of interest in the
subject. This interest

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persisted, so that in February of 1988 the President of SICOT, Sir Dennis Paterson, formed a "Presidential Commission for Documentation and Evaluation" with Maurice E. Muller as Chairman.

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