

Foot & Ankle Solutions



# restor3d Ossera<sup>™</sup> AFX are a treatment option for ankle fusion in patients at risk of limb loss.

The system consists of 3D printed Titanium alloy implants and single-use disposable instrumentation including size trials, cannulated reamers, and inserters. The fully interconnected porous implant architectures utilize  $TIDAL^{TM}$  technology for in-growth as early as 4 weeks.<sup>4</sup>



### **Product Highlights**

- · Available in five shapes and multiple size variations, ensuring an optimized fit for diverse anatomies
- Optional surgical templating via x-ray or CT for patient-planned solutions\*\*
- · Procedural efficiency with sterile packed single-use instrumentation for bone preparation, implant trialing, and implant insertion
- 100% Interconnectivity and up to 80% porosity<sup>1</sup>, mesoscale pores support graft retention and bony ingrowth<sup>2</sup>
- Direct bony apposition to implant surface guided by surface topography and curvature demonstrated in preclinical model<sup>2,3</sup>, in-growth as early as 4 weeks<sup>4</sup>

### **Implant Geometry**

For Tibiotalocalcaneus Cage Contact

RECTANGLE						
ML Width (mm)	AP Depth (mm)	Height (mm)				
26	34					
28	38	24-46*				
	41					
31	44					
34						
	48					
	52					

34		34		
5-1		51	34-46*	
36	24-46*	36	34-40	
50		50		
38		38	36-46*	
40		40	38-46*	
		-		
42		42	40-46*	
44		44	42-46*	
46		46	44-46*	

Diam.

Height

Height









DOME		PILL		
Diam. (mm)	Height (mm)	Diam. (mm)	Height (mm)	
34	29.1	34	34-46*	
36	31.4	36	34-46	
38	33.7	38	36-46*	
40	36.0	40	38-46*	
42	38.2	42	40-46*	
44	40.4	44	42-46*	
46	42.6	46	44-46*	





All implants feature a 15 mm central cannulation



Lateral fibular relief provided on all cylinder, dome, pill & half-pill implants

<sup>\*</sup>Available in 2mm increments

<sup>\*\*</sup>restor3d surgical templating available only for cylinder and rectangle implants

# Ossera<sup>TM</sup> AFX

**Ankle Fusion System** 



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## A Process Built for Every Patient & Surgeon

restor3d Ossera<sup>TM</sup> AFX are available Made To Order to meet the needs of every patient and every surgeon. Surgical templating may be performed by a physician or restor3d using x-ray or CT based imaging.\*

## Ordering Through r3id

At the direction of a physician, implants of the desired geometry and dimensions can be ordered directly through r3id, or by contacting restor3d customer service. To place an order on r3id, follow these simple steps:

- Create a new case on r3id.restor3d.com
- Select "Ossera™ AFX" from the cleared devices
- Follow the prompts to select the desired nominal implant and alternate implants



Patient imaging containing the full field of view of the affected region may be provided to restor3d for surgical templating of cylinder or rectangle implants. Scans are recommended to be less than 6 months old and must be in one of the following imaging modalities:

#### Calibrated x-rays

- File Type: Uncompressed DICOM
- Lateral and coronal views
- Must contain a calibration sphere, line, or PACS measurement for scale
- If scans contain a calibration sphere, the sphere must be half or more in view
- If scans contain a calibration line, the line must be fully in view
- Scans with measurements obtained from PACS must have the measurement viewable in the image

### CT

The following CT scan parameters are recommended:

- File type: Uncompressed DICOM
- Field of view: less than or equal to 40cm
- kVp: 120
- Pixel Spacing: less than or equal to 0.5mm
- Slice Thickness: 1.25mm or less







example implant templating by restor3d



example coronal x-ray with calibration sphere

restor3d surgical templating only available for cylinder and rectangle implants. The surgical template is intended to enable independent review of patient imaging and implant sizing options by the surgeon to inform his/her own decision making. The surgical template is not intended to be relied on to make a clinical diagnosis or treatment decision regarding an individual patient. The surgical template has been validated for visualizing an implant in the anatomy, at the same scale, using an overlay method.

<sup>1.</sup> Kelly, et al. Acta Biomaterialia (2019) 94, 601-626.

<sup>2.</sup> Kelly, et al. Journal of the Mechanical Behavior of Biomedical Materials (2021) 116, 104380.

<sup>3.</sup> Kelly, et al. Biomaterials (2021) 279, 121206.

<sup>4.</sup> Data on file.