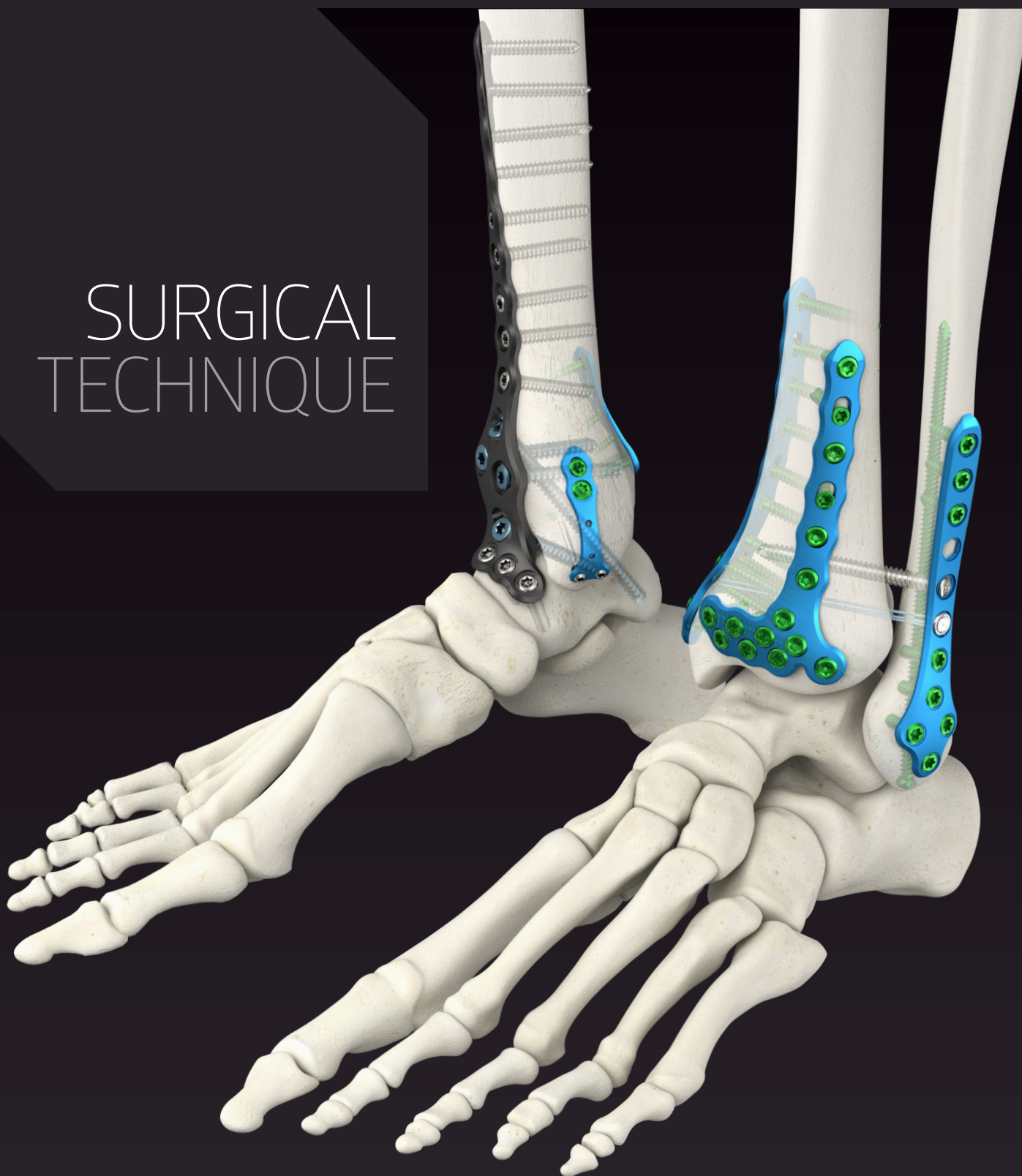




UNITE[®]
FOOT & ANKLE

Ankle trauma systems
Intelligently designed implants and instrumentation

SURGICAL TECHNIQUE



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Implant options

Continuity in design means consistency in implant technology, instrumentation and tray layout for a predictable surgical experience across all patients and procedures. Medline UNITE offers one of the industry's most comprehensive ankle fracture plating systems with nearly 90 plate options.

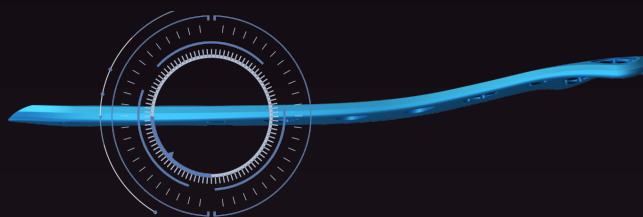
Anatomically contoured

Five-axis, CNC-machined titanium plates match curvatures of the distal fibula and distal tibia to minimize the need for intraoperative plate contouring.



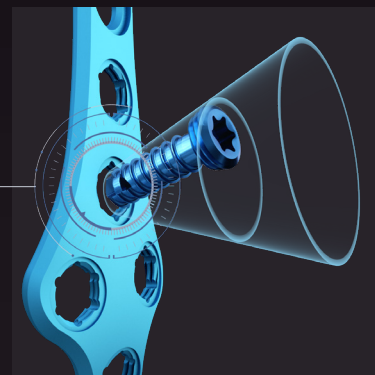
Minimal profile

Transitional plate profiles and beveled edges strike a perfect balance between soft tissue friendliness and robust fixation.



Multi-diameter polyaxial locking

Plates allow for up to 15° of off-axis locking with ø2.7 mm or ø3.5 mm screws for greater intraoperative flexibility and patient-customized fixation.

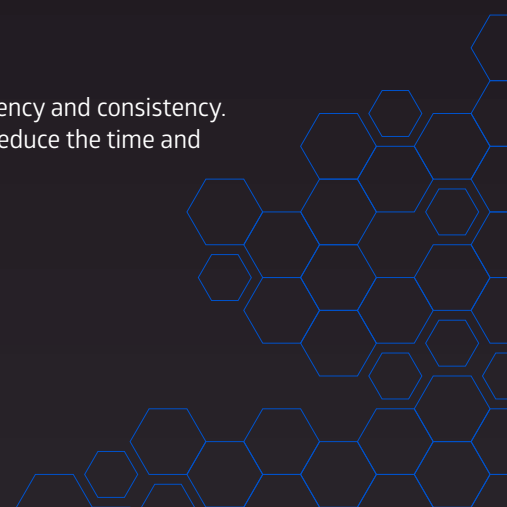


Instruments for greater ease and access

From exposure and fracture reduction to guides, our leading-edge instrumentation is designed with speed, precision, and control in mind.

Sequenced trays for surgical flow

Instrumentation organized in order of use improves efficiency and consistency. Color-coding helps reduce errors and consolidated trays reduce the time and cost of sterilizing numerous sets and loose instruments.



INDICATIONS FOR USE

Ankle Fracture and Distal Tibia Plating Systems

Medline UNITE® Ankle Fracture Plates and Screws are intended for fixation of fractures, osteotomies and nonunions of the distal tibia and fibula such as:

- Lateral Malleolar Fractures
- Syndesmosis Injuries
- Medial Malleolar Fractures
- Bi-Malleolar Fractures
- Tri-Malleolar Fractures
- Posterior Malleolar Fractures
- Distal Anterior Tibia Fractures
- Vertical Shear Fractures of the Medial Malleolus
- Pilon Fractures
- Distal Tibia Shaft Fractures
- Distal Fibula Shaft Fractures
- Distal Tibia Periarticular Fractures
- Medial Malleolar Avulsion Fractures
- Lateral Malleolar Avulsion Fractures

The Medline Locking and Non-Locking Cortical and Cancellous Screws are indicated for use with the Medline Ankle Fracture Plates of the same base material. The Non-Locking Cortical Screws are also indicated for bone reconstruction, osteotomy, arthrodesis, joint fusion, fracture repair, and fracture fixation, appropriate for the size of the device.

SYNDEX® with Constrictor® Technology

The Fixation Button System is to be used for fixation of bone to bone or soft tissue to bone. The components are intended to serve as fixation posts, a distribution bridge, or for distributing suture tension over area of ligament or tendon repair. Specifically, the Fixation Button System is intended for use in the fixation of bone and soft tissue in orthopaedic procedures requiring ligament or tendon repair/reconstruction, including providing fixation during the healing process following acromioclavicular separations, as an adjunct to fracture repair in syndesmotic trauma, and ACL and PCL repair.

Medial Malleolus Peg Plate System

The Medline UNITE® Medial Malleolus Peg Plate System, when used in conjunction with the Medline UNITE® Locking and Non-Locking Screws, are indicated for fixation of fractures, osteotomies, and nonunions of the distal tibia and fibula such as:

- Medial Malleolar Fractures
- Lateral Malleolar Fractures
- Syndesmosis Injuries
- Bi-Malleolar Fractures
- Tri-Malleolar Fractures
- Vertical Shear Fractures of the Medial Malleolus
- Medial Malleolar Avulsion Fractures
- Lateral Malleolar Avulsion Fractures

In addition, the Medline UNITE® Locking Pegs, when used in conjunction with the Medline UNITE® Mini Plates and Screws, are indicated for use in stabilization of fresh fractures, revision procedures, joint fusion and reconstruction of small bones of the hand, feet, wrist, ankles, fingers and toes. The system can be used in both adult and pediatric (adolescent and child) patients.

PLATING SYSTEMS

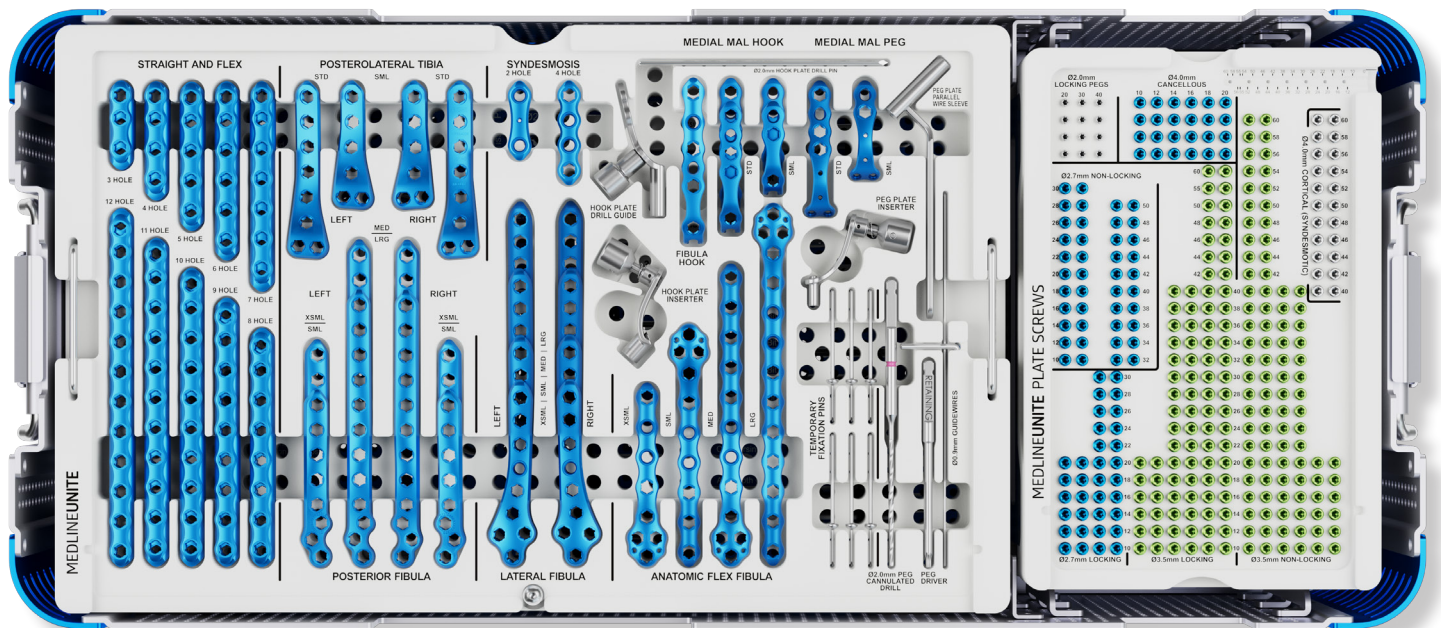
Ankle Fracture

10 plate families | 51 unique options

Addresses all ankle fracture patterns and approaches

SCREW OPTIONS

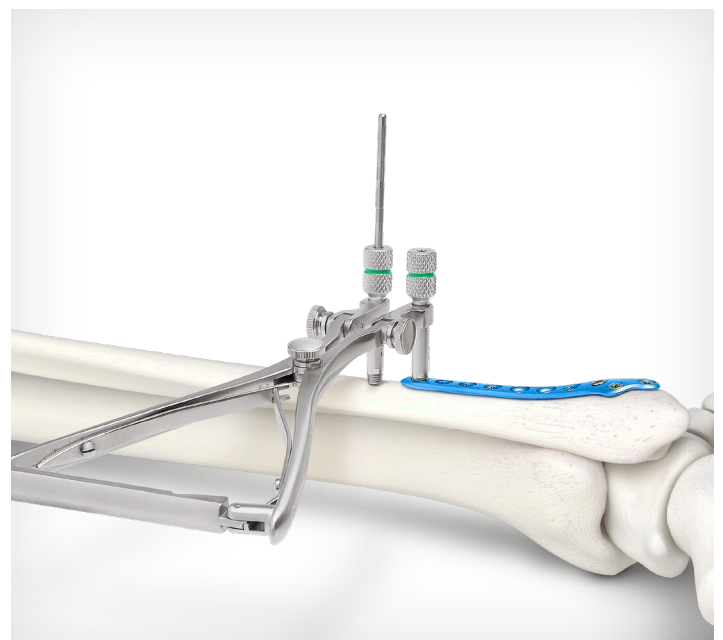
Ø2.7/3.5/4.0mm Polyaxial Locking and Non-Locking



Innovative instrumentation

The Fibula Lengthening Distractor locks into place for easier and more controlled anatomic reduction with a modified “push-pull” technique.

Extensive reduction instruments include a bone fragment pick, periosteal elevator and five types of clamps.

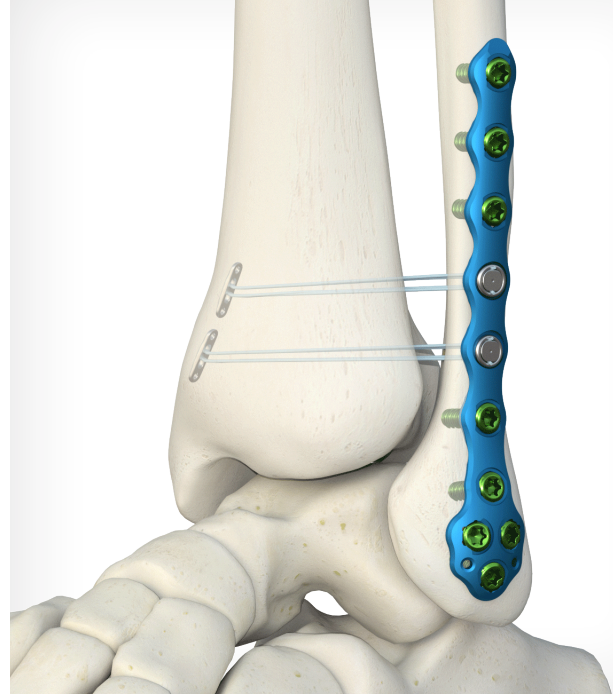
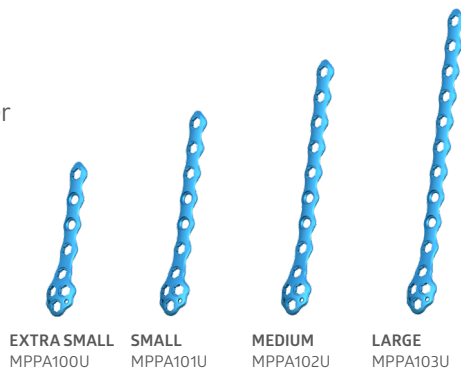


Lateral Fibula

All lateral fibula plate families feature specially designed syndesmotomic slots accommodating suture button fixation devices, as well as Ø3.5mm or Ø4.0mm syndesmotomic screws up to 60mm in 2mm increments.

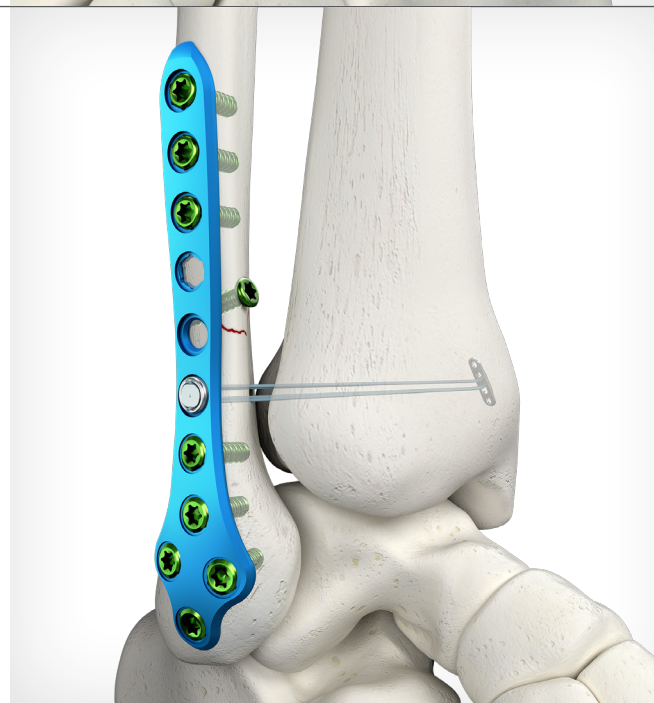
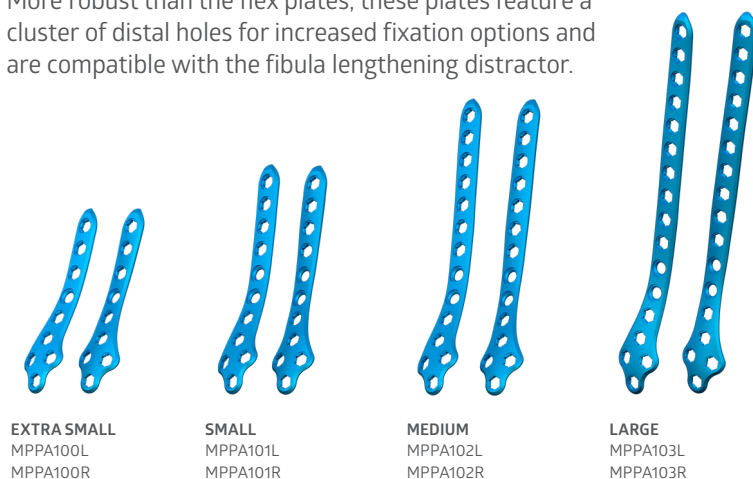
Anatomic Flex

These universal plates feature a compact distal anatomic cluster of holes and incorporate our low profile, scalloped flex design for more malleability and in-situ contouring. These plates are compatible with the fibula lengthening distractor.



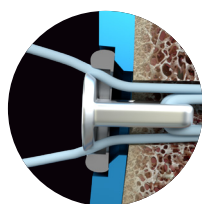
Standard

More robust than the flex plates, these plates feature a cluster of distal holes for increased fixation options and are compatible with the fibula lengthening distractor.

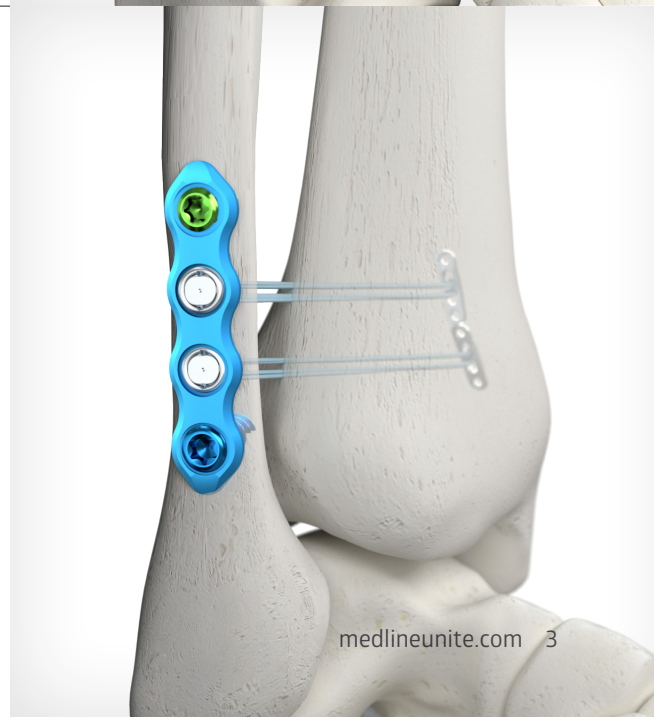


Syndesmosis Buttress

These plates are thinner and narrower than our traditional straight plates and more similar to the flex fibula plate design.

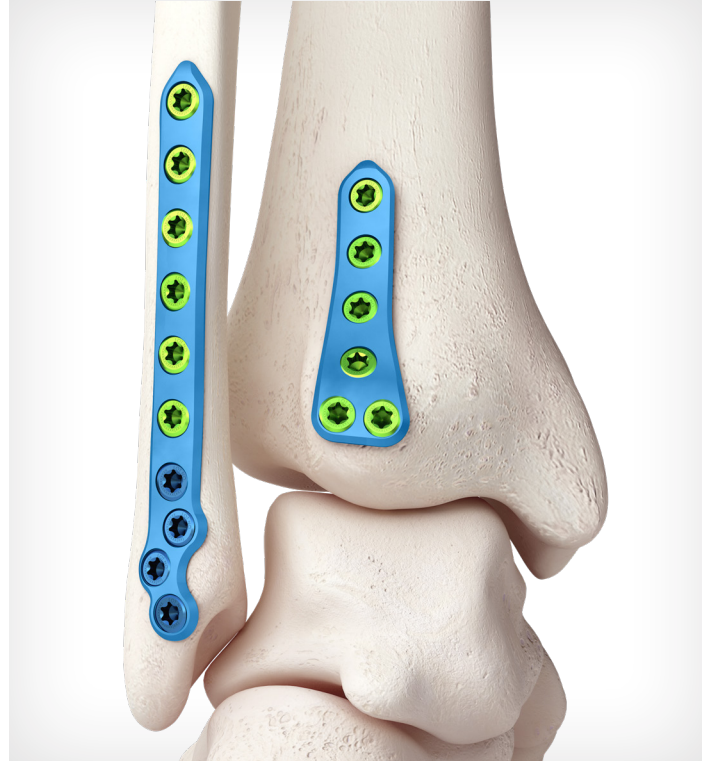
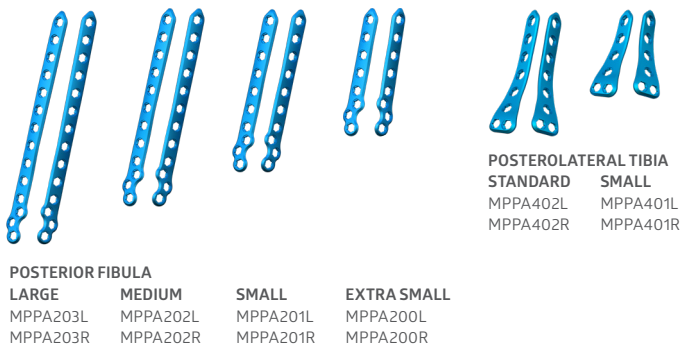


Compatible
with SYDEX®
WITH
CONSTRUCTOR®
TECHNOLOGY



Anatomic Posterior Tibia | Fibula

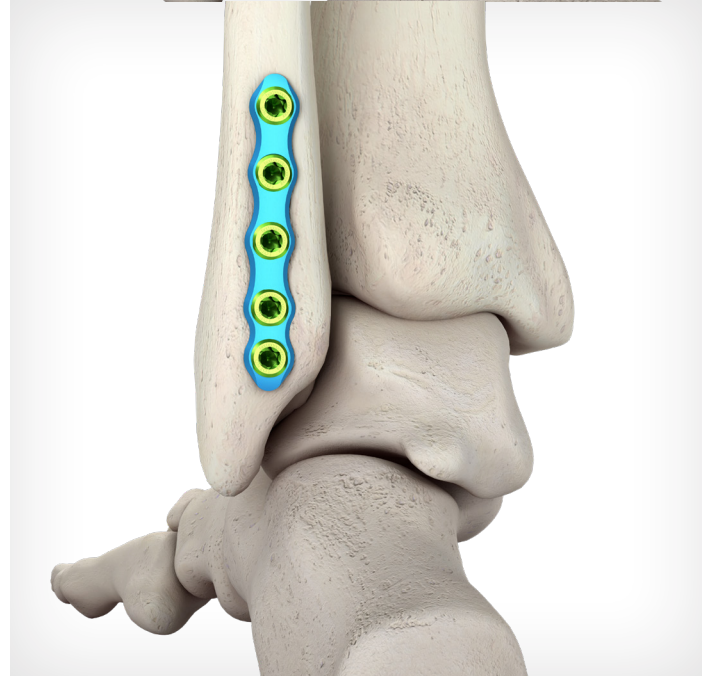
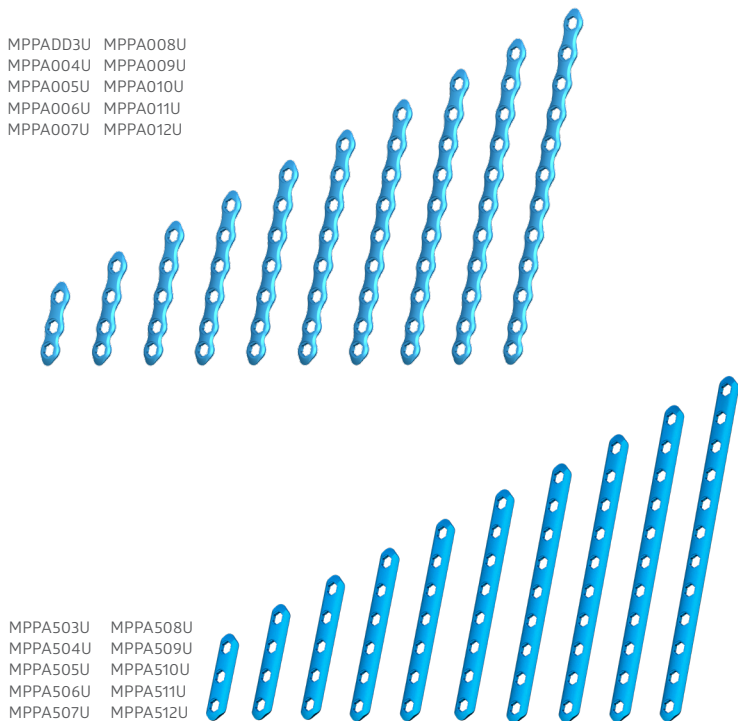
Optimized for treatment of tri-malleolar ankle fractures and the posterior approach, these plates offer superior distal fixation and fit compared to conventional one-third tubular plates. The Posterolateral Tibia plates feature a built-in anterosuperior screw trajectory to avoid impinging the tibiotalar joint space.



Flex and Straight Fibula

Flex Fibula plates feature a low-profile, scalloped, malleable design with a closely spaced two-hole in-line distal cluster—a hybrid solution when anatomical and conventional one-third tubular plates are not suitable for a patient's anatomy or fracture pattern.

The Straight plates are more rigid than Flex plates, but stronger and more malleable than stainless steel one-third tubular plates.



Hook and Peg Plates

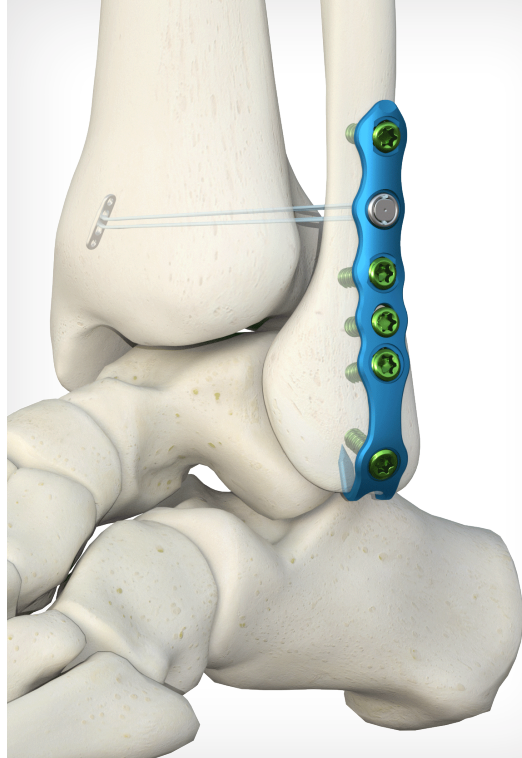
All hook and peg plates feature fully cannulated instrumentation, including the guides and plate inserters, for maximum intraoperative ease and accuracy. Their low-profile, anatomic design allows for flush placement and minimizes risk of soft tissue irritation.

Fibula Hook

This plate serves as an alternative option for capturing distal avulsion fragments, and features a syndesmotomic hole for optional fixation with SYNDEX® or syndesmotomic screws.



MPPA331U

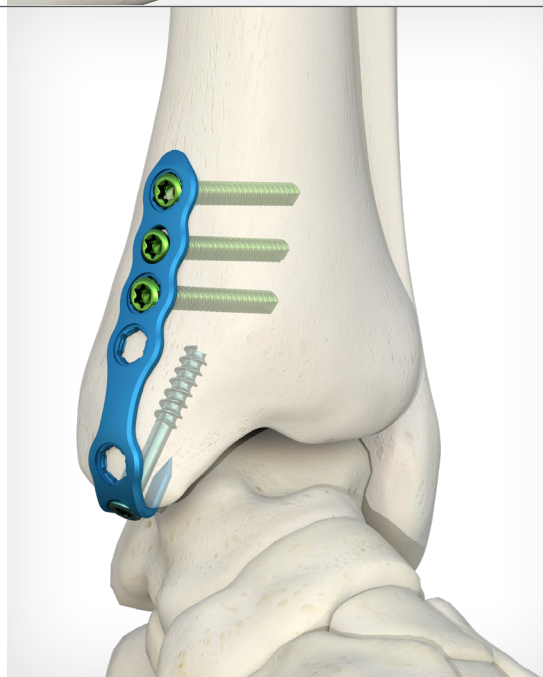


Medial Malleolar Hook

The hook plate is an alternative option for larger avulsion fragments where plate fixation is desired, and can be used with or without a Ø4.0 mm headed cannulated screw. The system also includes a hook plate guide and impactor.



SMALL MPPA321U STANDARD MPPA322U

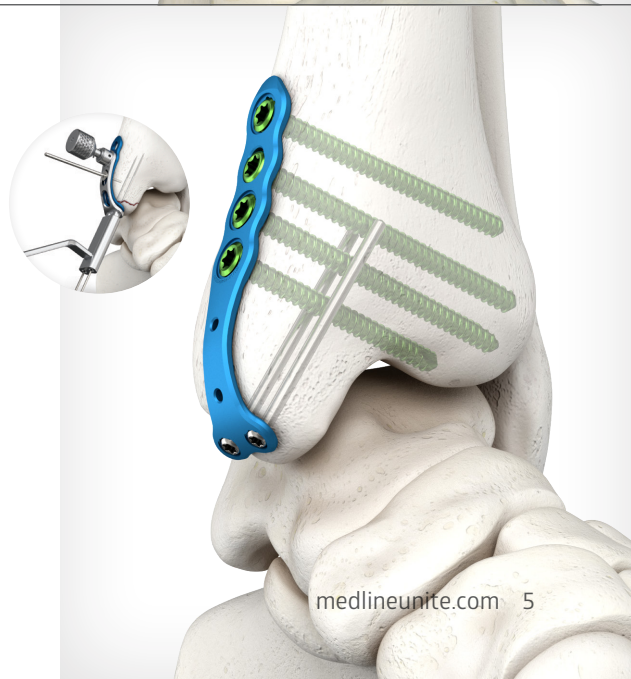


Medial Malleolar Peg

These plates address avulsion fragments that require fixation, but are too small for Ø4.0 mm screws. The peg plates utilize parallel Ø2.0 mm locking pegs distally. The plate inserter features a built-in drill guide allowing for cannulated or solid technique.



STANDARD MPPA311U SMALL MPPA310U



PLATING SYSTEMS

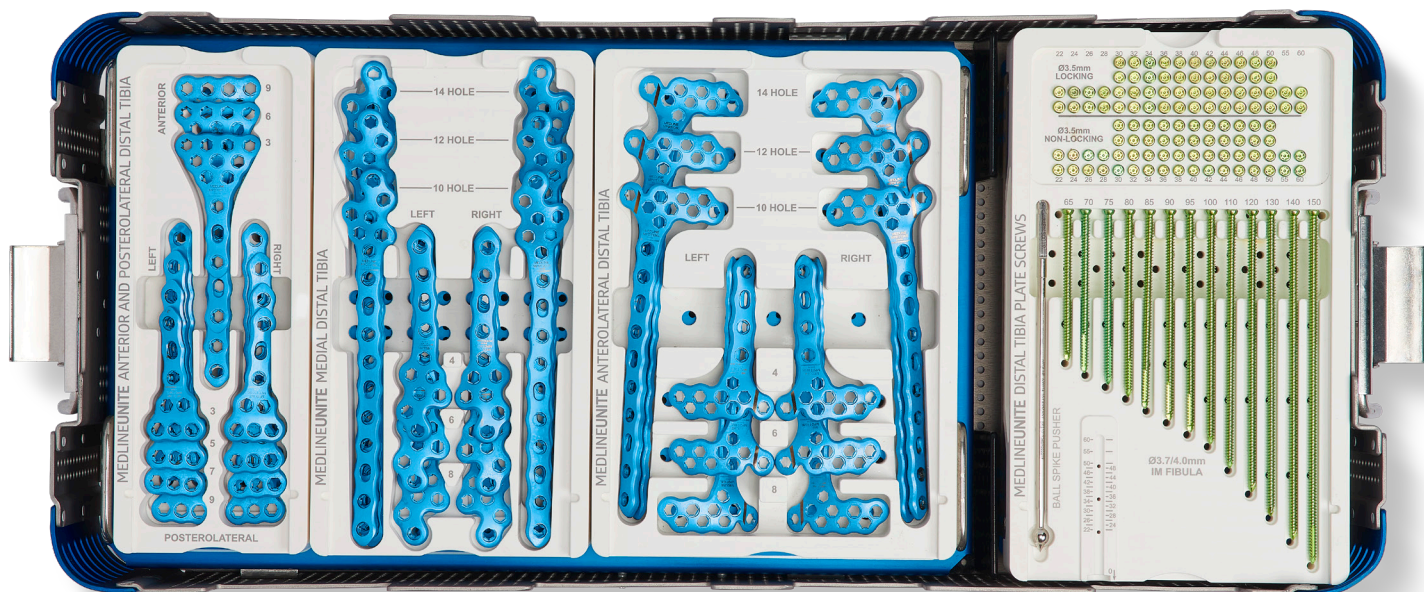
Distal Tibia

4 plate families | 43 unique options

Addresses high energy distal tibia (Pilon) fractures and complex trimalleolar ankle fractures

SCREW OPTIONS

Ø3.5mm Polyaxial Locking and Non-Locking



Innovative instrumentation

The Distal Tibia Plate Inserter features built-in locking drill guides allowing for MIPO technique when Pilon fractures extend more proximally.

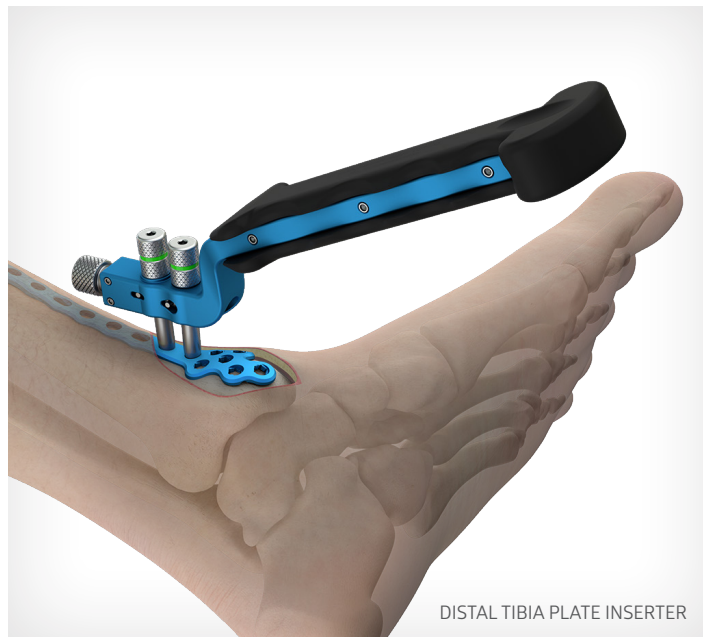
The set also offers extensive reduction instruments including a banana elevator, ball spike pusher and large wheel clamp.



BANANA
ELEVATOR



LARGE
WHEEL CLAMP



DISTAL TIBIA PLATE INSERTER

Anterolateral Distal Tibia

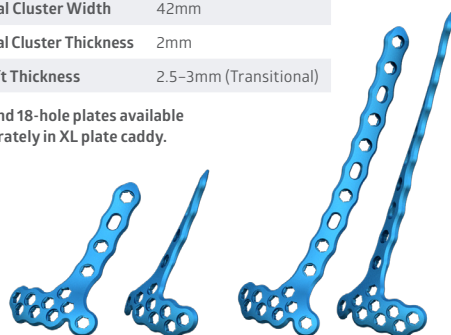
This plate family features a lateral tab with a machined relief on the plate underside allowing bending and contouring to capture the Chaput fragment. The plate's transitional profile, robust proximal shaft and lower profile distal design minimizes hardware prominence in an area with minimal soft tissue coverage.

4-HOLE (72mm) MPDT101L MPDT101R	10-HOLE (144mm) MPDT104L MPDT104R	16-HOLE (216mm)* MPDT107L MPDT107R
6-HOLE (96mm) MPDT102L MPDT102R	12-HOLE (168mm) MPDT105L MPDT105R	18-HOLE (240mm)* MPDT108L MPDT108R
8-HOLE (120mm) MPDT103L MPDT103R	14-HOLE (192mm) MPDT106L MPDT106R	

Specifications

Distal Cluster Width	42mm
Distal Cluster Thickness	2mm
Shaft Thickness	2.5–3mm (Transitional)

*16- and 18-hole plates available separately in XL plate caddy.



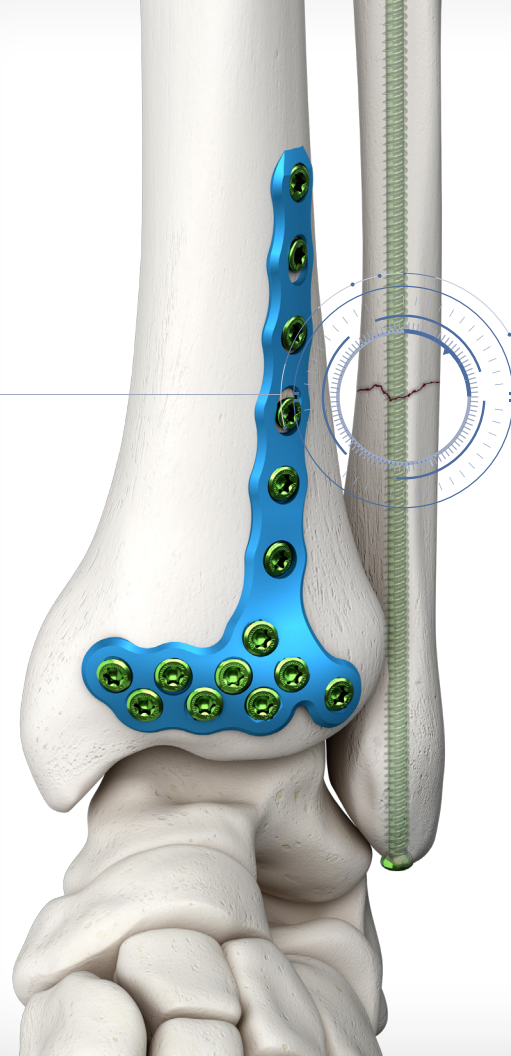
4-HOLE (72mm)

10-HOLE (144mm)

IM Fibula Implants

MSFB0xxx series

- Ø3.7/4.0mm taper, 65–150mm lengths
- Designed to address transverse fibula fractures requiring intramedullary fixation
- Tapered diameter to fit within the fibular canal, with a dual-lead thread for faster insertion
- Included in the set to reduce cost and inefficiency of pulling another tray



Medial Distal Tibia

This plate family features a distal tab with a machined relief on the plate underside for bending and contouring to follow anatomical variations and to hug the medial malleolus. The transitional profile with a robust proximal shaft and lower profile distal design minimize hardware prominence in an area with less soft tissue coverage.

4-HOLE (88mm) MPDT201L MPDT201R	12-HOLE (185mm) MPDT205L MPDT205R
6-HOLE (112mm) MPDT202L MPDT202R	14-HOLE (209mm) MPDT206L MPDT206R
8-HOLE (136mm) MPDT203L MPDT203R	16-HOLE (232mm)* MPDT207L MPDT207R
10-HOLE (161mm) MPDT204L MPDT204R	18-HOLE (256mm)* MPDT208L MPDT208R

Specifications

Distal Cluster Width	24mm
Distal Cluster Thickness	2mm
Shaft Thickness	2.5–3mm (Transitional)



4-HOLE (88mm)

6-HOLE (161mm)

10-HOLE (256mm)*



Anterior Distal Tibia

These plates ideally address anterior shearing fractures or multiple anterior fragments without significant extension into the tibial shaft. A low-profile distal cluster hugs the anterior tibial crest, minimizing hardware prominence in an area with less soft tissue coverage. The plates offer nine points of fixation with on-axis screw trajectories that aim superior to the ankle joint.

Specifications

Length Range	62–135mm
Left/Right Specific	No
Distal Cluster Width	38mm
Distal Cluster Thickness	2mm
Shaft Thickness	2mm



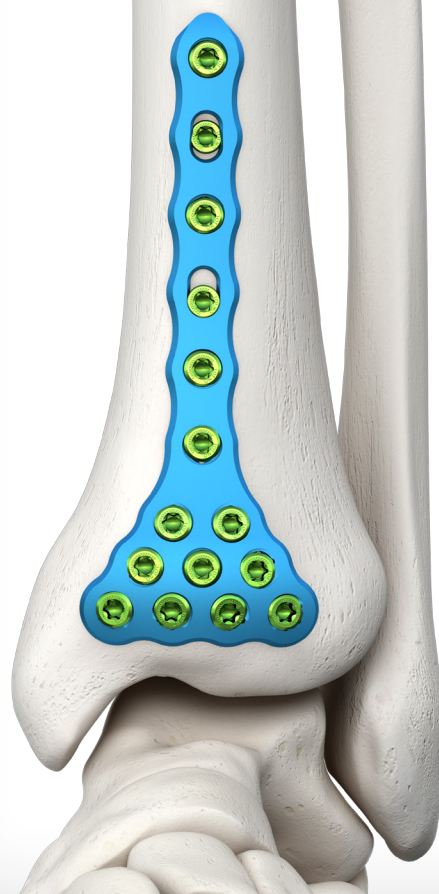
3-HOLE (62mm)
MPDT001U



6-HOLE (99mm)
MPDT002U



9-HOLE (135mm)
MPDT003U



Posterolateral Distal Tibia

These plates are designed for severely comminuted fractures requiring a posterior approach. The plates feature an anatomical design similar to the smaller Posterolateral Tibia plates in the Ankle Fracture system, with additional holes distally for greater fixation and longer length options to address segmental fractures that extend proximally into the tibial shaft.

Specifications

Distal Cluster Width	26mm
Distal Cluster Thickness	2.5mm
Shaft Thickness	2.5mm



3-HOLE (59mm)
MPDT301L
MPDT301R



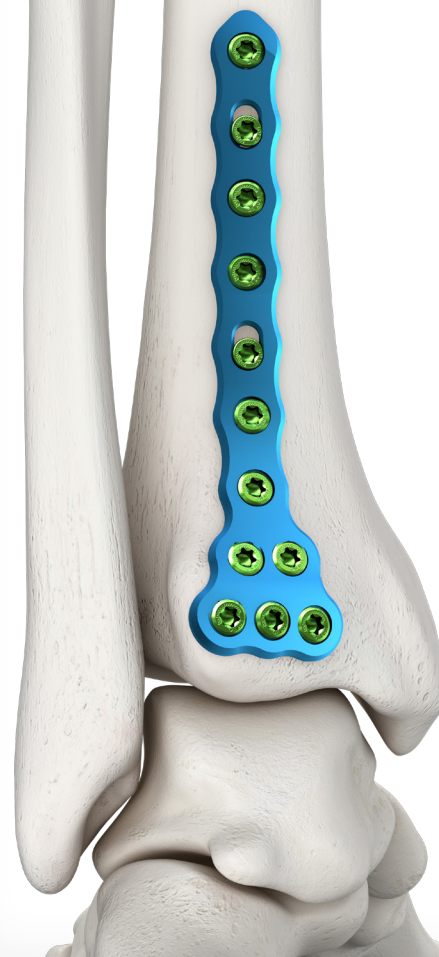
5-HOLE (83mm)
MPDT302L
MPDT302R



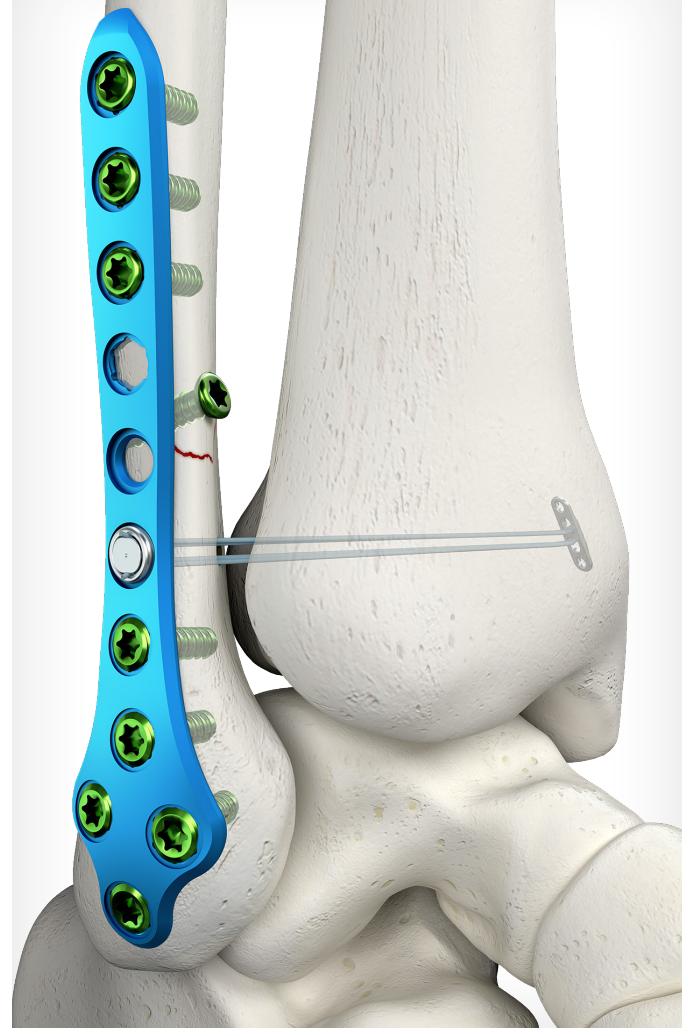
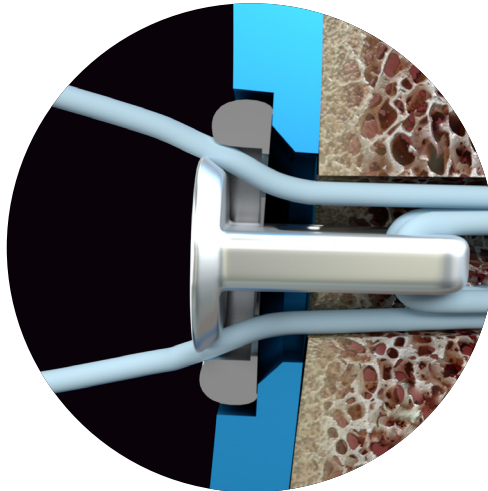
7-HOLE (106mm)
MPDT303L
MPDT303R



9-HOLE (130mm)
MPDT304L
MPDT304R



This knotless, adjustable button technology for syndesmosis repair features a self-locking design to help prevent loss of reduction. It offers superior fixation under cyclic loading and substantial difference in load-to-failure compared to the market leader.¹ The button fits in the UNITE Lateral Fibula and Syndesmosis Buttress Plates with minimal prominence.



Pilon Primary Fusion

The Primary Pilon option is designed for patients with severely comminuted distal tibia fractures with intra-articular involvement where primary arthrodesis of the tibiotalar joint is indicated. These plates feature a long anterolateral proximal shaft to span comminution up through the metadiaphyseal region. Plates are designed with a distal row of screw holes which accept either Ø3.5 mm or Ø4.0 mm polyaxial locking screws. An additional larger hole accommodates either a single Ø4.5 or Ø5.5 mm locking screw.

*The Pilon Primary Fusion plate is located in the Ankle Fusion System tray.



PILON PRIMARY FUSION
MPAF601L
MPAF601R



ANKLE FRACTURE PLATING SYSTEM

Lateral Fibula Plate

Step 1 | Exposure and reduction

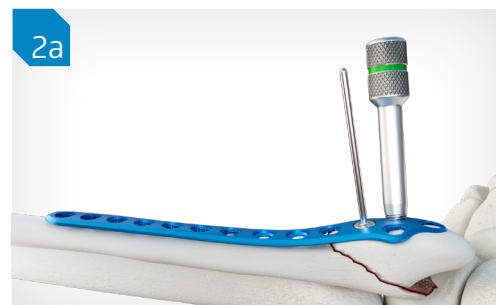
Make a straight lateral or posterolateral surgical incision to gain proper exposure to the distal fibula. Take care to avoid the peroneal and sural nerves during dissection. Reduce fracture using reduction forceps, lobster claws, wires or pins, or lag screw, according to surgeon preference. Confirm reduction and positioning with fluoroscopy.

Optional | Interfragmentary screw placement

In situations where an independent lag screw is desired for stabilization of the fracture prior to plate fixation, utilize the Ø2.8 mm and Ø3.5 mm drills and the corresponding soft tissue protector to lag by technique for a Ø3.5 mm non-locking screw.

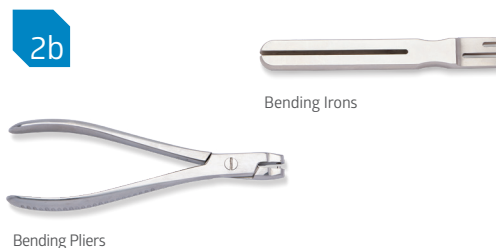
Step 2 | Plate selection

Select the appropriate lateral fibula plate according to the patient's anatomy and fracture pattern/location. A locking drill guide may be used as a "joy-stick" to assist with plate placement. Provisionally fixate the plate with temporary fixation pins and confirm placement with fluoroscopy (Fig. 2a).



Optional | Plate bending

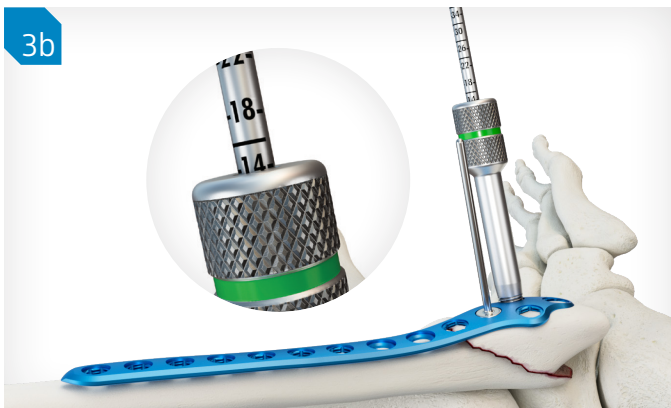
Additional plate contouring may be achieved with the provided bending irons or pliers (Fig. 2b). Plates should not be bent back-and-forth, and over-bending should be avoided.



Lateral Fibula Plate Surgical Technique, *continued*

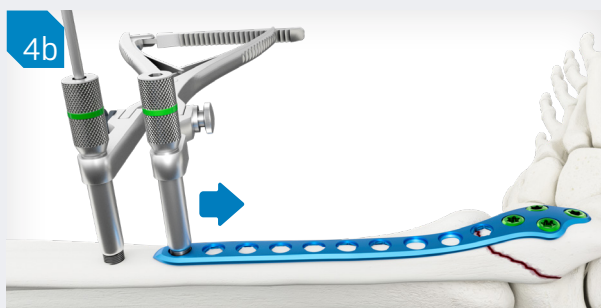
Step 3 | Distal fixation

Select the desired drill guide (calibrated locking tower, tissue protector, or polyaxial drill guide) and the corresponding drill to pre-drill for each distal screw (Fig. 3a, 3b). The polyaxial drill guide may be used to drill 15° off-axis. Measure the appropriate screw length using the calibrated drill bit or depth gauge and insert the selected screw with a T15 driver (Fig. 3c). Plate holes are universal and accept Ø2.7 mm and Ø3.5 mm locking or non-locking or Ø4.0 mm cancellous screws (Fig. 3c).



Optional step 4 | Restore length

Position the Fibula Distractor so that one locking tower arm threads into the most proximal plate hole and the other is over the fibula shaft. Insert a Ø2.7 mm distractor pin through the proximal arm of the Fibula Distractor and bicortically through the fibula shaft (Fig. 4a). Squeeze the Fibula Distractor handle to restore proper fibula length and confirm with fluoroscopy (Fig. 4b).



Step 5 | Proximal fixation

Pin the plate distal to the Fibula Distractor, then use the desired drill guide to drill and then measure for the proximal plate shaft screws (Fig. 5a).

Note: The Fibula Distractor's drill guide arm can be used for on-axis drilling with the Ø2.8 mm drill for Ø3.5 mm screws following distraction and temporary fixation.

Place all desired screws proximally and remove all remaining temporary fixation pins (Fig. 5b).



SURGICAL TECHNIQUE

SYNDESMOSIS REPAIR

SYNDEX™

WITH
CONSTRUCTOR®
TECHNOLOGY

Step 1

Following fracture fixation and reduction of the syndesmosis, drill all four cortices under fluoroscopic guidance approximately 1.5 – 2 cm above the ankle joint and 30° anterior to the coronal plane using the Ø3.7 mm drill bit (Fig. 1). Make a medial incision to allow the drill and medial button to be passed and ultimately seated.

Step 2

Remove the drill bit from the power attachment and insert the passing suture through the drill bit's eyelet (Fig. 2).

Step 3

Pull the drill bit through the tibial side to pass the medial button (Fig. 3). If the drill bit cannot be pulled through the medial side manually, it may be re-chucked and removed under power with oscillation.

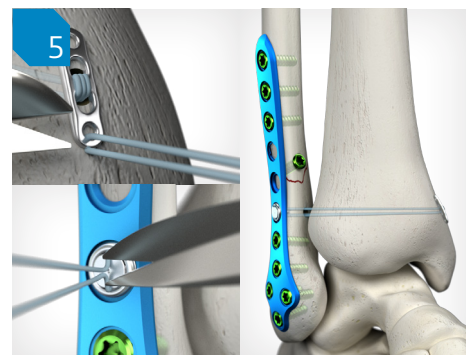
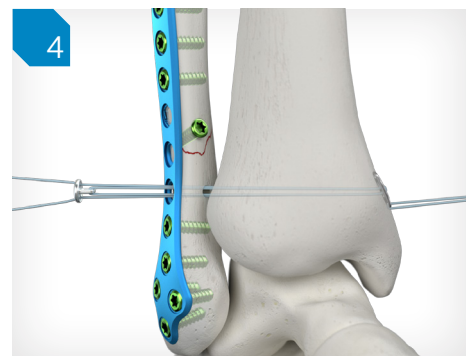
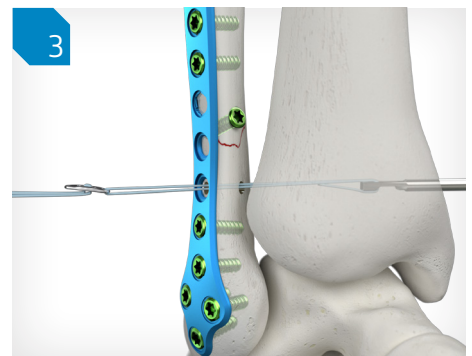
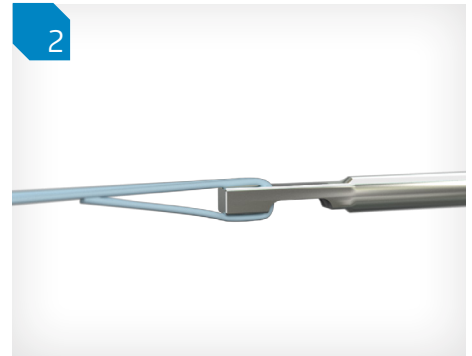
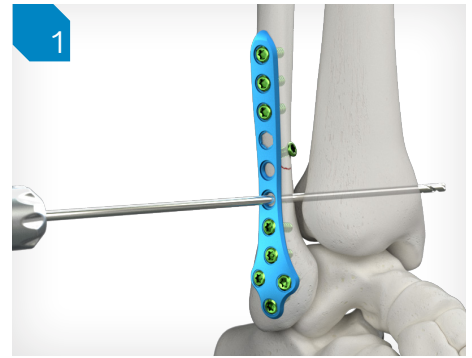
Step 4

Flip the medial button and gently pull the sutures between the lateral button and the fibula. Once flipped, alternate pulling straight back on the free ends of the sutures a few centimeters at a time to tension the button until fully seated within the plate (Fig. 4). Do not pull the sutures out to the side.

Suture tensioning handles are available and may be used. Alternatively, sutures can be wrapped around hemostats while tensioning.

Step 5

Cut the excess lateral and medial sutures once the repair is complete (Fig. 5).

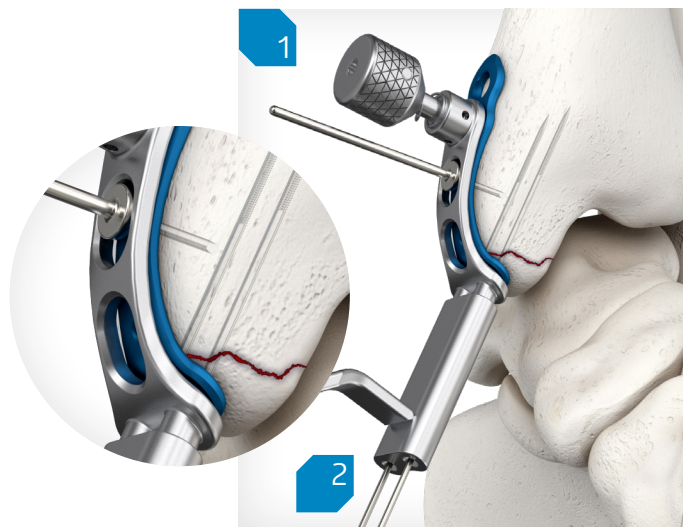


ANKLE FRACTURE PLATING SYSTEM

Medial Malleolar Peg Plate

Step 1

Following exposure and fracture reduction, select the desired plate size and secure it to the inserter/drill guide instrument with the spring-loaded knob (Fig. 1). Provisionally fixate the plate to the medial malleolus using one or two temporary fixation pins. The inserter features large slots which allow temporary fixation pins to hold the plate down to the bone, while also allowing for the guide to be removed with the pins still in place.

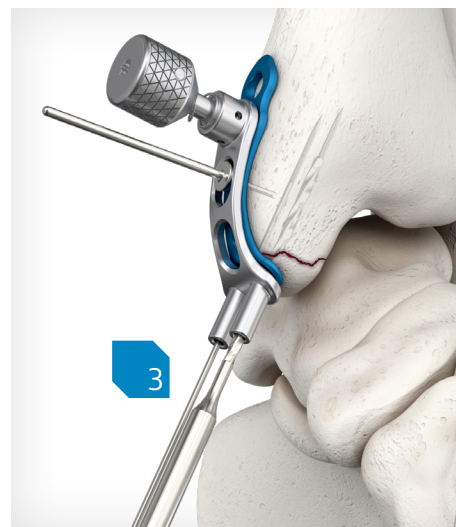


Step 2

Insert two Ø0.9 x 150 mm guidewires through the parallel guide/sleeve. Verify correct peg trajectory both visually and fluoroscopically (Fig. 2).

Step 3

Pre-drill for the pegs using the cannulated Ø2.0 mm drill bit. Alternatively, a solid Ø2.0 mm drill is provided in the ankle fracture set and may be used. Fully advance the drill until it contacts the drill guide. After drilling, remove the inserter/drill guide instrument by unscrewing the knob. Leave at least one temporary fixation pin in place (Fig. 3).

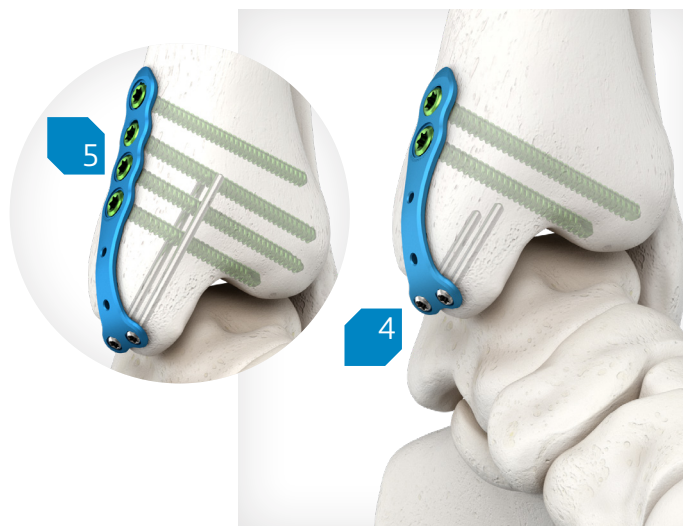


Step 4

Insert two Ø2.0 mm locking pegs through the distal plate holes (20, 30, or 40 mm length options). Surgeon discretion should be used to determine whether to use short or long pegs based on the desire for additional rotational control of the fragment (i.e. long pegs) (Fig. 4).

Step 5

If compression is desired, drill eccentrically in the oblong slot and insert a Ø3.5 mm non-locking screw to compress the fracture. Finish the construct by placing Ø3.5 mm locking or non-locking screws in the remaining plate shaft holes (Fig. 5).



ANKLE FRACTURE PLATING SYSTEM

Medial Malleolar Hook Plate

Step 1 | Template & Prep for Plate Hooks

Following dissection and fracture reduction, use the hook plate drill guide as a template to determine the proper plate alignment and positioning. Secure the guide using a temporary fixation pin (Fig 1).

Place a Ø1.4mm guidewire through the center wire hole of the guide for provisional fixation of the fragment. This will also determine trajectory for a Ø4.0mm cannulated hook plate screw, if desired.

Pre-drill for the plate hooks through the other two guide holes using a Ø2.0mm drill. Once pre-drill is complete, remove the temporary fixation pin and targeting guide, leaving the Ø1.4mm guidewire in place.

Step 2 | Insert Plate

Select the hook plate inserter along with the desired plate size. Position the plate within the inserter and secure the construct by threading the spring-loaded knob into the plate. Slide the inserter-plate construct over the Ø1.4 mm guidewire, ensuring the plate hooks find the pre-drilled holes (Fig 2).

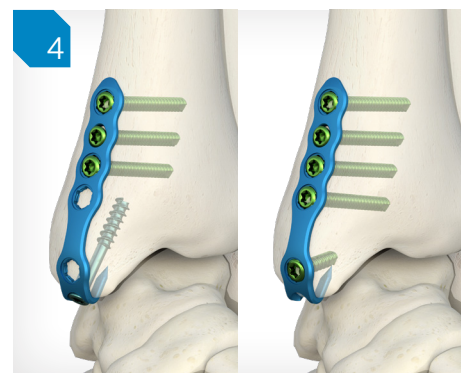
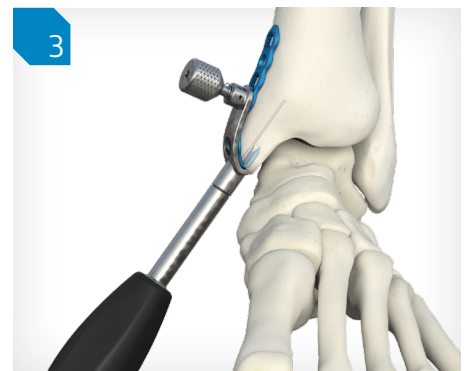
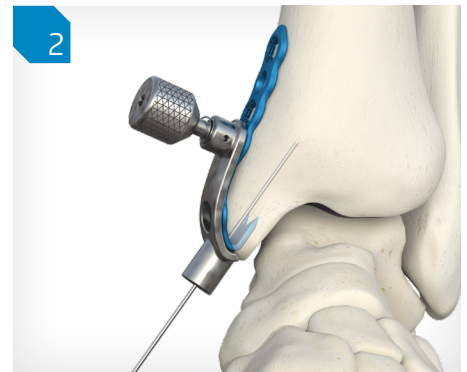
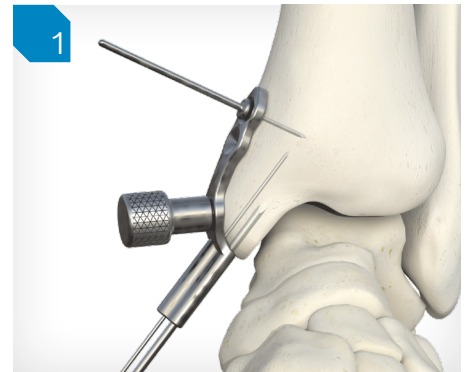
Step 3 | Impact Plate

Slide the hook plate impactor over the Ø1.4mm guidewire and into the hook plate inserter. Using a mallet, impact the plate taking care not to displace the fragment (Fig 3).

Step 4 | Insert Screws

Remove the hook plate inserter and place a temporary fixation pin in the proximal end of the plate. Measure for the length of the Ø4.0mm cannulated screw using a cannulated depth gauge, then pre-drill and place screw, if desired.

Additional compression can be obtained through the plate by drilling eccentrically through the compression slot and placing a non-locking screw. Select the appropriate locking drill guide and drill bit for the desired screw diameters to finish the plate construct (Fig 4).



SURGICAL TECHNIQUE

DISTAL TIBIA PLATING SYSTEM

IM Fibula Implant

Step 1

Make an incision just distal to the tip of the fibula. Take care to avoid the peroneal tendons and sural nerve branches in this region.

Step 2

Using either percutaneous or open technique, reduce the fibular fracture with reduction clamps provided in the set.

Step 3

Fluoroscopically establish the point of entry through the distal tip of the fibula in line with the medullary canal.

Step 4

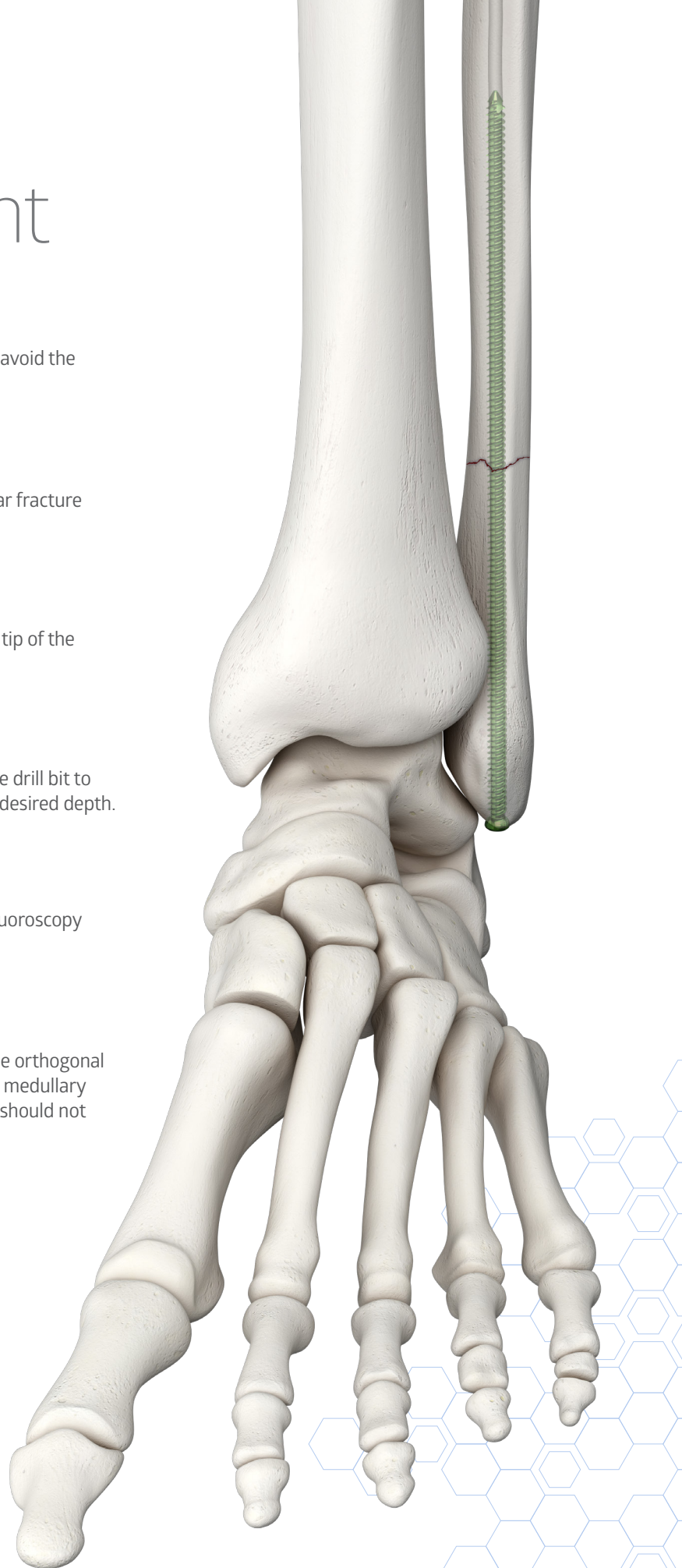
Using the provided tissue protector, use the Ø2.8 mm solid core drill bit to open the distal cortex and drill in a retrograde direction to the desired depth.

Step 5

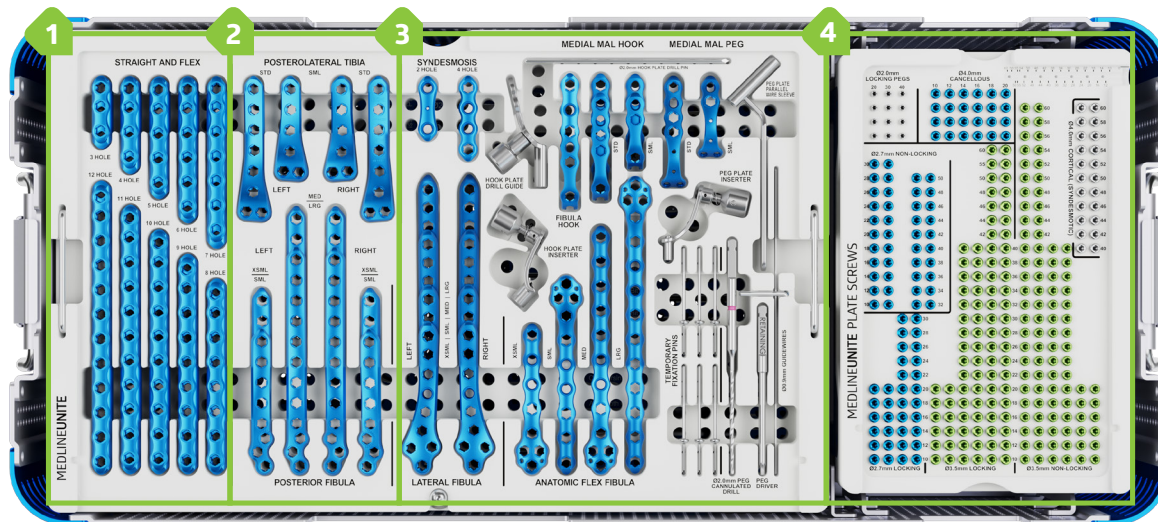
Choose the appropriate implant length to span the fracture. Fluoroscopy may be used to obtain appropriate implant sizing.

Step 6

Insert and advance the IM Fibula Implant using a T15 driver. Use orthogonal fluoroscopy to ensure the implant is positioned properly in the medullary canal and when crossing the fracture. The head of the implant should not impinge the lateral process of the talus.



Ankle Fracture—Level 1



Section 1

Straight Fibula Plates

Item No.	Description	Qty.
MPPA503U	3 Hole	1
MPPA504U	4 Hole	1
MPPA505U	5 Hole	1
MPPA506U	6 Hole	1
MPPA507U	7 Hole	1
MPPA508U	8 Hole	1
MPPA509U	9 Hole	1
MPPA510U	10 Hole	1
MPPA511U	11 Hole	1
MPPA512U	12 Hole	1

Flex Fibula Plates

Item No.	Description	Qty.
MPPA003U	3 Hole	1
MPPA004U	4 Hole	1
MPPA005U	5 Hole	1
MPPA006U	6 Hole	1
MPPA007U	7 Hole	1
MPPA008U	8 Hole	1
MPPA009U	9 Hole	1
MPPA010V	10 Hole	1
MPPA011U	11 Hole	1
MPPA012U	12 Hole	1

Section 2

Posterolateral Tibia Plates

Item No.	Description	Qty.
MPPA401L	Small, Left	2
MPPA401R	Small, Right	2

Posterolateral Tibia Plates

Item No.	Description	Qty.
MPPA402L	Standard, Left	2
MPPA402R	Standard, Right	2

Posterior Fibula Plates

Item No.	Description	Qty.
MPPA200L	Extra Small, Left	1
MPPA200R	Extra Small, Right	1
MPPA201L	Small, Left	1
MPPA201R	Small, Right	1
MPP202L	Medium Left	1
MPPA202R	Medium, Right	1
MPPA203L	Large, Left	1
MPPA203R	Large, Right	1

Section 3

Syndesmosis Plates

Item No.	Description	Qty.
MPPA401L	2 Hole	1
MPPA401R	4 Hole	1

Standard Lateral Fibula Plates

Item No.	Description	Qty.
MPPA100L	Extra Small, Left	2
MPPA100R	Extra Small, Right	2
MPPA101L	Small, Left	2
MPPA101R	Small, Right	2
MPPA102L	Medium, Left	2
MPPA102R	Medium, Right	2
MPPA103L	Large, Left	2
MPPA103R	Large, Right	2

Anatomic Flex Lateral Fibula Plates

Item No.	Description	Qty.
MPPA100U	Extra Small	2
MPPA101U	Small	2
MPPA102U	Medium	1
MPPA103U	Large	1

Hook Plate Implants & Instruments

Item No.	Description	Qty.
MPPA322U	Flex Fibula Hook, Standard	1
MPPA321U	Flex Medial Mal Hook, Small	1
MPPA322U	Flex Medial Mal Hook, Standard	1
MPDP1120	Ø2.0 mm Hook Plate Drill Pin	2
MPN50031	Hook Plate Insertor	1
MPN50032	Hook Plate Drill Guide	1

Peg Plate Implants & Instruments

Item No.	Description	Qty.
MPPA310U	Medial Mal Peg Plate, Small	1
MPPA311U	Medial Mal Peg Plate, Standard	1
MSG09150	0.9 x 150 mm Smoot Guidewire	6
MPN50017	Peg Plate Parallel Wire Sleeve	1
MPN50016	Peg Plate Insertor	1
MSN10002	2.0 mm Cannulated Drill Bit, AO/QC	2
MPN30006	T8 Retaining Drive, AO/QC	2
MPPF1115	1.1 x 15 mm Temporary Fixation Pin, Smooth	6

Section 4

2.0 mm Locking Pegs

Item No.	Description	Qty.
MPSP2020	2.0 x 20 mm	4
MPSP2030	2.0 x 30 mm	4
MPSP2040	2.0 x 40 mm	4

2.7 mm Non-Locking Screws

Item No.	Description	Qty.
MPSN2710	2.7 x 10 mm	2
MPSN2712	2.7 x 12 mm	2
MPSN2714	2.7 x 14 mm	2
MPSN2716	2.7 x 16 mm	2
MPSN2718	2.7 x 18 mm	2
MPSN2720	2.7 x 20 mm	2
MPSN2722	2.7 x 22 mm	2
MPSN2724	2.7 x 24 mm	2
MPSN2726	2.7 x 26 mm	2
MPSN2728	2.7 x 28 mm	2
MPSN2730	2.7 x 30 mm	2
MPSN2732	2.7 X 32 mm	2
MPSN2734	2.7 X 34 mm	2
MPSN2736	2.7 X 36 mm	2
MPSN2738	2.7 X 38 mm	2
MPSN2740	2.7 X 40 mm	2
MPSN2742	2.7 X 42 mm	2
MPSN2744	2.7 X 44 mm	2
MPSN2746	2.7 X 46 mm	2
MPSN2748	2.7 X 48 mm	2
MPSN2750	2.7 X 50 mm	2

2.7 mm Polyaxial Locking Screws

Item No.	Description	Qty.
MPSL2710	2.7 x 10 mm	4
MPSL2712	2.7 x 12 mm	4
MPSL2714	2.7 x 14 mm	4
MPSL2716	2.7 x 16 mm	4
MPSL2718	2.7 x 18 mm	4
MPSL2720	2.7 x 20 mm	4
MPSL2722	2.7 x 22 mm	2
MPSL2724	2.7 x 24 mm	2
MPSL2726	2.7 x 26 mm	2
MPSL2728	2.7 x 28 mm	2
MPSL2730	2.7 x 30 mm	2

3.5 mm Polyaxial Locking Screws

Item No.	Description	Qty.
MPSL3510	3.5 x 10 mm	6
MPSL3512	3.5 x 12 mm	6
MPSL3514	3.5 x 14 mm	6
MPSL3516	3.5 x 16 mm	6
MPSL3518	3.5 x 18 mm	6
MPSL3520	3.5 x 20 mm	6
MPSL3522	3.5 x 22 mm	4
MPSL3524	3.5 x 24 mm	4
MPSL3526	3.5 x 26 mm	4
MPSL3528	3.5 x 28 mm	4
MPSL3530	3.5 x 30 mm	4
MPSL3532	3.5 x 32 mm	4
MPSL3534	3.5 x 34 mm	4
MPSL3536	3.5 x 36 mm	4
MPSL3538	3.5 x 38 mm	4
MPSL3540	3.5 x 40 mm	4
MPSL3542	3.5 x 42 mm	2
MPSL3544	3.5 x 44 mm	2
MPSL3546	3.5 x 46 mm	2
MPSL3548	3.5 x 48 mm	2
MPSL3550	3.5 x 50 mm	2
MPSL3555	3.5 x 55 mm	2
MPSL3560	3.5 x 60 mm	2

3.5 mm Non-Locking Screws

Item No.	Description	Qty.
MPSN3510	3.5 x 10 mm	6
MPSN3512	3.5 x 12 mm	6
MPSN3514	3.5 x 14 mm	6
MPSN3516	3.5 x 16 mm	6
MPSN3518	3.5 x 18 mm	6
MPSN3520	3.5 x 20 mm	6
MPSN3522	3.5 x 22 mm	4
MPSN3524	3.5 x 24 mm	4
MPSN3526	3.5 x 26 mm	4
MPSN3528	3.5 x 28 mm	4
MPSN3530	3.5 x 30 mm	4
MPSN3532	3.5 x 32 mm	4
MPSN3534	3.5 x 34 mm	4
MPSN3536	3.5 x 36 mm	4
MPSN3538	3.5 x 38 mm	4
MPSN3540	3.5 x 40 mm	4
MPSN3542	3.5 x 42 mm	2
MPSN3544	3.5 x 44 mm	2
MPSN3546	3.5 x 46 mm	2
MPSN3548	3.5 x 48 mm	2
MPSN3550	3.5 x 50 mm	2
MPSN3552	3.5 x 52 mm	2
MPSN3554	3.5 x 54 mm	2
MPSN3556	3.5 x 56 mm	2
MPSN3558	3.5 x 58 mm	2
MPSN3560	3.5 x 60 mm	2

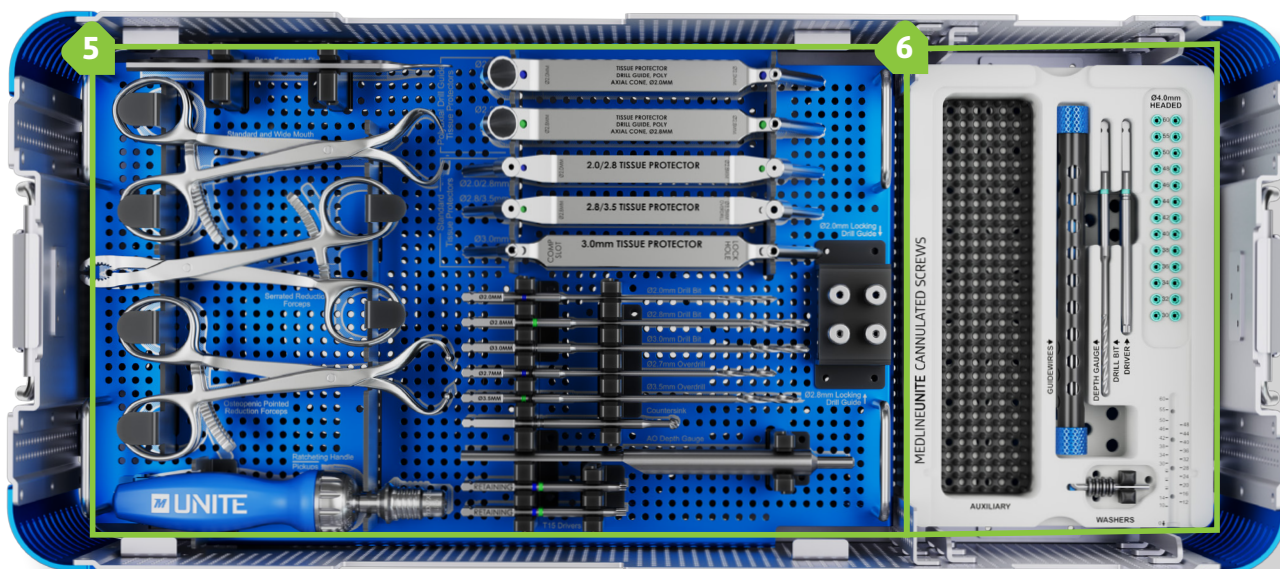
Cancellous Screws

Item No.	Description	Qty.
MPSC4010	4.0 X 10 mm	4
MPSC4012	4.0 X 12 mm	4
MPSC4014	4.0 X 14 mm	4
MPSC4016	4.0 X 16 mm	4
MPSC4018	4.0 X 18 mm	4
MPSC4020	4.0 X 20 mm	4

Cortical Syndesmotomic Screws

Item No.	Description	Qty.
MPSN4040	4.0 X 40 mm	2
MPSN4042	4.0 X 42 mm	2
MPSN4044	4.0 X 44 mm	2
MPSN4046	4.0 X 46 mm	2
MPSN4048	4.0 X 48 mm	2
MPSN4050	4.0 X 50 mm	2
MPSN4052	4.0 X 52 mm	2
MPSN4054	4.0 X 54 mm	2
MPSN4056	4.0 X 56 mm	2
MPSN4058	4.0 X 58 mm	2
MPSN4060	4.0 X 60 mm	2

Ankle Fracture—Level 2



Section 5

Item No.	Description	Qty.
MPN50005	Bone Fragment Pick	1
MPN50001	Reduction Forceps, Pointed, Osteopenic	1
MPN50002	Reduction Forceps, Pointed, Wide	1
MPN50003	Reduction Forceps, Serrated	2
MPN50015	Reduction Forceps, Pointed	1
MPN52006	2.0 mm Polyaxial Cone Drill Guide	1
MPN52014	2.8 mm Polyaxial Cone Drill Guide	1
MPN50011	2.0 mm/2.8 mm Tissue Protector	1
MPN50012	2.8 mm/3.5 mm Tissue Protector	1
MPN40009	3.0 mm Compression Slot Drill Guide	1
MPN40001	2.0 mm Locking Tower Drill Guide	2
MPN40002	2.8 mm Locking Tower Drill Guide	2

Solid Core Drill Bit, AO/QC

Item No.	Description	Qty.
MPN10020	2.0 mm	2
MPN10027	2.7 mm	2
MPN10028	2.8 mm	2
MPN10030	3.0 mm	2
MPN10035	3.5 mm	2

Item No.	Description	Qty.
MPN40006	Depth Gauge, AO Style, 60mm	1
MSN20003	3.0 mm/3.5 mm Cannulated Countersink, AO/QC	1
MSN90003	Pickups	1
MPN30002	T15 Retaining Driver, AO/QC	4
MSN90001	AO/QC Cannulated Ratcheting Handle, Standard	1

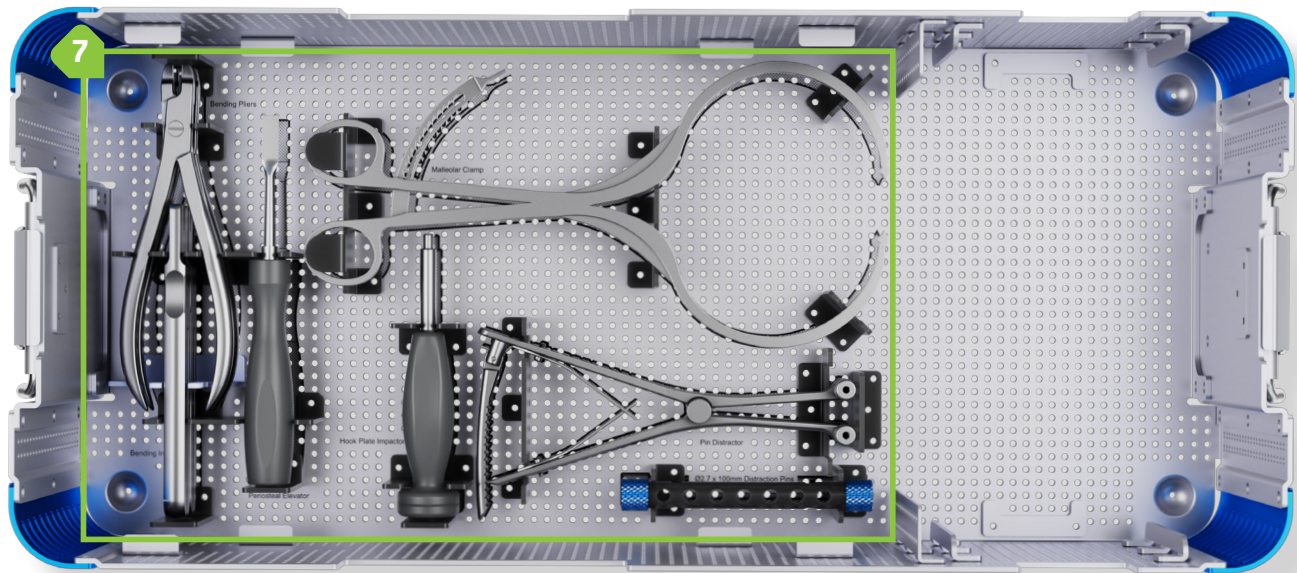
Section 6

4.0 Headed Cannulated Screws

Item No.	Description	Qty.
MSD14030	4.0 X 30 mm	2
MSD14032	4.0 X 32 mm	2
MSD14034	4.0 X 34 mm	2
MSD14036	4.0 X 36 mm	2
MSD14038	4.0 X 38 mm	2
MSD14040	4.0 X 40 mm	2
MSD14042	4.0 X 42 mm	2
MSD14044	4.0 X 44 mm	2
MSD14046	4.0 X 46 mm	2
MSD14048	4.0 X 48 mm	2
MSD14050	4.0 X 50 mm	2
MSD14055	4.0 X 55 mm	2
MSD14060	4.0 X 60 mm	2

Item No.	Description	Qty.
MSW03035	3.0 mm/3.5 mm & 4.0 mm Washer	4
MSG14150	1.4 X 150 mm Smooth Guidewire	6
MSN40001	Cannulated Depth Gauge (150 mm Wire)	1
MSN10012	2.6 mm Cannulated Drill Bit, AO/QC	2
MSN30005	T15 Cannulated Driver, AO/QC	2

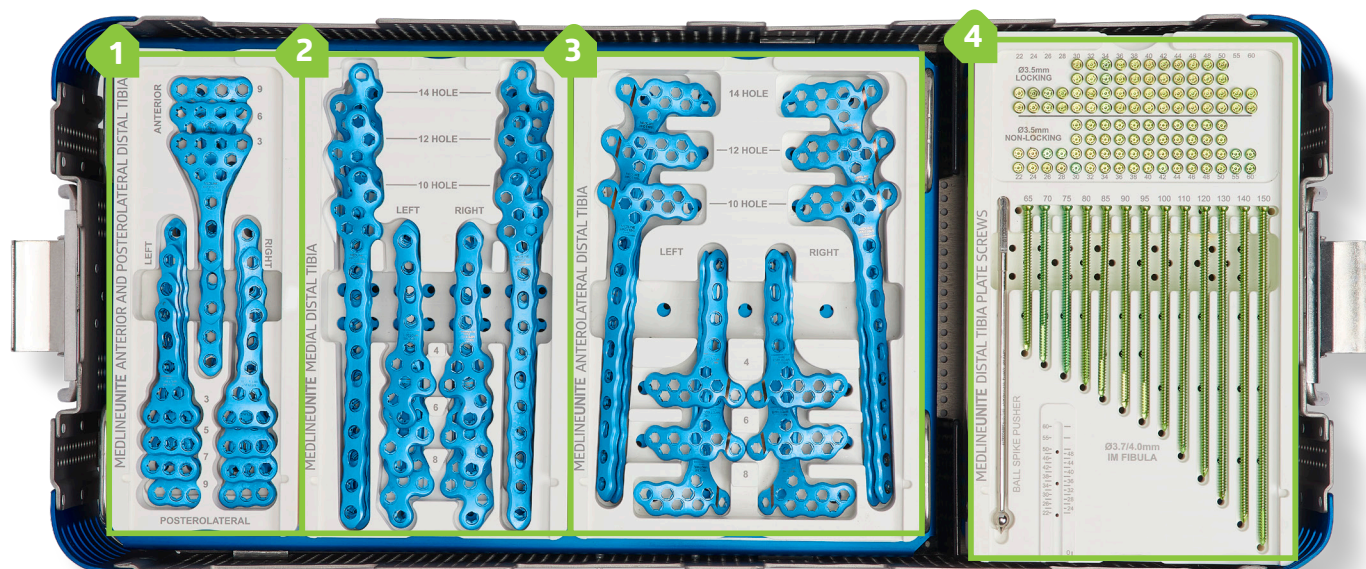
Ankle Fracture—Level 3



Section 7

Item No.	Description	Qty.
MPN50007	Bending Irons, Ankle Plates	2
MPN50008	Bending Pliers, Ankle Plates	2
MPN50006	Periosteal Elevator	1
MPN50004	Malleolar Clamp	1
MPX00002	Fibula Distractor	1
MPN50033	Malleolar Hook Plate Impactor	1
MPX27100	2.7 X 100 mm Fibula Distractor Pins	4

Distal Tibia—Level 1



Section 1

Anterior Distal Tibia Plates

Item No.	Description	Qty.
MPDT001U	3 Hole	1
MPDT002U	6 Hole	1
MPDT003U	9 Hole	1

Posterolateral Distal Tibia Plates

Item No.	Description	Qty.
MPDT301L	3 Hole, Left	1
MPDT301R	3 Hole, Right	1
MPDT302L	5 Hole, Left	1
MPDT302R	5 Hole, Right	1
MPDT303L	7 Hole, Left	1
MPDT303R	7 Hole, Right	1
MPDT304L	9 Hole, Left	1
MPDT304R	9 Hole, Right	1

Section 2

Medial Distal Tibia Plates

Item No.	Description	Qty.
MPDT201L	4 Hole, Left	1
MPDT201R	4 Hole, Right	1
MPDT202L	6 Hole, Left	1
MPDT202R	6 Hole, Right	1
MPDT203L	8 Hole, Left	1
MPDT203R	8 Hole, Right	1
MPDT204L	10 Hole, Left	1
MPDT204R	10 Hole, Right	1
MPDT205L	12 Hole, Left	1
MPDT205R	12 Hole, Right	1
MPDT206L	14 Hole, Left	1
MPDT206R	14 Hole, Right	1

Section 3

Anterolateral Distal Tibia Plates

Item No.	Description	Qty.
MPDT101L	4 Hole, Left	1
MPDT102L	6 Hole, Left	1
MPDT103L	8 Hole, Left	1
MPDT104L	10 Hole, Left	1
MPDT105L	12 Hole, Left	1
MPDT106L	14 Hole, Left	1
MPDT101R	4 Hole, Right	1
MPDT102R	6 Hole, Right	1
MPDT103R	8 Hole, Right	1
MPDT104R	10 Hole, Right	1
MPDT105R	12 Hole, Right	1
MPDT106R	14 Hole, Right	1

Section 4

3.5 mm Polyaxial Locking Screws

Item No.	Description	Qty.
MPSL3522	3.5 x 22 mm	2
MPSL3524	3.5 x 24 mm	2
MPSL3526	3.5 x 26 mm	2
MPSL3528	3.5 x 28 mm	2
MPSL3530	3.5 x 30 mm	4
MPSL3532	3.5 x 32 mm	4
MPSL3534	3.5 x 34 mm	4
MPSL3536	3.5 x 36 mm	4
MPSL3538	3.5 x 38 mm	4
MPSL3540	3.5 x 40 mm	4
MPSL3542	3.5 x 42 mm	4
MPSL3544	3.5 x 44 mm	4
MPSL3546	3.5 x 46 mm	4
MPSL3548	3.5 x 48 mm	4
MPSL3550	3.5 x 50 mm	4
MPSL3555	3.5 x 55 mm	2
MPSL3560	3.5 x 60 mm	2

3.5 mm Non-Locking Screws

Item No.	Description	Qty.
MPSN3522	3.5 x 22 mm	2
MPSN3524	3.5 x 24 mm	2
MPSN3526	3.5 x 26 mm	2
MPSN3528	3.5 x 28 mm	2
MPSN3530	3.5 x 30 mm	4
MPSN3532	3.5 x 32 mm	4
MPSN3534	3.5 x 34 mm	4
MPSN3536	3.5 x 36 mm	4
MPSN3538	3.5 x 38 mm	4
MPSN3540	3.5 x 40 mm	4

3.5 mm Non-Locking Screws (continued)

Item No.	Description	Qty.
MPSN3542	3.5 x 42 mm	4
MPSN3544	3.5 x 44 mm	4
MPSN3546	3.5 x 46 mm	4
MPSN3548	3.5 x 48 mm	4
MPSN3550	3.5 x 50 mm	4
MPSN3555	3.5 x 55 mm	2
MPSN3560	3.5 x 60 mm	2

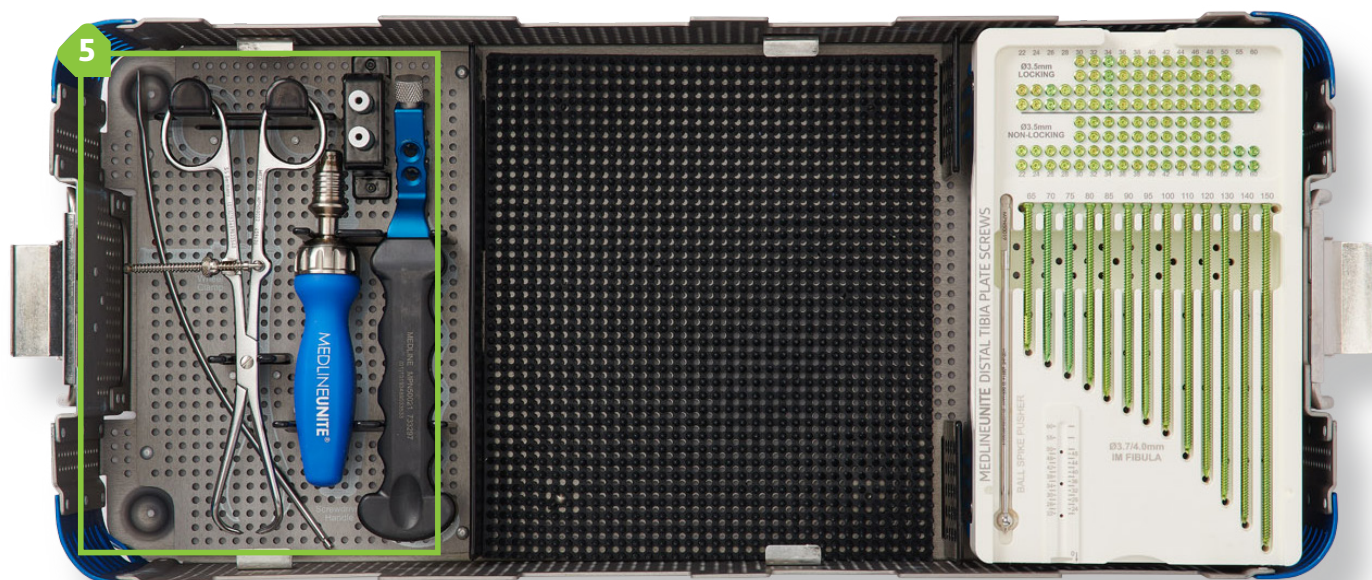
3.7/4.0 mm IM Fibula Implant

Item No.	Description	Qty.
MSFB0065	3.7/4.0 x 65 mm	1
MSFB0070	3.7/4.0 x 70 mm	1
MSFB0075	3.7/4.0 x 75 mm	1
MSFB0080	3.7/4.0 x 80 mm	1
MSFB0085	3.7/4.0 x 85 mm	1
MSFB0090	3.7/4.0 x 90 mm	1
MSFB0095	3.7/4.0 x 95 mm	1
MSFB0100	3.7/4.0 x 100 mm	1
MSFB0110	3.7/4.0 x 110 mm	1
MSFB0120	3.7/4.0 x 120 mm	1
MSFB0130	3.7/4.0 x 130 mm	1
MSFB0140	3.7/4.0 x 140 mm	1
MSFB0150	3.7/4.0 x 150 mm	1

Instruments

Item No.	Description	Qty.
MPN50019	Ball Spike Pusher, AO/QC	1

Distal Tibia—Level 2



Section 5

Item No.	Description	Qty.
MPN50022	Forceps, Reduction Forceps, Pointed, Wheel	1
MSN90006	Non-Ratcheting Cannulated Handle, Standard	1
MPN50021	Distal Tibia Plates Inserter	1
MPN50029	Curved Banana Elevator, AO/QC	1
MPN40002	2.8 mm Locking Tower Drill Guide	2

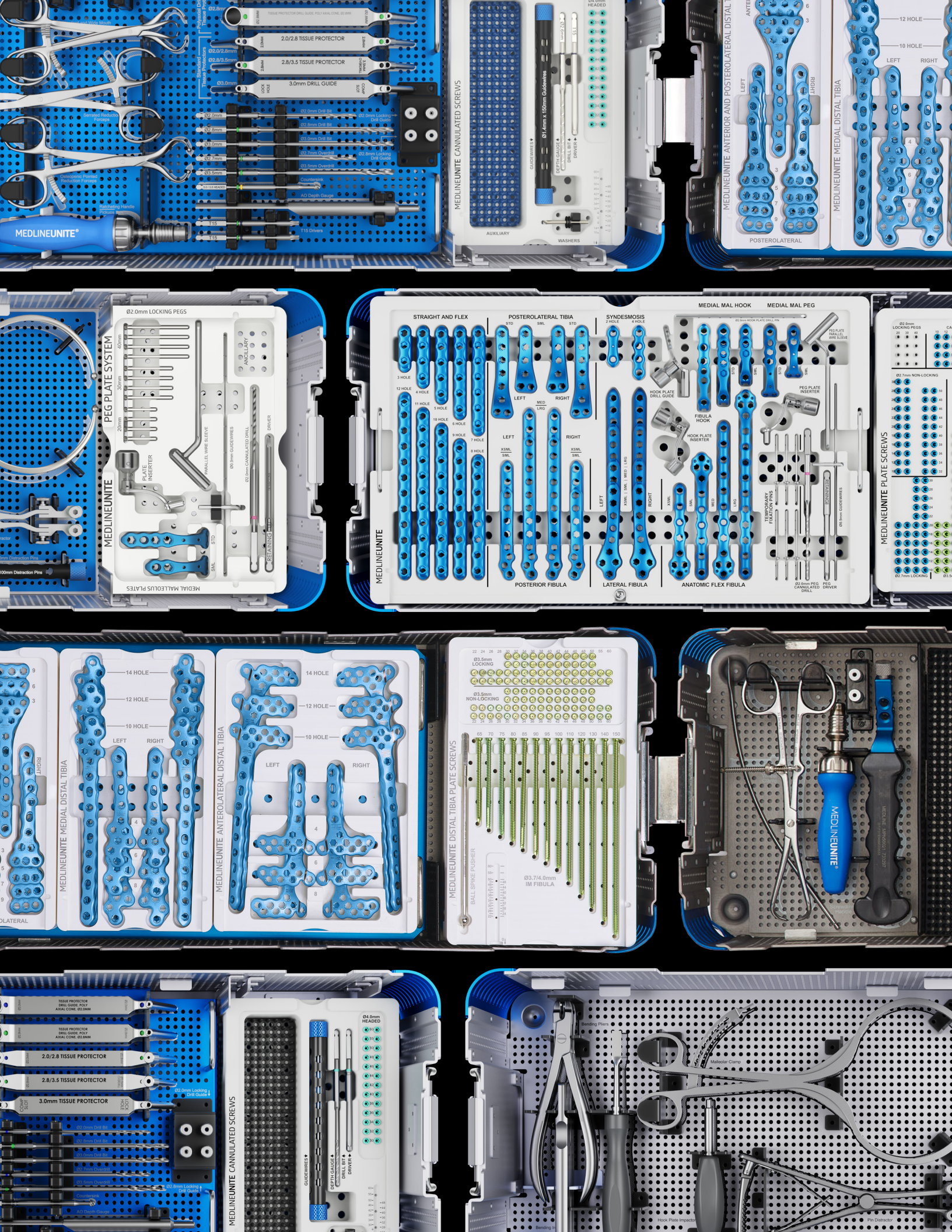
Distal Tibia XL Plates Caddy*

Item No.	Description	Qty.
MPDT107L	16 Hole Anterolateral Distal Tibia Plate, Left	1
MPDT107R	16 Hole Anterolateral Distal Tibia Plate, Right	1
MPDT108L	18 Hole Anterolateral Distal Tibia Plate, Left	1
MPDT108R	18 Hole Anterolateral Distal Tibia Plate, Right	1
MPDT207L	16 Hole Medial Distal Tibia Plate, Left	1
MPDT207R	16 Hole Medial Distal Tibia Plate, Right	1
MPDT208L	18 Hole Medial Distal Tibia Plate, Left	1
MPDT208R	18 Hole Medial Distal Tibia Plate, Right	1

**This is an ancillary caddy that is not standard in the Distal Tibia Plating System and is available upon request. Caddy is not pictured.*

Notes

Notes



Expertise in practice

UNITE is guided by the expertise of our surgeon design teams, down to the finest details. Ongoing collaboration at every step of the way is at the heart of the process in order to address the complex unmet needs of surgeons and advance clinical performance through intelligent design.



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