PediGuard®



→ Electrical Circuit Board

Provides audio / visual feedback which can alert the surgeon prior to a breach

The Challenge

Accuracy of pedicle screw placement remains a critical issue in spine surgery.

In recently published papers studying screw placement accuracy:

- The average rate of misplaced screws using conventional techniques is around 20% (Tian 2011, Gelalis 2011, Verma 2010)
- The average rate of misplaced screws using navigation is around 8% (Tian 2011, Gelalis 2011, Verma 2010)
- Up to 40% of patients have screws of concern (106 patients /2,229 screws). Screws of concern are qualified as: adjacent to aorta, viscera or 2-4mm breach OR impinging on aorta, viscera medial displacement greater than or equal to 4mm (Wollowick, 2011)

Consequences of misplaced pedicle screws are not to be underestimated.

Literature reviews and clinical studies recently published suggest that:

- 2.3% of patients (29/1,254) presented neurologic complications due to misplaced screws placed free hand with or without fluoroscopy (Gelalis 2011, Verma 2010)
- 4.7% of patients (7/148) showed screw proximity (7/1,797 screws) to the aorta requiring a revision surgery (Sarlak 2009)

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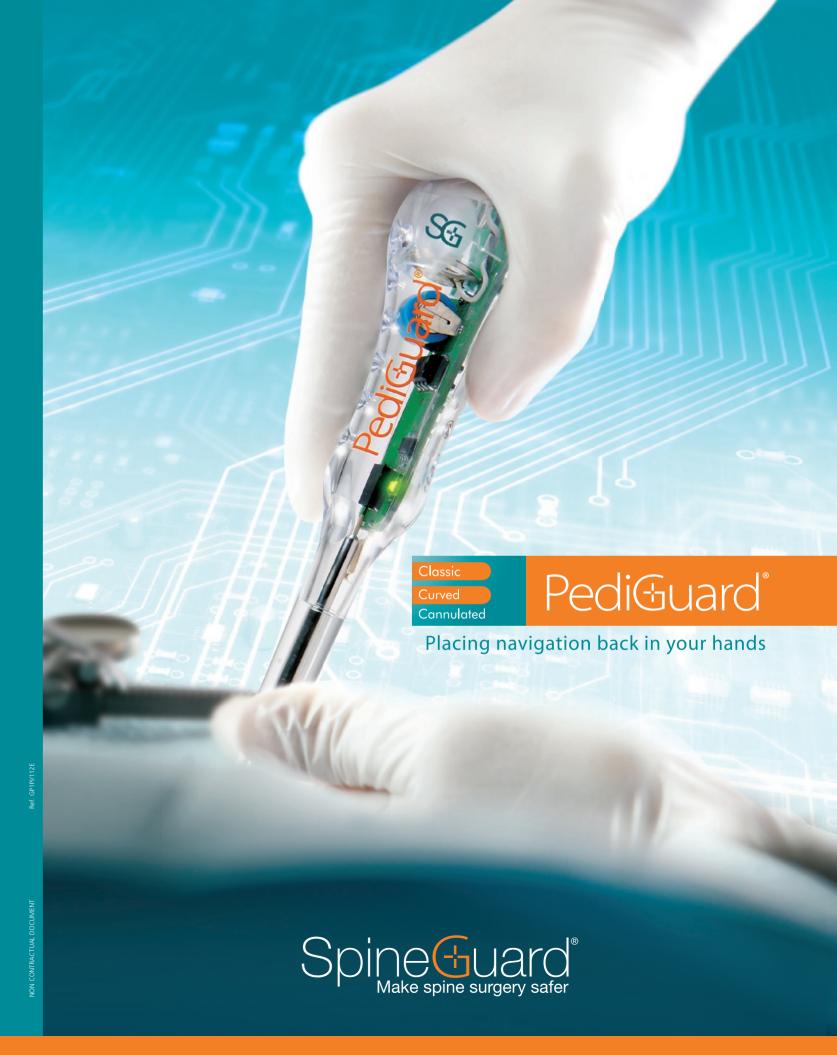


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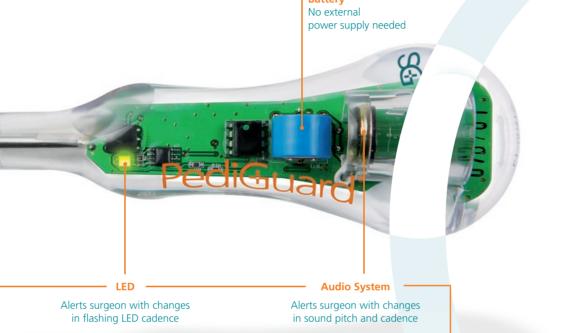
Simple. Innovative. Smart.

The need for a smart pedicle probe is real - and the solution is here. Introducing PediGuard, the smart gearshift.

- Hear and feel what you cannot see
- Be reassured your trajectory is precise
- Anticipate possible breaches of the pedicular wall or vertebral body and
- Redirect with complete confidence

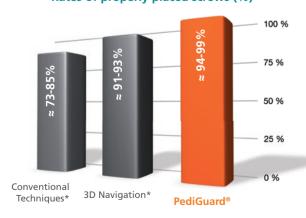
PediGuard has assisted orthopedic spine surgeons and neurosurgeons throughout the world in over 20,000 surgeries - experience the difference today.

PediGuard®



Proven Efficiency

Rates of properly placed screws (%)



*Tian 2011, Gelalis 2011, Verma 2010

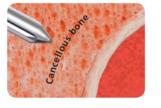
Electromagnetic Bipolar Sensor

Monitors real-time changes in electrical

conductivity five times per second

• 97% screw placement accuracy^[2, 3, 4, 5, 6]

- 98% probability of breach detection[1]
- 87% breach anticipation[7]
- 3-fold reduction in neuro-monitoring alarms[8]
- 15% time saving during screw placement[6]









Imminent CORTICAL BREACH:

HIGH pitch, HIGH cadence



Reduce Radiation Exposure

Surgeons' greater reliance on fluoroscopy during procedures exposes the OR team to

- The average spine surgeon will receive the maximum allowable lifetime exposure of radiation for classified workers within 10 years of practice (UI Hague 2006)
- The radiation exposure in spine surgery has been found to be 10 to 12 times greater than the radiation exposure during other fluoroscopically assisted non-spinal musculoskeletal procedures (Rampersaud 2000)

Studies show that the use of PediGuard can significantly reduce the radiation exposure

- 73% radiation time reduction[9]
- 51% reduction in thyroid radiation exposure to the surgeon [9]
- 25% 30% reduction in Fluoroscopy shots during pedicle screw placement[2,6]



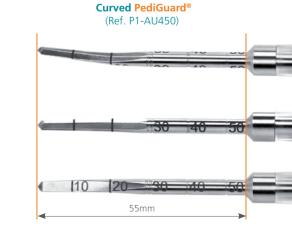
Delivered sterile, ready to use.

Now you have a choice

- A tapered tip to ease penetration through the pedicle and removal from the pedicle when drilling is complete.
- A sense of directionality. As surgeons become comfortable with the direction of the curve, we anticipate enhanced awareness of the location of a possible breach for proper redirection.







Surgeons who prefer a curved gearshift will appreciate the tactile feel of the Curved PediGuard: