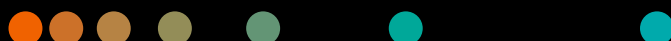
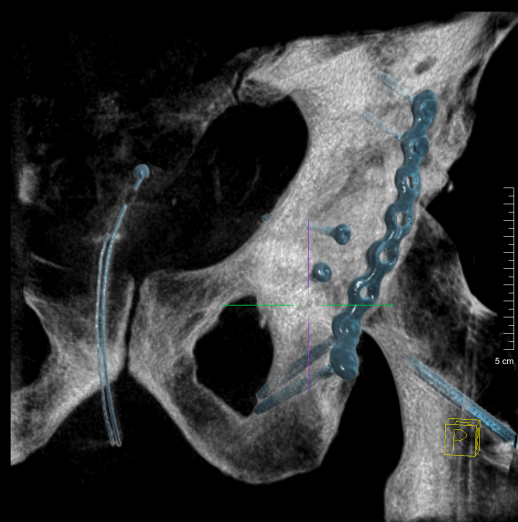


Study protocol

# Fixation of acetabular fracture

Ortho/trauma surgery



## Case description

### Patient

Male, aged between 31 and 45 years  
BMI range: 25–30

### Diagnosis

Acetabular fracture with involvement of the posterior pillar and the posterior wall  
AO classification: 62B2  
(Figs. 1–3)

### Surgical procedure

Fixation of acetabular fracture: after assessing the fracture using preoperative CT imaging, a pelvic brim plate was contoured to fit the anterior column and then fixated with screws.  
(Figs. 4–11)

### Benefits of CIARTIC Move

No C-arm technologist was needed, the surgeon operated the system from within the sterile field using **Smart Control**.

With **Position Assist** it is possible to store up to 12 procedure-specific positions, making surgical workflows more efficient.

**3D imaging** played a vital part in confirming the success of the surgery. The dose area product was 1904.18  $\mu\text{Gy}\cdot\text{m}^2$  and the radiation time was 99.7 seconds.

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### Courtesy of

BG Trauma Center Ludwigshafen, Germany

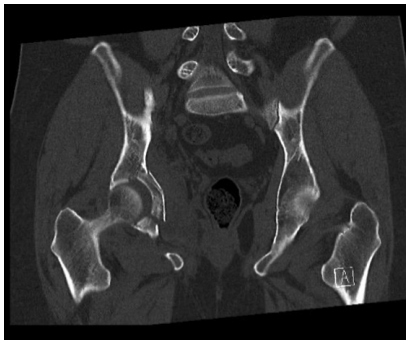
### System and software

CIARTIC Move, VB10A

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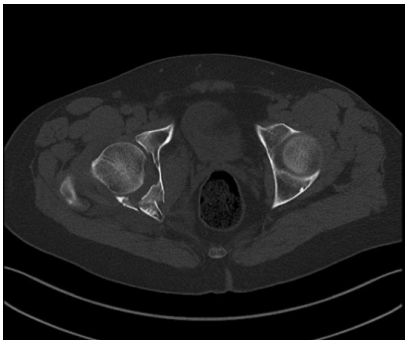
# Clinical images and illustrations

Fig. 1



**Preoperative CT imaging:** acetabular fracture with involvement of the posterior pillar and posterior wall on the right

Fig. 2



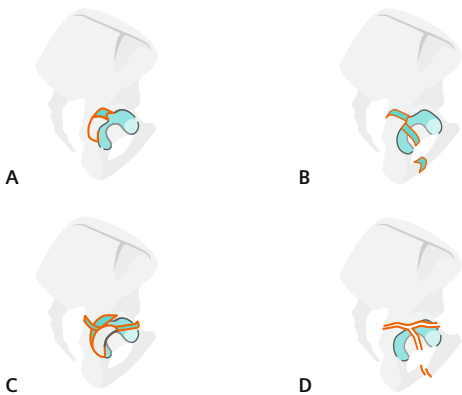
**Preoperative CT imaging:** acetabular fracture with involvement of the posterior pillar and posterior wall on the right

Fig. 3



**Preoperative pelvic overview:** acetabular fracture of the right side

Fig. 4



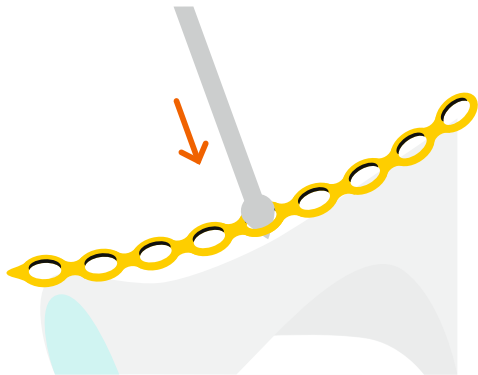
Fracture assessment and decision-making

Fig. 5



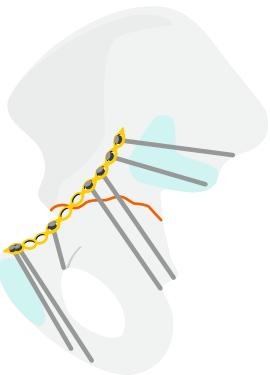
Patient preparation and positioning

Fig. 6



Contouring the plate to fit the anterior column

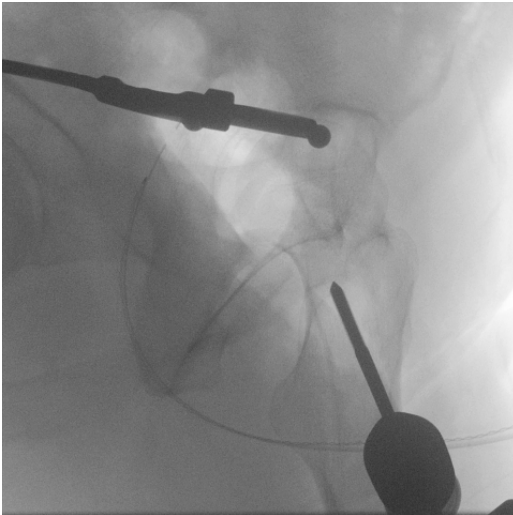
Fig. 7



Fixation using pelvic brim plate

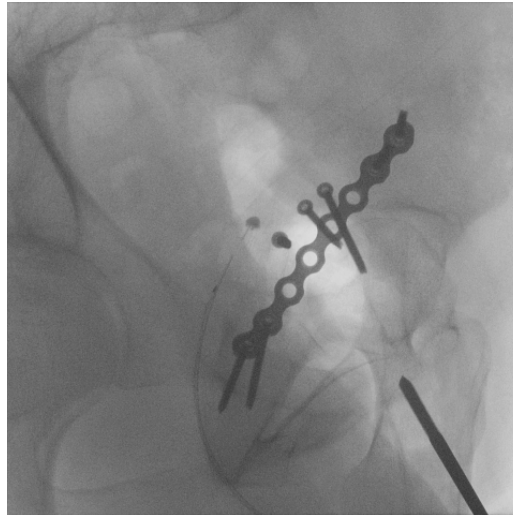
## Clinical images

Fig. 8



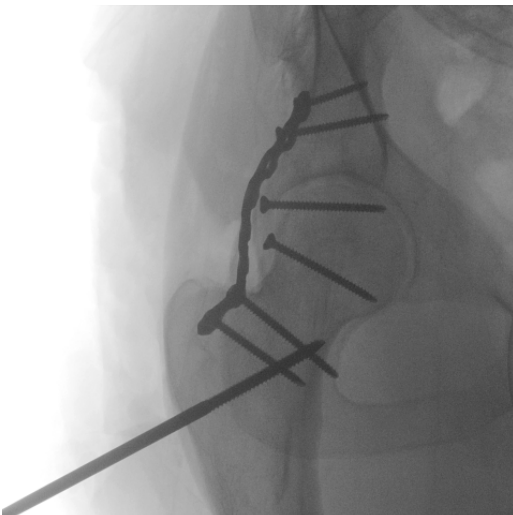
**Intraoperative image with Schanz screw inserted in the proximal femur:** this provides traction on the femoral head to allow subluxation of the hip joint and subsequent reduction and treatment of the acetabular fracture.

Fig. 9



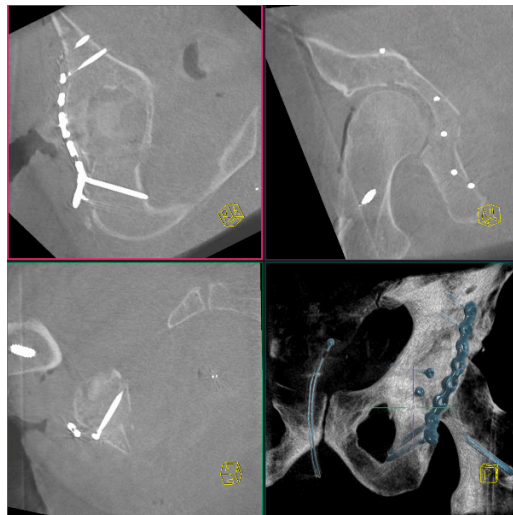
**Intraoperative image:** access via the Kocher-Langenbeck approach. Low-profile plate inserted along with KF3 lag screws

Fig. 10



**Intraoperative check:** correctly inserted plate and screws, correct reduction of the fracture

Fig. 11



**Intraoperative 3D scan:** correctly inserted implant, correct screw position, correct reduction of the fracture

The information presented in the study protocol is for illustration only and is not intended to be relied upon by the reader for instruction as to the practice of medicine. Any healthcare practitioner reading this information is reminded that they must use their own learning, training, and expertise in dealing with their individual patients. This material does not substitute for that duty and is not intended by Siemens Healthineers to be used for any purpose in that regard.

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