stryker

Mako Total Knee

SmartRobotics

Know more

with 3D CT-based preoperative planning

1. Right side panel:

- Note femoral and tibial sizes
- Turn on femoral axis (PCA) and resection landmarks



5.0°

2. Sagittal view of femur (top right):

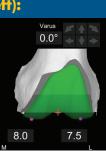
- Confirm femoral component's medial condyle is concentric with the native condyle
- Confirm proper placement of distal and posterior resection landmarks
- Scroll through CT slices to ensure implant anterior flange is not proud of native sulcus
- Note appropriate flexion of femur and confirm size of femoral component

3. Transverse view of femur (top middle):

- Scroll through CT slices to assess M/L width to avoid overhang
- Assess implant trochlea, and confirm the implant does not overstuff the patellofemoral compartment
- Note femoral rotation with respect to TEA and/or PCA
- Confirm default 8 mm resection on posterior medial condyle

4. Coronal view of femur (top left):

- Confirm starting alignment
- Confirm default 8 mm resection on distal medial condyle
- Review the runout of the anterior cut relative to the anterior flange of the component. Adjust femoral flexion as needed



0.0°

3.0

4.8°

8.0

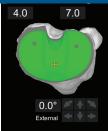
5. Coronal plane of tibia (bottom left):

- Confirm starting alignment
- Confirm default 7 mm resection from lateral tibial plateau. If medial tibial plateau is more prominent, reference 5 mm off medial plateau
- Scroll through CT slices to assess any bony wear and determine changes to tibial component positioning



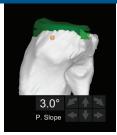
6. Transverse view of tibia (bottom middle):

- Assess size and fit of tibial component, noting and anticipating removal of osteophytes
- Confirm proper placement of resection landmarks
- Scroll through CT slices to assess any bony wear and determine changes to tibial component positioning



7. Sagittal view of tibia (bottom right):

 Confirm default tibial slope (3° posterior for CR, CS and 1° posterior for PS)



8. Right side panel:

• Turn off Implants View to review bone cut plan



Triathion® CR C

stryker

Mako Total Knee

SmartRobotics

Know more

with 3D CT-based intraoperative planning

M L

17mm 18mm

1. Coronal plane • • adjustments 1 4 Limb Flexi Femoral and tibia • varus/valgus + Limb Varu 5° + 8mm 6mm 17_{mm} 18mm ned Va 3° 4_{mr} М 17mm 18mm Extension 17mm 18mm Flexion 2. Transverse plane stryker 0 0 0 1 4 5° Limb Ele 92° Femoral internal/ • external rotation + Limb Varu 6° + 10mr 3_{mm} 17_m 18mm ned Var 4... 6.....

A surgeon must always rely on his or her own professional clinical judgment when deciding whether to use a particular product when treating a particular patient. Stryker does not dispense medical advice and recommends that surgeons be trained in the use of any particular product before using it in surgery.

The information presented is intended to demonstrate the breadth of Stryker's product offerings. A surgeon must always refer to the package insert, product label and/or instructions for use before using any of Stryker's products. Products may not be available in all markets because product availability is subject to the regulatory and/or medical practices in individual markets. Please contact your sales representative if you have questions about the availability of products in your area.

Stryker Corporation or its divisions or other corporate affiliated entities own, use or have applied for the following trademarks or service marks: Mako, SmartRobotics, Stryker. All other trademarks are trademarks of their respective owners or holders.

MAKTKA-BRO-10_29076 Copyright © 2021 Stryker

3. Review implant positioning

- Femoral flexion
- Medial condyle concentricity
- Trochlea concentricity
- Anterior and posterior footprint
- Confirm final component sizes

