United®
Orthopedic Corporation

U-Motion II™

Surgical Protocol

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Device Description

Total Hip Arthroplasty (THA) has become one of the most successful treatments in orthopedic surgeries, having both good patient satisfaction and long-term survivorship. However, challenging problems still exist-especially for physically active individuals such as postoperative dislocation, bearing wear, and insufficient range of motion. The U-Motion II Acetabular System has recruited advanced implant materials, BIOLOX® *delta* ceramic heads, highly cross-linked polyethylene (XPE), and Vitamin E stabilized highly cross-linked polyethylene (E-XPE) liners. With this unique material technology, the U-Motion II Acetabular System offers larger femoral head sizes to improve hip activities and to reduce the risk of joint dislocation. The U-Motion II Acetabular Cup incorporates a tapered inner face for ceramic, XPE, and E-XPE liners. In addition, the metallic cup has a single-rim locking mechanism for the attachment of polyethylene liners whereas the taper face is served to provide a press-fit locking with the ceramic liner. Bearing options with 28 mm, 32 mm, 36 mm and 40 mm articulation diameters are available in the U-Motion II Acetabular System. Full range of acetabular cup size from 44 mm to 70 mm (in 2 mm increments) supports the variety of acetabular anatomy. Clinically proven fixation of Ti plasma spray coating or hydroxyapatite with Ti plasma spray coating is applied on the acetabular cup. Additionally, cluster-, multi- and no-hole cups are also available for optional supplementary screw fixation. The advanced acetabular system grants orthopedic surgeons flexibility during surgery for addressing clinical problems they might meet.

Preoperative Planning and Templating

The reconstruction of hip anatomy and restoration of joint biomechanics are the main goals of total hip replacement. A comprehensive analysis of the affected hip is needed. Anteroposterior (AP) and lateral roentgenographic images are crucial to help determining hip rotational center and correcting component size. Also, an AP roentgenographic image of the pelvis may be necessary to verify preoperative decisions by comparing with the contralateral side.

Magnifications of 115 percent of templates are provided to meet the roentgenographic images. Templating the outline of the component which best fits the acetabulum is recommended, thus an ideal implant position and a correct sizing can be achieved (Fig. 1). The template of acetabular cup should be positioned towards the medial aspect of the acetabulum as possible, simultaneously, keep in mind that a inherent 2 mm offset of the center of rotation in the U-Motion II acetabular system. Care should be taken to avoid overlap between the component and the teardrop, any uncovering of the component, and inclination over 45 degrees. However, the final determination should be made depending on the actual condition during surgery.

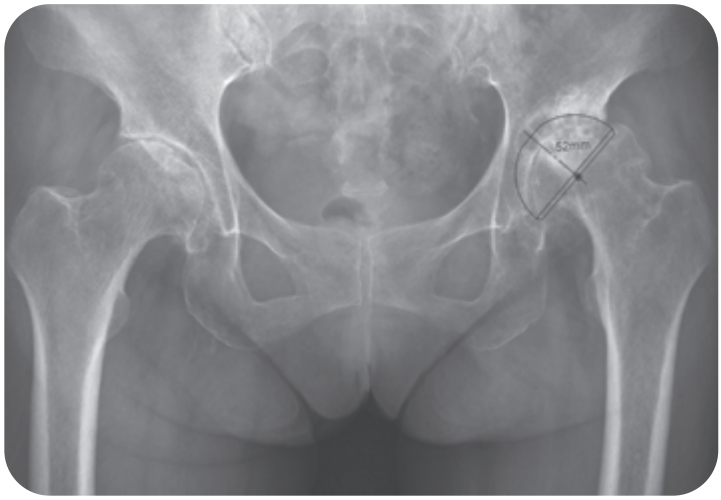


Fig. 1

Acetabular Preparation

1. Cup Reamer Handle
9203 - 1201 - RA

2. Cup Reamer
C/N varies by sizes

Acetabular reaming

Appropriate reaming of the acetabulum is important for the cup to be fully seated within. It is important to understand the labeled size on the U-Motion II acetabular instrumentation is an absolute dimension (include coating). All articular cartilage, osteophytes, and any soft tissues should be removed throughout the reaming process.

Hold the **Cup Reamer Handle**[1] at an abduction of 40°- 45° and an anteversion of 15°-20° (Fig. 2). Utilize the smallest **Cup Reamer**[2] to begin acetabular reaming, then gradually proceed with enlarged reamers in 1-2 mm increments until the anticipated size is achieved.

If press-fit is desired for primary implant fixation, under reaming of the cavity by 2 mm is recommended. To adapt this consideration, the last reamer should be 2 mm under sized. The surface coating of TPS⁺ type is thicker than Ti plasma type, thus the under reaming of the cavity by 1 mm is recommended. Sometimes a line-to-line reaming would be required to treat an acetabulum with great bone density.

Note:
The implant with TPS⁺ type has 0.35 mm surface coating thickness in each side. For example, a 58 mm cup of Ti plasma and TPS⁺ type represent 58 and 58.7 mm at the rim (Fig. 3).

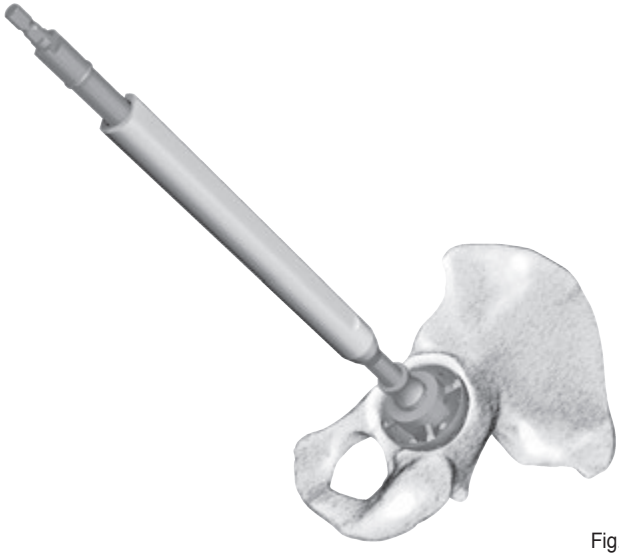


Fig. 2

Fig. 3

Acetabular Preparation

Cup trialing

Once a proper acetabular cavity is established, place an **Acetabular Cup Trial**[3] to : (1) confirm the bone-implant congruency via the peephole on the trial; (2) verify the prepared acetabulum is truly hemispherical; and (3) check the stability of the trial cup before final implant inserted.

Thread the appropriate trial cup onto the **U-M II Cup impactor**[4]. A same diameter trial of the last reamer is recommended to avoid destruction during press-fit procedure. The profile of the trial cup is characterized as true hemisphere corresponded to the marked diameter.

Before trialing, clean acetabular cavity and excise any protruded tissues. Control the trial cup to be inserted with a 40°-45° abduction and a 15°-20° anteversion. Impact the cup trial into the cavity with a mallet (Fig. 4). Palpate the peripheral edge of the trial cup to ensure it is fully seated at an appropriate orientation.

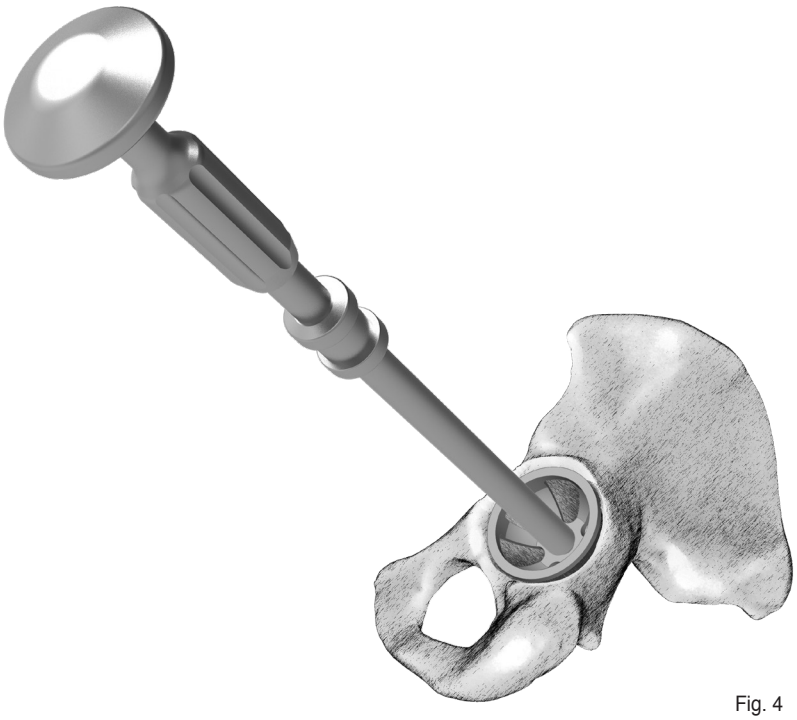
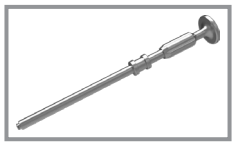


Fig. 4

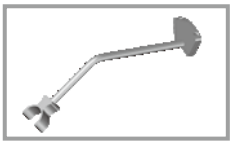
3. Acetabular Cup Trial
C/N varies by sizes

4. U-M II Cup Impactor
9206 - 1103 - RG

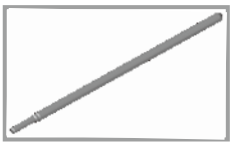


Cup Insertion

5. Alignment Tower, lateral
9206 - 5102



6. Alignment Rod
9206 - 5104



Cup orientation

Proper implant orientation can be guided by the external alignment system. The U-Motion II alignment system assists in directing a satisfactory level of acetabular cup abduction and anteversion.

Attach the quick connect **Alignment Tower**[5] to the cup impactor and thread the **Alignment Rod**[6] into left/right screw hole of the tower. Firmly secure the acetabular cup onto the tip of the cup impactor.

As the patient is in lateral side position, make the vertical bar perpendicular to the operating table with the alignment rod parallel to the floor (Fig. 5). The cup impactor should subsequently be rotated until the alignment rod is in line with the longitudinal axis of the patient body (Fig. 6). Then, an anatomic positioning of a 45° abduction and a 20° anteversion is built up.

Before implant insertion, attention should be taken as employing a cluster-hole cup where the screw holes must be placed superoposteriorly and/or inferoposteriorly (Fig. 7) for a correct orientation. The laser marks on outer surface of the cup indicate the position of screw holes.

Caution: When a ceramic liner is expected, cup abduction should not be greater than 45° (approximately 40° is recommended). In addition, the anteversion angle should lie between 10° and 20° in order to reduce the risk of impingement.

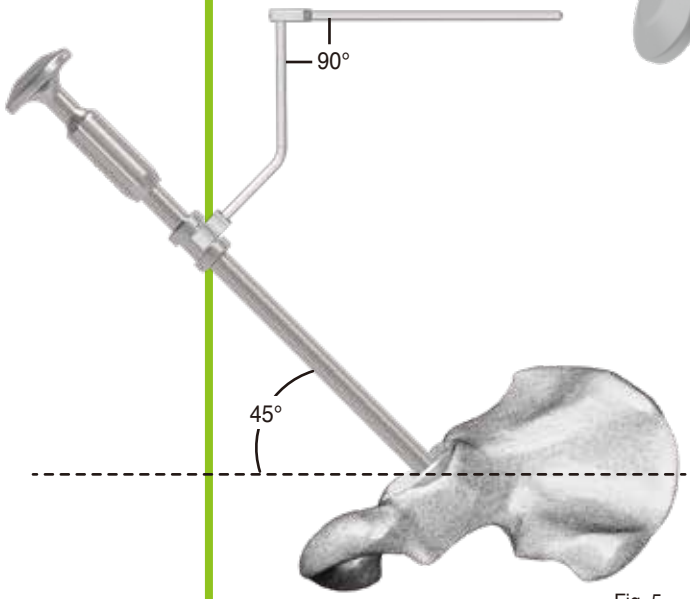


Fig. 5

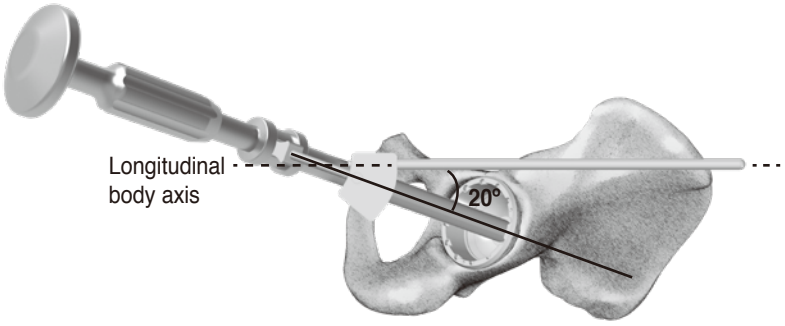


Fig. 6

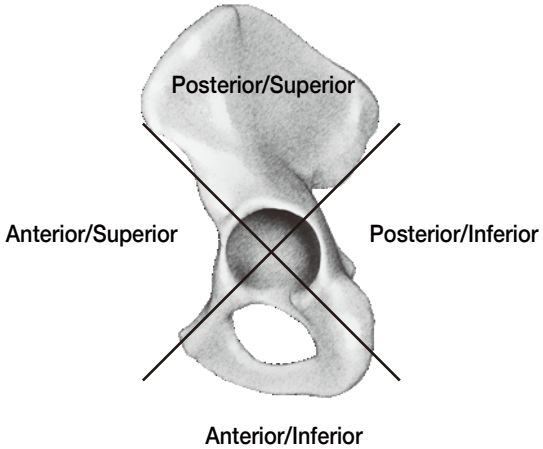


Fig. 7

Cup Insertion

Dome hole plugging

All U-Motion II acetabular cup can be implanted with identical surgical technique. While handling the cup prosthesis at proper position and alignment, strike the cup impactor with a mallet until the cup is fully seated. By sighting through the apical hole or screw holes if present, confirm whether a congruent contact between bone-implant interface is achieved.

An apical hole cover among the **Screw-Hole Cover**[7] set is then plugged with a hex head **Straight Screwdriver**[8] by the **Ratchet Handle**[9] following cup seating (Fig. 8). Supplementary threaded covers are prepared for residual screw holes as well.

Multi-hole cup insertion

All screw hole covers are preassembled in multi-hole cup. Before multi-hole cup implantation, surgeons should remove the hole cover from the cup if additional screw fixation will be needed.

If surgeon would like to decide whether screw fixation is required after cup insertion, care must be taken that removing screw hole cover from well-seated cup may lead to cup instability.

Surgical tip:
Run finger around the edge of dome holes to verify the covers are below the inner surface of the cup.

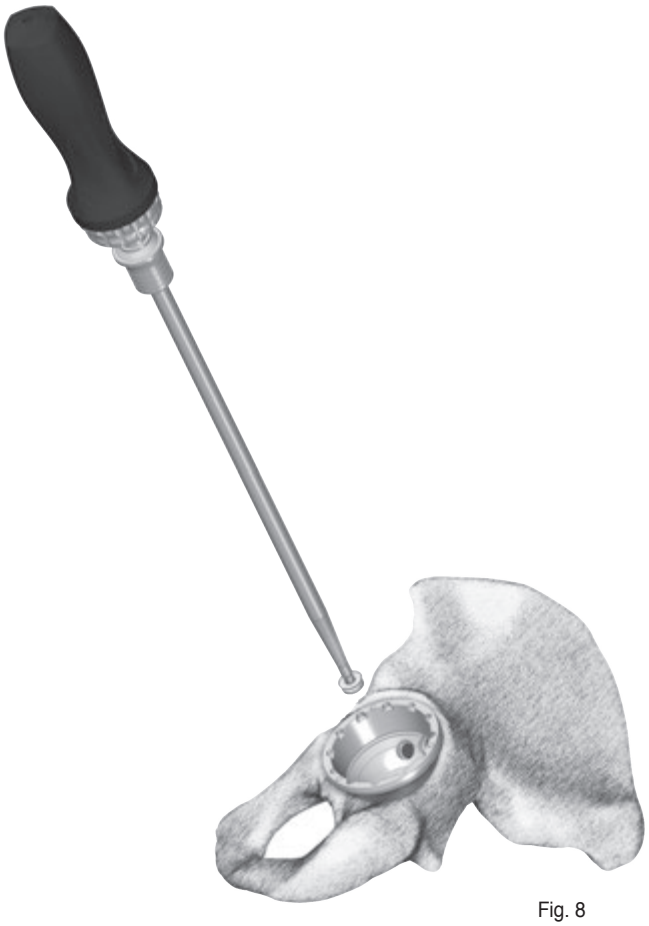
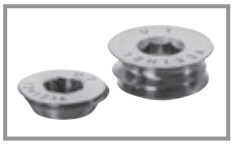
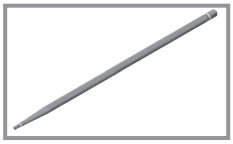


Fig. 8

7. Screw-Hole Cover
1306 - 1001



8. Straight Screwdriver
9206 - 1113



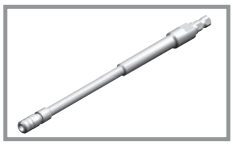
9. Ratchet Handle
9721 - 1041

Cup Insertion

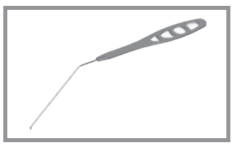
10. U-M II Drill Guide
9206 - 2101

11. Drill Bit
9206 - 3115, 15mm
9206 - 3125, 25mm
9206 - 3135, 35mm
9206 - 3150, 50mm

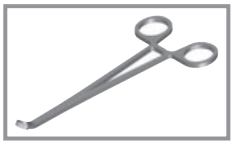
12. Modular Flex Shaft
9206 - 1107



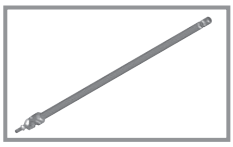
13. Depth Gauge
9206 - 7101



14. U-M II Screw Forceps
9206 - 5106



15. Universal Screwdriver
9206 - 1114



Screw insertion

The U-Motion II Acetabular System offers three screw-hole cups comprised cluster-, multi-, and no-hole. For primary cases with good bone stock, no-hole cup may be preferable. However, additional screw fixation is necessary when deficient acetabulum or poor bone quality is observed.

The cluster-hole cup has three screw holes while numerous screw holes are available in multi-hole cup. The screw should be inserted in the posterior superior quadrant of the acetabulum (Fig. 6) on a thick part of the ilium where there is a low-risk area of neurovascular damage.

Use the **U-M II Drill Guide**[10], **Drill Bit**[11] and **Modular Flex Shaft**[12] for drilled hole preparation (Fig. 9). The effective lengths of four drill bits are 15, 25, 35 and 50 mm. Carefully drill into acetabulum within selected holes, utilize the **Depth Gauge**[13] to determine an appropriate screw length (Fig. 10).

Grasp the screw with the **U-M II Screw Forceps**[14]. Attach the flexible **Universal Screwdriver**[15] to the screw head, then insert the screw using the ratchet handle (Fig. 11). Allowed screw angulation varies by as much as 32° (Fig. 12). Care should also be taken to confirm the screw is fully seated within the screw hole without damaging the liner.

Surgical tip:
Run finger around the edge of dome holes to verify inserted screws are below the inner surface of the cup.

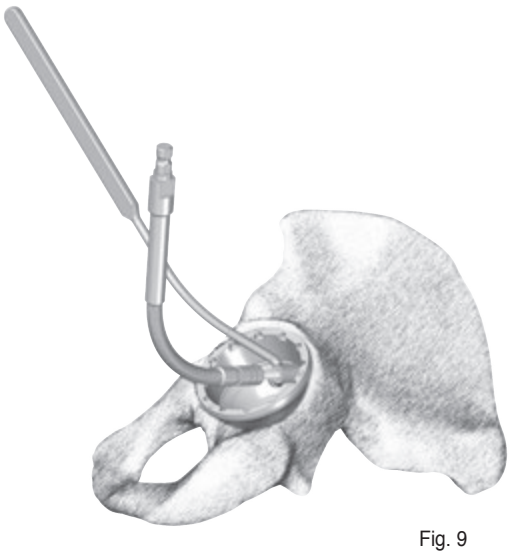


Fig. 9

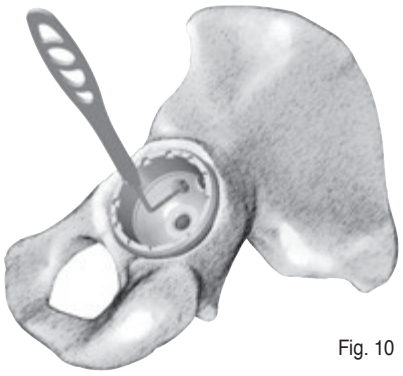


Fig. 10

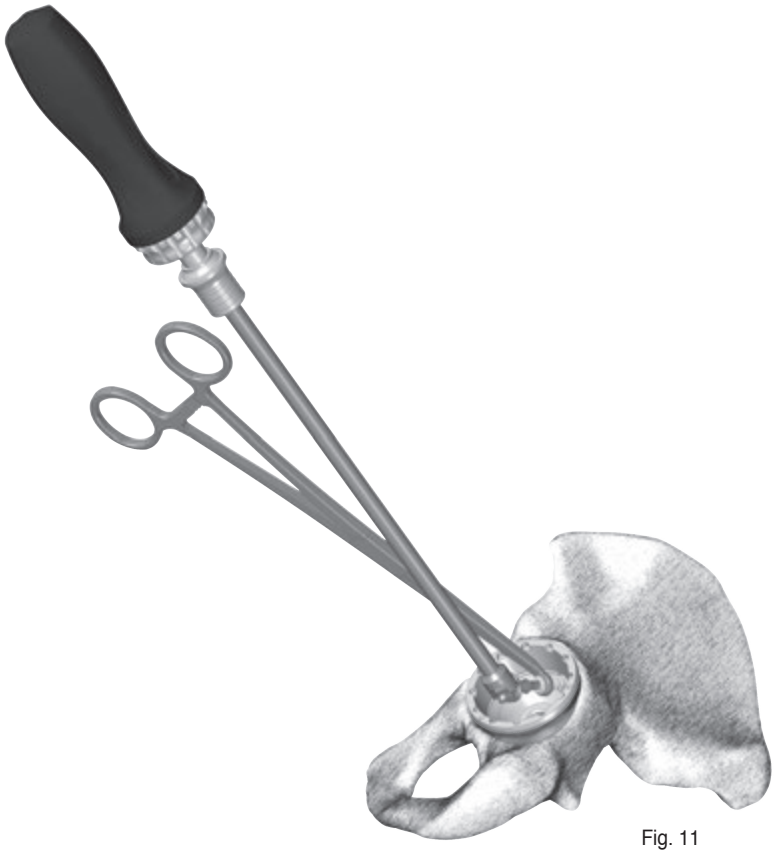


Fig. 11

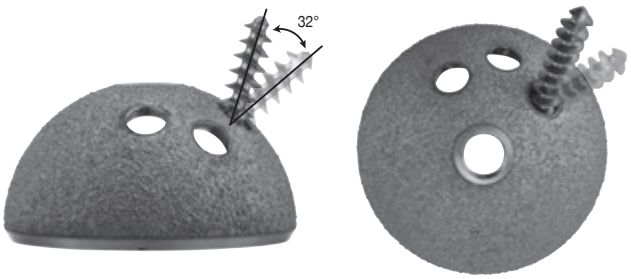
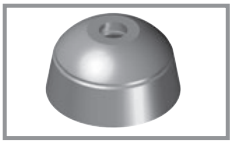


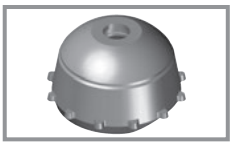
Fig. 12

Liner Trial Placement

16. Acetabular Liner Trail
C/N Varies by Sizes



17. Acetabular
Liner Trail, 20°
C/N Varies by Sizes



After securing the prosthetic cup into the acetabular cavity, introduce a size-matched **Acetabular Liner Trial**[16,17] for trial reduction (Fig. 13). Make sure the orientation of the liner trail if a 20º lipped liner is desired. Laser mark on the acetabular cup aids in final positioning of the lipped liner (Fig. 14). Ensure the liner trail is well fixed within the cup before an overall evaluation of joint biomechanics.

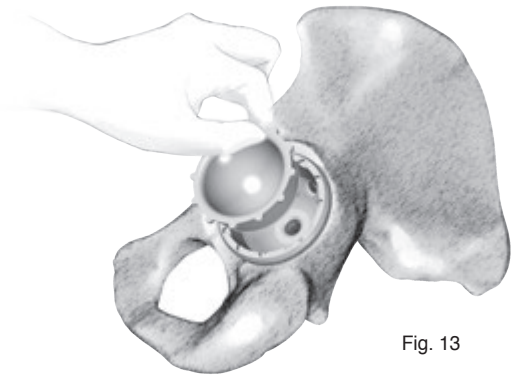


Fig. 13

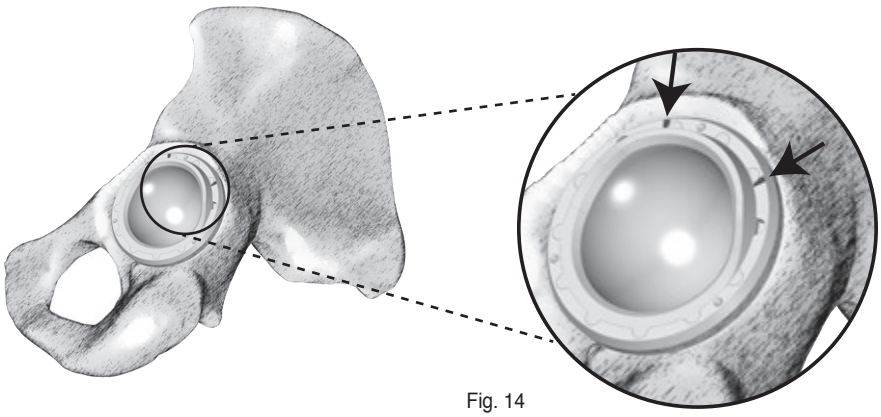


Fig. 14

Trial Reduction

Following acetabular and femoral preparations, the trial reduction can be carried out. Trial heads with 28 mm, 32 mm, 36 mm, and 40 mm (ceramic only) diameters are available options for surgeons to select an optimized size, which corresponds to the implanted acetabular cup.

Femoral heads with different neck length are also supplied for surgeons to make a proper determination and to revalidate preoperative decision. After final trial reduction, assessment of joint stability, range-of-motion, leg length, and component size can be accomplished.

Liner Insertion

XPE & E-XPE insertion

Eliminate any particles on the inner surface of acetabular cup like bone fragment prior to insert the final liner. It is important to inspect the cup/liner locking groove is free from debris.

Attach a **Liner Impactor**[18] matched with the selected liner to the tip of the **Universal Handle**[19]. Place the polyethylene liner into acetabular cup by hand making sure that the tabs on the liner is aligned with corresponding scallops in the acetabular cup (Fig. 15). There are 12 scallops in the cup that provide variable liner position in 30 degree increments, for a well alignment of the 20° lipped liner.

Impact the universal handle until the liner is fully seated (Fig. 16). To confirm a complete seating of the liner, palpate around the rim of the cup.

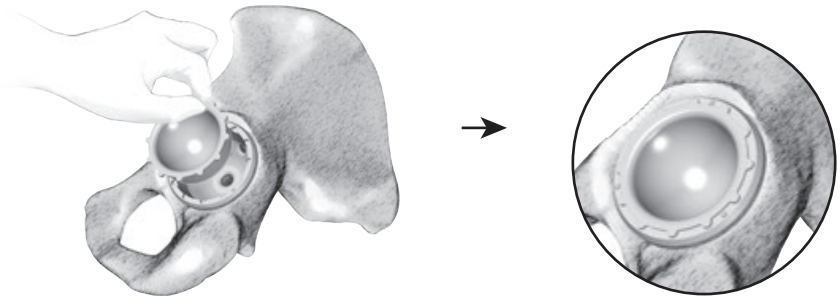


Fig. 15

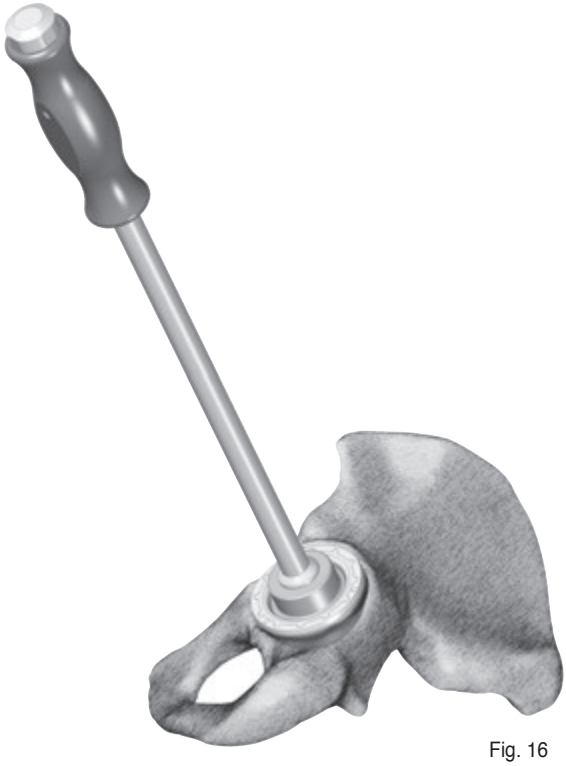
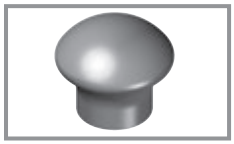


Fig. 16

18. Liner Impactor
9206 - 5028, 28 mm
9206 - 5032, 32 mm
9206 - 5036, 36 mm
9206 - 5040, 40 mm



19. Universal Handle
9206 - 1112, 230 mm

Liner Insertion

Ceramic liner insertion

Prior to introducing the ceramic liner, ensure all taper surfaces of the cup and the mating liner are clean and free of debris as prevents the locking mechanism from inefficacy and accompanying premature component damage.

Direct the ceramic liner into the cup by hand with an appropriate taper-to-taper alignment. Verify a well aligned initial seating by running finger around the circumstance of the liner (Fig. 17).

Mount the proper sized **Liner Impactor**[18] with the **Universal Handle**[19]. Strike the liner impactor with several slight blows to finally engage the liner with the cup (Fig. 18). Again, palpate the outside of the liner to check a complete seating in the cup. Cautiously estimate the alignment of the ceramic liner is considerably significant before final impaction. Failure to follow these procedures can lead to breakage of the ceramic liner.

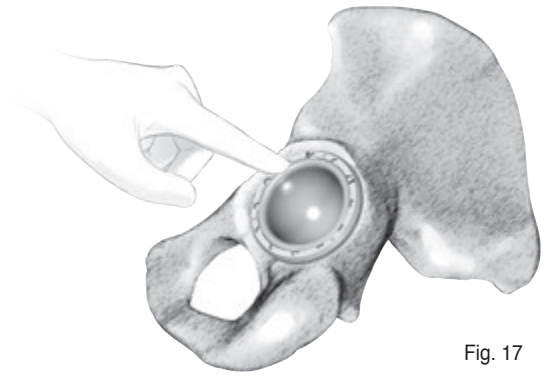


Fig. 17

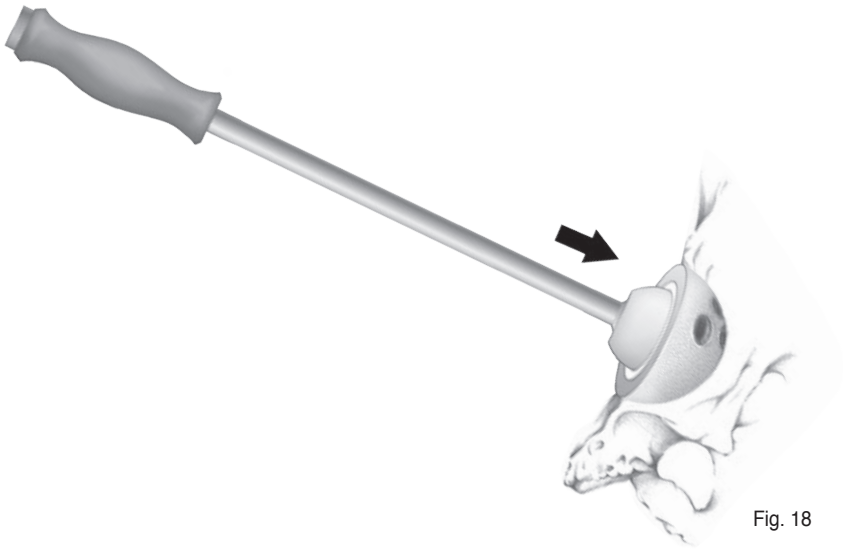


Fig. 18

Liner Extraction

XPE & E-XPE liner removal

Utilize a **Straight Drill**[20] combined with the drill guide to perform an eccentric hole in the polyethylene liner (Fig. 19). Applying a hex-driver, a cancellous screw is then be advanced into the drilled hole until dislodgement of the polyethylene liner from the acetabular cup (Fig. 20).

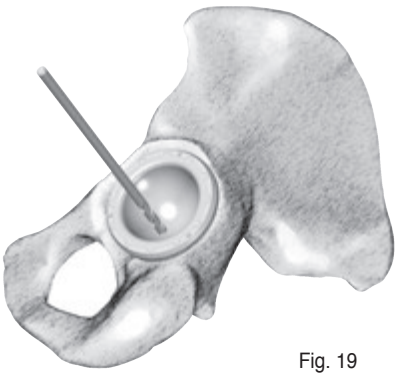


Fig. 19

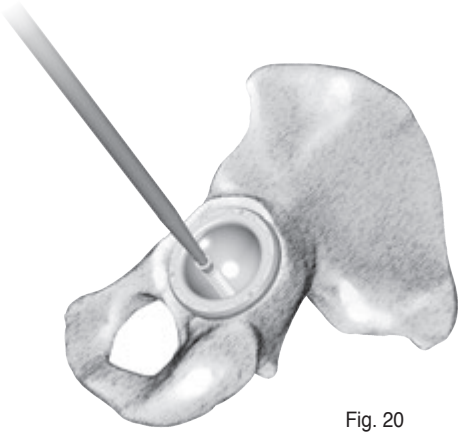
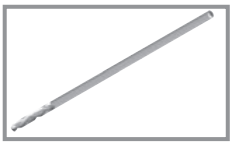


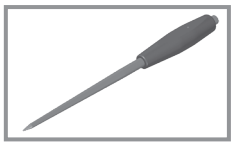
Fig. 20

20. Straight Drill
9201 - 4201

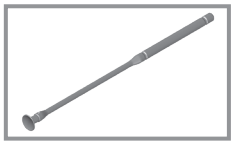


Liner Extraction

21. Ceramic Liner Extractor
9206 - 1108



22. Ceramic Liner Holder
9206 - 1109



Ceramic liner removal

Ceramic Liner Extractor[21] and **Ceramic Liner Holder**[22] are provided for ceramic liner extraction. Use the suction cap of the holder to engage with the inner surface of the ceramic liner first. Then, position the tip of the punch in three dimples on the face of acetabular cup, respectively (Fig. 21) and gently tap acetabular cup through the punch. The resulting vibration will loosen the integrity of taper locked interface between the ceramic liner and the cup. Then the ceramic liner can be lifted out of the acetabular cup by the suction mechanism.

Surgical tip:
Utilizing a cup trial and cup impactor can be alternative for taper locking release. Hold the impactor making a peripheral alignment between the real cup and the trial (Fig. 22). Gently tap the periphery of the real cup by the inverted trial will loosen the ceramic liner by a vibration force.

** Technique from Dr. Mel S Lee, Deputy Superintendent, Chang Gung Memorial Hospital, Taiwan.*

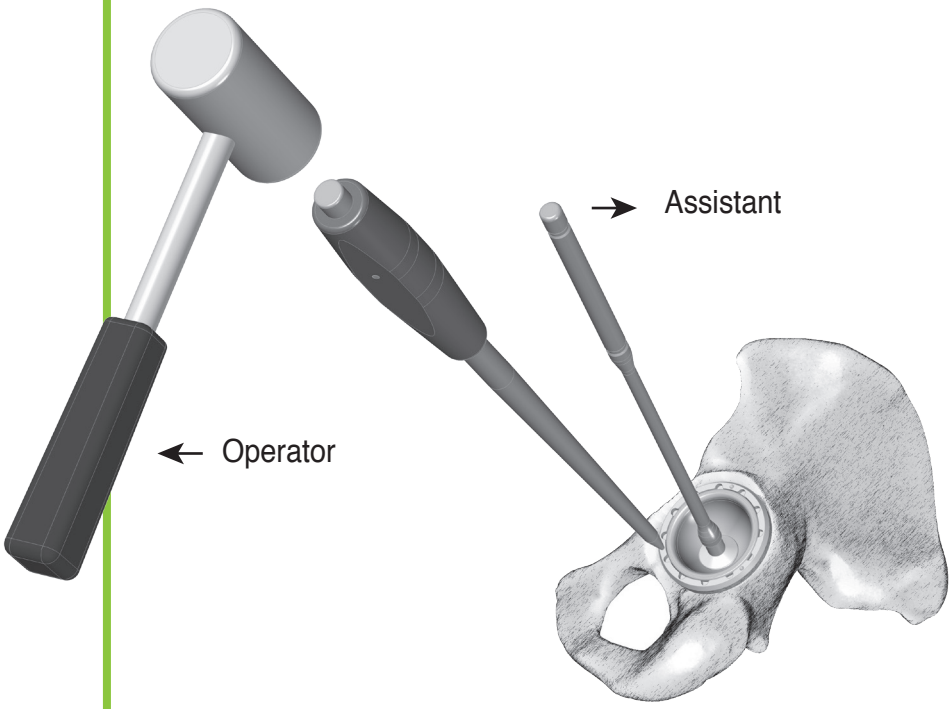


Fig. 21

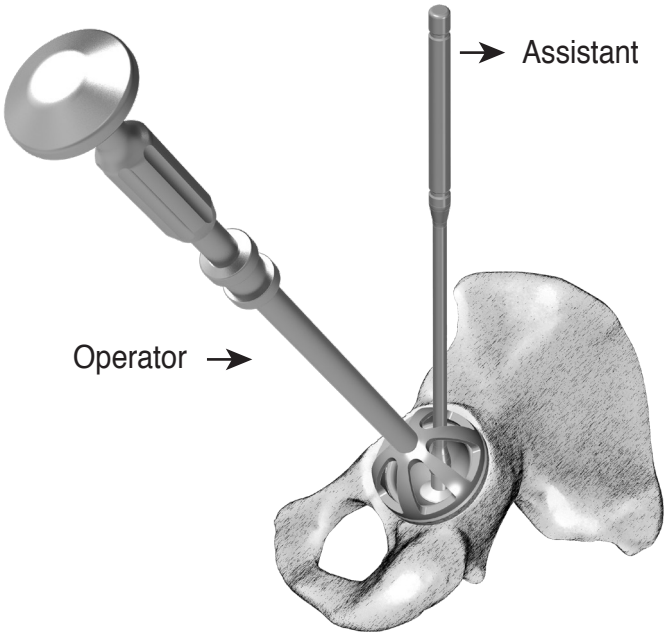


Fig. 22

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Order Information

Special Order Items




	Cluster-Hole Cup				No-Hole Cup		Multi-Hole Cup	
Cup Size (mm)	TPS Plus	Ti Plasma	HA/TPS Plus	HA/Ti Plasma	TPS Plus	Ti Plasma	HA/TPS Plus	HA/Ti Plasma
Ø 44	1306-3144	1306-3044	1306-1144	1306-1044	1306-3344	1306-3244	1306-1544	1306-1444
Ø 46	1306-3146	1306-3046	1306-1146	1306-1046	1306-3346	1306-3246	1306-1546	1306-1446
Ø 46	1306-3147	1306-3047	1306-1147	1306-1047	1306-3347	1306-3247	1306-1547	1306-1447
Ø 48	1306-3148	1306-3048	1306-1148	1306-1048	1306-3348	1306-3248	1306-1548	1306-1448
Ø 50	1306-3150	1306-3050	1306-1150	1306-1050	1306-3350	1306-3250	1306-1550	1306-1450
Ø 50	1306-3151	1306-3051	1306-1151	1306-1051	1306-3351	1306-3251	1306-1551	1306-1451
Ø 52	1306-3152	1306-3052	1306-1152	1306-1052	1306-3352	1306-3252	1306-1552	1306-1452
Ø 54	1306-3154	1306-3054	1306-1154	1306-1054	1306-3354	1306-3254	1306-1554	1306-1454
Ø 56	1306-3156	1306-3056	1306-1156	1306-1056	1306-3356	1306-3256	1306-1556	1306-1456
Ø 58	1306-3158	1306-3058	1306-1158	1306-1058	1306-3358	1306-3258	1306-1558	1306-1458
Ø 60	1306-3160	1306-3060	1306-1160	1306-1060	1306-3360	1306-3260	1306-1560	1306-1460
Ø 62	1306-3162	1306-3062	1306-1162	1306-1062	1306-3362	1306-3262	1306-1562	1306-1462
Ø 64	1306-3164	1306-3064	1306-1164	1306-1064	1306-3364	1306-3264	1306-1564	1306-1464
Ø 66	1306-3166	1306-3066	1306-1166	1306-1066	1306-3366	1306-3266	1306-1566	1306-1466
Ø 68	1306-3168	1306-3068	1306-1168	1306-1068	1306-3368	1306-3268	1306-1568	1306-1468
Ø 70	1306-3170	1306-3070	1306-1170	1306-1070	1306-3370	1306-3270	1306-1570	1306-1470


	Ti Cancellous Screw, Ø 6.5 mm							
Length (mm)	15	20	25	30	35	40	45	50
Cat. No.	5206-1015	5206-1020	5206-1025	5206-1030	5206-1035	5206-1040	5206-1045	5206-1050

	XPE Liner		E-XPE Liner		Head
Cup Size (mm)	Standard	20° lipped	Standard	20° lipped	CoCrMo
Ø 44	1406-3844	1406-5844	1406-7144	1406-7544	1206-1028 - 3 28 mm 1206-1128 + 0 28 mm 1206-1228 + 2.5 28 mm 1206-1428 + 5 28 mm 1206-1628 + 7.5 28 mm 1206-1828 + 10 28 mm
Ø 46	1406-3846	1406-5846	1406-7146	1406-7546	
Ø 46	1406-3247	1406-5247	1406-7247	1406-7647	1206-1032 - 3 32 mm 1206-1132 + 0 32 mm 1206-1232 + 2.5 32 mm 1206-1432 + 5 32 mm 1206-1632 + 7.5 32 mm 1206-1832 + 10 32 mm
Ø 48	1406-3248	1406-5248	1406-7248	1406-7648	
Ø 50	1406-3250	1406-5250	1406-7250	1406-7650	
Ø 50	1406-3651	1406-5651	1406-7351	1406-7751	1206-1036 - 3 36 mm 1206-1136 + 0 36 mm 1206-1236 + 2.5 36 mm 1206-1436 + 5 36 mm 1206-1636 + 7.5 36 mm 1206-1836 + 10 36 mm
Ø 52	1406-3652	1406-5652	1406-7352	1406-7752	
Ø 54	1406-3654	1406-5654	1406-7354	1406-7754	
Ø 56	1406-3656	1406-5656	1406-7356	1406-7756	
Ø 58	1406-3658	1406-5658	1406-7358	1406-7758	
Ø 60	1406-3660	1406-5660	1406-7360	1406-7760	
Ø 62	1406-3662	1406-5662	1406-7362	1406-7762	
Ø 64	1406-3664	1406-5664	1406-7364	1406-7764	
Ø 66	1406-3666	1406-5666	1406-7366	1406-7766	
Ø 68	1406-3668	1406-5668	1406-7368	1406-7768	
Ø 70	1406-3670	1406-5670	1406-7370	1406-7770	

	Screw Hole Covers
Cat. No.	1306-1001

Screw hole covers are pre-assembled with multi-hole cup.

Special Order Items

	XPE Liner		E-XPE Liner		*delta* Ceramic	
Cup Size (mm)	Standard	20° lipped	Standard	20° lipped	Liner	Head
Ø 44	1406-3844	1406-5844	1406-7144	1406-7544	1406-1844	1203-5028 - 2.5 28 mm 1203-5228 + 1 28 mm 1203-5428 + 4 28 mm
Ø 46	1406-3846	1406-5846	1406-7146	1406-7546		
Ø 46	1406-3247	1406-5247	1406-7247	1406-7647	1406-1247	1203-5032 - 3 32 mm
Ø 48	1406-3248	1406-5248	1406-7248	1406-7648	1406-1248	1203-5232 + 1 32 mm 1203-5432 + 5 32 mm 1203-5632 + 8 32 mm
Ø 50	1406-3250	1406-5250	1406-7250	1406-7650		
Ø 50	1406-3651	1406-5651	1406-7351	1406-7751	1406-1651	1203-5036 - 3 36 mm
Ø 52	1406-3652	1406-5652	1406-7352	1406-7752	1406-1652	1203-5236 + 1 36 mm 1203-5436 + 5 36 mm 1203-5636 + 9 36 mm
Ø 54	1406-3654	1406-5654	1406-7354	1406-7754		
Ø 56	1406-3056	1406-5056	1406-7456	1406-7856	1406-1056	1203-5040 - 3 40 mm 1203-5240 + 1 40 mm
Ø 58	1406-3058	1406-5058	1406-7458	1406-7858		
Ø 60	1406-3060	1406-5060	1406-7460	1406-7860		
Ø 62	1406-3062	1406-5062	1406-7462	1406-7862		
Ø 64	1406-3064	1406-5064	1406-7464	1406-7864	1406-1064	1203-5440 + 5 40 mm 1203-5640 + 9 40 mm
Ø 66	1406-3066	1406-5066	1406-7466	1406-7866		
Ø 68	1406-3068	1406-5068	1406-7468	1406-7868		
Ø 70	1406-3070	1406-5070	1406-7470	1406-7870		

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Instrument Catalog

Acetabular Cup Trial	Catalog Number	Description
	1306-2044	Ø 44 mm
	1306-2046	Ø 46 mm
	1306-2048	Ø 48 mm
	1306-2050	Ø 50 mm
	1306-2052	Ø 52 mm
	1306-2054	Ø 54 mm
	1306-2056	Ø 56 mm
	1306-2058	Ø 58 mm
	1306-2060	Ø 60 mm
	1306-2062	Ø 62 mm
	1306-2064	Ø 64 mm
	1306-2066	Ø 66 mm
	1306-2068	Ø 68 mm
	1306-2070	Ø 70 mm

Instrument Catalog

U-M II XPE
Acetabular Liner Trial

Catalog Number	Description	Head Size
1406-4844	44 mm	28 mm
1406-4846	46 mm	
1406-4247	46 mm	32 mm
1406-4248	48 mm	
1406-4250	50 mm	
1406-4651	50 mm	36 mm
1406-4652	52 mm	
1406-4654	54 mm	
1406-4656	56 mm	
1406-4658	58 mm	
1406-4660	60 mm	
1406-4662	62 mm	
1406-4664	64 mm	
1406-4666	66 mm	
1406-4668	68 mm	
1406-4670	70 mm	

U-M II XPE
Acetabular Liner Trial, 20°

Catalog Number	Description	Head Size
1406-6844	44 mm	28 mm
1406-6846	46 mm	
1406-6247	46 mm	32 mm
1406-6248	48 mm	
1406-6250	50 mm	
1406-6651	50 mm	36 mm
1406-6652	52 mm	
1406-6654	54 mm	
1406-6656	56 mm	
1406-6658	58 mm	
1406-6660	60 mm	
1406-6662	62 mm	
1406-6664	64 mm	
1406-6666	66 mm	
1406-6668	68 mm	
1406-6670	70 mm	

Instrument Catalog

Catalog Number	Description
9201-4201	Straight Drill

Catalog Number	Description
9201-7101-RA	Depth Gauge

Catalog Number	Description
9206-7101	Depth Gauge

Catalog Number	Description
9203-1201-RA	Cup Reamer Handle

Instrument Catalog

Cup Reamer

Catalog Number	Description
9203-4042	Ø 42 mm
9203-4043	Ø 43 mm
9203-4044	Ø 44 mm
9203-4045	Ø 45 mm
9203-4046	Ø 46 mm
9203-4047	Ø 47 mm
9203-4048	Ø 48 mm
9203-4049	Ø 49 mm
9203-4050	Ø 50 mm
9203-4051	Ø 51 mm
9203-4052	Ø 52 mm
9203-4053	Ø 53 mm
9203-4054	Ø 54 mm
9203-4055	Ø 55 mm
9203-4056	Ø 56 mm
9203-4057	Ø 57 mm
9203-4058	Ø 58 mm
9203-4059	Ø 59 mm
9203-4060	Ø 60 mm
9203-4061	Ø 61 mm
9203-4062	Ø 62 mm
9203-4063	Ø 63 mm
9203-4064	Ø 64 mm
9203-4065	Ø 65 mm
9203-4066	Ø 66 mm
9203-4067	Ø 67 mm
9203-4068	Ø 68 mm
9203-4069	Ø 69 mm
9203-4070	Ø 70 mm

Catalog Number	Description
9206-1103-RG	U-M II Cup Impactor

Instrument Catalog

Catalog Number	Description
9206-1107	Modular Flex Shaft

Catalog Number	Description
9206-1112	Universal Handle, 230 mm (long)

Catalog Number	Description
9206-1113	Straight Screw Driver

Catalog Number	Description
9206-1114	Universal Screw Driver

Instrument Catalog

Catalog Number	Description
9206-2101	U-M II Drill Guide

Catalog Number	Description
9206-3115	Drill Bit, 15 mm
9206-3125	Drill Bit, 25 mm
9206-3135	Drill Bit, 35 mm
9206-3150	Drill Bit, 50 mm

Catalog Number	Description
9203-4115-RA	Flexible Drill, 15 mm
9203-4125-RA	Flexible Drill, 25 mm

Catalog Number	Description
9206-5028	Liner Impactors, 28 mm
9206-5032	Liner Impactors, 32 mm
9206-5036	Liner Impactors, 36 mm

Catalog Number	Description
9206-5102	Alignment Tower, Lateral

Instrument Catalog

Catalog Number	Description
9206-5104	Alignment Rod

Catalog Number	Description
9206-5106	U-M II Screw Forceps

Catalog Number	Description
9206-8010	U-M II Case #1 (Reamer、Screw Set)
9206-8020	U-M II Case #2 (Trial、Implantation)

Catalog Number	Description
9721-1041	Ratchet Handle

Instrument Catalog (MIS Device)

Catalog Number	Description
9203-8102-RC	MIS Set Case

Catalog Number	Description
9206-1102-RB	Cup Reamer Handle, Offset

Catalog Number	Description
9206-1105	Cup Impactor, Offset

Catalog Number	Description
9206-1111	Universal Handle, Offset

Catalog Number	Description
9206-5103	Alignment Tower, **Supine**

Instrument Catalog (*Delta* Ceramic Device)

Ceramic Head Trials

Catalog Number	Description
1203-6028-RB	Ø 28 mm, - 2.5
1203-6228-RB	Ø 28 mm, +1
1203-6428-RB	Ø 28 mm, +4
1203-6032-RB	Ø 32 mm, - 3
1203-6232-RB	Ø 32 mm, +1
1203-6432-RB	Ø 32 mm, +5
1203-6632-RB	Ø 32 mm, +8
1203-6036-RB	Ø 36 mm, - 3
1203-6236-RB	Ø 36 mm, +1
1203-6436-RB	Ø 36 mm, +5
1203-6636-RB	Ø 36 mm, +9
1203-6040-RB	Ø 40 mm, - 3
1203-6240-RB	Ø 40 mm, +1
1203-6440-RB	Ø 40 mm, +5
1203-6640-RB	Ø 40 mm, +9

Acetabular Liner Trials

Catalog Number	Description	Head Size
1406-4056	56 mm	40 mm
1406-4058	58 mm	
1406-4060	60 mm	
1406-4062	62 mm	
1406-4064	64 mm	
1406-4066	66 mm	
1406-4068	68 mm	
1406-4070	70 mm	

Instrument Catalog (*Delta* Ceramic Device)

Catalog Number	Description
9206-1108	Ceramic Liner Extractor

Catalog Number	Description
9206-1109	Ceramic Liner Holder

Catalog Number	Description
9206-5040	Liner Impactors, 40 mm

Catalog Number	Description
9206-8030	U-M II *Delta* Case

U-Motion II™ Acetabular Components Safety Statement

INDICATIONS

The device is used for reduction or relief of pain and/or improved hip function in skeletally mature patients with the following conditions:

1.Painful, disabling joint disease of the hip resulting from: degenerative arthritis, rheumatoid arthritis, post-traumatic arthritis or late stage avascular necrosis.

2.Revision of previous unsuccessful femoral head replacement, cup arthroplasty or other procedure.

3.Clinical management problems where arthrodesis or alternative reconstructive techniques are less likely to achieve satisfactory results.

4.Correction of functional deformity.

5.Treatment of nonunion femoral neck and trochanteric fracture of the proximal femur with head involvement that is unmanageable using other techniques.

The device is intended for cementless use.

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