

Globus Medical Quartex



The patient is placed under [general anesthesia](#) and positioned [prone](#). The operative area is carefully cleaned and an [incision](#) is made at the appropriate level(s). While there are various techniques for implant insertion, a standard midline approach and the assembly of an occipito-cervico-thoracic (OCT3) construct is described for the purposes of this [surgical technique](#) guide. Lateral C-arm fluoroscopy or other radiographic methods may be utilized throughout surgery to ensure correct implant placement.

Locate [pedicles](#) or [lateral masses](#) (C1-T3) and remove bone and/or soft tissue as needed using standard instruments.

Align the [Awl](#), 2.4 mm in the trajectory for the [screw](#) and perforate the cortex to create a pilot hole. The Pedicle Probe, Straight or Pedicle Probe, Curved may be used to open the pedicle or lateral mass pathway. The Ball Tip Probe may be used to verify that the walls of the prepared pathway are not violated.

Determine the appropriate screw diameter and length. Choose the [drill](#) bit for the selected screw diameter and length. The Drill Guide with Adjustable Stop, 6-50 mm allows drill depths from 6-50 mm, in 2 mm increments. Rotate the gold ring and pull down the tapered sleeve to release the ratchet.

Adjust the drill stop until the appropriate depth is indicated and release the sleeve. Rotate the gold ring until secure to lock the drill guide at the appropriate depth. If the required depth is 14mm, the Drill Guide, Fixed Stop 14 mm may be used.

Attach the drill bit to the Quick Connect Handle, Swivel and insert the assembly through the drill guide and drill to the stop. The Depth Gauge may be used to verify depth.

If preparing the [pedicles](#) with a Tap, the Adjustable Depth Tap Sleeve may be used to indicate depth. Insert the tap into the sleeve to the desired depth and rotate the knob to lock in place.

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