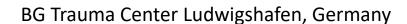
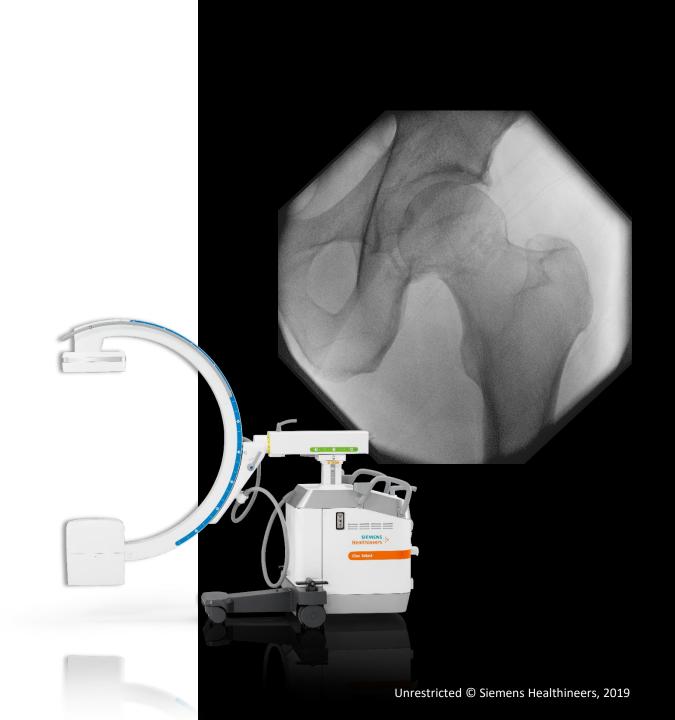


Intraoperative Imaging with Cios Select FD

Clinical Cases - Ortho Trauma





Clinical Cases



- Acetabulum
- Clavicula
- <u>Femur</u>
- Humerus distal
- <u>Tibia</u>
- Tibia plateau
- Conclusion





Clinical Case

Acetabulum

Back to content slide clinical cases

Intraoperative imaging with Cios Select FD Clinical case – Acetabulum



- Background pathology
- Background therapy
- Patient history
- Preoperative findings
- Surgical procedure

AP view
Alar/oblique view



Background pathology



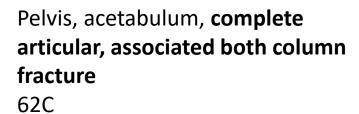
AO Classification

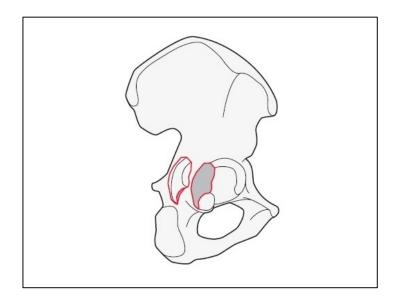
Acetabular fractures

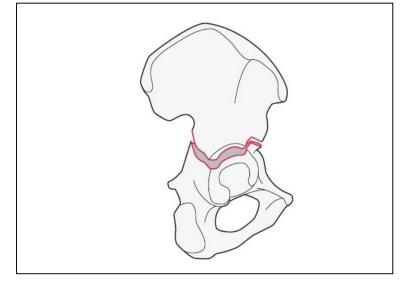
Types:

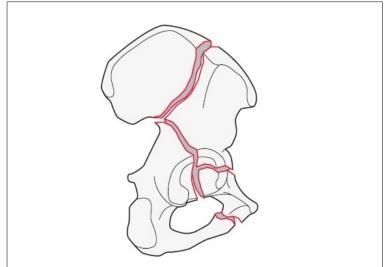
Pelvis, acetabulum, partial articular, isolated column and/or wall fracture 62A

Pelvis, acetabulum, partial articular, transverse type fracture
62B





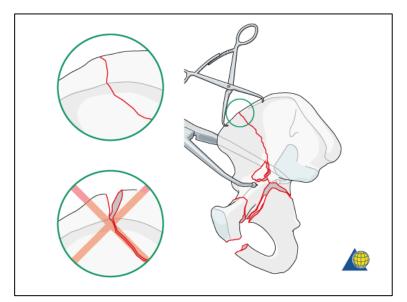


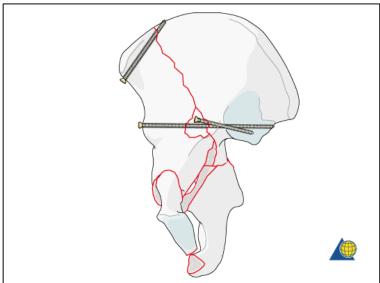


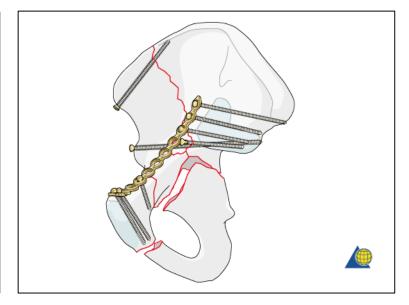
Background therapy



ORIFFixation of the iliac wing and plate fixation of the anterior column







Patient history



Classification:

Complex acetabular fracture with central hip protrusion and pelvic fracture

Remarks:

- Skiing accident
- Initial extension treatment
- Pain in right pelvic region
- No peripheral motorical or neurological deficits

Gender	male
Age	46 - 60



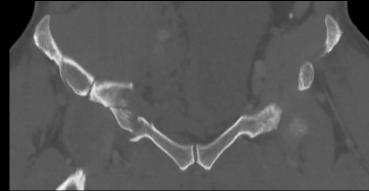
Preoperative findings



Preoperative CT

Axial, sagittal and coronal view of pelvis

 Complex acetabular fracture with central hip protrusion and pelvic fracture on the right





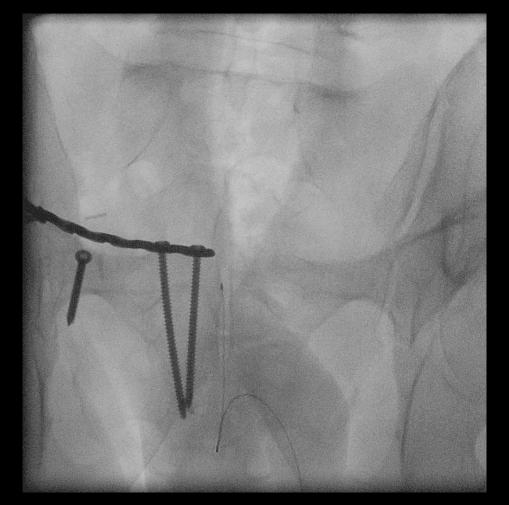




Intraoperative imaging

Pelvis and right hip in AP view

- Regular articulation of the hip joint
- Symphysis and right ISG joint are in anatomically regular position





Intraoperative imaging

Pelvis and right hip in AP view

- Correct implant positioning
- Good bony contrast in spite of metal objects
- No intra-articular fragments or screw penetration



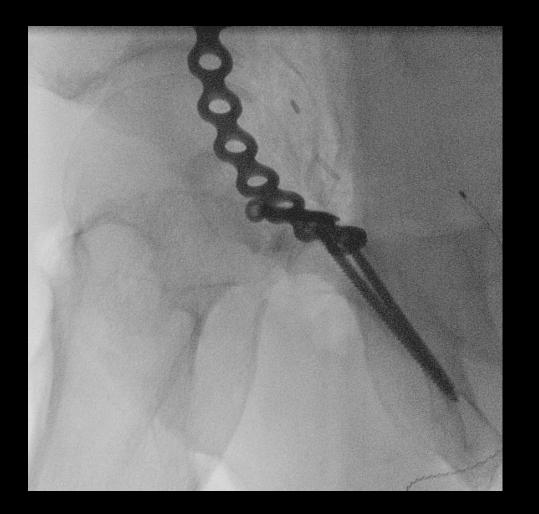
Surgical procedure Alar/ oblique view



Intraoperative imaging

Pelvis and right hip in alar/oblique view

- Correct implant positioning
- Regular articulation of the hip joint

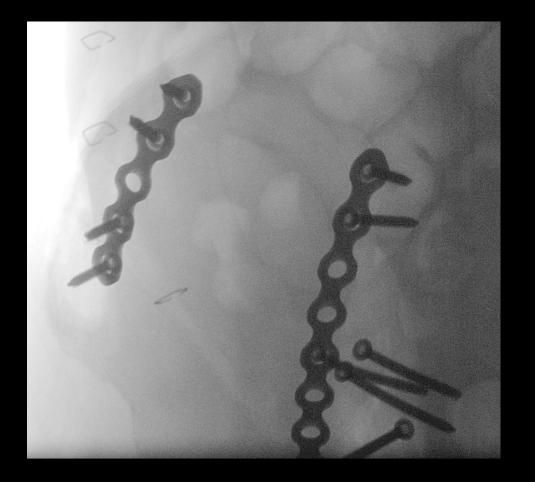




Intraoperative imaging

Pelvis and right hip in alar/oblique view

- Correct implant positioning
- No intra-articular fragments or screw penetration





Clinical Case

Clavicula

Back to content slide clinical cases

Intraoperative imaging with Cios Select FD Clinical case - Clavicula



- **Background pathology**
- **Background therapy**
- **Patient history**
- **Preoperative findings**
- Surgical procedure

AP view Axial view

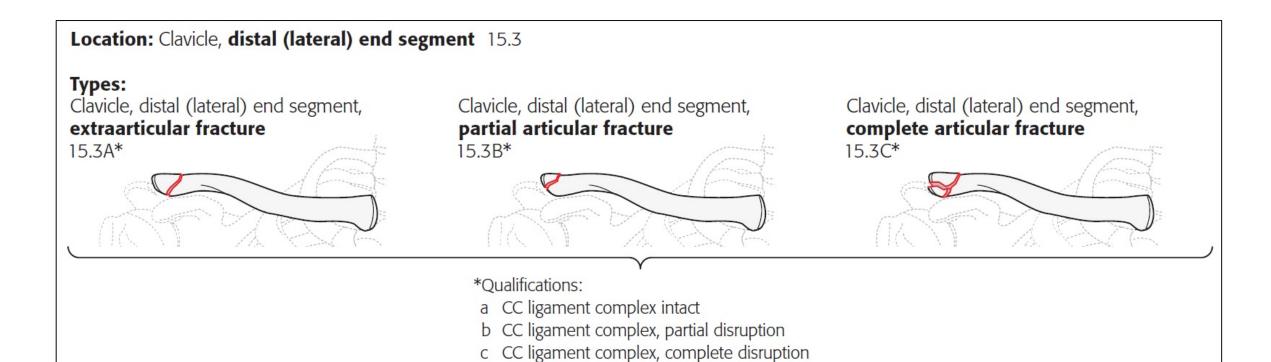


Background pathology



AO Classification

Types of distal (lateral) end segment fractures of the clavicle

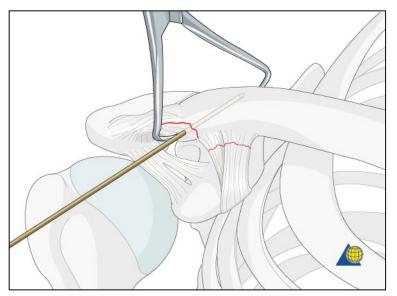


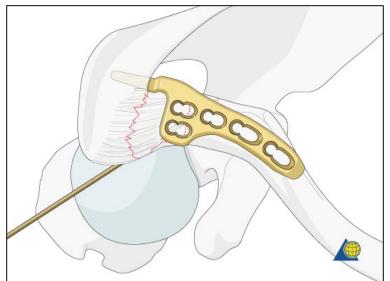
Background therapy

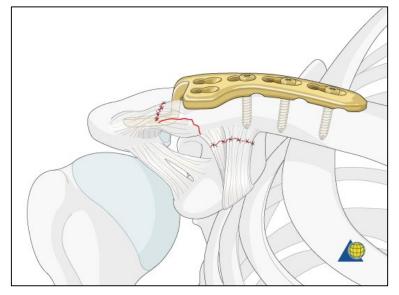


ORIF – Hook plate

Open reduction, temporary fixation with K-wire, plate application and ligament repair







Copyright by AO Foundation, Switzerland Source: AO Surgery Reference, www.aosurgery.org

Patient history



Classification:

Lateral fracture of the left clavicle of type 15.3 C1 (AO)

Remarks:

- Fell off a horse
- Gilchrist-bandage
- Hematoma, swelling and pain in AC joint region
- No peripheral motorical or neurological deficits

Gender	female
Age	46 - 60



Preoperative findings



Preoperative X-ray images

AP and tangential view of left clavicle

- Lateral clavicle fracture
- Fracture dislocation of more than one shaft width in AP view



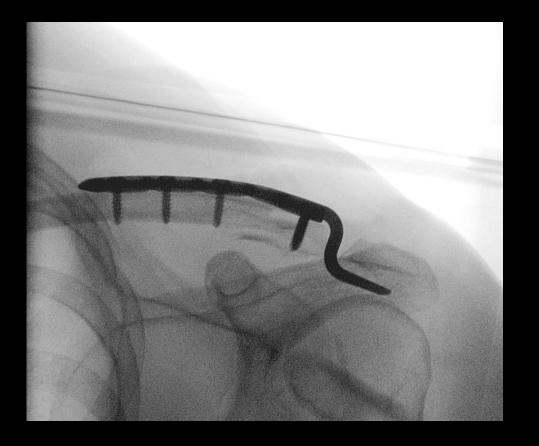




Intraoperative imaging

AP view of left clavicle

- Correct anatomic reduction of AC joint
- Correct position of the hook plate
- No vertical dislocation
- Good bony contrast in spite of metal objects
- Good field of view



Surgical procedure Axial view



Intraoperative imaging

Axial view of left clavicle

- Correct anatomic reduction of AC joint
- Correct position of the hook plate
- No sagittal dislocation





Clinical Case

Femur

Back to content slide clinical cases

Intraoperative imaging with Cios Select FD Clinical case – Femur



- **Background pathology**
- **Background therapy**
- **Patient history**
- **Preoperative findings**
- Surgical procedure

Anterior view Lateral view

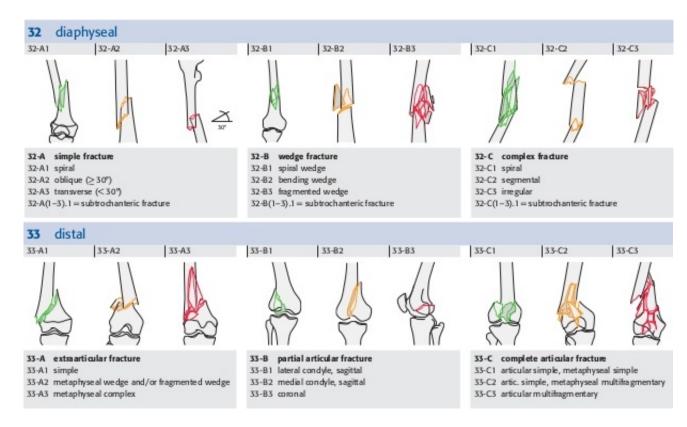


Background pathology



AO Classification

Diaphyseal and distal femur fractures

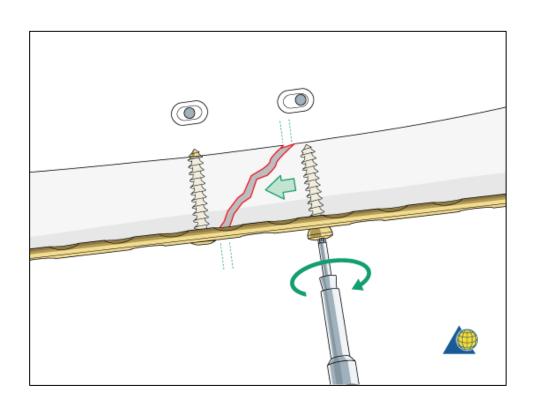


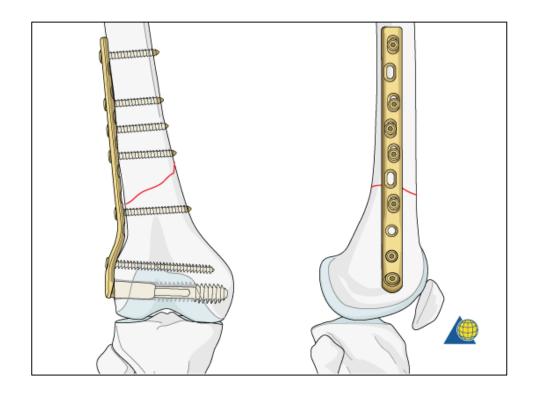
Background therapy



ORIF – Compression plating

Dynamic compression and plate fixation





Patient history



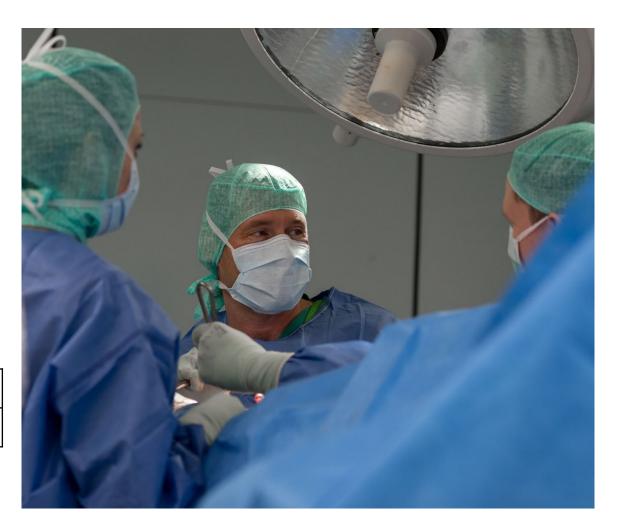
Classification:

Complex multi-segmental dislocated femur fracture

Remarks:

- Motorcycle accident, hit by car
- Analgosedation, no neurological status
- Initial reduction via external fixator

Gender	male
Age	46 - 60



Preoperative findings



Preoperative X-ray images

AP view of left upper leg

• Fracture of the left femur with dislocated proximal femoral shaft fracture and comminuted fracture of the distal femur





Intraoperative imaging AP view of left upper leg

- Anatomical reduction via plating
- Correct implant position





Intraoperative imaging

AP view of left upper leg

- Good bony contrast in spite of metal objects
- Good field of view





Intraoperative imaging AP view of left upper leg

- No intra-articular screw penetration
- Plate not completely shown

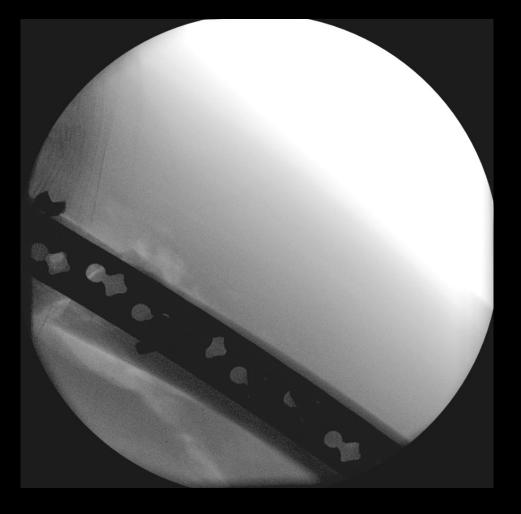


Surgical procedure Lateral view



Intraoperative imagingLateral view of left upper leg

• Small dorsal fracture gap of the proximal femur

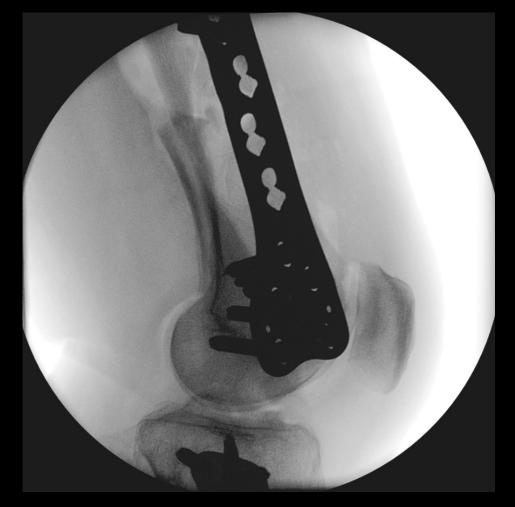


Surgical procedure Lateral view



Intraoperative imagingLateral view of left upper leg

- Correct plate position
- No intra-articular screw penetration





Clinical Case

Humerus distal

Back to content slide clinical cases

Intraoperative imaging with Cios Select FD Clinical case - Humerus distal



- **Background pathology**
- **Background therapy**
- **Patient history**
- **Preoperative findings**
- Surgical procedure

Anterior view Lateral view

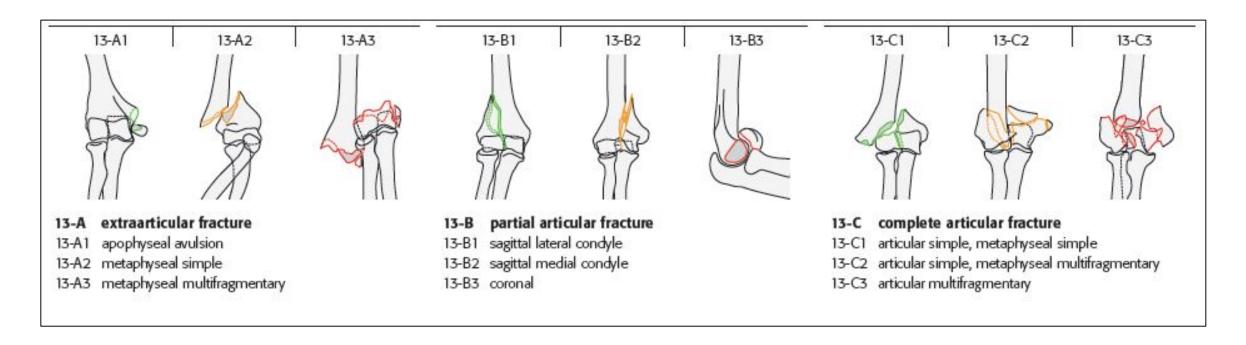


Background pathology



AO Classification

Fractures of the distal humerus

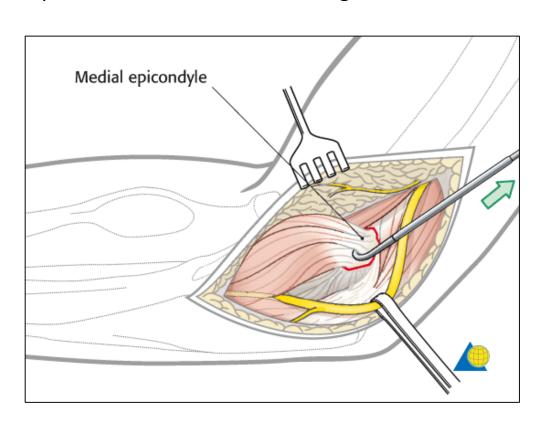


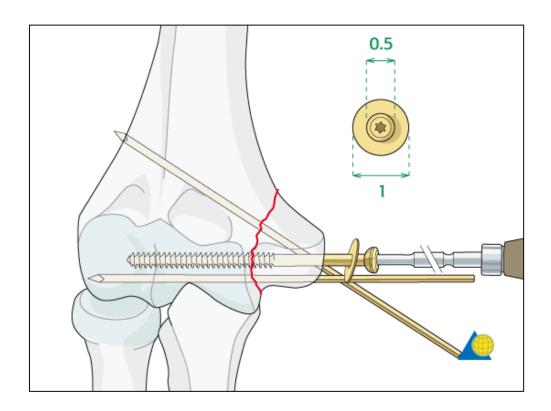
Background therapy



ORIF – Screw fixation

Open reduction and K-Wire navigated screw fixation





Patient history



Classification:

Type 13-C3 (AO)

Remarks:

- Stumbling fall
- Initial immobilization via upper arm plaster cast
- Pain and bony crepitation of the left elbow joint
- No peripheral motorical or neurological deficits

Gender	female
Age	61 - 75





Preoperative X-ray pictureLeft elbow

- 1. AP in extension
- 2. Lateral in flexion





Preoperative CT

Left elbow

Plaster cast

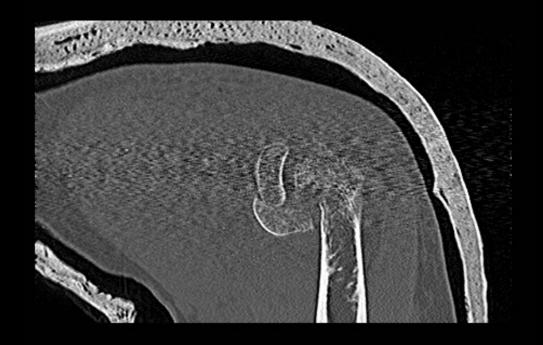




Preoperative CT

Left elbow

• Fracture of the distal humerus with multi-fragmentary trochlea and capitulum fracture



Surgical procedure AP view



Intraoperative imaging

AP view of left elbow

- Anatomical reduction
- Fixation of ulnar and radial ligaments via 2 FASTak-Anchors
- Good bony contrast in spite of metal objects



Surgical procedure Lateral view



Intraoperative imagingLateral view of left elbow

- Anatomical reduction
- No intra-articular screw penetration





Clinical Case

Tibia

Back to content slide clinical cases

Intraoperative imaging with Cios Select FD Clinical case - Tibia



- **Background pathology**
- **Background therapy**
- **Patient history**
- **Preoperative findings**
- Surgical procedure

Anterior view Lateral view

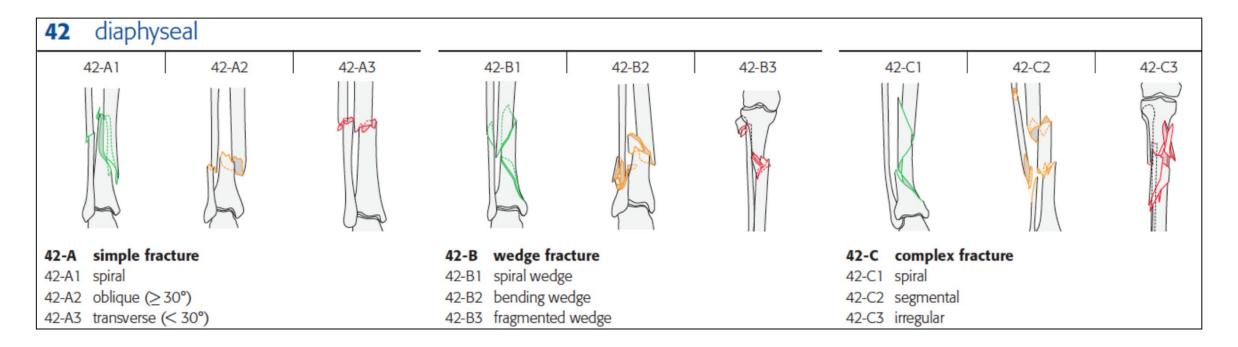


Background pathology



AO Classification

Diaphyseal fractures of the lower leg

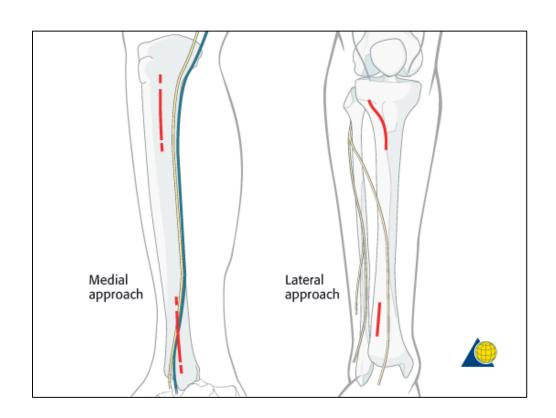


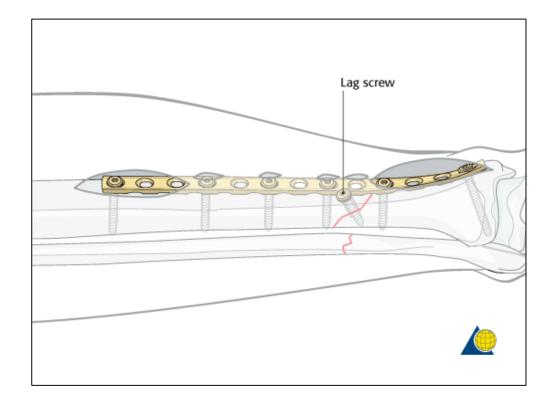
Background therapy



MIO – Compression plating

Approaches and Reduction (plate + interfragmentary lag screw)





Patient history



Classification:

Type 42 A1 (AO)

Remarks:

- Skating accident
- Closed fracture of right lower leg
- Closed reduction by emergency doctor
- Pain and deformity of lower leg
- No peripheral neurological and motorical deficits

Gender	female
Age	13 - 17





Preoperative X-ray imagesRight lower leg in AP and Lateral view

- Simple spiral fracture of the lower leg
- Minimally displaced





Surgical procedure AP view



Intraoperative imaging

AP view of lower leg

- Anatomical reduction
- Correct implant position
- Good bony contrast in spite of metal objects
- Sufficient field of view



Surgical procedure Lateral view



Intraoperative imagingLateral view of lower leg

- Anatomical reduction
- Correct implant placement
- Plates not completely displayed





Clinical Case

Tibia plateau

Back to content slide clinical cases

Intraoperative imaging with Cios Select FD Clinical case – Tibia plateau



- **Background pathology**
- **Background therapy**
- **Patient history**
- **Preoperative findings**
- Surgical procedure

Anterior view Lateral view

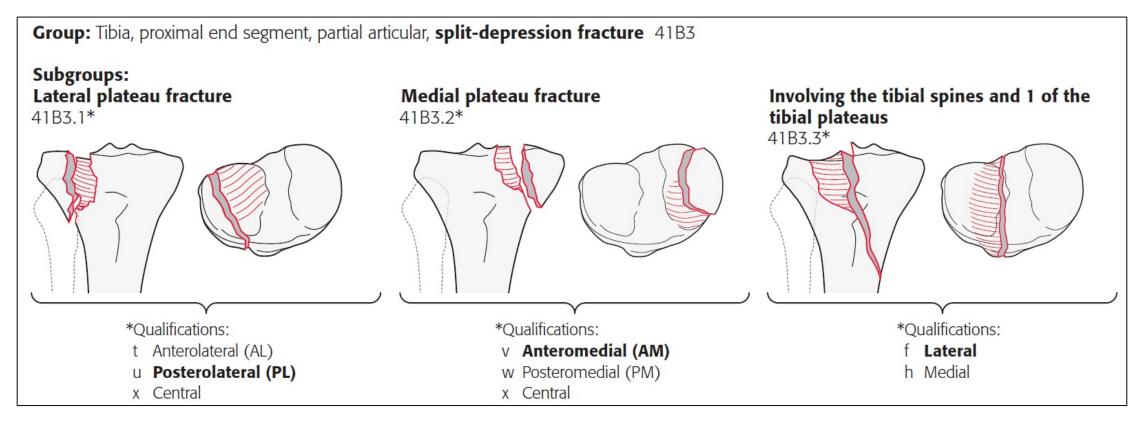


Background pathology



AO Classification

Tibia plateau fractures

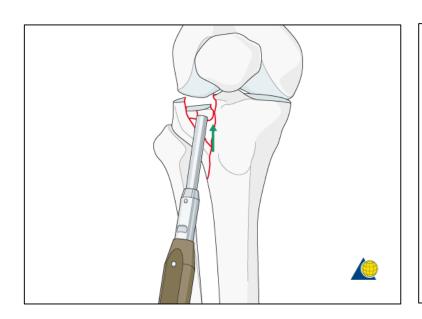


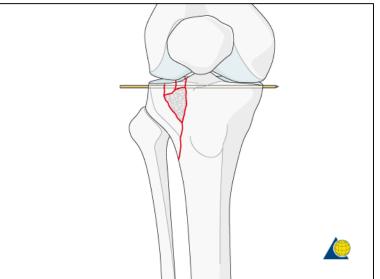
Background therapy

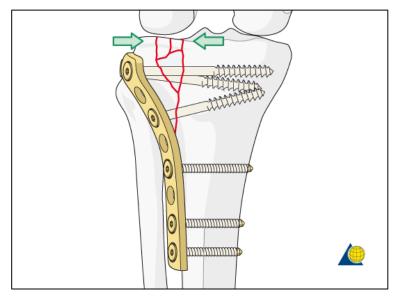


ORIF – Plates with angular stability

Reduction of articular surface, filling of defect or adjustment osteotomy, plate fixation







Patient history



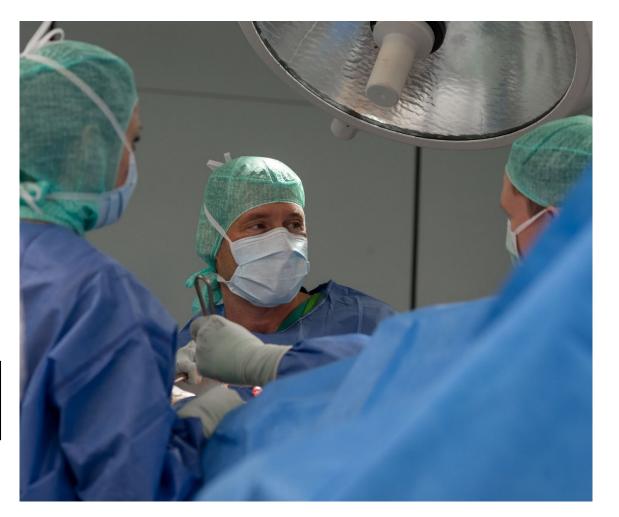
Classification:

Lateral fracture of the left tibia plateau type 41-B3 (AO)

Remarks:

- Direct impact trauma of the left knee during handball
- Persistent pain symptoms and joint effusion despite relief by forearm crutches
- MR diagnostics
- Pressure pain in lateral joint segment and restricted range of motion (Ex/Flex 0-20-50°)
- No peripheral motorical and neurological deficits

Gender	female
Age	18 - 30





Preoperative CT

Axial and coronal view of left knee joint

• Ventrolateral impression fracture of the tibia plateau with lateral articular depression of 8 mm



Surgical procedure AP view



Intraoperative imaging

AP view of left knee joint

- Anatomical reduction of tibia plateau alignment
- No fragment dislocation after adjustment osteotomy
- Correct plate position
- No intra-articular screw penetration
- Good bony contrast in spite of metal objects

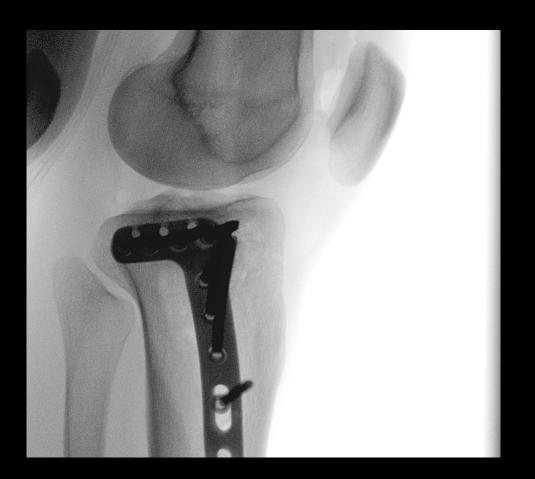


Surgical procedure Lateral view



Intraoperative imagingLateral view of left knee joint

- Correct plate position
- No sagittal fragment dislocation
- No intra-articular fragments or screw penetration





Cios Select FD

Conclusion

Back to content slide clinical cases





"In my opinion, Cios Select FD can be used for every procedure in orthopedic trauma. This C-arm is easy to handle and with a few minutes of introduction the improved user interface can be operated by everyone. But most important for me: Cios Select FD provides a new level of two-dimensional intraoperative imaging in terms of image quality!"

Dr. med. Jochen Franke, Head – Division of Trauma Department for Orthopedic and Trauma Surgery BG Trauma Center Ludwigshafen at Heidelberg University Hospital Germany

Cios Select FD Select smart surgical imaging





The right dose in each individual case thanks to **CARE technology**

Easy patient and system positioning thanks to large C-arm geometry

Smart power management

for the right power wherever and whenever you need it

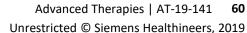
Wireless footswitch*

for cableless freedom in the OR



Display of live and reference images in high detail thanks to **high bright color monitors**

Advanced connectivity thanks to wireless DICOM*



Thank you for your enthusiasm!



Siemens Healthineers Headquarters

Siemens Healthcare GmbH Henkestr. 127 91052 Erlangen Germany

Phone: +49 9131 84-0

siemens-healthineers.com

On account of certain regional limitations of sales rights and service availability, we cannot guarantee that all products included in this presentation are available through the Siemens sales organization worldwide. Availability and packaging may vary by country and are subject to change without prior notice.

The customers cited are employed by an institution that might provide Siemens product reference services, R&D collaboration or other relationship for compensation pursuant to a written agreement.