

Accolade[®] II

Femoral Hip System

Surgical protocol



Accolade II Femoral Hip System

Surgical protocol

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Indications and contraindications and precautions

Indications

Indications for the U.S. and rest of world:

The indications for use of the total hip replacement prostheses include:

1. noninflammatory degenerative joint disease, including osteoarthritis and avascular necrosis;
2. rheumatoid arthritis;
3. correction of functional deformity;
4. revision procedures where other treatments or devices have failed; and,
5. nonunions, femoral neck and trochanteric fractures of the proximal femur with head involvement that are unmanageable using other techniques.

Additional indication specific to use of ACCOLADE II Femoral Stems with compatible Howmedica Osteonics Constrained Liners:

1. When the stem is to be used with compatible Howmedica Osteonics Constrained Liners, the device is intended for use in primary or revision patients at high risk of hip dislocation due to a history of prior dislocation, bone loss, soft tissue laxity, neuromuscular disease, or intra-operative instability.

ACCOLADE II Femoral Stems are intended for cementless use only and are intended for total and hemiarthroplasty procedures.

Indications for EU, EMEA countries requiring CE mark, and Australia:

The indications for use of the total hip replacement prostheses include:

1. noninflammatory degenerative joint disease, including osteoarthritis and avascular necrosis;
2. correction of functional deformity;

Additional indication specific to use of ACCOLADE II Femoral Stems with compatible Howmedica Osteonics Constrained Liners:

- When the stem is to be used with compatible Howmedica Osteonics Constrained Liners, the device is intended for use in patients at high risk of hip dislocation.

ACCOLADE II Femoral Stems are intended for cementless use only and are intended for total hip arthroplasty procedures.

Contraindications

1. Active infection or suspected latent infection in or about the hip joint;
2. Bone stock that is inadequate for support or fixation of the prosthesis;
3. Skeletal immaturity
4. Any mental or neuromuscular disorder that would create an unacceptable risk of prosthesis instability, prosthesis fixation failure, or complications in postoperative care.
5. Obesity. An overweight or obese patient can produce loads on the device that can lead to failure of the fixation of the device or to failure of the device itself.

Warnings and precautions

See package insert for warnings, precautions, adverse effects, information for patients and other essential product information.

Before using Accolade II instrumentation, verify:

- Instruments have been properly disassembled prior to cleaning and sterilization;
- Instruments have been properly assembled post-sterilization;
- Instruments have maintained design integrity; and,
- Proper size configurations are available.

For instructions for cleaning, sterilization, inspection and maintenance of orthopaedic medical devices, refer to LSTPI-B and SLI0001.

Introduction

The Accolade II Femoral Hip System is a femoral stem that is intended for cementless, press-fit application. The proximal region of the stem is coated with PureFix HA over a commercially pure titanium plasma spray substrate. The Morphometric Wedge — an evolution of the tapered wedge — is characterized by its variable, size-specific medial curvature. The Accolade II Femoral Hip System is suitable for various surgical approaches, including direct anterior.

The total system includes:

- Twelve body sizes ranging from size 0 to size 11
- Two anatomic offset options for each size

The stem is designed for use with Stryker V40 femoral heads and their compatible acetabular components.

The Accolade II Hip System includes a broach-only instrumentation platform that accommodates all surgical approaches and has been streamlined for surgical efficiency.



Preoperative planning

Step 1

Preoperative planning aids in the determination of probable implant style and size. The preoperative planning process should take qualitative and quantitative factors (including patient bone quality, density and morphology) into consideration in order to evaluate and select the appropriate instrument/implant system for the patient.

Place an acetabulum template over the area on the X-ray (**Figure 1**). Be sure that the cup is well centered within the acetabulum and the size fills between the tear drop and the superior rim. After templating the acetabulum for size, mark the center of rotation (represented by the blue dot).

The Accolade II has two offset options: the standard offset 132° neck angle and the high offset 127° neck angle. Choose the Accolade II template for which the stem size achieves mediolateral cortical engagement at the proximal two-thirds of the stem and recreate the desired leg length and offset. For both the 132° and 127° offset options, the template has markings that indicate the center of the femoral head for a range of head offset options.

The predicted change in leg length and offset is determined by the relative positioning of the center of rotation markings on the femoral and acetabular components. For example, if a given femoral component center of rotation marking is superior to the center of rotation marking of the acetabular component, leg lengthening is predicted. The desired change in leg length is determined by the radiographic leg length inequality that was previously determined. If 8mm of leg lengthening is required in order to equalize the leg lengths, the center of rotation marking of the femoral component should be positioned 8mm superior to the center of rotation marking of the acetabular component. The stem size and head offset that most closely meets this goal is chosen. The predicted change in offset is also considered by comparing the relative medial/lateral position of the center of rotation markings of the femoral and acetabular components. The templates should be used to estimate the final components that most closely restore the normal offset of the patient's hip.

Once the final estimated stem size and position is determined, the neck resection level should be noted. This will be used as a reference during intraoperative neck resection.

Tip: The templated stem size and neck resection level may have to be adjusted if leg length cannot be managed solely by changing the head offset or neck angle.

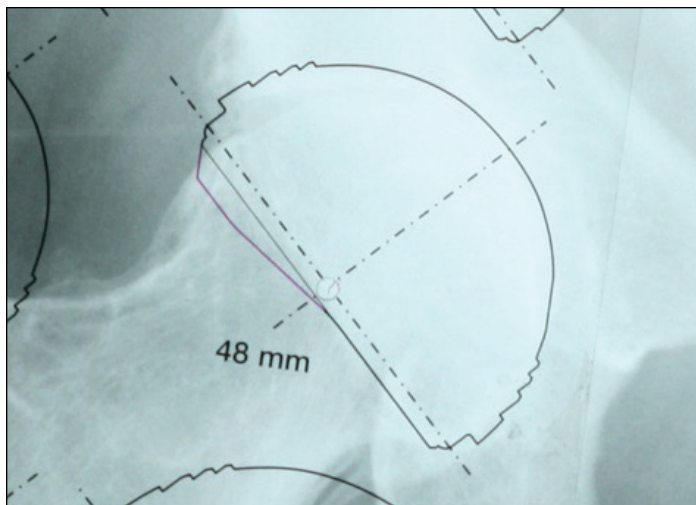


Figure 1

Tip: Templating is an important aspect of preoperative planning, but it should only serve as a guide. Final decision making concerning fit, size, and soft tissue tensioning occurs in the operating room at the surgeon's discretion.

Surgical templates

Accolade II: ATEMH0105

Surgical templates include 20% magnification.

Femoral neck resection

Step 2

A proper neck resection level directly affects the final placement and fit of the femoral stem. Using the anatomic landmarks referenced during preoperative X-ray templating, the preplanned neck resection is made with an oscillating saw and with the aid of the Neck Resection Guide. The guide helps the surgeon to determine the correct stem orientation and placement. After careful preoperative templating, the guide is placed on the anterior/posterior aspect of the exposed proximal femur and the planned femoral neck cut is marked using a marking instrument of choice. Care should be taken to align the body of the guide with the axis of the femoral canal (**Figure 2**).



Figure 2

Instruments

Neck Resection Guide
1020-1100



Preparing the femoral canal

Step 3

To help facilitate proper final orientation of the stem, lateral bias during implant preparation is preferred. Retraction of the gluteus medius and removal of the lateral cortical bone at the piriformis insertion will permit true axial introduction of the instruments and implant. The Modular Box Osteotome or a rongeur can be used to remove bone from this area (**Figure 3**).

Tip: Remove the lateral cortical bone at the piriformis fossa to help obtain ideal proximal fit and to minimize the risk of undersizing and/or varus placement of the femoral component.



Figure 3

Instruments

Modular Box Osteotome
1601-1210



Orthonomic Modular Handle
1020-2900



Mallet
1120-1000



Preparing the femoral canal (continued)

Step 3

The Accolade II Hip System is a broach-only system. While use of an Axial Starter Reamer is needed, use of cylindrical reamers is not necessary to prepare the femoral canal. The Axial Starter Reamer is used with the T-Handle to open the femoral canal and to aid in determining the orientation of the femoral axis. The tapered design allows for access to the canal and is graduated along the flutes, which helps provide a reference during insertion into the canal. Advance the Axial Starter Reamer into the femoral canal to a depth at which the first graduation mark is aligned with the medial aspect of the neck resection (**Figure 4**).

Slight lateral pressure on the reamer during operation will aid in preparing the femoral canal in the neutral orientation of the implant.

Note: Care should be taken not to sink the starter reamer below the first graduation mark to allow for proper press fit of the implant.

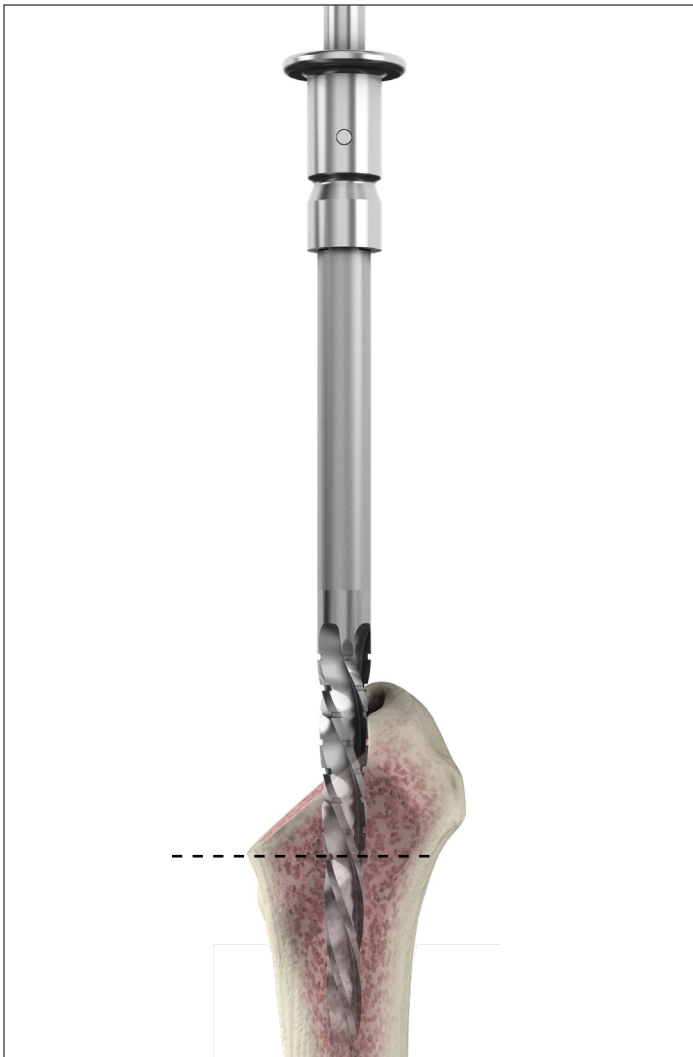


Figure 4

Instruments

Axial Starter Reamer
1020-1200



Orthonomic T-Handle
1101-2200



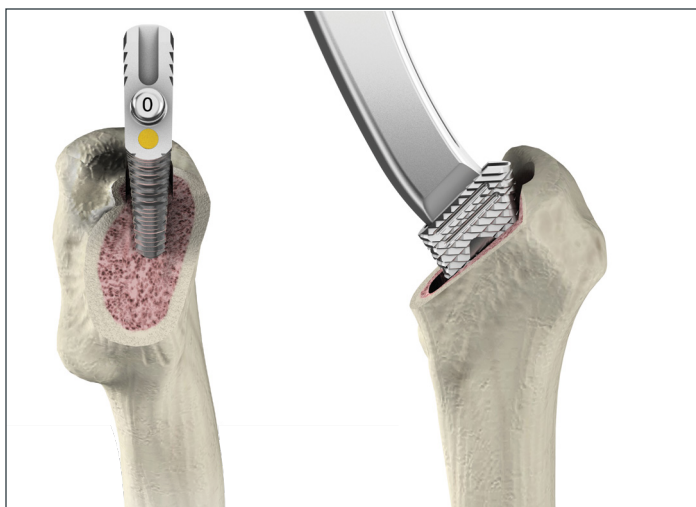


Figure 5

Figure 6

Broaching

Step 4

Broaching is then performed beginning with the size 0 broach. The broach should be oriented to the long axis of the oblong shape created by the neck resection (**Figure 5**).

Sequentially broach upward in size until the proper size is achieved. The surgeon's clues to a firm fit and final size include:

1. changing pitch of sound that results from Mallet blows to the broach handle;
2. increased resistance to forward advancement;
3. lack of further motion.

Two grooves on the anterior and posterior surfaces of the broach act as a point of reference to help the surgeon visualize the broach advancing into the femur (**Figure 6**).

Note: Accolade II broaches can be properly identified in several ways.

1. The broach size is engraved into a square pocket on both the anterior and posterior sides of the broach.
2. The size is marked on the top of the broach post.
3. The distal lateral tip of the broach is polished.
4. 1020-52xx part number

Note: Accolade and Accolade II broaches cannot be used interchangeably.

Tip: During broaching, place lateral bias on the broach to fill the proximal femur and minimize undersizing the implant.

Instruments

Offset Broach Handle
1020-1460



Accolade II Broach Size 0-11
1020-52xx



Mallet
1120-1000



Broaching (continued)

Step 4

Relying only on the neck resection height alone for final seating height may lead to improper sizing and inadequate component fixation.

The final broach should seat firmly against medial and lateral cortical bone (**Figure 7**).

Generally, if a broach sinks below the level of the neck resection, advance to the next larger broach. If the neck resection is deemed higher than desired, remove the broach and perform a new neck resection at a lower level.

For good fixation of the implant, it is important that axial alignment of the broach is maintained at all times in the canal. Generally, the broach rotation is self-aligning.

Upon reaching the final size and depth of the broach, detach the broach handle from the broach, leaving the broach fully seated in the femoral canal.

Tip: If the broach and/or stem stops above or below the original neck resection, leg length and soft-tissue tensioning must be reassessed during intraoperative trialing. Do not force the broach and/or stem to the resection level. This will increase the risk of proximal femur fracture.

Assemble the Calcar Planer to the reamer power adaptor. Guide the Calcar Planer over the broach post ensuring the Calcar Planer is axially aligned with the post and is stable. Initiate power prior to contacting the femur and slowly advance the Calcar Planer toward the broach using continuous power until the positive stop on the Calcar Planer contacts the broach face and the bone is removed (**Figure 8a**). Failure to operate the Calcar Planer in accordance with these instructions may result in damage to the femur.

In the event that the Calcar Planer cannot fully engage the broach post (**Figure 8b**), remove the broach and perform a new neck resection at a lower level. Alternatively, a larger broach size should also be considered.

Tip: Preoperative templating serves as a guide. Don't keep hitting the broach harder just because you have not reached the size that was templated.



Figure 7



Figure 8a

Figure 8b

Instruments

Calcar Planer – Standard
1020-1111



Trial reduction

Step 5

Select a Neck Trial which has the same base neck length and angle as the planned implant size. This can be determined in two ways.

1. Match the color indicator located on top of the Neck Trial taper to the color indicator on top of the broach (**Figure 9**).
2. The table at right indicates the correct neck length for each size stem and the corresponding color code. The size of the broach directly corresponds to the size of the implant.

Tip: Start with a standard offset (132°) Neck Trial. If the leg lengths are equal, but soft tissues are lax, move to a 127° degree Neck Trial.

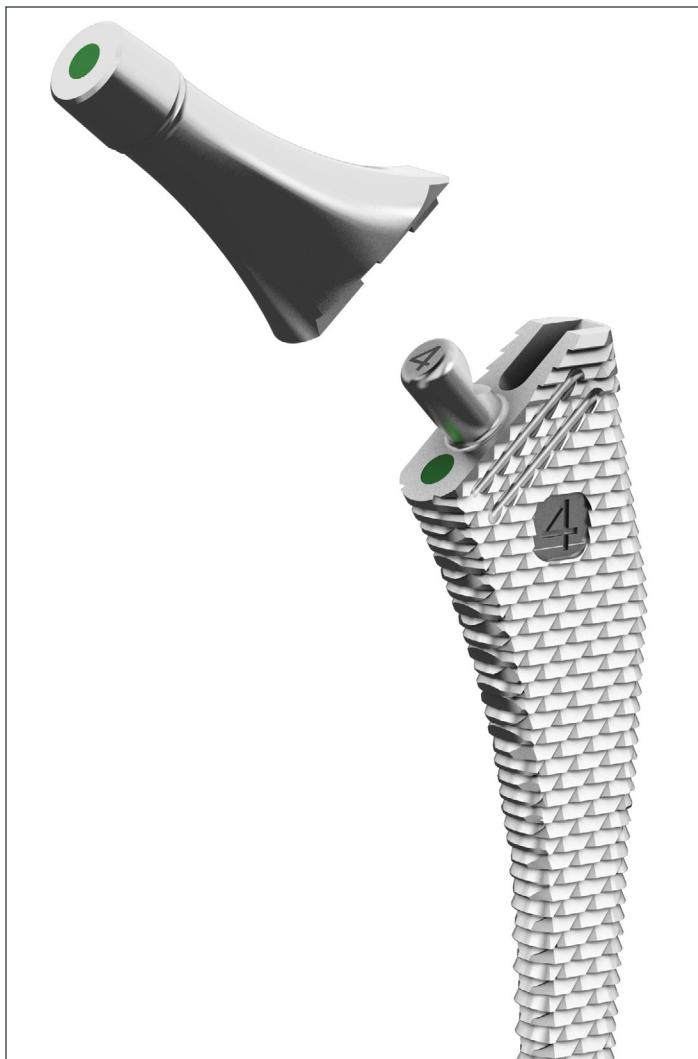


Figure 9

Stem size	Neck Trial length/color
0, 1	27mm/yellow
2, 3	30mm/blue
4, 5, 6	35mm/green
7, 8, 9	37mm/black
10, 11	40mm/red

Instruments

132° Neck Trial
1020-32xx



127° Neck Trial
1020-27xx



ACCOLADE II Broach Size 0-11
1020-52xx



Trial reduction (continued)

Step 5

Assemble the Neck Trial onto the broach. Next, assemble a V40 Head Trial onto the Neck Trial (**Figure 10**). Femoral heads come in multiple offsets and are different for each femoral head implant material (see table at right.) For this reason, final head material should be chosen prior to trial reduction. Offsets add or subtract from the base neck length of the implant and help to achieve the desired leg length and offset.

Perform a trial reduction of the hip. Upon confirmation of the selected components, remove the trial head and trial neck, and reassemble the broach handle to the broach. Remove the broach from the femoral canal. The final broach size facilitates determination of the correct implant size.

Tip: Remember, preoperative templating serves as only a guide. Final sizing, leg length and offset are determined intraoperatively.

Tip: After trial reduction and prior to removing the broach, tap on the broach a few more times to see if it will advance. Due to the viscoelastic properties of the bone, the bone could relax during the trialing process. If the broach does advance, retrial and make adjustments accordingly.



Figure 10

Femoral head family	Catalog no.	Size (mm)	Offsets (mm)
BIOLOX delta V40	6570-0-XXX	28	-4, -2.7, 0, +4
		32	-4, 0, +4
		36	-5, -2.5, 0, +2.5, +5, +7.5
BIOLOX delta Universal Taper (must be used with Universal Taper Sleeve #6519-T-XX)	6519-1-XXX	28	-2.5, 0, +4
		32	-2.5, 0, +4
		36	-2.5, 0, +4
		40	-2.5, 0, +4
BIOLOX delta C-Taper (must be used with a C-Taper Sleeve #17-000E)	18-28XX	28	-2.5, 0, +2.5, +5
		32	-2.5, 0, +2.5, +5
	18-36XX	36	-5, -2.5, 0, +2.5, +5, +7.5
Alumina V40	6565-0-XXX	28	-2.7, 0, +4
		32	-4, 0, +4
		36	-5, 0, +5
Alumina C-Taper (must be used with a C-Taper Sleeve #17-000E)	17-28XXX	28	-2.5, 0, +5
	17-32XXX	32	-2.5, 0, +5
	17-36XXX	36	-5, 0, +5
LFIT CoCr V40	6260-9-XXX	22	0, +3, +8
		26	-3, 0, +4, +8, +12
		28	-4, 0, +4, +6, +8, +12
		32	-4, 0, +4, +8, +12
		36	-5, 0, +5, +10
		40	-4, +0, +4, +8, +12
CoCr V40	6260-4-XXX	22	0, +3, +8
		26	-3, 0, +4, +8, +12
	6260-5-XXX	28	-4, 0, +4, +6, +8, +12
		32	-4, 0, +4, +8, +12
Unitrax* Modular Endo head (must be used with a Unitrax V40 Sleeve #6942-6-XXX)	6942-5-XXX	38, 40-56, 58, 61	-4, 0, +4, +8, +12

* Accolade II Femoral Hip System is not indicated for hemiarthroplasty in the EU, EMEA countries requiring CE mark, and Australia

Instruments

V40 Head Trial
6264-x-xxxR



Note: Head Trials with an “R” suffix are made from a radiopaque material, making them visible on an X-ray.

For full list of head sizes and trials, refer to Implant section.

Implanting the stem

Step 6

Option 1

Thread the Modular Threaded Stem Inserter into the drive hole on the proximal face of the stem (**Figure 11**). The inserter should be fully threaded and secured to the stem prior to impaction to help prevent damage to the threads on the implant or the instrument. Using the inserter, the stem should be inserted into the femoral canal until it stops.

Tip: If the stem hangs up due to impingement of the Modular Threaded Stem Inserter against the overhanging tip of the greater trochanter, remove the threaded stem inserter leaving the stem in place and use the Modular Stem Impactor to fully seat the stem.

Option 2

The Accolade II Femoral Stem can also be inserted using the Modular Offset Quick Connect Stem Inserter. Place tip of the inserter into the drive hole of the stem taking care to align the version tab on the inserter with the slot in the stem (**Figure 12**). The quick connect design provides the inserter with a stable spring connection, but it does not provide a mechanical lock. Therefore, this assembly should be handled with care, as excessive shaking or motion may result in the stem disassociating from the inserter.

Note: The Modular Offset Quick Connect Stem Inserter cannot be used with the Size 0 and Size 1 Accolade II. Misuse could lead to instrument failure.

Option 3

The Accolade II Femoral Stem can also be inserted by hand and then impacted into the bone using the Modular Stem Impactor. The Modular Stem Impactor has a spherical tip, which is placed onto the drive hole of the stem. This instrument allows for off-axis impaction of the stem. The Modular Stem Impactor does not connect to the stem, and therefore can only be used for final impaction of the stem.



Figure 11

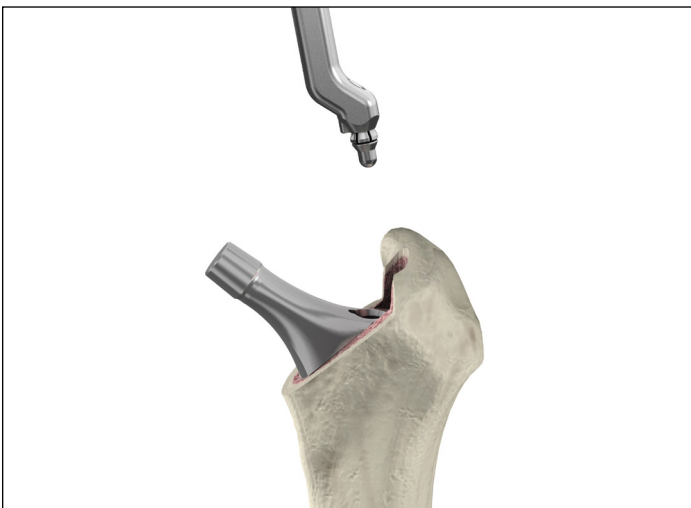


Figure 12

Instruments

Modular Threaded
Stem Inserter
1020-1800



Modular Offset Quick
Connect Stem Inserter
1020-1860



Modular Stem
Impactor
1020-1870



Implanting the stem (continued)

Step 6

A Mallet is then used to seat the stem into the canal (**Figure 13**).

The surgeon should NOT attempt to continue impacting the femoral component if visual and auditory clues indicate that the stem is firmly seated in the canal. These clues, rather than the broach seating level, should be used to determine the final seating height of the implant. Continued aggressive impaction could lead to femoral fracture. In the event that dense bone is encountered intraoperatively and compounding anatomical factors are present, the seating of the implant may not be consistent with the level of the broach due to the viscoelastic nature of the femoral bone.* If the final seating height is undesirable, the implant can be removed and additional broaching can be performed. If the stem inserter is contacting the greater trochanter during insertion, continued impaction could lead to a fracture.

Tip: Prior to any impaction using the Mallet, the implant should always be inserted into the femoral canal until it stops. This aids in positioning the implant in the same orientation that was broached, preventing the stem from being forced into a different position.

* Fung YC. Bone and Cartilage. In: Fung YC, ed. Biomechanics: Mechanical Properties of Living Tissue. 2nd ed. Springer Science+Business Media; 1993:500-519. doi: 10.1007/978-1-4757-2257-4



Figure 13

Instruments

Orthonomic Modular Handle
1020-2900



Mallet
1120-1000





Figure 14

Final reduction

Step 7

Prior to final head assembly, neck length / head offset selection may be reevaluated using a V40 Head Trial. Place the Head Trial onto the stem neck taper and reduce the hip. Leg length equality and proper soft tissue tension are evaluated. Remove the Head Trial and dry the implant trunnion with a laparotomy sponge or sterile towel.

Select the appropriate corresponding V40 Femoral Head (CoCr, Alumina Ceramic, BIOLOX delta Ceramic) or sleeve and place it onto the dry trunnion of the femoral stem with a slight twist. Impact the head with two moderate impactions using the Modular Head Impactor (**Figure 14**).

Verify the head is secure on the trunnion after head impaction by applying traction to the head and confirming stability on the trunnion. If necessary, the head can be removed utilizing the head disassembly instrument.*

Relocate the femoral head into the acetabular cup and re-check the hip biomechanics. The surgical site is then closed according to surgeon preference.

* If a ceramic head is placed on the trunnion and then removed, it must be replaced with a V40 cobalt chrome head or a V40 Titanium Adaptor Sleeve (17-0000E) and a C-Taper ceramic head.

If the stem must be removed, utilize the Modular Threaded Stem Inserter.

Note: When selecting a BIOLOX delta Universal Taper Ceramic Femoral Head (6519-1-0xx) for implantation, use of a Universal Adaptor Sleeve is necessary.

After completing the trialing process, intraoperatively assemble the adaptor sleeve to the femoral stem manually. The Universal Adaptor Sleeve must be fully seated on the stem taper before the head is assembled.

Catalog no.	Offset (mm)	Taper
6519-T-025	-2.5	V40
6519-T-100	+0	V40
6519-T-204	+4	V40

Note: In no instance should any attempt be made to preassemble the adaptor sleeve inside the BIOLOX delta Universal Ceramic Head.

Intraoperatively assemble the BIOLOX delta Universal Taper Ceramic Head onto the sleeved femoral stem and set with two moderate strikes using the Head Impactor (6626-0-140). Care must be taken to avoid excessive impact forces when assembling the Ceramic Head to the sleeved femoral component.

Instruments

V40 Head Trial
6264-x-xxxR



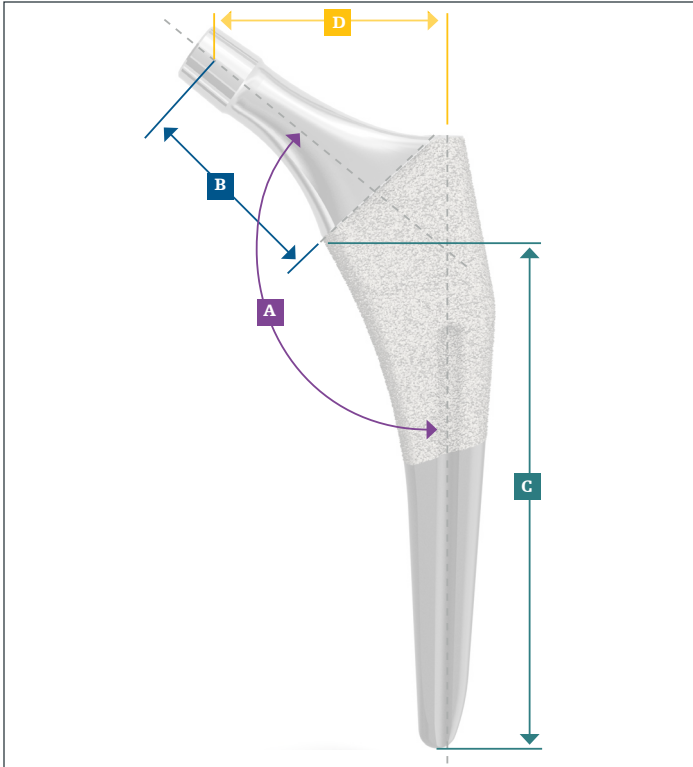
Modular Head
Impactor
1601-1700



Orthonomic
Modular Handle
1020-2900



Implant information



Part number	Size	A Neck angle	B Neck length	C Stem length	D Offset	Taper
6720-0027	0	132°	27mm	93mm	28mm	V40
6720-0127	1		27mm	96mm	29mm	
6720-0230	2		30mm	99mm	33mm	
6720-0330	3		30mm	102mm	35mm	
6720-0435	4		35mm	105mm	38mm	
6720-0535	5		35mm	108mm	40mm	
6720-0635	6		35mm	111mm	41mm	
6720-0737	7		37mm	114mm	46mm	
6720-0837	8		37mm	117mm	47mm	
6720-0937	9		37mm	120mm	49mm	
6720-1040	10		40mm	123mm	51mm	
6720-1140	11		40mm	126mm	53mm	
6721-0027	0	127°	27mm	93mm	32mm	V40
6721-0127	1		27mm	96mm	34mm	
6721-0230	2		30mm	99mm	37mm	
6721-0330	3		30mm	102mm	38mm	
6721-0435	4		35mm	105mm	42mm	
6721-0535	5		35mm	108mm	44mm	
6721-0635	6		35mm	111mm	45mm	
6721-0737	7		37mm	114mm	50mm	
6721-0837	8		37mm	117mm	51mm	
6721-0937	9		37mm	120mm	53mm	
6721-1040	10		40mm	123mm	57mm	
6721-1140	11		40mm	126mm	58mm	

Implants

Femoral head implants & trials: BIOLOX delta Ceramic

V40 Taper BIOLOX delta Ceramic Heads

Catalog no.	Diameter (mm)	Offset (mm)	Trial catalog no
6570-0-028	28	-4	6264-8-028R
6570-0-328	28	-2.7	6264-8-928R
6570-0-128	28	+0	6264-8-128R
6570-0-228	28	+4	6264-8-228R
6570-0-032	32	-4	6264-8-032R
6570-0-132	32	+0	6264-8-132R
6570-0-232	32	+4	6264-8-232R

V40 Taper BIOLOX delta Ceramic Anatomic Heads

Catalog no.	Diameter (mm)	Offset (mm)	Trial catalog no
6570-0-036	36	-5	6264-8-036R
6570-0-436	36	-2.5	6264-8-436R
6570-0-136	36	+0	6264-8-136R
6570-0-536	36	+2.5	6264-8-536R
6570-0-236	36	+5	6264-8-236R
6570-0-736	36	+7.5	6264-8-736R

Universal Taper BIOLOX delta Ceramic Heads*

Catalog no.	Diameter (mm)	Offset (mm)
6519-1-028	28	-2.5, 0, +4
6519-1-032	32	-2.5, 0, +4
6519-1-036	36	-2.5, 0, +4
6519-1-040	40	-2.5, 0, +4
6519-1-044	44	-2.5, 0, +4

Universal Adapter V40 Sleeves - Titanium

Catalog no.	Offset (mm)
6519-T-025	-2.5
6519-T-100	+0
6519-T-204	+4

Additional Universal V40 Trial Heads

Catalog no.	Diameter (mm)	Offset (mm)
6264-8-728R	28	-2.5
6264-8-632R	32	-2.5
6264-8-236R	36	+4.0
6264-8-940R	40	-2.5
6264-8-944R	44	-2.5

*Must be used with Universal Adapter Sleeve, catalog # 6519-T-XXX

C-Taper BIOLOX delta Ceramic Heads**

Catalog no.	Diameter (mm)	Offset (mm)	Trial catalog no
18-28-3	28	-2.5	1100-2897R
18-2800	28	+0	1100-2800R
18-2825	28	+2.5	1100-2825R
18-2805	28	+5	1100-2805R
18-32-3	32	-2.5	1100-3297R
18-3200	32	+0	1100-3200R
18-3225	32	+2.5	1100-3225R
18-3205	32	+5	1100-3205R

C-Taper BIOLOX delta Ceramic Anatomic Heads**

Catalog no.	Diameter (mm)	Offset (mm)	Trial catalog no
18-36-5	36	-5	1100-3699R
18-36-3	36	-2.5	1100-3697R
18-3600	36	+0	1100-3600R
18-3625	36	+2.5	1100-3625R
18-3605	36	+5	1100-3605R
18-3675	36	+7.5	1100-3675R

**Must be used with a C-Taper Sleeve catalog #17-000E

**Must be used with a C-Taper Sleeve catalog #17-000E

Implants

Femoral head implants & trials: Alumina Ceramic

V40 Taper Alumina Ceramic Heads

Catalog no.	Diameter (mm)	Offset (mm)	Trial catalog no
6565-0-028	28	-2.7	6264-8-928R
6565-0-128	28	+0	6264-8-128R
6565-0-228	28	+4	6264-8-228R
6565-0-032	32	-4	6264-8-032R
6565-0-132	32	+0	6264-8-132R
6565-0-232	32	+4	6264-8-232R
6565-0-036	36	-5	6264-8-036R
6565-0-136	36	+0	6264-8-136R
6565-0-236	36	+5	6264-8-236R

C-Taper Alumina Ceramic Heads*

Catalog no.	Diameter (mm)	Offset (mm)	Trial catalog no
17-28-3E	28	-2.5	1100-2897R
17-2800E	28	+0	1100-2800R
17-2805E	28	+5	1100-2805R
17-32-3E	32	-2.5	1100-3297R
17-3200E	32	+0	1100-3200R
17-3205E	32	+5	1100-3205R
17-36-5E	36	-5	1100-3699R
17-3600E	36	+0	1100-3600R
17-3605E	36	+5	1100-3605R

*Must be used with a C-Taper Sleeve catalog #17-000E

Implants

Femoral head implants & trials: CoCr

V40 Taper LFIT Heads

Catalog no.	Diameter (mm)	Offset (mm)	Trial catalog no
6260-9-122	22	+0	6264-8-122R
6260-9-222	22	+3	6264-8-222R
6260-9-322	22	+8	6264-8-322R
6260-9-028	28	-4	6264-8-028R
6260-9-128	28	+0	6264-8-128R
6260-9-228	28	+4	6264-8-228R
6260-9-328	28	+8	6264-8-328R
6260-9-428	28	+12	6264-8-428R
6260-9-032	32	-4	6264-8-032R
6260-9-132	32	+0	6264-8-132R
6260-9-232	32	+4	6264-8-232R
6260-9-332	32	+8	6264-8-332R
6260-9-432	32	+12	6264-8-432R

V40 Taper LFIT Anatomic Heads

Catalog no.	Diameter (mm)	Offset (mm)	Trial catalog no
6260-9-036	36	-5	6264-8-036R
6260-9-136	36	+0	6264-8-136R
6260-9-236	36	+5	6264-8-236R
6260-9-336	36	+10	6264-8-336R
6260-9-040	40	-4	6264-8-040R
6260-9-140	40	+0	6264-8-140R
6260-9-240	40	+4	6264-8-240R
6260-9-340	40	+8	6264-8-340R
6260-9-440	40	+12	6264-8-440R
6260-9-044	44	-4	6264-8-044R
6260-9-144	44	+0	6264-8-144R
6260-9-244	44	+4	6264-8-244R
6260-9-344	44	+8	N/A
6260-9-444	44	+12	N/A

V40 Vitallium

Catalog no.	Diameter (mm)	Offset (mm)	Trial catalog no
6260-5-126	26	+0	6264-8-126R
6260-5-226	26	+4	6264-8-226R
6260-5-326	26	+8	6264-8-326R
6260-5-426	26	+12	6264-8-426R
6260-5-028	28	-4	6264-8-028R
6260-5-128	28	+0	6264-8-128R
6260-5-228	28	+4	6264-8-228R
6260-5-628	28	+6	6264-7-226R
6260-5-328	28	+8	6264-8-328R
6260-5-428	28	+12	6264-8-428R
6260-5-132	32	+0	6264-8-132R
6260-5-232	32	+4	6264-8-232R
6260-5-332	32	+8	6264-8-332R
6260-5-432	32	+12	6264-8-432R

Implants

Femoral head implants & trials: Modular Endo head

Unitrax Unipolar

(For full list of Unitrax instruments and trials, refer to UHT Instrument System surgical protocol)

Unitrax Unipolar femoral heads**

Catalog no.	Diameter (mm)	Catalog no.	Diameter (mm)
6942-5-038	38	6942-5-049	49
6942-5-040	40	6942-5-050	50
6942-5-041	41	6942-5-051	51
6942-5-042	42	6942-5-052	52
6942-5-043	43	6942-5-053	53
6942-5-044	44	6942-5-054	54
6942-5-045	45	6942-5-055	55
6942-5-046	46	6942-5-056	56
6942-5-047	47	6942-5-058	58
6942-5-048	48	6942-5-061	61

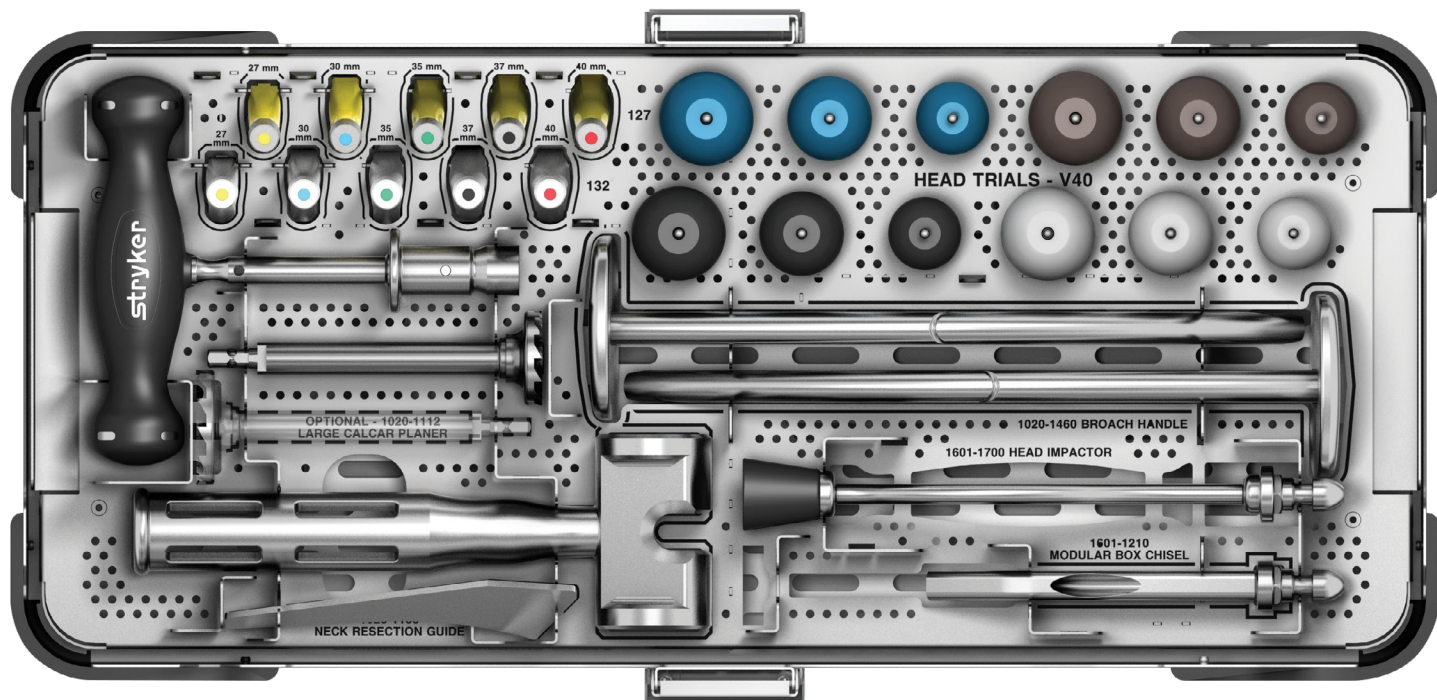
Unitrax V40 Sleeve**

Catalog no.	Offset (mm)
6942-6-060	-4
6942-6-065	+0
6942-6-070	+4
6942-6-075	+8
6942-6-080	+12

* Must be used with the Unitrax V40 Sleeve catalog #6942-6-0XX

** Accolade II Femoral Hip System is not indicated for hemiarthroplasty in the EU, EMEA countries requiring CE mark, and Australia

Instrumentation



Instruments

Catalog no.	Description
1020-9001	Basic Tray
1020-9000	Single Tray Case
1101-2200	Orthonomic T-Handle
1020-1112	Calcar Planer - Large (optional)
1020-1111	Calcar Planer - Standard
1020-1100	Neck Resection Guide
1120-1000	Mallet
1020-1460	2 x Offset Broach Handle
1440-1460	2 x Straight Broach Handle (optional)
1601-1700	Modular Head Impactor
1601-1210	Modular Box Osteotome

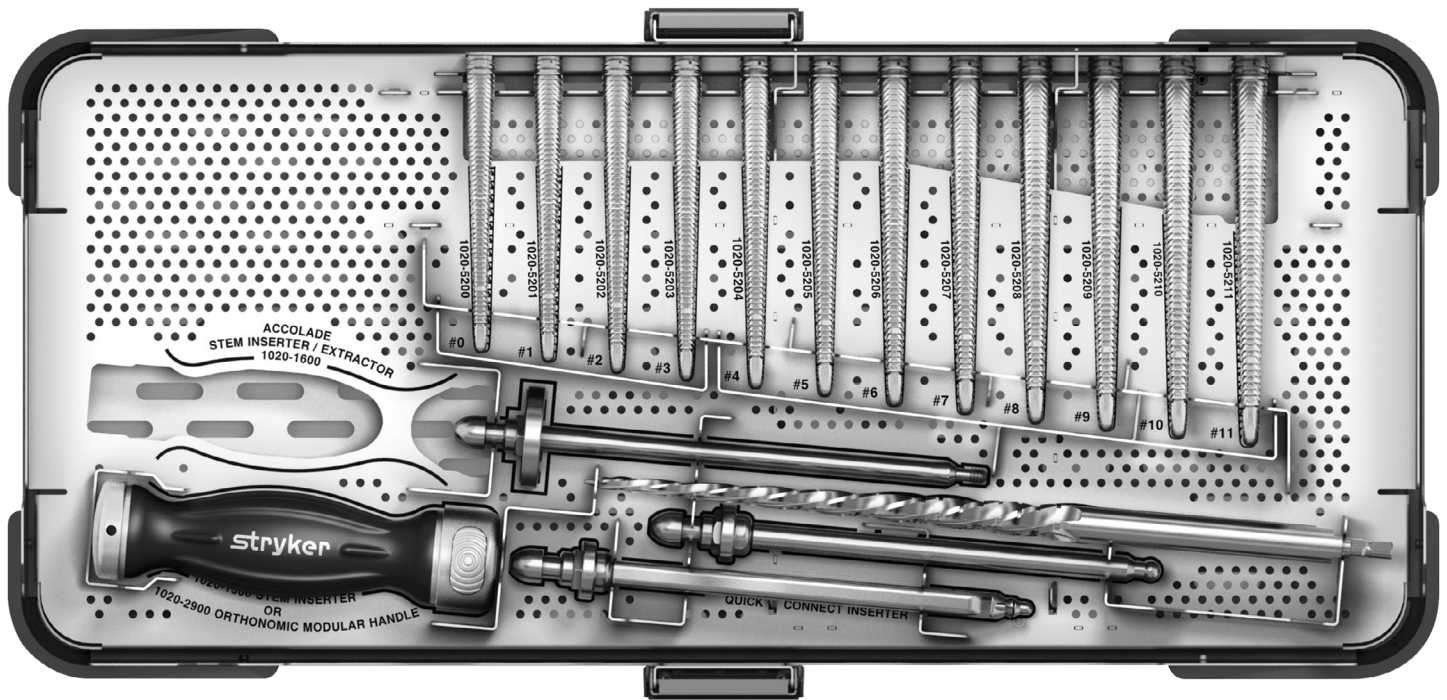
Neck Trials

Catalog no.	Angle	Length (mm)	Broach size
1020-3227	132°	27mm	0, 1
1020-3230	132°	30mm	2, 3
1020-3235	132°	35mm	4, 5, 6
1020-3237	132°	37mm	7, 8, 9
1020-3240	132°	40mm	10, 11
1020-2727	127°	27mm	0, 1
1020-2730	127°	30mm	2, 3
1020-2735	127°	35mm	4, 5, 6
1020-2737	127°	37mm	7, 8, 9
1020-2740	127°	40mm	10, 11

V40 Femoral Head Trials

Tray holds 12 head trials. Refer to Implant Information section for corresponding head trial catalog numbers.

Instrumentation



Instruments

Catalog no.	Description
1020-9002	Accolade II Broach Tray
1020-9000	Single Tray Case
1020-2900	Orthonomic Modular Handle
1020-1800	Modular Threaded Stem Inserter
1020-1860	Modular Offset Quick Connect Stem Inserter
1020-1870	Modular Stem Impactor
1020-1200	Axial Starter Reamer

Accolade II Broach

Catalog no.	Size
1020-5200	0
1020-5201	1
1020-5202	2
1020-5203	3
1020-5204	4
1020-5205	5
1020-5206	6
1020-5207	7
1020-5208	8
1020-5209	9
1020-5210	10
1020-5211	11

Stryker Orthopaedics has validated the following reusable instrument trays with Aesculap's SterilContainer™ System and with CSR wrap. Refer to LSTPI-B (Instructions for Cleaning, Sterilization, Inspection, and Maintenance of Reusable Medical Devices) and SLI0001.

- 6147-0-100 Universal Lid
- 6147-1-101 Accolade II Basic Tray
- 6147-1-102 Accolade II Broach Tray

Instrument listing

Instrument/Trays

Catalog no.	Description
7000-5520	Femoral Instrument Tray – General
1020-1111	Calcar Planer – Standard
1020-1112	Calcar Planer – Large
1101-2200	Orthonomic T-Handle
1601-1700	Modular Head Impactor
6264-X-XXXX	Femoral heads (select 10 from list)
XXXX-XXXX	Broach handles x2 (select from below list of handle options)
1601-1210	Modular Box Osteotome
1020-1200	Axial Starter Reamer
1020-2900	Orthonomic Modular Handle

Broach handles (Select two from the following options)

Catalog no.	Description
7000-5529	Extra Offset Broach Handle – Lever
7000-5525	Straight Broach Handle – Lever
7000-5526	Offset Broach Handle – Lever
1440-1460	Straight Broach Handle
1020-1460	Offset Broach Handle

Stryker Orthopaedics has validated the following reusable instrument trays with Aesculap’s SterilContainer™ System and with CSR wrap. Refer to LSTPI-B (Instructions for Cleaning, Sterilization, Inspection, and Maintenance of Reusable Medical Devices).

6147-0-100 Universal Lid
 7000-5200 Femoral Instrument Tray – General
 7000-5222 Accolade II Broach Tray – General

Femoral Head trials (select 10)

Catalog no.	Description
6264-8-028R	28mm -4mm V40 Trial Head
6264-8-728R	28mm -2.5mm Trial Head
6264-8-928R	28mm -2.7mm V40 Trial Head
6264-8-128R	28mm +0(STD) V40 Trial Head
6264-8-228R	28mm +4mm V40 Trial Head
6264-8-828R	28mm +5mm Trial Head
6264-8-628R	V40 Trial Femoral Head 28+6mm
6264-8-328R	28mm +8mm V40 Trial Head
6264-8-428R	28mm +12mm Trial Head
6264-8-032R	32mm -4mm V40 Trial Head
6264-8-632R	32mm -2.5mm Trial Head
6264-8-132R	32mm +0(STD) V40 Trial Head
6264-8-232R	32mm +4mm V40 Trial Head
6264-8-732R	32mm +5mm Trial Head
6264-8-332R	32mm +8mm V40 Trial Head
6264-8-432R	32mm +12mm Trial Head
6264-8-036R	36mm -5mm V40 Trial Head
6264-8-436R	36mm/-2.5mm Trial Head
6264-8-136R	36mm +0(STD) V40 Trial Head
6264-8-536R	36mm +2.5mm Trial Head
6264-3-236R	36mm +4mm V40 Trial Head
6264-8-236R	36mm +5mm V40 Trial Head
6264-8-736R	36mm/+7.5mm Trial Head
6264-8-336R	36mm +10mm Trial Head

Instrument listing

Instruments

Catalog no.	Description
7000-5522	Accolade II Broach Tray - General
1020-5200	Size 0 Accolade II Broach
1020-5201	Size 1 Accolade II Broach
1020-5202	Size 2 Accolade II Broach
1020-5203	Size 3 Accolade II Broach
1020-5204	Size 4 Accolade II Broach
1020-5205	Size 5 Accolade II Broach
1020-5206	Size 6 Accolade II Broach
1020-5207	Size 7 Accolade II Broach
1020-5208	Size 8 Accolade II Broach
1020-5209	Size 9 Accolade II Broach
1020-5210	Size 10 Accolade II Broach
1020-5211	Size 11 Accolade II Broach
1020-2727	127 degree, 27mm neck trial
1020-2730	127 degree, 30mm neck trial
1020-2735	127 degree, 35mm neck trial
1020-2737	127 degree, 37mm neck trial
1020-2740	127 degree, 40mm neck trial
1020-3227	132 degree, 27mm neck trial
1020-3230	132 degree, 30mm neck trial
1020-3235	132 degree, 35mm neck trial
1020-3237	132 degree, 37mm neck trial
1020-3240	132 degree, 40mm neck trial
1020-1100	Neck Resection Guide
1020-1860	Modular Offset Quick Connect Stem Inserter
1020-1870	Modular Stem Impactor
1020-1800	Modular Threaded Stem Inserter
ATEMH0105	Accolade II Surgical Template



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