Expert Femur Nail II

Size Chart:

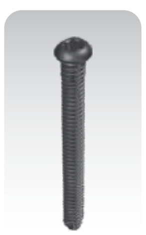
Diameter	Length	Code
9 mm	320-440 mm(20 mm Increment)	NT380.09.320.01 – NT380.09.440.01
		NT380.09.320.02 – NT380.09.440.02
10 mm	320-440 mm(20 mm Increment)	NT380.10.320.01 – NT380.10.440.01
		NT380.10.320.02 – NT380.10.440.02
11 mm	320-440 mm(20 mm Increment)	NT380.11.320.01 – NT380.11.440.01
		NT380.11.320.02 – NT380.11.440.02
12 mm	320-440 mm(20 mm Increment)	NT380.12.320.01 – NT380.12.440.01
		NT380.12.320.02 – NT380.12.440.02

Ø 7.0 mm Expert Femur Nail II Antirotation Screw

Length 60 to 115 mm *(5 mm increment)*
ST381.60 – ST381.115

Ø 7.0 mm Expert Femur Nail II Cannulated Antirotation Screw

Length 60 to 115 mm *(5 mm increment)*
ST382.60 – ST382.115



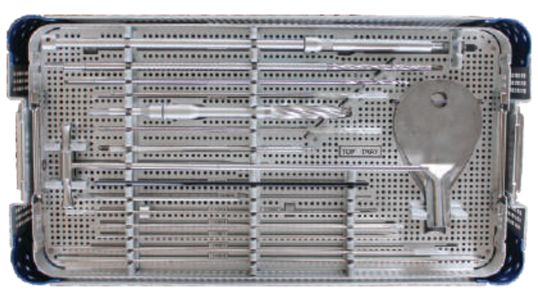
Ø 5.0 mm Advanced IM Nail Screw

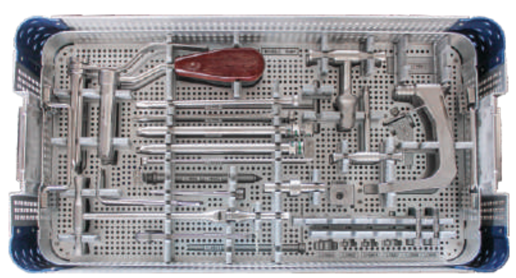
Length 26 to 70 mm *(2 mm increment)*
ST461.26 - ST461.70

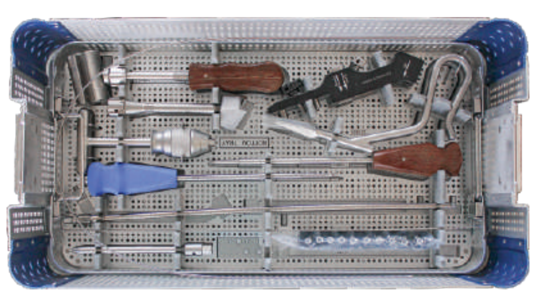
Length 75 to 100 mm *(5 mm increment)*
ST461.75 - ST461.100

Expert Femur Nail II End Cap

Length 0 to 15 mm *(5 mm increment)*
ECT383.00 – ECT383.15







Expert Femur Nail II

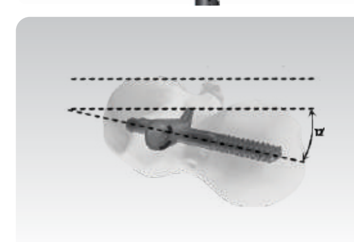
Miraclus®
Implanting LIFE

Indication:

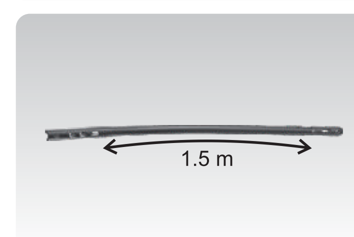
- Subtrochanteric femur fractures.
- Ipsilateral femoral neck and shaft fractures.
- Isolated femoral shaft fractures.
- Fractures at risk of becoming pathological.
- Femoral malunions and nonunions.

Features :

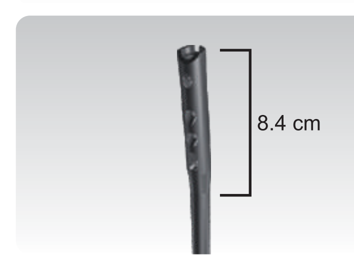
- Proximal bend 5 degree, enables easy insertion from Greater Trochanter.



- Restriction mode locking nail has 12° anterversion angle.



- Radius of curvature for the nail is 1.5 m.



- The bend in the nail begins 8.4 cm from its proximal end.

Features

Entry Point :

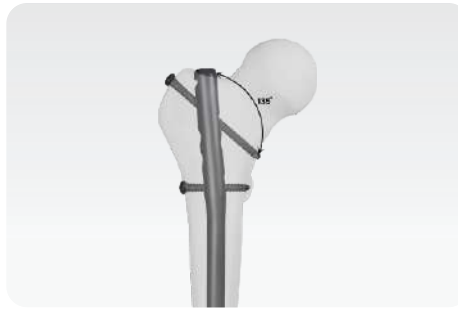
AP View : Tip of Greater Trochanter.

: 5° laterally to the axis of intramedullary canal.

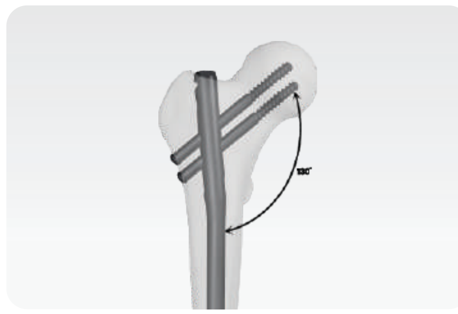
Lateral View : It is in the line of the axis of intramedullary canal.

Proximal Locking:

(A) **Static Locking -** is achieved using a 5mm Advanced IM Nail screw at a 135° antegrade position.(mostly preferred for shaft fractures). It features an antegrade locking hole and a transverse locking slot, provides both static & dynamic locking options.

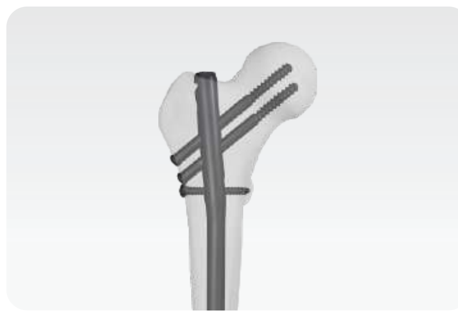


(B) **Recon Locking -** Recon locking is used for combined femoral shaft and neck fractures, as well as subtrochanteric fractures, utilizing two 7mm EFN II Cannulated Antirotation screws placed at a 130° angle.



(C) **Recon Locking with transverse locking screw -**

Proximal locking includes two recon screws along with a transverse locking screw positioned for static locking.



- Proximal nail cut ensures clear visibility of the implant under C-arm during the surgical procedure.
- Proximal Locking options can be done by both 5.0mm Advanced IM Nail Screw or 7mm EFN II Cannulated Antirotation screws.

Note: When planning to use recon screws, it is advisable to complete proximal locking before proceeding with distal locking.

Distal Locking:

(I) **Static Locking -** Static locking is performed using 5.0 mm Advanced IM Nail Screw.

Having multiplanar holes.

Anteriorposterior, mediolateral, oblique angulation 30° posterior to mediolateral view.

(II) **Dynamic Locking -** Dynamic locking is achieved using a 5.0 mm Advanced IM Nail Screw positioned at the distal end of the dynamic slot.

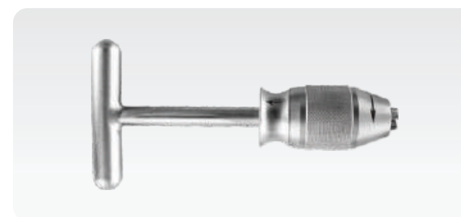
Multiple locking configurations

- Enhanced stability via multiplanar screw orientation.
- Improved anti-rotational control.
- Option for distal dynamization to support controlled axial compression.

EFN – II Advanced Instrumentation

- Multiguide Wire Sleeve (Honeycomb design) – Intraoperative freedom to surgeons for guide wire correction.

- The Universal Chuck can function both as a guide wire inserter and for manual drilling.



- Self Holding Screw Driver.