

#### Başvuru Bilgileri

**Başvuru Numarası** : 2012/01556

**Evrak Numarası** : 2012-G-46544

**Tescil Numarası** :

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**Tescil Tarihi** :

**Başvuru Şekli** : Ulusal Başvuru

**Koruma Tipi** : Patent

**Yayın Tarihi** : 2012/12/21

#### Başvuru Sahipleri

**SAYAN TIBBİ ALETLER PAZARLAMA SANAYİ VE TİCARET LİMİTED ŞİRKETİ**  
Kemalpaşa Mah.7105 Sok.No:27 Işıkkent BORNOVA İZMİR

#### Buluşun Tasnif Sınıfları

A61B 17/16

#### Buluş Sahipleri

**SERDAR ÖMÜR GÖREN**

Kemalpaşa Mah.7105 Sok.No:27 Pınarbaşı BORNOVA İZMİR

#### Vekil Bilgileri

**İSMAİL ÜSAME YILMAZ (İNNOVASİA DAN. AR-GE PATENT HİZ. TİC. LTD. ŞTİ.)**

KONAK MAH. LEFKOŞA CAD. NO:12/9 - NİLÜFER/BURSA

#### Buluş Başlığı

Mini kesi ortopedi cerrahisinde, leğen kemiğini (asetabulumu) oymaya yarayan bir rende kolu.

#### Buluş Özeti

Buluş özellikle, mini kesi ortopedi cerrahisinde, leğen kemiğini (asetabulumu) oymaya yarayan, kemik büyüklüğüne göre değişen farklı çaplardaki yarım küre rendelere hareket vermek amacıyla kullanılmak üzere, farklı açılarda tutma kolu (8) ve motor bağlantısı sunan bir rende kolu ile ilgilidir.

## ÖZET

**MINİ KESİ ORTOPEDİ CERRAHİSİNDE, LEĞEN KEMİĞİNİ (ASETABULUMU) OYMAYA  
YARAYAN BİR RENDE KOLU**

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Buluş özellikle, mini kesi ortopedi cerrahisinde, leğen kemiğini (asetabulumu) oymaya yarayan, kemik büyüklüğüne göre değişen farklı çaplardaki yarım küre rendelere hareket vermek amacıyla kullanılmak üzere, farklı açılarda tutma kolu (8) ve motor bağlantısı sunan bir rende kolu ile ilgilidir.

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**TARİFNAME****MINİ KESİ ORTOPEDİ CERRAHİSİNDE, LEĞEN KEMİĞİNİ (ASETABULUMU) OYMAYA YARAYAN BİR RENDE KOLU**

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**Teknik Alan**

Buluş, mini kesi ortopedi cerrahisinde kullanılmak üzere bir aparat ile ilgilidir.

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Buluş özellikle, mini kesi ortopedi cerrahisinde, leğen kemiğini (asetabulumu) oymaya yarayan, kemik büyüklüğüne göre değişen farklı çaplardaki yarım küre rendelere hareket vermek amacıyla kullanılmak üzere bir rende kolu ile ilgilidir.

**Tekniğin Bilinen Durumu**

Günümüzde, mini kesi ameliyatlarında kullanılan rende kollarının en önemli dezavantajları şunlardır:

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Aletin tutma kolu ile rendeye hareket vermek üzere alete bağlanan cerrahi motorun tutma açısı ergonomik değildir. Cerrahi motorun alete bağlantısı ancak aletin orta ekseninde mümkün olabilmektedir.

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Ameliyat sonrası temizlenebilmesi için tamamen parçalanarak yıkanmak zorunda olmasından dolayı, gerek yıkanma gerekse montaj esnasında iç mekanizmaya ait bazı ufak parçaların kaybolmasından dolayı alet tamamen veya kısmen kullanılmaz hale gelmektedir.

Mevcut teknik, hekime, aleti tutması için bir adet tutamak imkanı sağlamaktadır. Bunun haricindeki tutma pozisyonları için hekimin kendi alternatiflerini geliştirmesi gerekmektedir.

Alet, faklı cerrahi motor kullanımları için pratik imkanlar sağlamamaktadır.

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Tamamen sökülebilir olmasından dolayı üretim tekniği daha karmaşık olup, buna bağlı olarak da maliyeti yüksektir

Sonuç olarak mini kesi ortopedi cerrahisinde, leğen kemiğini (asetabulumu) oymaya yarayan, kemik büyüklüğüne göre değişen farklı çaplardaki yarım küre rendelere hareket vermek amacıyla kullanılmak üzere mevcut çözümlerin yetersizliğini ortadan kaldıracak bir rende koluna olan gereksinimin varlığı ilgili teknik alanda bir geliştirme yapmayı zorunlu kılmıştır

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**Buluşun Amacı**

Tekniğin bilinen durumuna ait dezavantajları ortadan kaldırmak üzere buluşun bir amacı, tutma kolunun rende kolu gövdesine kilitlenebilir oynar mafsal yardımıyla bağlanması ve cerrahi motor hareket aktarma milinin de gövde miline hareketi mafsal üzerinden aktarması sonucunda gerek sağ gerekse sol elini kullanan hekimler için tutma kolunun kolaylıkla ayarlanması sağlanmıştır.

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Buluşun bir diğer amacı, hekimlere cerrahi motor bağlantı milini aletin gövde eksenine göre istenilen farklı değerlerde açı konumunda sabitleme ve kullanım imkanı sağlamaktır. Motor milini ile tutma kolunun birbirine montajlanması sayesinde de motor milinin kullanımı için seçilen konumda aletin sağlam bir şekilde tutularak alete hakim olunması sağlanmıştır

- 5 Buluşun bir diğer amacı, tutma kolu içerisinde yerleştirilen bir kilitlenebilir, radyüslü ayar kolu vasıtasıyla motor bağlantı milinin, aletin gövde eksenine göre açılma kabiliyetinin  $63,5^\circ$ 'ye ( $63^\circ 30'$ ) kadar çıkarılmasını sağlamaktır.

Buluşun bir diğer amacı, tutma kolunun gövdeden kolaylıkla demonte edilmesi ve aletin gövdesi üzerine yerleştirilen bir sap vasıtasıyla, istenilmesi durumunda tutma kolunun 10 çıkartılarak motor bağlantı milinin aletin gövde eksenine göre yatay düzlemde  $29^\circ$  ile  $67^\circ$ , düşey düzlemde ise  $29^\circ$  ile  $81^\circ$  arasında serbest açı ile kullanımını sağlamaktır. Serbest açı kullanımı esnasında aletin hakimiyeti gövde üzerindeki sap vasıtasıyla yapılmaktadır.

Buluşun bir diğer amacı, aletin ameliyat sonrası temizliğinin kolay yapılması ve temizlik esnasında ve temizlik sonrası montaj esnasında parçalarının kaybolmasından dolayı 15 kullanılmaması riskini ortadan kaldırmak için, cerrahi motor bağlantısından kemiği oyan rendeye kadar hareket ileten aksam demonte edilmesine gerek olmayacak şekilde yapılmıştır. İnsan vücudu içerisinde kullanılan aletin uç kısmındaki sabit hareket aktarma elemanı herhangi bir doku sarması sonucu ilave yaralanmaya sebebiyet vermemek üzere muhafaza altına alınmıştır. Ameliyat sonrasında uygun şekilde temizlenmesi için üzerinde 20 karşılıklı kanallar yapılmıştır. Aynı tür kanallar radyüslü ayar kolu mekanizmasının uygun şekilde temizlenmesi için tutma kolunun üzerine de açılmıştır

Buluşun bir diğer amacı, motor bağlantı miline kolaylıkla takılan adaptorler vasıtasıyla aletin her tür cerrahi motor ile kolaylıkla kullanımını sağlamaktır.

Buluşun yapısal ve karakteristik özellikleri ve tüm avantajları aşağıda verilen şekiller ve bu 25 şekillere atıflar yapılmak suretiyle yazılan detaylı açıklama sayesinde daha net olarak anlaşılacaktır ve bu nedenle değerlendirmenin de bu şekiller ve detaylı açıklama göz önüne alınarak yapılması gerekmektedir

### **Buluşun Anlaşılmasına Yardımcı Olacak Şekiller**

- 30 Şekil 1, Buluşun tutma kolu içermeyen yapılanmasının yandan görünümüdür,  
 Şekil 2, Buluşun tutma kolu içermeyen yapılanmasının üstten geniş açılı halde görünümüdür,  
 Şekil 3, Buluşun tutma kolu içermeyen yapılanmasının üstten dar açılı halde görünümüdür,  
 Şekil 4, Buluşun tutma kolu içeren yapılanmasının yandan görünümüdür,  
 Şekil 5, Buluşun tutma kolu içeren yapılanmasının üstten geniş açılı halde görünümüdür,  
 35 Şekil 6, Buluşun tutma kolu içeren yapılanmasının üstten dar açılı halde görünümüdür,  
 Şekil 7, Buluşun tutma kolu içeren yapılanması ve demonte halde cerrahi motor adaptörünün perspektif görünümüdür

Çizimlerin mutlaka ölçeklendirilmesi gerekmektedir ve mevcut buluşu anlamak için gerekli olmayan detaylar ihmal edilmiş olabilmektedir. Bundan başka, en azından büyük ölçüde özdeş olan veya en azından büyük ölçüde özdeş işlevleri olan elemanlar, aynı numara ile gösterilmektedir.

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#### **Parça Referanslarının Açıklaması**

- |                                  |                               |
|----------------------------------|-------------------------------|
| 1. Gövde                         | 7. Radyüslü ayar kolu         |
| 2. Tutma kolu sabitleme mafsali  | 8. Tutma kolu                 |
| 3. Motor bağlantı mili           | 9. Sap                        |
| 4. Sabit hareket aktarma elemanı | 10. Kanallar                  |
| 5. Oynar mafsali                 | 11. Rende bağlantı kafası     |
| 6. Cerrahi motor adaptörü        | 12. Radyüslü ayar kolu kilidi |

#### **Buluşun Detaylı Açıklaması**

10 Buluş, mini kesi ortopedi cerrahisinde, leğen kemiğini (asetabulumu) oymaya yarayan, kemik büyüklüğüne göre değişen farklı çaplardaki rendelere hareket vermek amacıyla kullanılmak üzere bir cerrahi motordan aldığı hareketi, içerdiği rende bağlantı kafası (11) vasıtasıyla leğen kemiğini (asetabulum) oymada kullanılan rendeyle aktaran; bahsedilen rende bağlantı kafasını (11) taşıyan gövde (1) ile insan vücudu içerisinde kullanılan renderin irtibatlandığı rende bağlantı kafasını (11) gövdeye bağlayan ve motordan gelen hareketi bahsedilen rende bağlantı kafasına (11) aktaran sabit hareket aktarma elemanı (4) içeren bir rende koludur.

Buluşun özelliği,

- motordan hareketi alıp bahsedilen sabit hareket aktarma elemanına (4) ileten motor bağlantı mili (3), ve
- 20 • motor bağlantı milinin (3) aletin gövde eksenine göre yatay düzlemde ve düşey düzlemde serbest açı ile kullanımını sağlayan ve bahsedilen motor bağlantı milinin (3) farklı açılma değerlerindeki hareketini sabit hareket aktarma elemanına (4) ileten oynar mafsali (5) ihtiva etmesidir.

#### **25 Buluşun tercih edilen yapılanmaları:**

Bu detaylı açıklamada, buluş konusu rende kolunun tercih edilen yapılanmaları, sadece konunun daha iyi anlaşılmasına yönelik olarak ve hiçbir sınırlayıcı etki oluşturmayacak şekilde açıklanmaktadır.

30 Şekil 1'de buluşun tercih edilen yapılanmasının yan görünümü yer almaktadır. Buluş konusu rende kolu; temel olarak cerrahi motordan aldığı hareketi leğen kemiğini (asetabulum)

oymada kullanılan rendeye aktaran bir aktarma elemanı olarak işlev görmektedir. Bu işlev sırasında hareket, gövde (1) üzerindeki sabit millere bir mafsal (5) ile aktarılır. Bu nedenle rende kolu, oynar mafsal (5) vasıtasıyla belirtilen limitler dahilinde istenilen açıda hareket iletme yetisine sahiptir (Şekil 1-6). Buluş, bahsedilen gövde (1) ile irtibatlı şekilde sap (9) 5 ihtiva etmektedir. Özellikle üzerindeki girinti ve çıkıntılar sayesinde kavrama kolaylığı sağlayan bu sap (9) sayesinde buluş, sabit şekilde tutulabilmekte ve sorunsuz bir kullanım sunmaktadır.

Buluş bahsedilen özelliklere ek olarak bahsedilen gövdeye (1) irtibatlı, rende kolunun gövde 10 ekseninden farklı ekseninde tutulmasını sağlayan ve bahsedilen motor bağlantı milinin (3) üzerinde yatakladığı tutma kolu (8) içermektedir (Şekil 4-6). Bahsedilen tutma kolunun (8) gövdeye göre farklı değerlerde açılmasını ve istenilen açılma değerinde gövdeye (1) sabitlenmesini sağlayan ayrıca bir tutma kolu sabitleme mafsalı (2) kullanılmaktadır. Bahsedilen tutma kolu sabitleme mafsalı (2), bahsedilen sap (9) üzerinde konumlandırılır (Şekil 15 3)

Şekillerde görülen çift oynar mafsal (5) hekimlere cerrahi motor bağlantı milini (3), aletin gövde eksenine göre 43°'lik serbest açılma ile kullanım imkanı sağlamaktadır (Şekil 6). Motor bağlantı milini (3) ile tutma kolunun (8) birbirine montajlanması sayesinde de motor 20 bağlantı milinin (3) kullanımı için seçilen konumda, aletin sağlam bir şekilde tutularak, alete hakim olunması sağlanmaktadır. Oynar mafsal (5) ise motor bağlantı milinin (3) farklı açılma değerlerinde, sabit hareket aktarma elemanına (4) hareket iletmektedir.

Yine Şekil 4 ve 5'te görülen tutma kolu (8) içerisine yerleştirilen, istendiğinde çıkarılan ve 25 tutma kolu (8) dışındaki ucu bahsedilen motor bağlantı miline (3) irtibatlanan bir kilitlenebilir, radyüslü ayar kolu (7) bulunmaktadır. Bu kol (7) vasıtasıyla motor bağlantı milinin (3), aletin gövde eksenine göre açılma kabiliyetinin 63,5°'ye kadar çıkarılması sağlanmaktadır (Şekil 4). Böylece radyüslü ayar kolu (7) en açık konumda iken motor bağlantı miline (3), aletin gövde eksenine göre dikey düzlemde 63,5°'lik, yatay düzlemde 53,5°'lik serbest açılma, 30 sabitleme ve kullanım imkanı sağlanmaktadır. Yine Şekil 4-6'da radyüslü ayar kolunun (7) istenilen konumda sabitlenmesini sağlayan bir radyüslü ayar kolu kilidi (12) görülmektedir. Bu kilit (12) tercihen, ayar kolunun (7) içerisinden çıktığı tutma kolu (8) üzerinde konumlandırılmaktadır.

35 Şekillerde görüleceği üzere, insan vücudu içerisinde kullanılan aletin uç kısmındaki sabit hareket aktarma elemanı (4) herhangi bir doku sarması sonucu ilave yaralanmaya sebebiyet vermemek üzere muhafaza altına alınmıştır. Ameliyat sonrasında uygun şekilde

temizlenmesi için söz konusu sabit aktarma elemanı (4) üzerinde karşılıklı kanallar (10) formlandırılmıştır. Aynı şekilde, radyüslü ayar kolu (7) mekanizmasının uygun şekilde temizlenmesi için tutma kolunun (8) üzerine de kanallar (10) açılmıştır

- 5 Şekil 1'de görüleceği üzere, tutma kolunun (8) sökülebilir olması sayesinde cerrahi motor bağlantı milini (3), dikey düzlemdeki serbest kullanımda daha fazla açılma (81 derece) yapabilmektedir. Bu sayede mevcut rende kollarına göre kullanıcı hekime ameliyat esnasında daha fazla serbestlik imkanı sağlamaktadır. İstenilmesi durumunda tutma kolunun (8) çıkartılarak motor bağlantı milinin (3) aletin gövde eksenine göre yatay düzlemde 29° ile 10 67°, düşey düzlemde ise 29° ile 81° arasında serbest açı ile kullanımı sağlanmaktadır (Şekil 1-3) Serbest açı kullanımı esnasında aletin hakimiyeti gövde (1) üzerindeki sap (9) vasıtasıyla yapılmaktadır

- Yine buluş konusu rende kolu, sistemin sökülmesi halinde bile küçük parçalara ayrılmıyor 15 olması sebebiyle de ameliyat sonrası temizlik esnasında parçalarının kaybolmamasından dolayı çok sıklıkla yaşanan parça kaybolması ile oluşan aletin kullanım dışı kalması riski en aza indirgenmiş olmaktadır.

- Soz konusu buluş, motor bağlantı miline (3) kolaylıkla monte edilecek adaptörler (6) ile de 20 farklı tipteki cerrahi motorlarla kolaylıkla kullanılmaktadır (Şekil 7) Yine, cerrahi motor bağlantı milinin (3) hareketi, gövdeye (1) bir mafsalla (5) iletiliyor olması ve söküm yapılmadan aletin temizliğinin mümkün olması prensipleri rende ile asetabulumun oyulmasının ardından konulacak metal implantı yerleştirecek aletin tasarımında da kullanılabilecektir

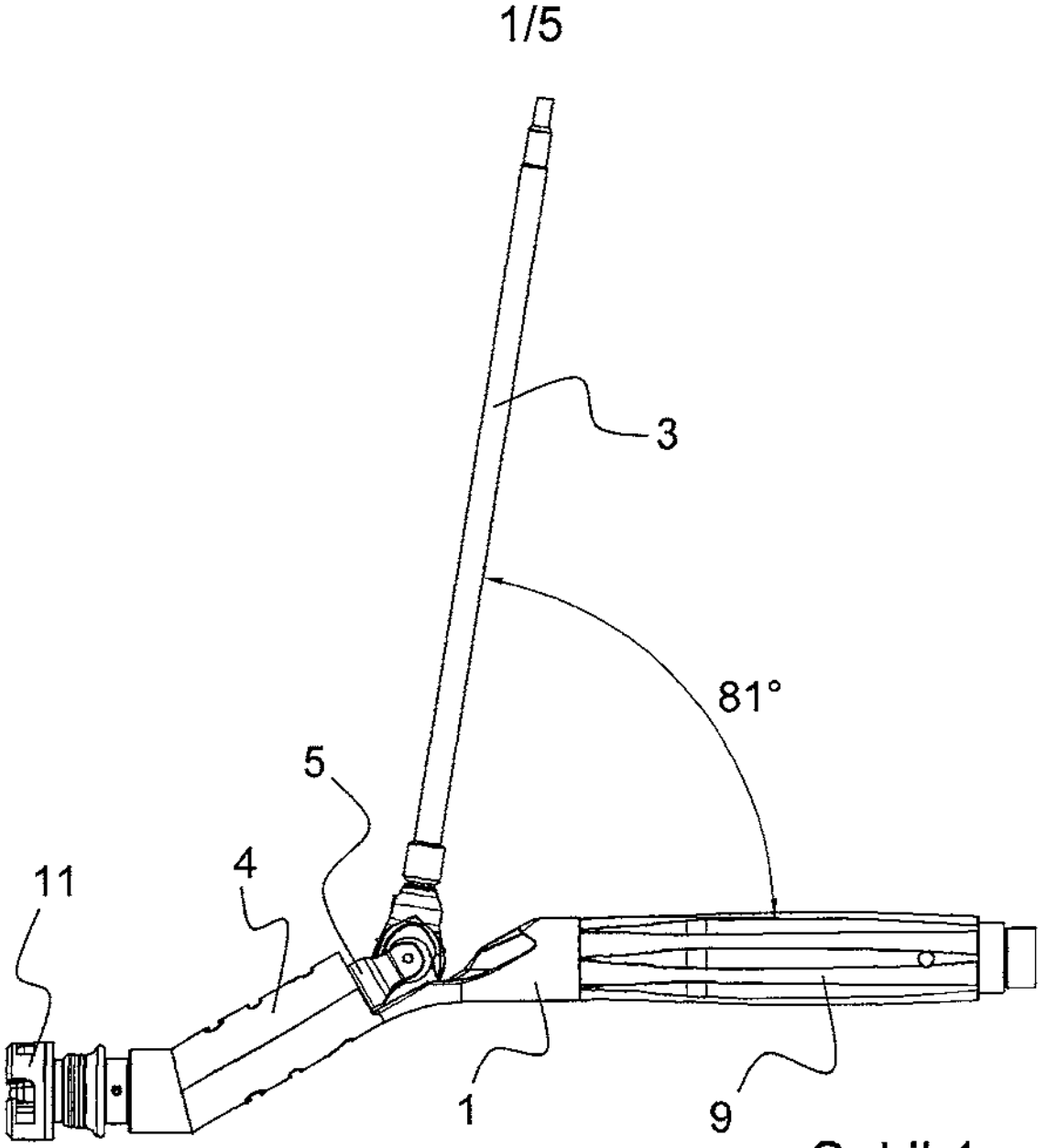
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**İSTEMLER**

1. Buluş, mini kesı ortopedi cerrahisinde, leğen kemiğini (asetabulumu) oymaya yarayan  
rendelere hareket vermek amacıyla kullanılmak üzere bir cerrahi motordan aldığı hareketi,  
5 içerdiği rende bağlantı kafası (11) vasıtasıyla leğen kemiğini (asetabulum) oymada kullanılan  
rendeye aktaran, bahsedilen rende bağlantı kafasını (11) taşıyan gövde (1) ile insan vücudu  
içerisinde kullanılan renderının irtibatlandığı rende bağlantı kafasını (11) gövdeye bağlayan ve  
motordan gelen hareketi bahsedilen rende bağlantı kafasına (11) aktaran sabit hareket  
aktarma elemanı (4) içeren bir rende kolu olup,  
10 • motordan hareketi alıp bahsedilen sabit hareket aktarma elemanına (4) ileten motor  
bağlantı mili (3), ve  
• motor bağlantı milinin (3) aletin gövde eksenine göre yatay düzlemde ve düşey düzlemde  
serbest açı ile kullanımını sağlayan ve bahsedilen motor bağlantı milinin (3) farklı açılanma  
değerlerindeki hareketini sabit hareket aktarma elemanına (4) ileten oynar mafsal (5)  
15 içermesiyle karakterize edilmektedir.
2. İstem 1'e uygun bir rende kolu olup, bahsedilen gövde (1) ile irtibatlı şekilde sap (9)  
içermesi ile karakterize edilmektedir.
- 20 3. İstem 1'e uygun bir rende kolu olup, bahsedilen gövdeye (1) irtibatlı ve rende kolunun  
gövde ekseninden farklı ekseninde tutulmasını sağlayan tutma kolu (8) içermesi ile karakterize  
edilmektedir.
- 25 4. İstem 1'e uygun bir rende kolu olup, bahsedilen gövdeye (1) irtibatlı, rende kolunun  
govde ekseninden farklı ekseninde tutulmasını sağlayan ve bahsedilen motor bağlantı milinin  
(3) üzerinde yatakladığı tutma kolu (8) içermesi ile karakterize edilmektedir.
- 30 5. İstem 3 veya 4'e uygun bir rende kolu olup, tutma kolunun (8) govdeye göre farklı  
noktalarda konumlanmasını ve istenilen konumlanma değerinde govdeye (1) sabitlenmesini  
sağlayan bir tutma kolu sabitleme mafsalı (2) içermesi ile karakterize edilmektedir.
- 35 6. İstem 4'e uygun bir rende kolu olup, bahsedilen motor bağlantı milinin (3) hareket  
serbestisini arttırmak üzere, bahsedilen tutma kolu (8) içerisine yerleştirilen, istendiğinde  
çıkarılan ve tutma kolu (8) dışındaki ucu bahsedilen motor bağlantı miline (3) irtibatlanan  
radyuslü ayar kolu (7) içermesiyle karakterize edilmektedir.

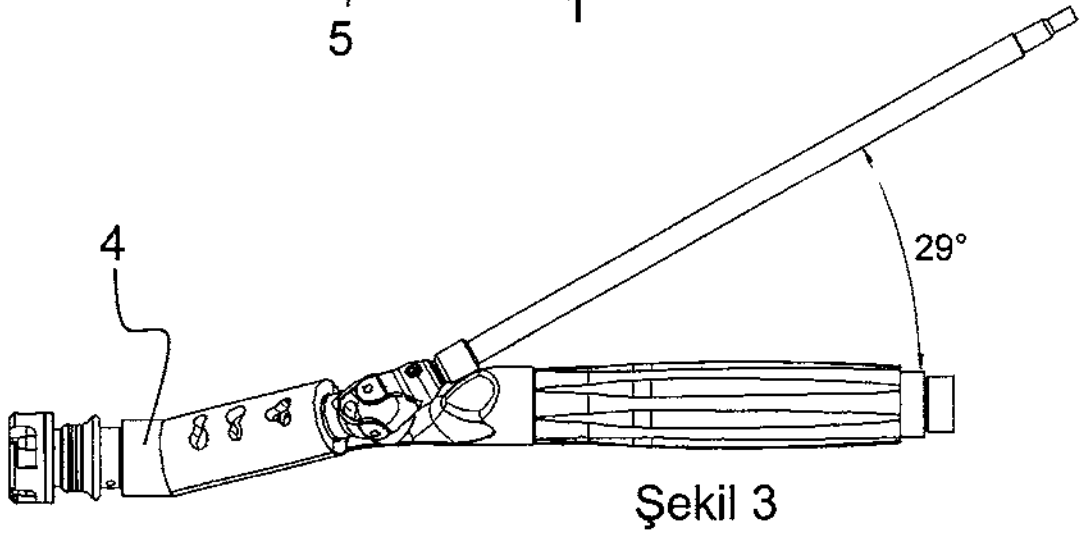
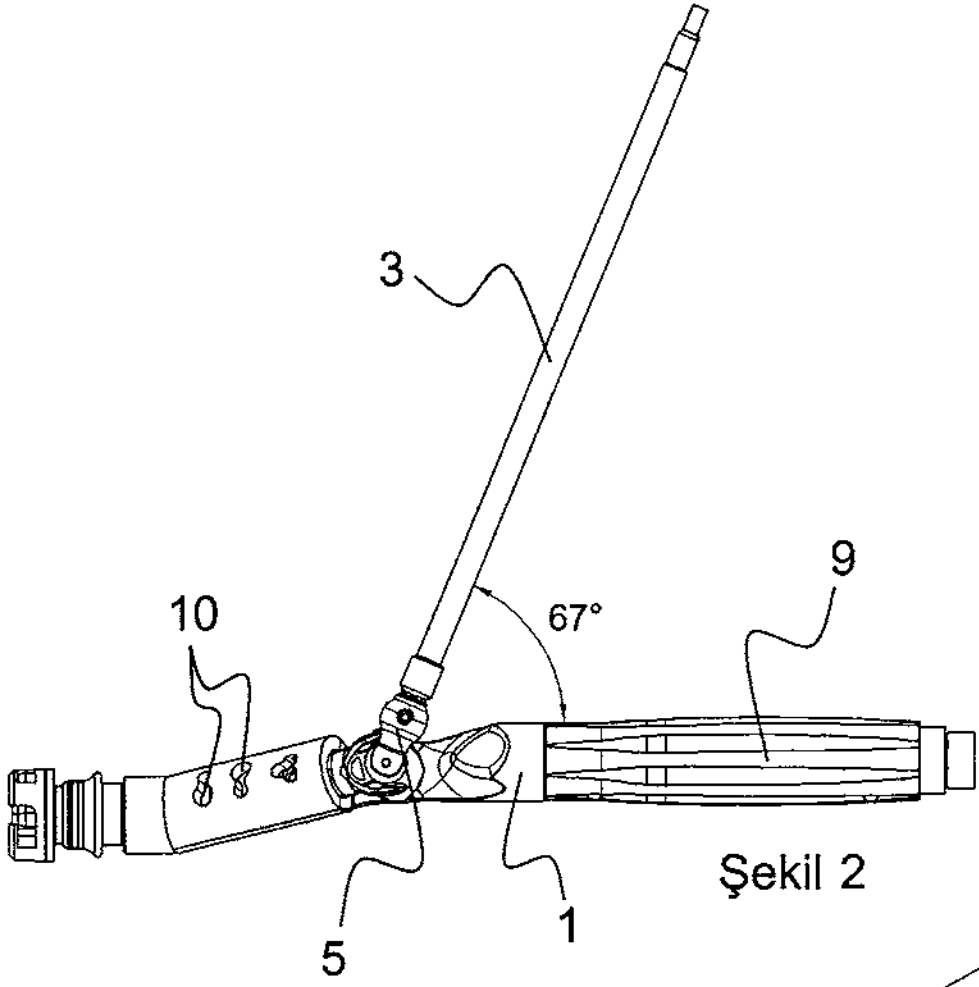


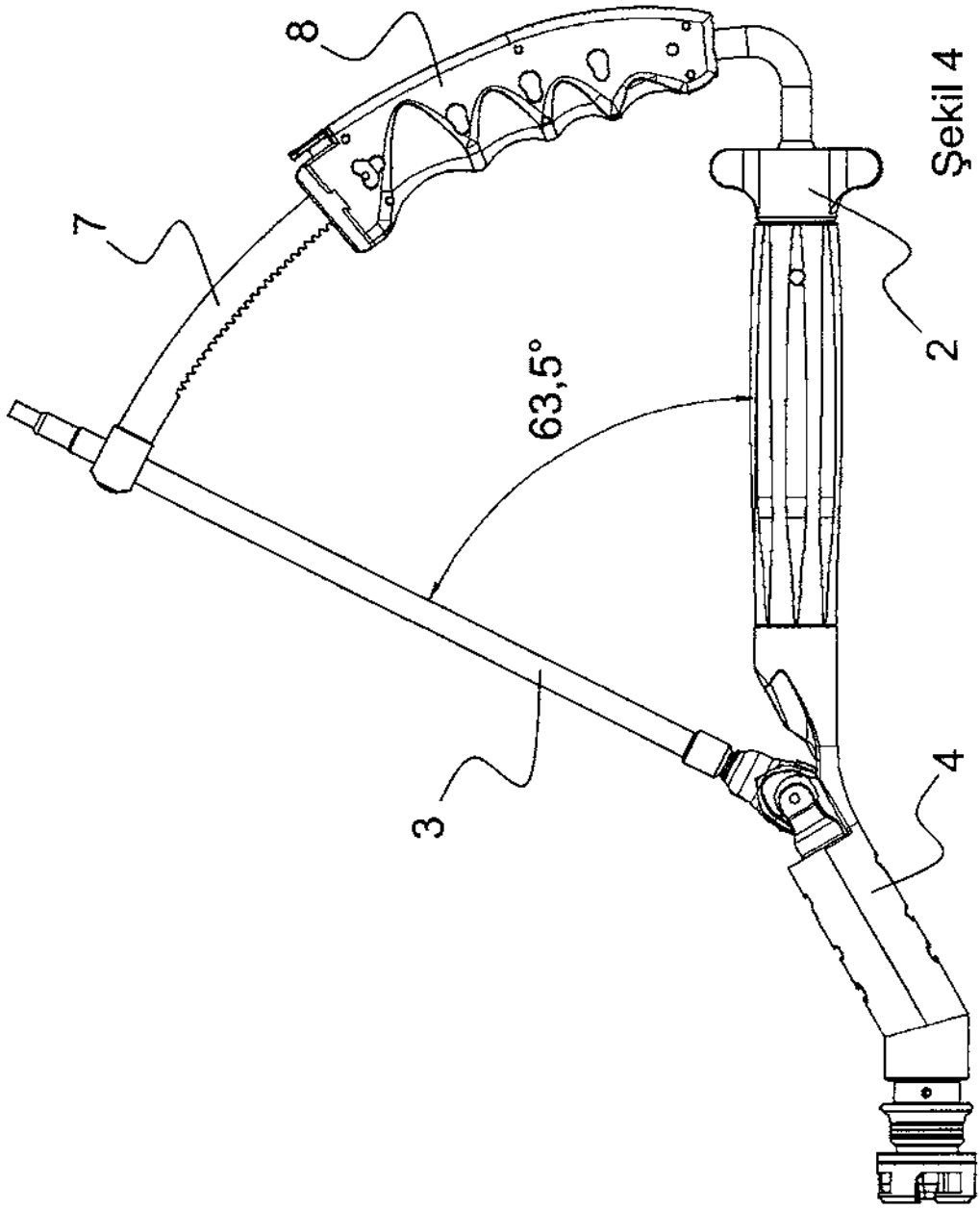
7. İstem 6'ya uygun bir rende kolu olup, bahsedilen radyuslu ayar kolunun (7) istenilen konumda sabitlemesini sağlayan bir radyüslü ayar kolu kilidi (12) içermesiyle karakterize edilmektedir.
- 5 8. İstem 7'ye uygun bir rende kolu olup, bahsedilen radyuslu ayar kolu kilidinin (12) bahsedilen tutma kolu (8) üzerinde konumlu olması ile karakterize edilmektedir
9. İstem 1, 4 veya 6'ya uygun bir rende kolu olup, motor bağlantı milinin (3) yaptığı açılanmanın, aletin gövde eksenine göre yatay düzlemde  $29^\circ$  ile  $67^\circ$ , düşey düzlemde ise 10  $29^\circ$  ile  $81^\circ$  arasında açı olması, bahsedilen tutma kolu (8) kullanılması durumunda üst limitin yatay ve düşey düzlemde  $43^\circ$  olması ve radyuslu ayar kolu (7) kullanılması durumunda yatay düzlemdeki üst limitin  $53,5^\circ$  ve düşey düzlemdeki üst limitin  $63,5^\circ$  olması ile karakterize edilmektedir.
- 15 10. İstem 1'e uygun bir rende kolu olup, farklı motorlar ile bağlantıyı sağlamak üzere, motor bağlantı miline (3) monte edilen motor adaptorleri (6) içermesiyle karakterize edilmektedir.
11. İstem 3 veya 4'e uygun bir rende kolu olup, bahsedilen sabit aktarma elemanı (4) ve/veya bahsedilen tutma kolu (8) üzerinde oluşturulan kanal (10) içermesiyle karakterize 20 edilmektedir.
12. İstem 5'e uygun bir rende kolu olup, bahsedilen tutma kolu sabitleme mafsalinın (2), bahsedilen sap (9) üzerinde konumlu olması ile karakterize edilmektedir.



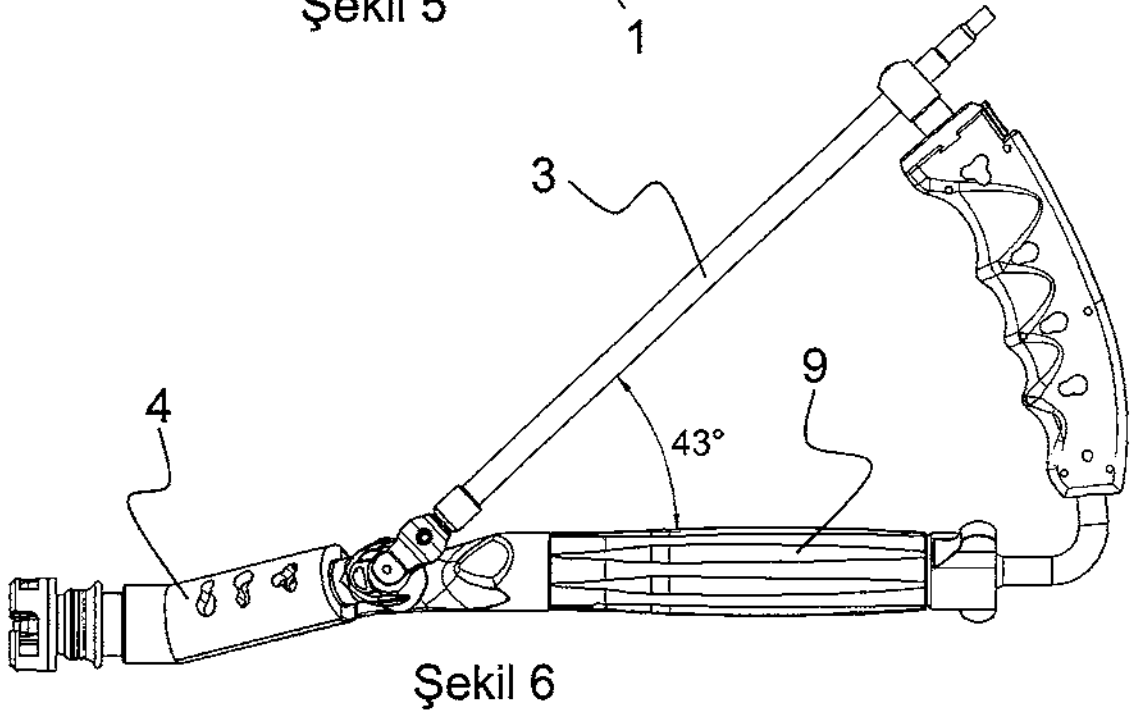
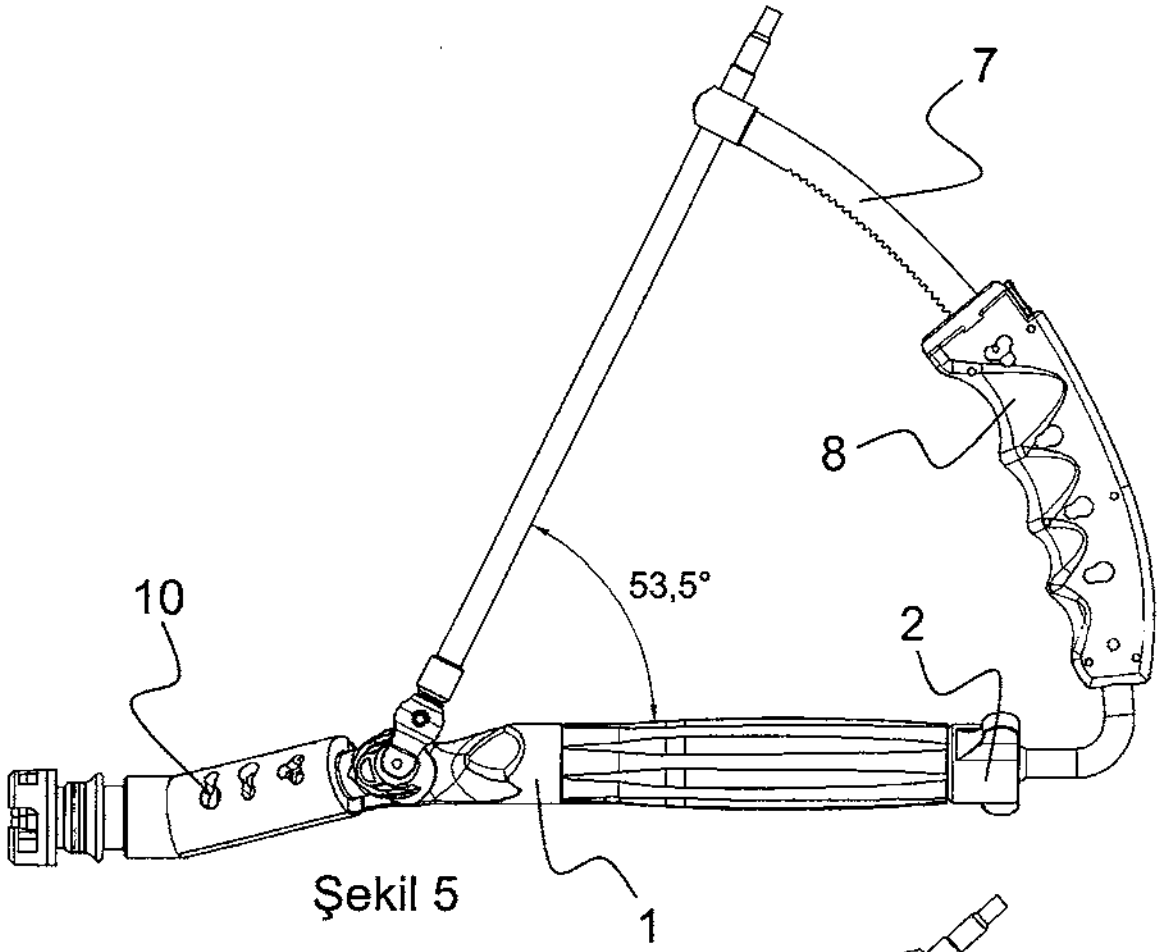
Şekil 1

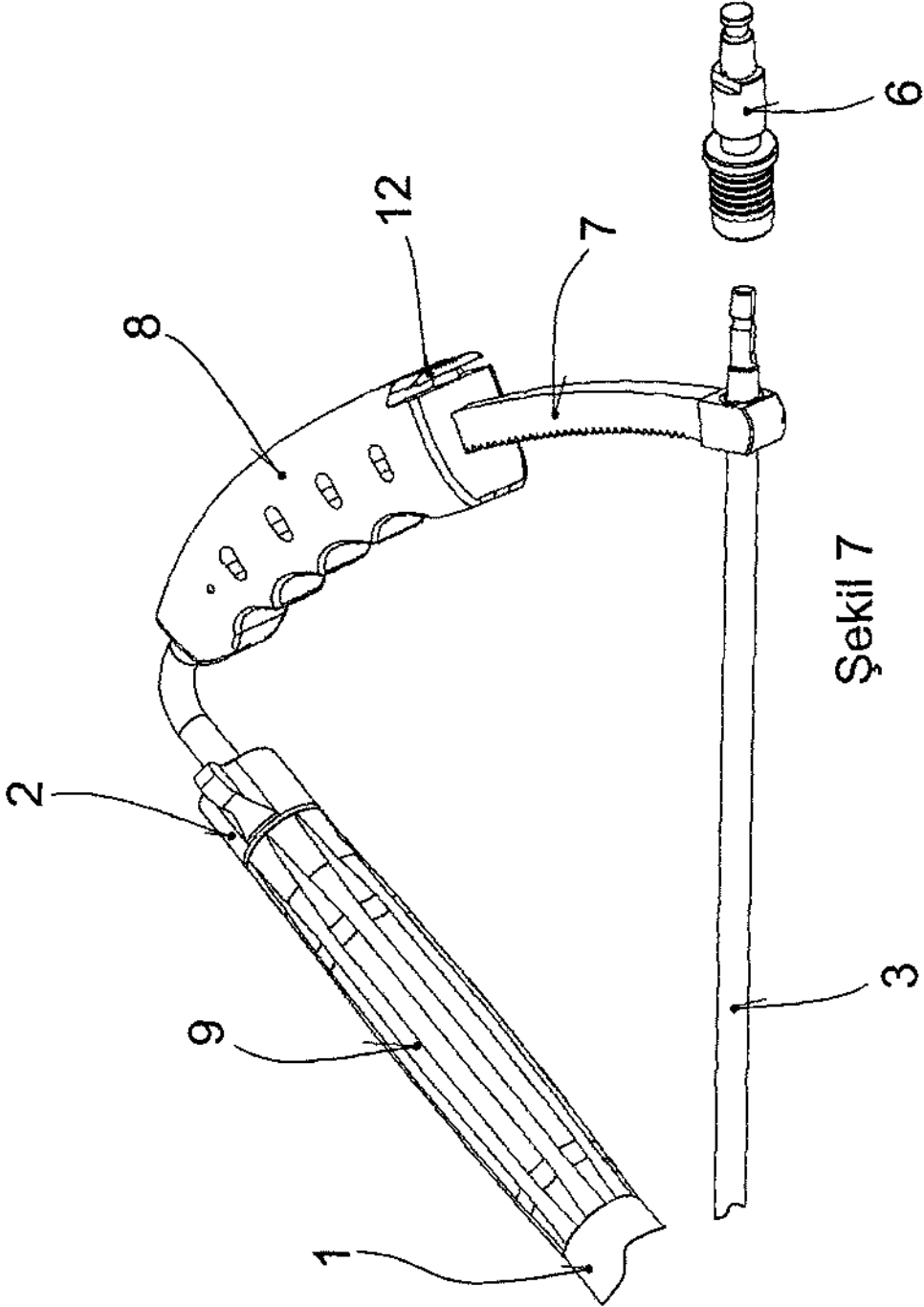
2/5





4/5





Şekil 7

Başvuru Sahibi <b>SAYAN TIBBİ ALETLER PAZARLAMA SANAYİ VE TİCARET LİMİTED ŞİRKETİ</b>		
Başvuru No <b>2012/01556</b>	Başvuru Tarihi <b>13/02/2012</b>	(İlk) Ruçhan Tarihi -
Patent Sınıfı (IPC <sup>9</sup> ) <b>A61B 17/16 (2009.01)</b>		
<b>GENEL GÖZLEMLER</b>		
<b>Buluş Bütünlüğü</b>		
<input checked="" type="checkbox"/> Var (başvuru sadece bir buluş konusunu içermektedir)		
<input type="checkbox"/> Yok (başvuru birden çok buluş konusunu içermektedir) (Bakınız Bölüm III)		
<b>Tarifname Takımı</b>		
<input checked="" type="checkbox"/> Rapor aşağıda belirtilen tarifname takımı esas alınarak düzenlenmiştir		
Tarifname 5 sayfa (orijinal)		
İstem 12 adet (orijinal)		
Resim 5 sayfa (orijinal)		
<b>Açıklık</b>		
<input checked="" type="checkbox"/> Tüm istemler araştırılabilir niteliktedir		
<input type="checkbox"/> nolu istemler araştırılabilir nitelikte değildir (Bakınız Bölüm IV)		
<input type="checkbox"/> Başvuruyla ilgili diğer görüşler (Bakınız Bölüm II)		
Raporun Tamamlandığı Tarih <b>25/11/2013</b>		
Türk Patent Enstitüsü - Patent Dairesi Başkanlığı Hipodrom Cad. No 115 06330 Yenimahalle/ANKARA Tel (312) 303 1182 Faks (312) 303 1220	Araştırmayı Yapan Uzman  <b>Ali Bülent DALOĞLU</b>	

Başvuru Numarası:

**2012/01556****A. BULUŞUN PATENT SINIFI (IPC<sup>B</sup>)****A61B 17/16 (2009.01)****B. ARAŞTIRILAN ALANLAR****A61B 17/00**

**Araştırma esnasında kullanılan elektronik veritabanları ve -uygun olduğu durumlarda- kullanılan bazı anahtar kelimeler**

EPODOC, WPI, EPOQUE İngilizce ve Almanca Tam-metin Veritabanları (TXTE, TXTDE), TPE Patent Veritabanı, Espacenet,

*"reamer, handle, reaming, pelvis, hipbone, bone, acetabulum, minimal, invasive, ortopedic, surgery, surgical, operation, antrum, cavitate, planer, shave, mounting, rod, connecting, mini kesi, ortopedi, ameliyat, cerrahi, leğen kemiği, asetabulumu, oymak, ründe, kol, bağlantı parçası"* ve bunların uygun kombinasyonları

**C. İLGİLİ DOKÜMANLAR**

Kategori	Dokümanlar	İlgili Olduğu İstem
X	<b>EP1442729 A1</b> (Adjustable reamer with tip tracker linkage) 04 Ağustos 2004 (04 08 2004) Özet, Teknik resimler Tanıfname özellikle paragraf 16, 18, 22	1 - 6 , 9 - 12
A	<b>US2007293869 A1</b> (Curved acetabular positioner, impactor and reamer handle) 20 Aralık 2007 (20 12 2007) Teknik resimler, 26-29 Tanıfname özellikle paragraf 88,89	1
A	<b>US2005038443 A1</b> (Surgical tools for joint replacement) 17 Şubat 2005 (17 02 2005) Teknik resimler 3-5 Tanıfname özellikle paragraf 23-28, 40	1
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 İlgili Dokümanlar sonraki sayfadan devam etmektedir

 Patent Ailesi Uyeleri ekine bakınız
**Kategorilerin Açıklaması**

"X"	Buluşun yeni olmadığını veya buluş basamağı içermediğini tek başına gösteren doküman	"E"	Başvuru tarihinde veya başvuru tarihinden sonra yayımlanan doküman
"Y"	Buluşun buluş basamağı içermediğini başka bir dokümanla bir araya getirildiğinde gösteren doküman	"T"	Buluşun altında yatan ilke veya teoriyi anlamak için belirtilen doküman
"A"	Tekniğin bilinen durumunu belirten ama buluşla tam olarak ilgili olmayan doküman	"L"	Başka nedenlerle belirtilen doküman
"O"	Yazılı olmayan açıklama	"D"	Başvuruda belirtilen doküman
"P"	Başvuru tarihi ile ruhan tarihi arasında yayımlanan doküman	"&"	Aynı patent ailesinin dokümanı

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**Hedley et al.** (43) **Pub. Date: Feb. 17, 2005**

(54) **SURGICAL TOOLS FOR JOINT REPLACEMENT**

**Publication Classification**

(76) **Inventors** **Anthony K. Hedley, Phoenix, AZ (US), Michael Howard, Prescott, AZ (US), Henry H. Fletcher, Cameron Park, CA (US)**

(51) **Int. Cl.<sup>7</sup>** **A61F 5/04, A61B 17/56, A61F 2/32, A61B 17/58, A61B 17/60**  
 (52) **U.S. Cl.** **606/91, 606/86, 606/53**

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(57) **ABSTRACT**

Described are surgical tools, including tool drivers and implantation instruments, that provide improved visual and positional access to human acetabulum. Some embodiments include a conduit with multiple bends to circumvent soft tissue surrounding the acetabulum. The conduits may employ a number of interlocking, rotational links to transfer torque from a drive end of the tool to a bit end. In one embodiment the bit end supports an attachment actuator that securely engages a conventional acetabular cup for insertion and placement. The attachment actuator can release the cup without moving the body of the tool, which prevents accidental dislodging of a properly placed acetabular cup.

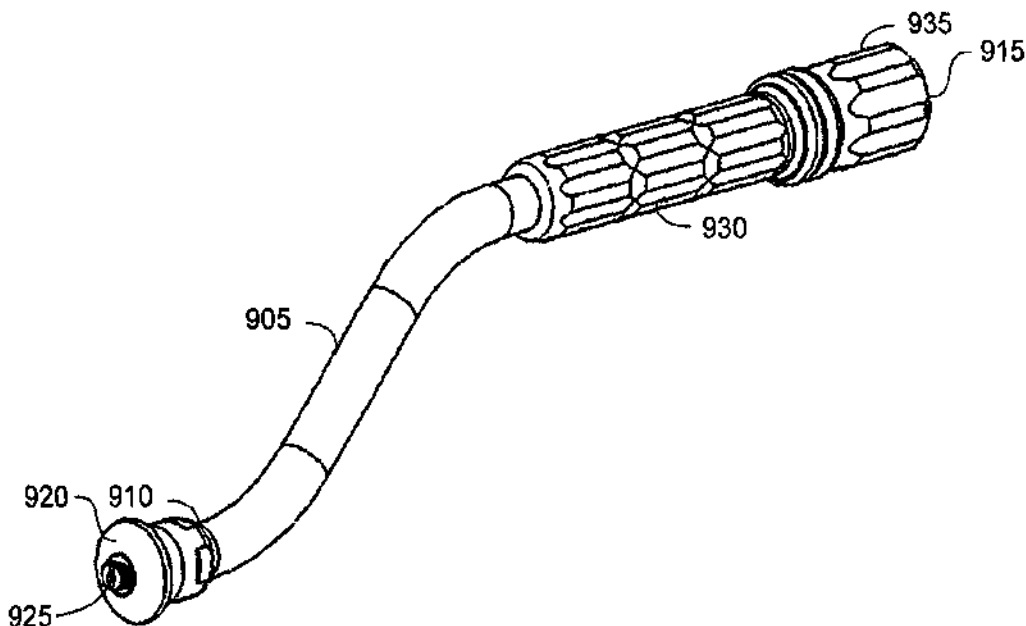
(21) **Appl No** **10/734,330**

(22) **Filed** **Dec. 11, 2003**

**Related U.S. Application Data**

(60) **Provisional application No. 60/432,730, filed on Dec 12, 2002. Provisional application No. 60/432,729, filed on Dec 12, 2002. Provisional application No. 60/474,366, filed on May 30, 2003.**

900



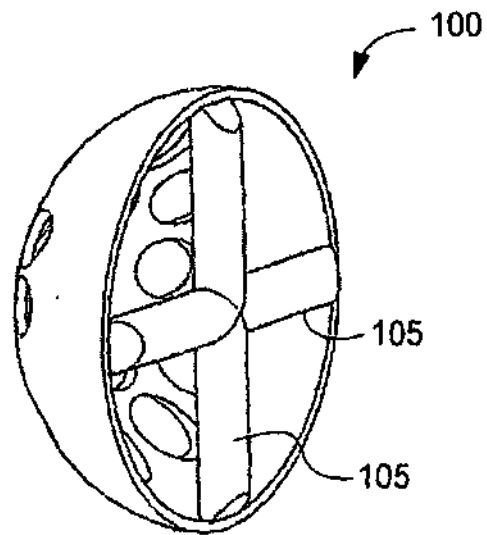


Fig. 1 (PRIOR ART)

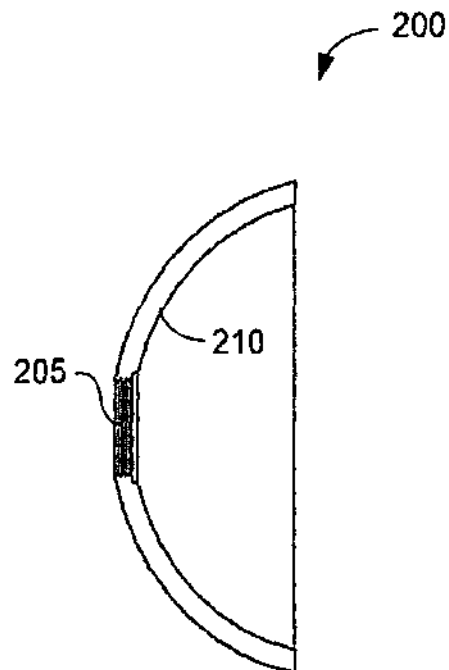


Fig. 2 (PRIOR ART)

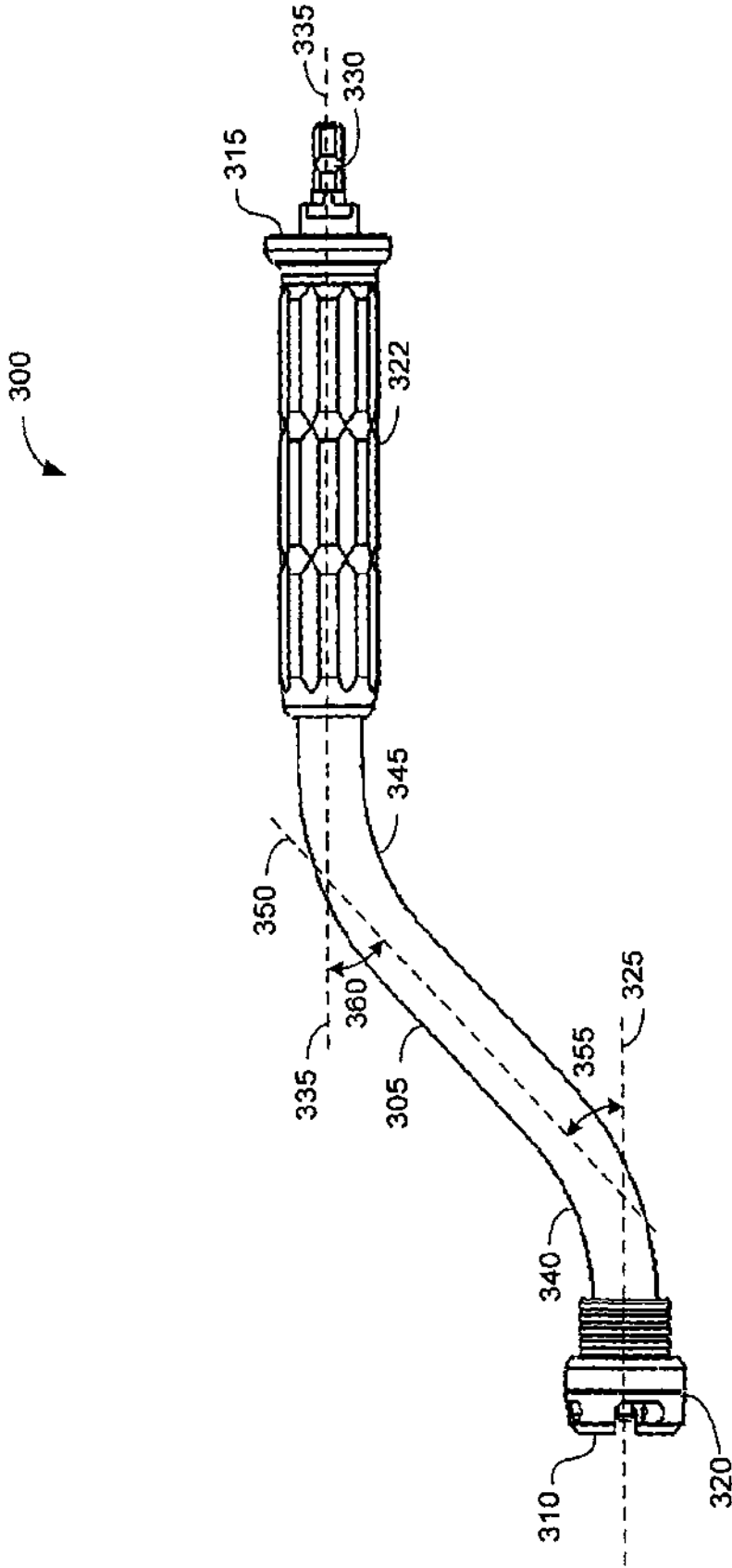


Fig. 3

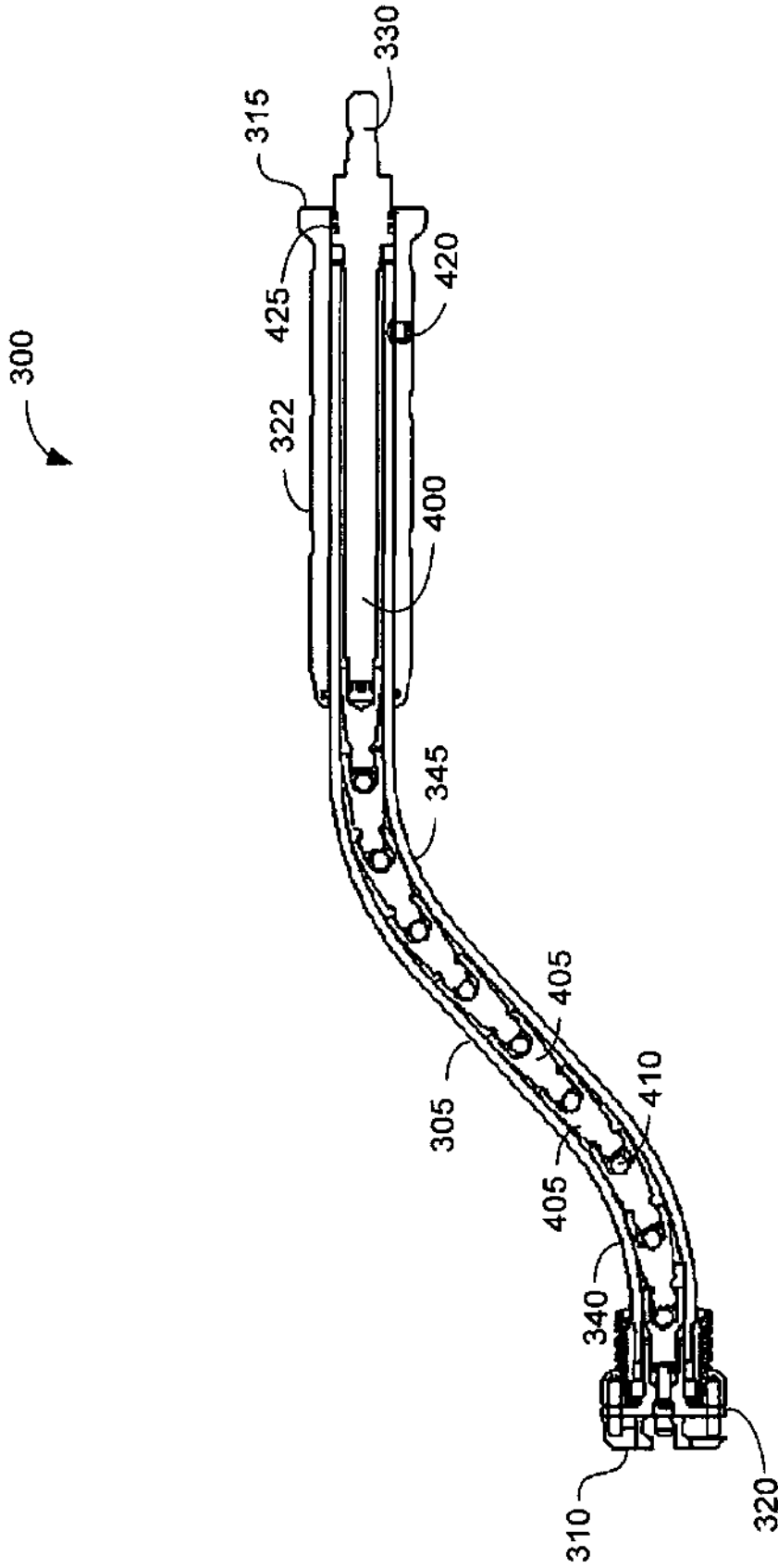


Fig. 4

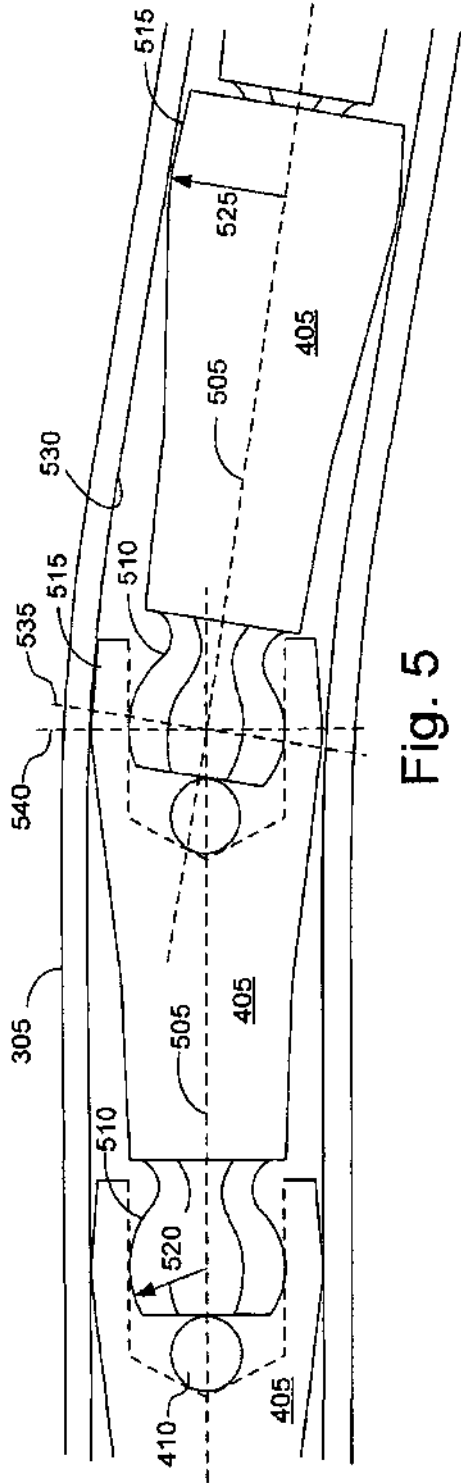


Fig. 5

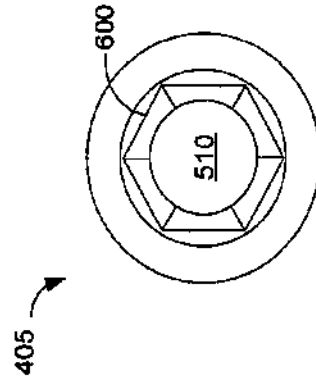


Fig. 6A

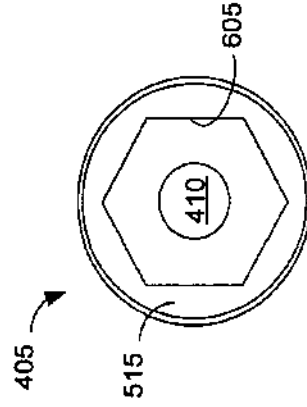


Fig. 6B

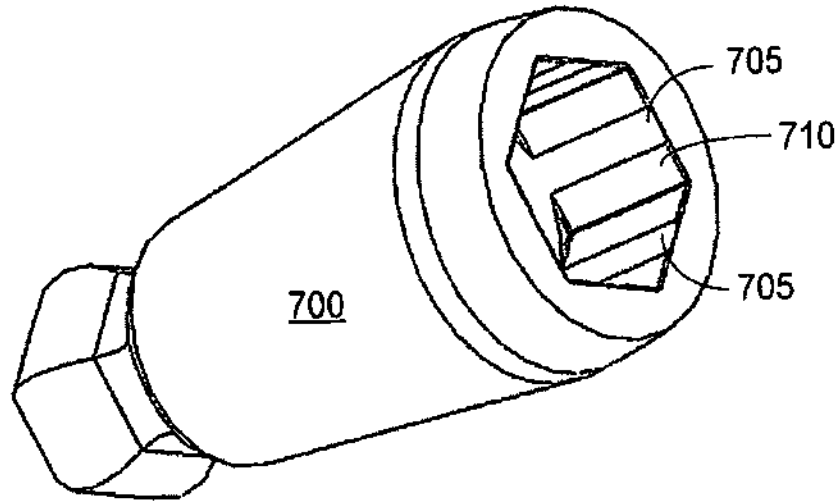


Fig. 7

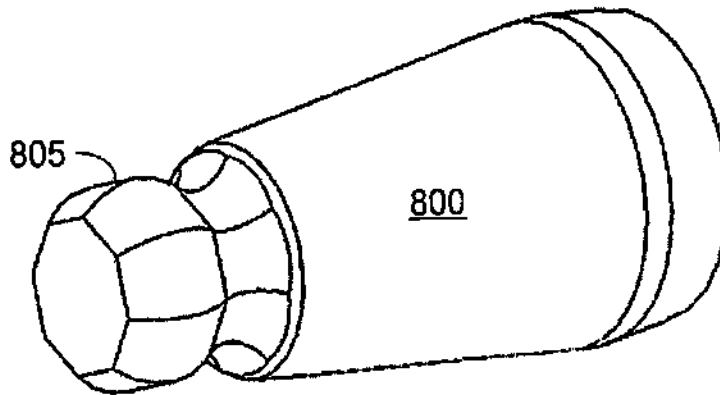


Fig. 8

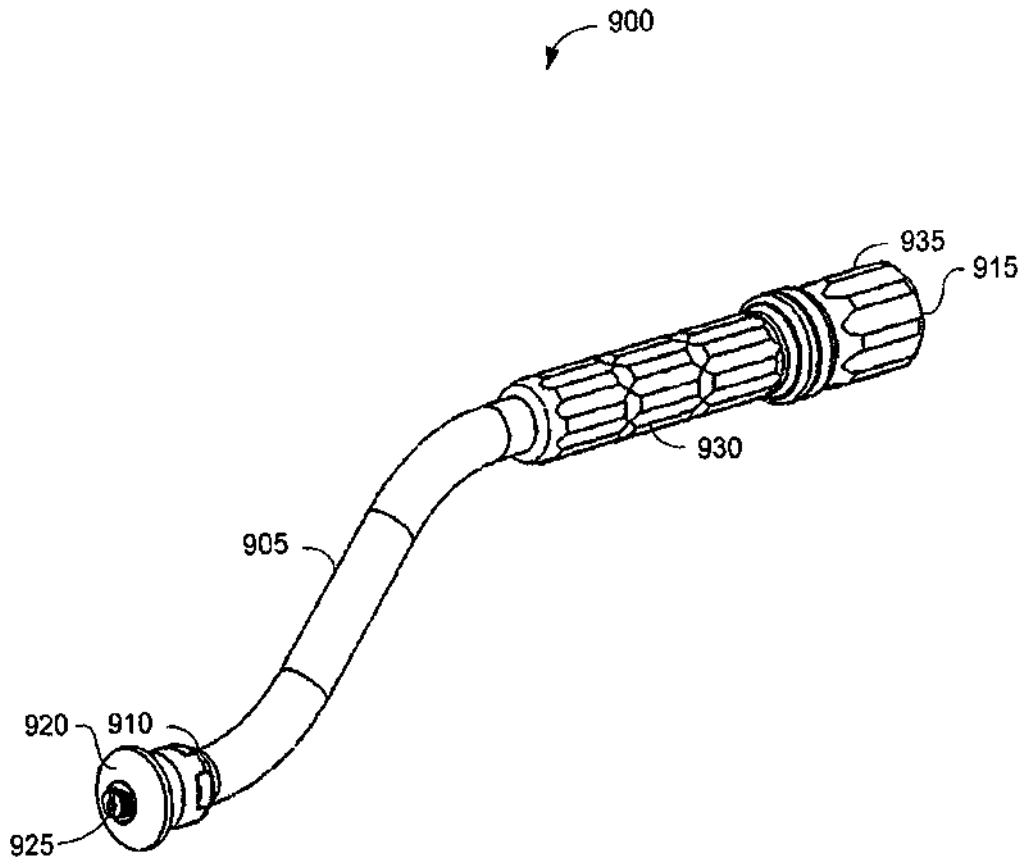


Fig. 9

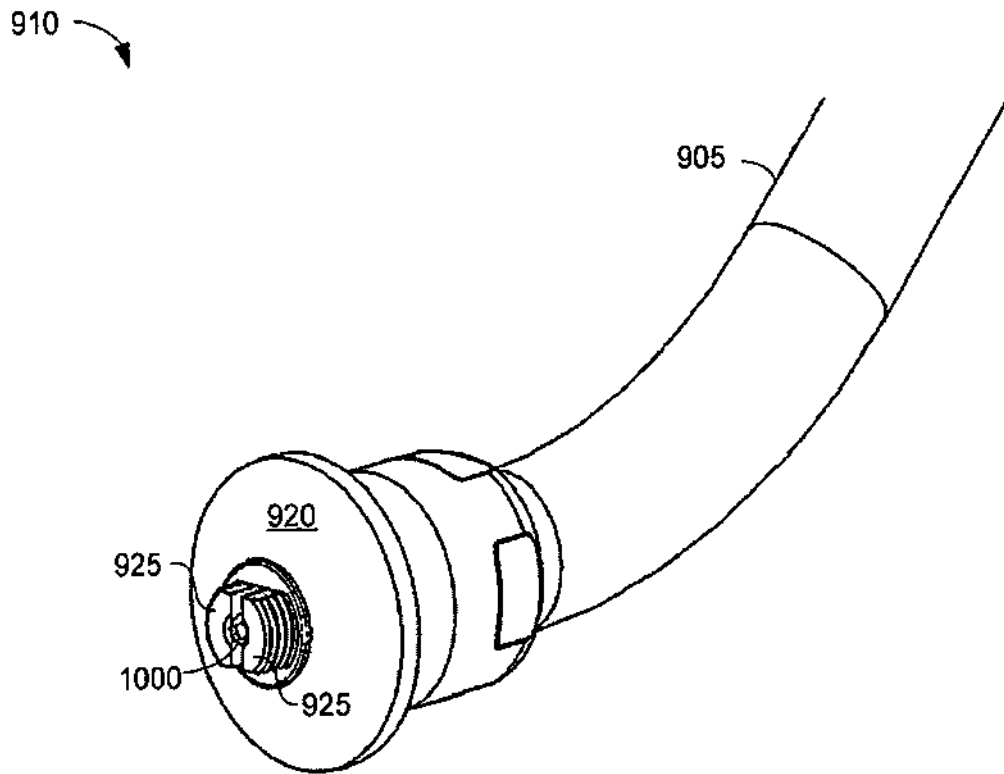


Fig. 10



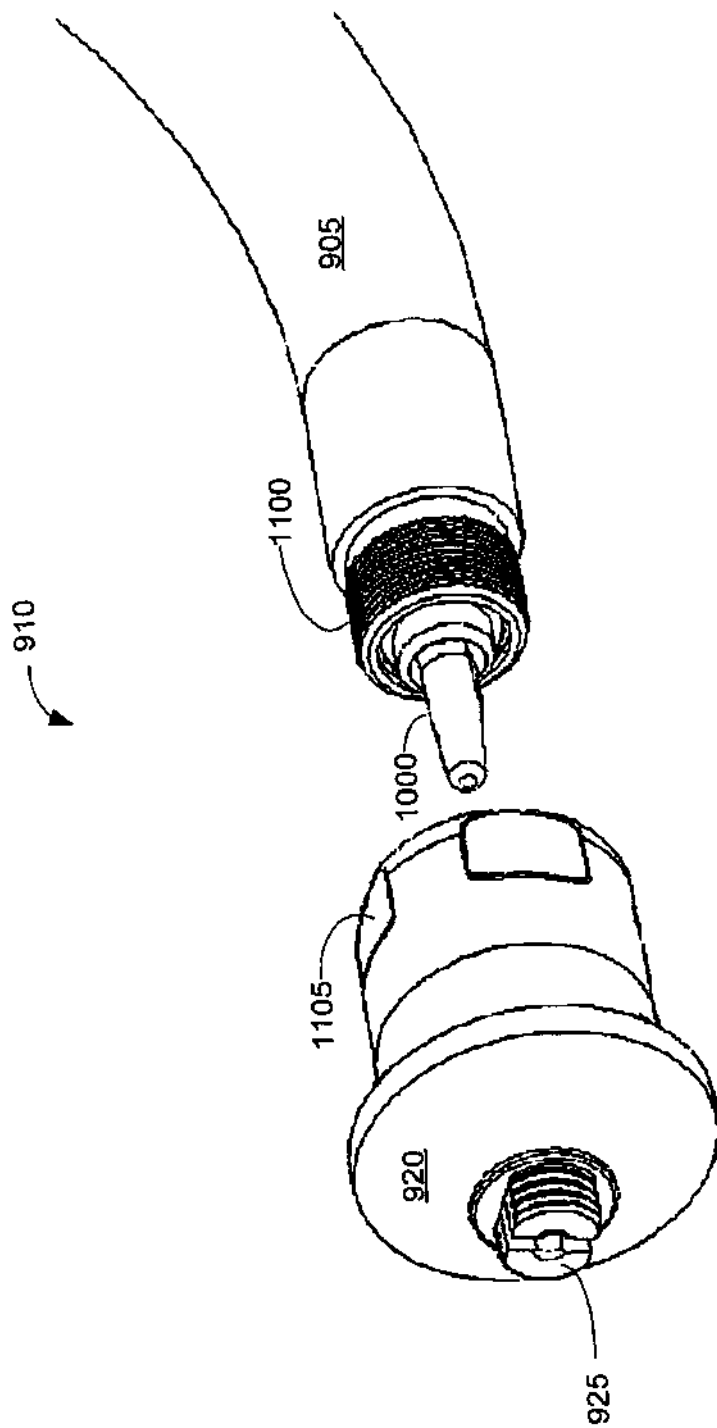


Fig. 11

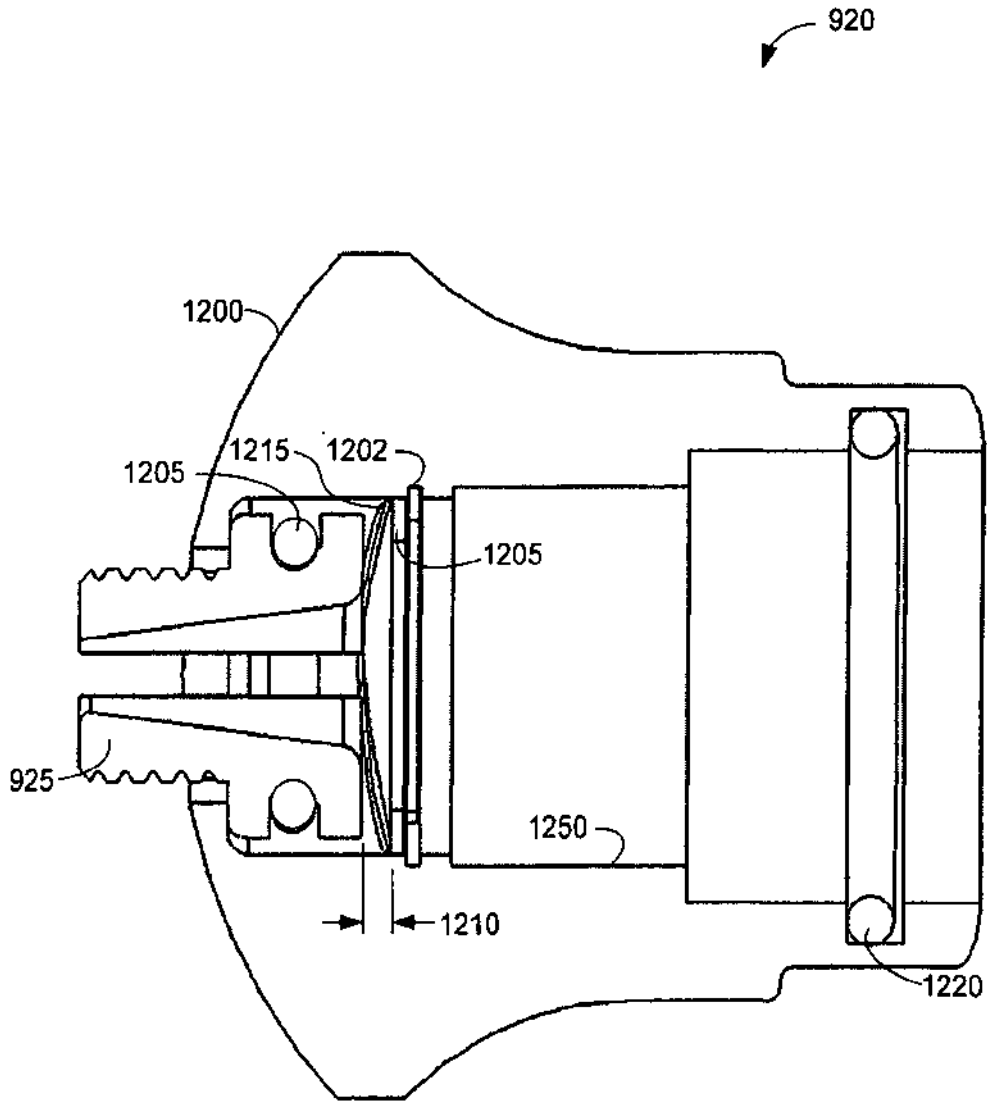


Fig. 12

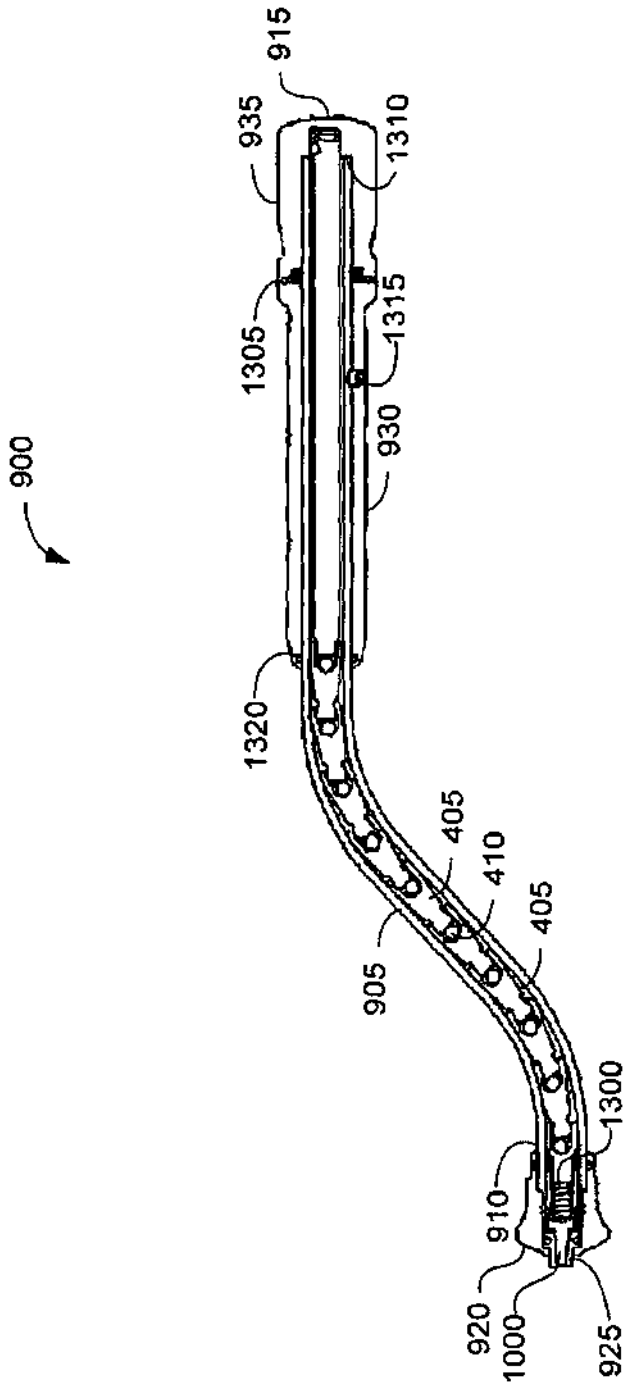


Fig. 13

## SURGICAL TOOLS FOR JOINT REPLACEMENT

### BACKGROUND

[0001] FIG. 1 (prior art) depicts an acetabular reamer cup 100, a type of surgical bit used to cut precisely sized hemispherical cavities in the human acetabulum, a cavity at the base of the hipbone into which fits the ball-shaped head of the femur. Acetabular reamer cups are generally mounted on a tool driver via a pair of cross members 105. The tool driver is in turn mounted in the chuck or collet of a low-speed, high torque portable drill or flexible powered shaft. An embodiment of reamer cup 100 is detailed in U.S. Pat. No. 6,428,543, which is incorporated herein by reference.

[0002] FIG. 2 (prior art) is a cross section of a joint-replacement cup 200, in this example an acetabular cup, for implanting into a hemispherical cavity formed using reamer cup 100. Acetabular cup 200 becomes part of an artificial hip joint. A threaded hole 205 firmly secures the concave inner surface 210 of cup 200 against an implantation instrument (not shown) used to insert and position cup 200 into the associated cavity.

[0003] Soft tissue surrounds the acetabulum, and interferes with tool drivers and implantation instruments. This problem is exacerbated in larger patients, who disproportionately require hip-replacement surgery. There is therefore a need for tool drivers and implantation instruments that provide improved access to the acetabulum.

[0004] For detailed discussions of hip replacement, including tool drivers and implantation instruments, see U.S. Pat. Nos. 5,320,625, 6,428,543, and 5,817,096, which are incorporated herein by reference.

### SUMMARY

[0005] The present invention is directed to surgical tools, including tool drivers and implantation instruments, that provide improved visual and positional access during joint-replacement surgery. Tool drivers and implantation instruments in some embodiments include multiple bends to circumvent soft tissue surrounding the acetabulum. The tool and drive ends may extend along parallel axes so tool operators enjoy a correct sense of reamer or cup placement.

[0006] Tool drivers with one or more bends provide improved access, but the bends complicate the task of transmitting high torque from the drive end to the tool end. Some embodiments address this problem using a drive mechanism made up of a number of interlocking, rotational links.

[0007] A hip-replacement tool in accordance with another embodiment supports an attachment actuator that securely engages a conventional acetabular cup for insertion and placement. The attachment actuator supports an attach state and a release state. In the attach state, threaded jaws in the attachment actuator expand into a hole in the acetabular cup. In the release state, the threaded jaws contract to disengage the cup without rotating with respect to the cup. Users can control the states of the attachment actuator without moving the body of the tool, so tool operators can detach the tool from the implanted cup without accidentally dislodging or misaligning the cup.

[0008] This summary does not limit the invention, which is instead defined by the claims.

### BRIEF DESCRIPTION OF THE FIGURES

[0009] FIG. 1 (prior art) depicts an acetabular reamer cup 100, a type of surgical bit used to cut precisely sized hemispherical cavities in the human acetabulum.

[0010] FIG. 2 (prior art) is a cross section of an acetabular cup 200 for implanting into the hemispherical cavities formed using reamer cup 100.

[0011] FIG. 3 is a side view of a hip-replacement tool 300 in accordance with one embodiment.

[0012] FIG. 4 depicts an embodiment of tool 300 of FIG. 3 in cross section, with like-numbered elements being the same as those of FIG. 3.

[0013] FIG. 5 depicts a portion of conduit 305 in cross section, detailing a number of interlocking rotational links 405.

[0014] FIG. 6A depicts link 405 from a perspective facing male end 510.

[0015] FIG. 6B depicts a link 405 from a perspective facing female end 515.

[0016] FIG. 7 depicts a link 700 in accordance with another embodiment.

[0017] FIG. 8 depicts a link 800 in accordance with another embodiment.

[0018] FIG. 9 depicts a hip-replacement tool 900 in accordance with an embodiment used for implanting and positioning an acetabular cup, such as cup 200 of FIG. 2.

[0019] FIG. 10 depicts bit end 910 of tool 900 in more detail for ease of illustration.

[0020] FIG. 11 depicts end 910 of tool 900 with cup attachment 920 removed from conduit 905 to better illustrate actuator 1000.

[0021] FIG. 12 is a cross-section of cup attachment 920 in accordance with one embodiment.

[0022] FIG. 13 depicts an embodiment of tool 900 of FIG. 9 in cross section.

### DETAILED DESCRIPTION

[0023] FIG. 3 is a side view of a surgical tool 300 in accordance with one embodiment. Tool 300, a hip-replacement tool in this example, includes a conduit 305 extending between a bit end 310 and a drive end 315. Bit end 310 supports a head 320 that rotates with respect to conduit 305 on a first axis 325. Drive end 315 includes a handle 322. A shaft end 330 adapted to mate with a drill collet extends from drive end 315, and rotates on a second axis 335. In one embodiment, a flexible shaft extends through conduit 305 from shaft end 330 to head 320, so rotating shaft end 330 similarly rotates head 320. Head 320 mates with an acetabular reamer cup similar to cup 100 of FIG. 1, and is, in this embodiment, of a type described in U.S. Pat. Nos. 6,540,739 and 6,506,000, both of which are incorporated herein by reference.

[0024] Conduit 305 includes a pair of bends 340 and 345, so a portion of conduit 305 extends along a third axis 350 at an angle 355 with respect to first rotational axis 325 and an angle 360 with respect to second rotational axis 335. Angles 355 and 360 are equal in the depicted embodiment, though this need not be the case. The double bend of tool 300 avoids soft tissue for improved visibility and positional accuracy, but still provides a straight-line approach to tool placement. In embodiments in which rotational axes 325 and 335 are parallel, the operator enjoys a correct sense of the position of bit end 310 even when blood and tissue obstruct direct viewing.

[0025] The inclusion of bends 340 and 345 facilitates ease of access, but renders difficult the task of transmitting high torque through conduit 305. Some embodiments employ a flexible shaft to convey torque from shaft end 330 to head 320, but such embodiments sometimes suffer gripping and vibration when actuating an acetabular reamer cup against hard or uneven bone surfaces.

[0026] FIG. 4 depicts an embodiment of tool 300 of FIG. 3 in cross section, with like-numbered elements being the same as those of FIG. 3. (In general, this document uses a numbering convention in which the leading digit or digits identifies the figure in which the element was introduced.) Rotating head 320 connects to shaft end 330 via a drive shaft 400 and a number of interlocking rotational links 405. Bushings 410 are disposed between adjacent links 405. The embodiment of FIG. 4 has been found to transfer torque more evenly than flexible shafts.

[0027] FIG. 5 depicts a portion of conduit 305 in cross section, detailing a number of interlocking rotational links 405. Each link 405 is symmetrical about a respective link access 505, and includes a male end 510 and a female end 515. Male end 510 has a radius of curvature 520 that allows each link 405 to pivot in a plane parallel to link axes 505 within female end 515 in an adjacent link 405. The exterior surface of each link 405 includes a radius of curvature 525 that allows the female end of each link 405 to pivot in a plane parallel to link axes 505 and freely against the interior wall 530 of conduit 305.

[0028] Referring to the interconnection of the two full links of FIG. 5, a dashed line 535 extends through the pivotal axis of male end 510 and a dashed line 540 extends through the pivotal axis of female end 515. The intervening bushing 410 maintains the intersection of the two pivotal axes over a range of angles. In other words, the pivotal axes of the male and female ends remain substantially coaxial when the rotational axes 505 of adjacent links 405 are misaligned. This link arrangement prevents links 405 from binding against one another and against interior wall 530 when transmitting torque around beads in conduit 305.

[0029] FIG. 6A depicts link 405 from a perspective facing male end 510. In this embodiment, link 405 includes six exterior facets 600, though other shapes might be used. FIG. 6B depicts a link 405 from a perspective facing female end 515. Female end 515 includes six interior facets 605 that mate with the exterior facets 600 of an adjacent link 405.

[0030] In one embodiment, conduit 305 is a 416 stainless-steel pipe with an inside diameter of about 0.410 inches and an outside diameter of about 0.625 inches. Each of bends 340 and 345 is about forty five degrees, with a bend radius

of about 2.18 inches. In one embodiment, conduit 305 is formed by drilling out a 416 stainless-steel rod, forming bends 340 and 345, forcing appropriately sized spheres through the resulting channel to restore the inside diameter within curves 340 and 345 using a hydraulic press, and hardening the resulting conduit. The hardened 416 stainless steel advantageously provides an excellent bearing surface for links 410. Links 410 are, in one embodiment, machined from 440-C stainless steel.

[0031] FIG. 7 depicts a link 700 in accordance with another embodiment. Link 700 is similar to links 410 of FIG. 4, but includes a lubrication channel 705 in one or more of interior facets 710. In one embodiment, lubrication channels 705 are formed by first pre-drilling the female end of link 700 to include round hole slightly larger in diameter than the short dimension of the hexagonal hole to be formed in the female end. The corners of the hexagon are then formed either by stamping the hole with a hexagonal die and removing the resulting chips or using a conventional wobbling broach technique.

[0032] FIG. 8 depicts a link 800 in accordance with another embodiment. Link 800 is similar to link 700 of FIG. 7, but includes 8 exterior facets 805 and eight interior facets (not shown).

[0033] FIG. 9 depicts a surgical tool 900 in accordance with an embodiment used for implanting and positioning a cup, such as acetabular cup 200 of FIG. 2. Tool 900 includes a conduit 905 extending between a bit end 910 and a handle end 915. Bit end 910 supports a cup attachment 920 through which protrudes a pair of jaws 925 adapted to extend into and engage with hole 205 of cup 200 (FIG. 2). As detailed below, jaws 925 are parts of an attachment actuator that supports an attach state and a release state: the attach state secures tool 900 to acetabular cup 200 and the release state releases cup 200. A user controls the states of the attachment actuator by grasping a knurled handle 930 and rotating a knob 935 on drive end 915. Tool 900 can release cup 200 while holding conduit 905 and handle 930 still, which prevents accidental dislodging of a properly placed cup 200. As in tool 300 of FIG. 3, the inclusion of two bends in tool 900 provides improved visual and surgical access, particularly for relatively large patients.

[0034] FIG. 10 depicts bit end 910 of tool 900 in more detail for ease of illustration. An actuator 1000 extends between jaws 925. Rotating knob 935 clockwise with respect to handle 930 extends actuator 1000 outward, spreading jaws 925, conversely, rotating knob 935 counter-clockwise withdraws actuator 1000, allowing jaws 925 to close.

[0035] Jaws 925 each include thread portions 1005 sized to engage the female threads of hole 205 in cup 200. Cup 200 can thus be mounted on cup attachment 920 either rotationally (taking advantage of thread portions 1005) or by extending jaws 925 through hole 205 in the release state and turning knob 935 to spread jaws 925 to engage threaded portions 1005. Tool 900 can then be used to position, implant, and adjust cup 200.

[0036] Once cup 200 is properly placed, tool 900 can easily release cup 200 without disturbing the position of cup 200. Rotating knob 935 counter-clockwise withdraws actuator 1000, allowing jaws 935 to close and release cup 200.

The ability of tool 900 to maintain a secure hold on cup 200 is important, as positioning and implanting cup 200 can require considerable force, possibly even hammer blows on knob 935. The ability of tool 900 to gently release cup 200 is also important, as cup 200, once properly positioned, should not be disturbed. Conventional tools that rely upon a rotational connection to threads 205 sometimes cross thread, rendering removal difficult and posing a danger of cup displacement.

[0037] FIG. 11 depicts end 910 of tool 900 with cup attachment 920 removed from conduit 905 to better illustrate actuator 1000. Cup attachment 920 mates with threads 1100 on conduit 905, and includes facets 1105 for accepting a suitable wrench.

[0038] Actuator 1000 moves in and out of conduit 905 with rotation of knob 935. Actuator 1000 mates with interior threads (not shown) within conduit 905. In one embodiment, the threads on actuator 1000 and the corresponding threads 905 are so-called double threads. Instead of a single helical land, as in most conventional threads, double threads have two interlaced helical lands, rather like the stripes of a barber pole. Double threads advance a mating threaded component twice as far in one turn as a single thread.

[0039] FIG. 12 is a cross-section of cup attachment 920 in accordance with one embodiment. Jaws 925 extend out through the face 1200 of cup attachment 920 and are held in place by a retaining ring 1202, a washer 1205, and a spring 1215 (spring 1215 is a Belleville washer in one embodiment). An O-ring 1220 urges jaws 925 against actuator 1000 (FIG. 10) so that jaws 925 close as actuator 1000 is withdrawn. Spring 1215 forces jaws 925 out through face 1200 of cup attachment 920. A gap 1210 between jaws 925 and washer 1205 prevents jaws 925 from taking the force of hammer blows by allowing jaws 925 to recede into cup attachment 920 until face 1200 engages the interior surface of cup 200. Face 1200, and not the more fragile jaws 925 and associated drive mechanism, thus absorbs the impact. A second O-ring 1220 prevents blood and debris from entering cup attachment 920 between attachment 920 and conduit 905. Though not shown here, attachment 920 includes female threads on an inside surface 1250 that mate with threads 1100 on the outside of conduit 905 (FIG. 11).

[0040] FIG. 13 depicts an embodiment of tool 900 of FIG. 9 in cross section. Various drive mechanisms can be used to force jaws 925 apart or allow jaws 925 to close. In this embodiment, however, a number of links 405 and bushings 410 of the type described above in connection with FIG. 4 transfer rotational motion of knob 935 to a threaded portion 1300 of actuator 1000. An O-ring 1305 seals knob 935 against handle 930 while allowing for relative rotation. Knob 935 includes a shoulder 1310 that rests against conduit 905. The force of blows applied to knob 935 is thus transmitted to cup attachment 920 via conduit 905, and not via the more sensitive drive mechanism. A set screw 1315 secures handle 930 to conduit 905, and an O-ring 1320 precludes blood and debris from collecting between handle 930 and conduit 905.

[0041] While the present invention has been described in connection with specific embodiments, variations of these embodiments will be obvious to those of ordinary skill in the art. For example

[0042] a. Hip-replacement tool 900 of FIG. 9 need not have split threads, as shown, but might also

include a more traditional rotating thread actuated using the disclosed link system or some other flexible means for providing torque through the channel,

[0043] b. Conduits in accordance with some embodiments are flexible to allow the bends to be adjusted over a range of angles. A series of rotational links might be installed, for example, within flexible conduits of the type available from e.g. Lockwood Products, Inc., under the trademark LOC-LINE.

[0044] c. The medical tools described above in the context of hip replacement can be used to advantage in other surgical procedures.

[0045] d. Veterinary joint replacement surgery will benefit from the tools described herein.

[0046] e. The link systems described herein have broad application outside the medical field.

[0047] f. Some embodiments can be modified to include a motor to provide the driving force.

[0048] Therefore, the spirit and scope of the appended claims should not be limited to the foregoing description.

1. A surgical tool for manipulating a joint-replacement cup, the tool comprising

a. a conduit having a head end and a drive end, wherein the head end is adapted to removably attach to the cup, and

b. a drive mechanism extending between the head end and the drive end, the drive mechanism rotating on a first axis at the head end and on a second axis on the drive end;

c. wherein at least a portion of the drive mechanism rotates on a third axis at a first angle with respect to the first axis and a second angle with respect to the second axis.

2. The surgical tool of claim 1, wherein the first and second angles are substantially equal.

3. The surgical tool of claim 2, wherein the first and second axes are substantially parallel.

4. The surgical tool of claim 1, wherein the cup comprises an acetabular reamer.

5. The surgical tool of claim 1, further comprising a plurality of interlocking links extending through the conduit.

6. The surgical tool of claim 1, wherein each of the links includes a male end and a female end.

7. The surgical tool of claim 6, wherein the male end includes a plurality of exterior facets and the female end includes a plurality of interior facets.

8. The surgical tool of claim 7, wherein the exterior facets define a hexagon.

9. The surgical tool of claim 7, wherein each link rotates along a link axis, and wherein the male end has a radius of curvature in a plane parallel to the rotational axis.

10. The surgical tool of claim 9, wherein the female end has a second radius of curvature in the plane.

11. The surgical tool of claim 6, further comprising a bushing disposed within the female end of a first of the links and the male end of a second of the links.

12. The surgical tool of claim 11, wherein the bearing is spherical.

13. The surgical tool of claim 1, wherein the acetabular cup is comprises a reamer surface

14. The surgical tool of claim 1, wherein the head comprises a cup support receiving an acetabular cup

15. A surgical tool for positioning a joint-replacement cup, the joint-replacement cup including a threaded hole, the surgical tool comprising

- a a conduit having a head end and a drive end,
- b a drive mechanism rotatably attached to the drive end of the conduit, the drive mechanism rotating on a first axis, and
- c a head connected to the head end of the conduit, the head including
  - i a cup attachment supporting the cup, and
  - ii a threaded attachment actuator having an attach state and a release state, the attach state securing the cup attachment to the cup and the release state releasing the cup,
  - iii wherein the actuator support transitions between the attach and release states without rotating with respect to the conduit

16. The surgical tool of claim 15, wherein the attachment actuator includes first and second jaws extending into the hole

17. The surgical tool of claim 16, wherein the attachment actuator further includes a wedge extending between the first and second jaws, and wherein the attach state corresponds to a first wedge position and the release state corresponds to a second wedge position

18. The surgical tool of claim 17, wherein the hole comprises female threads, and wherein the first and second jaws include partial threads

19. The surgical tool of claim 18, wherein the partial threads engage the female threads in the first wedge position and disengage the female threads in the second wedge position

20. The surgical tool of claim 15, wherein the conduit includes at least one bend between the head end and the drive end

21. The surgical tool of claim 15, further comprising a plurality of interlocking links extending through the conduit

22. The surgical tool of claim 15, wherein each of the links includes a male end and a female end

23. The surgical tool of claim 22, wherein the male end includes a plurality of exterior facets and the female end includes a plurality of interior facets.

24. The surgical tool of claim 23, wherein the exterior facets define a hexagon

25. The surgical tool of claim 23, wherein each link rotates along a link axis, and wherein the male end has a radius of curvature in a plane parallel to the rotational axis

26. The surgical tool of claim 25, wherein the female end of each link has a second radius of curvature in the plane

27. The surgical tool of claim 26, further comprising a bearing disposed within the female end of a first of the links and the male end of a second of the links

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32 (currently canceled)

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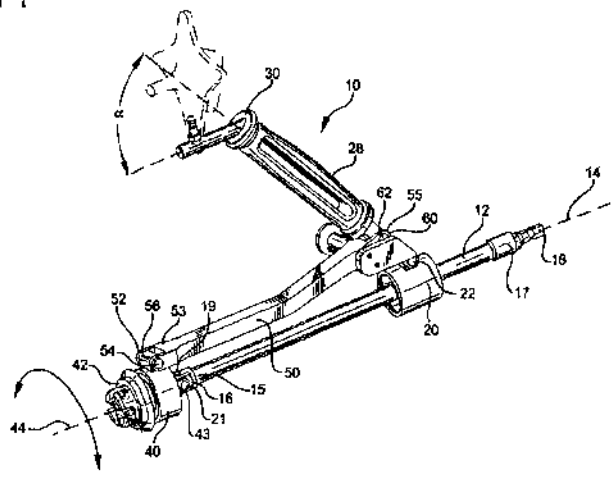
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(54) **Adjustable reamer with tip tracker linkage**

(57) A positioning tool for a joint socket cutting instrument or a implant is designed for use with a minimally invasive surgical procedure and in conjunction with a computer assisted surgical procedure. The positioning tool has a longitudinally extending drive shaft having a moveable joint at a first end and a drive coupling for connecting to a power source at a second end. A holder for mounting a cutting tool such a drill or as an acetabular cutting instrument or for mounting an acetabular implant is coupled to the moveable joint at the first end of the drive shaft for movement with respect to the drive shaft. The holder is rotatable about a central axis thereof when the drive shaft is rotated. The drive shaft

includes a shaft bearing mounted thereon which is pivotally coupled to the shaft at a fixed longitudinal position and is pivotally coupled to a longitudinally extending first arm having a handle. A tracker system which is capable of being utilized by a computer-aided surgical system is mounted on the first arm. A second arm is provided which is pivotally connected to the holder at a first end and pivotally connected to the first arm at a second end. The resulting four bar linkage allows the holder and the cutting instrument/implant to be manipulated in any position while the known geometric relationship between the tracker and the holder allows the location of the holder to be displayed by the computer on a cathode ray tube with respect to a joint.

FIG 1



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**Description****BACKGROUND OF THE INVENTION**

**[0001]** The present invention is directed to the implantation of artificial joint components and in particular to acetabular joint components. More particularly, it is related to instrumentation for reaming the acetabular socket and for locating the prosthetic acetabular cup within the reamed socket. Even more particularly, it is related to an instrument which can be used with computer-assisted minimally invasive surgical implantation of the joint component during joint replacement or revision procedures.

**[0002]** Total hip replacement or orthoplasty operations have been performed to repair the acetabulum and the regions surrounding it and to replace the hip components such as the natural femoral head which has degenerated.

**[0003]** With regard to the acetabulum, many instruments have been designed to locate either the acetabular cup or reamers for repairing the acetabulum to receive such a prosthetic cup. Such instruments are shown in U.S. Patent Nos. 4,305,394, 4,632,111, 5,037,424, 5,061,270, 5,320,625 and 6,395,005. Many of these instruments require a relatively large incision, i.e., 7-9 inches in the hip area in order to utilize the instruments in preparing the acetabulum and positioning the acetabular cup. There has been a long felt need to develop instrumentation to perform this procedure which can be used with a smaller incision, for example, 2-3 inches.

**[0004]** In addition, computer-assisted surgery has been developed which utilizes a tracking system which can relate positions on the patients and/or instruments to stored X-ray, CT scan and MRI data previously obtained for the patient. Alternately, image free computer-aided surgery has been developed where mechanical relationships can be calculated from anatomical reference points and utilized such as in joint arthroplasty. Such digitized points include the location of the center of the femoral head, the location of the epicondylar ligament attachment points, and the surfaces of the condyles. These systems are used intra-operatively for performing various surgical procedures, including replacement of artificial joints.

**[0005]** It has been especially useful to utilize trackable medical instruments for use in procedures utilizing computer-assisted image guided or image free medical and surgical navigation systems. Systems using body images are shown in U.S. Patent Nos. 5,383,454 to Bucholz and 6,021,343 to Foley et al. In general, these image-guided systems use computer stored digital images of a body part obtained, such as by CT scans taken before surgery, to generate images on a display, such as a CRT monitor screen, during surgery. These images are used in connection with real time information for representing the position of a surgical instrument with respect to the

body part. The systems typically include tracking devices such as, for example, an LED array mounted on a surgical instrument as well as a patient body part or parts. A tracker such as an optical tracker is used to track, in real time, the position of the body part and the instrument used during surgery, and a monitor screen to display images representing the body and the position of the instrument relative to the stored images or a vertical image as the surgical procedure is performed.

**[0006]** An image free type system is shown in U.S. Patent No. 6,385,475 the teachings of which are incorporated herein by reference. Some systems of this type include virtual joint images and relate the tracked anatomic landmarks to the virtual body part images. In such a system, an active or passive marker is attached to bones on opposite sides of a joint and a measuring device such as an optical sensing camera is coupled to a data processing system to which signals corresponding to the positioning data of the optical markers are supplied by the optical camera system. This data is used to correlate the markers on opposite sides of the joint with digitized anatomic landmarks. With a pointer mounted tracker, it is possible to locate various anatomic reference points on the joints to allow the optical/computer system to position a cutting instrument such as a reamer or sawblade having a tracker mounted thereon to shape a joint part for receiving a prosthetic implant.

**[0007]** In utilizing instruments which rotate such as reaming systems, it is important to align the cutting tool in the correct angle as well as locating and controlling the depth of penetration. There has been a long felt need for a tool which can axially align a reamer such as an acetabular reamer and guide the reamer internally of the body to a precise desired location. In addition, in order to perform minimally invasive surgery, reamers have been designed for the acetabulum which, rather than having the standard hemispherical shape, have only a part hemispherical shape but must be rotated through an angle such as 180° to form the hemispherical surface of an acetabular cavity in the pelvis designed to receive a hemispherical prosthetic acetabular component. An expandable reamer such as shown in U.S. Patent No. 3,702,611 may be used.

**SUMMARY OF THE INVENTION**

**[0008]** It is an object of the invention to provide an instrument on which a reamer or implant is held which can be manipulated within the body to align the reamer or implant in a desired position.

**[0009]** It is a further object of the invention to provide a holder which can be used with a joint shaper such as an acetabular reamer and/or to position an implant such as an acetabular cup within the body at any angle with respect to the central axis of the cup or reamer.

**[0010]** It is still an additional object of the invention to provide an instrument for positioning a cutting tool or implant on which instrument a tracker, such as an optical

tracker, for example, an emitter array, such as a light emitting diode array. The array includes a plurality of light emitters. The tracker can be mounted on an instrument and can interact with an optical tracking system to track the position of the cutting tool, such as a reamer, or an implant, including its axial orientation with respect to a bony target while the instrument is located within the body of a patient.

[0011] These and other objects of the invention are achieved by a positioning tool for use in a socket joint such as an acetabular cutting instrument or acetabular implant which tool has a longitudinally extending shaft extending along a longitudinal axis which shaft has a joint capable of movement about at least two axis and preferably three axis at a first end thereof. An implant or tool holder is mounted on the first end of the shaft and is designed to be placed within the body adjacent a socket joint such as the acetabulum. The holder has a central axis and is coupled at a connector to the moveable joint, such as a universal joint, to the first end of the longitudinally extending shaft. The holder is designed to either hold a reaming or cutting tool or to hold an acetabular implant. Since the holder is coupled at a connection point to the moveable joint on the end of the longitudinal shaft, it can be oriented in any angular position or at least a wide range of desired positions with respect to the shaft. The shaft has a shaft bearing mounted on the shaft adjacent an end opposite the holder end. The bearing may be mounted in a fixed position along the length of the shaft. The shaft may be a drive shaft used to rotate within the shaft bearing and drive the reamer or other tool via the universal or flexible joint. The positioner has a longitudinally extending first arm pivotally connected to the shaft bearing at a first pivot point for pivotal movement in a plane parallel or coplanar to the shaft longitudinal axis. The first arm preferably includes a handle portion. The tool includes a second arm pivotally connected to the first arm at a second pivot point and pivotally connected to the holder at a third pivot point. The first arm of the positioning tool has a mounting rod on which the tracker is mounted. In a preferred embodiment, the tracker emitter array includes at least three light emitting diodes to enable the optical tracking system to calculate the position of the arm. The array mounting rod extending from the first arm preferably extends at a point thereon located outwardly of a handle portion on the first arm, which handle is used by the surgeon to manipulate the positioning tool to position the holder at the desired location. The axis of the tracker is oriented at a fixed angle to the holder central axis, and may be parallel thereto to allow the optical tracking system to locate the holder central axis based on tracker data. Mounting the mounting arm parallel to the central axis allows the surgeon to visualize the angle of the holder by the orientation of the tracker mounting rod.

[0012] Preferably, the shaft bearing is fixed axially along the longitudinally extending shaft and the first, second and third pivot points are located at distances

from one another so as to position the central axis of the holder at an angle with respect to the first end of the longitudinal shaft in fixed relationship to the angle of the tracker mounting rod for all pivotal positions of the first arm with respect to the shaft bearing. This means that the central axis of the holder is located at a fixed angle or parallel to the axis of the tracker mounting rod as the positioning tool first arm is manipulated to any position with respect to the longitudinal shaft. As will be easily understood by one skilled in the art, the structure described is in the form of a four bar linkage with the lengths of the various arms and the locations of the pivot points on the arms connecting the adjacent sides of the linkage chosen to establish a known geometric relationship between the emitter (tracker) array and the reaming tool or implant mounted on the tool. In the preferred embodiment, the four arms form a parallelogram with opposite sides being the same length. Of course as long as the geometry of the tool is programmed into the computer, mathematical algorithms can calculate the position of the cutting head based on inputs of the optical tracking system.

[0013] The positioning tool is used by mounting the implant or instrument on the holder and mounting the tracker on the mounting rod attached to the first arm. The surgeon then can manipulate the positioner and the holder about the moveable joints to any desired position. An optical tracking system coupled to the computer-assisted surgical system can calculate the location of the implant or cutting tool from the known relationships of the linkage system and the known angle of the holder central axis which is at a fixed angle or is parallel to the central axis of the rod holding the light emitting diode tracker assembly. The holder, including cutting tool or implant, is placed within the patient and the optical tracking system allows the surgeon to view the joint, such as the acetabulum, on the CRT with the computer generated location of the cutting tool or implant overlaid either on the digital CT images stored in the computer database for the patient or on a vertical acetabulum. The movement (image free) of the holder is tracked in real time and the real or virtual image data is updated to compensate for patient movement, if any, also in real time. The surgeon can then manipulate the holder via the handle on the first arm to cut the proper cavity or locate the implant in its desired position. When used without the optical computer-aided system, the instrument can still be used utilizing the parallel relationship between the mounting rod on the handle and the holder central axis.

#### BRIEF DESCRIPTION OF THE DRAWINGS

##### [0014]

FIG 1 is a side isometric view of the positioning tool of the present invention,

FIG 2 is an isometric view of the positioning tool of the present invention, including an acetabular

reamer position to shape the natural socket of the acetabulum,

FIG 3 is a top view of the positioning tool of the present invention shown in FIG 1,

FIG 4 is a cross-sectional view of the positioning tool of FIG 3 along the lines 4-4,

FIG 5 is a side elevation view of the positioning tool of FIG 1,

FIG 6 is a front end view of the positioning tool of FIG 1,

FIG 7 is a rear end view of the positioning tool of FIG 1,

FIG 8 is a cross-sectional view of the positioning tool of FIG 3 along the lines 8-8, and

FIG 9 is an exploded view of the positioning tool of FIG 1

#### DETAILED DESCRIPTION

**[0015]** Referring to the figures, there is shown an acetabular cup or tool positioner of the present invention generally denoted as 10. Positioner 10 is essentially designed as a four bar linkage having a holder at its leading end design either to hold a cutting tool, such as an acetabular reamer or an implant such as a prosthetic acetabular cup. Of course the tool can be used to position other implants within the body.

**[0016]** Referring to FIGS 1 and 9, there is shown a positioning tool 10 which includes a drive shaft 12 extending along a longitudinal axis 14. At a first end 15, drive shaft 12 includes a joint 16 capable of movement about at least two axis such as a flexible shaft or wire or a typical mechanical universal joint which is of a well known design and sized to fit the diameter of the shaft. At a second end 17 of shaft 12, there is a drive connection 18 adapted to engage a chuck (not shown) of any typical rotary power drive such as an electric drill. Shaft 12 has a bearing member 20 mounted thereon. Bearing 20 is fixed axially on shaft 12 but allows the shaft 12 to rotate about axis 14 of shaft 12. Bearing 20 includes a pivot connection 22 on an outer surface thereof.

**[0017]** As best seen in FIGS 2-5 and 9, pivot connection 22 is pivotally connected to a first arm 24 via a pivot pin 26 and a pair of forks 24a and 24b. The preferred first arm 24 includes handle 28 coupled thereto which has a first end 30 opposite pivot point 22. In the preferred embodiment, a mounting rod 32 extends at a predetermined angle  $\alpha$  with respect to the longitudinal axis 31 of arm 24 and handle 28. Mounting rod 32 includes a connector 34 for connecting an emitter or tracker array 36 to the first arm 24. In the preferred embodiment, tracker array 36 includes at least three light emitting diodes 38 located in the same plane which diodes can be tracked by an optical tracking system such as described in U.S. Patent Nos. 6,021,343 and 6,434,415, the teachings of which are incorporated herein by reference. While in the preferred embodiment, an optical tracking system is used any tracking system such as acoustic system can

be used. In addition, while the preferred tracker includes radiation (light), emitting diodes a passive system using light reflectors could also be used.

**[0018]** Moveable joint 16 attached to first end 15 of shaft 12 is coupled to a holder 40 which includes a mounting system 42 on which a cutting tool, such as a reamer 44 is mounted. The preferred universal joint 16 has a pair of perpendicular pins 19 and 21 about which two parts of the joint can pivot in a standard manner. Holding system 42 can be any suitable system for gripping an acetabular cup implant or acetabular reamer. In the preferred embodiment, the holder is similar to that taught in U.S. Patent No. 6,264,647. Preferably, the holder can releasably grip both a reaming tool and the prosthetic acetabular cup.

**[0019]** Holder 40 has a central axis 44 and is coupled via a connector 43 to pin 21 at one end of the universal joint 16 so that axis 44 may, in the preferred embodiment, be oriented in any angular relationship to axis 14 of shaft 12. In order to effectuate angular movement of holder 40, holder 40 is coupled to a second arm 50 via a pivot connection 52 having forks 52a and 52b. Pivot connection 52 is similar to the pivot connection 22 and includes a pivot pin 54 extending through a bushing 56 having a flange integrally formed on the outer circumference of holder 40. Thus, second arm 50 has a first end 53 pivotally coupled to the holder 40 and a second end 55 pivotally connected to first arm 24 at pivot connection 60. In the preferred embodiment, the pivot connection 60 consists of a pivot pin 62 which extends through a pair of forks 64, 66 formed on second end 55 of second arm 50 and, in the preferred embodiment, through a portion of arm 24.

**[0020]** The resulting structure can be seen to be a four bar linkage where each of the four bars are pivotally connected. The linkage is thus made up of shaft 12, first arm 24, holder 40 and second arm 50. In the preferred embodiment, the distances between the pivot points connecting the four bars and the angle  $\alpha$  are chosen such that the axis 32 of mounting rod 34 always remains parallel to axis 44 of holder 40 throughout any location of first arm 24 and consequently any position of the four bar linkage.

**[0021]** In the preferred embodiment, the linkage forms a parallelogram with the distance between the pivot connection of universal joint 16 and pivot point 22 on bearing 20 along shaft 12 is approximately 6.6 inches and the length of second arm 50 between points 52, 60 is also approximately 6.6 inches. In the preferred embodiment, the distance of pivot point 54 from the center line 44 of holder 40 is approximately .79 inches. Likewise, the distance between pivot point 22 of bearing 20 from the axis 14 of shaft 12 is also approximately .79 inches. In the preferred embodiment, the distance between pivot point 22 and pivot point 60 a first arm 24 and second arm 50 respectively is approximately 1 inch and the distance between pivot point 52 and pivot point 21 is also 1 inch. The axis of all the pivot pins (except pin 19) are

parallel so that movement of handle 20 takes place in a plane containing axis 14 of shaft 12

**[0022]** During the preferred surgical procedure and after the optical-aid surgical system has been calibrated to the patient's anatomy, the instrument 10, including tracker assembly 36 mounted on rod 32 is grasped by the surgeon with one hand on handle 28. A cutting element or implant, such as a reamer or acetabular cup, denoted as 44 would be mounted on holder 40. In the case of reaming, a drive source, not shown, would be connected to drive element 18 on second end 17 of shaft 12 for powering the reamer. The positioner 10 is then inserted into an appropriate incision with the holder being aligned in the desired position via the computer-assisted surgical system. The surgeon may then manipulate handle 28 by manipulating the four bar linkage such as, for example, by rotating the handle along arrow 70 of FIG. 2. The surgeon may also rotate the entire assembly 10 about axis 14 of shaft 12 in the direction of arrow 72 of FIG. 2. The simultaneous movement of positioner 10 in direction 72 and the handle 28 and first arm 24 in direction 70 causes movement of cutting tool or acetabular cup 44 about the x, y and z axis of the universal joint 16. Such manipulation would be shown on the CRT with respect to either the stored actual images or virtual images of the patient joint by the tracking system. Upon obtaining the correct position adjacent the joint sockets, for example, the acetabulum, the drive shaft 12 and reamer is activated via drive element 18 with a suitable drive and rotating the shaft in a direction 74 about axis 14 (FIG. 2).

**[0023]** Once the reaming is complete, the instrument is removed from the patient and the reamer is replaced by the acetabular implant which is located in the desired orientation with the computer-aided tracking system. The cup is then implanted in a standard manner. If a tracker system is not used the surgeon can orient the reamer or implant via rod 32 since, in the preferred embodiment, it is parallel in all orientations to the holder central axis. If visual orientation is not needed, i.e., a computer-aided tracking system will always be used during surgery it may be possible to mount the tool geometry and tracker array in any orientation. The computer can then be programmed with the tracker orientation and calculate the correct holder orientation. Thus, the four-bar linkage need not be parallel as long as the actual geometry of the linkage were correctly programmed into the computer so that the actual holder orientation could be calculated based on the position of tracker 38.

**[0024]** Although the invention herein has been described with reference to particular embodiments, it is to be understood that these embodiments are merely illustrative of the principles and applications of the present invention. It is therefore to be understood that numerous modifications may be made to the illustrative embodiments and that other arrangements may be devised without departing from the spirit and scope of the present invention as defined by the appended claims.

## Claims

1. A positioning tool for a cutting instrument or implant, comprising
  - a shaft having a longitudinal axis and a first pivot connection capable of angular movement at a first end,
  - a holder having a central axis for holding the instrument or implant coupled to said first pivot connection for angular movement with respect to said shaft first end,
  - a shaft bearing rotatably mounted on said shaft,
  - a first arm pivotally connected to said shaft bearing at a second pivot point for pivotal movement in a plane parallel to said first shaft axis, and
  - a second arm pivotally connected to said first arm at a third pivot point and said holder at a fourth pivot point.
2. The positioning tool as set forth in claim 1, wherein said connection is a universal joint.
3. The positioning tool as set forth in claim 1, wherein said first arm has a tracking device thereon.
4. The positioning tool as set forth in claim 3, wherein said tracking device is selected from the group consisting of an active array, a passive array, a sonic array, a light emitting diode array light, a reflective array, an electromagnetic tracker and a laser emitting tracker.
5. The positioning tool as set forth in claim 3, wherein the first arm has a mounting element for mounting said tracker device thereon, said mounting element has an axis extending at a fixed angle to said central axis of said holder at any pivotal position of said first arm.
6. The positioning tool as set forth in claim 5, wherein the first pivot connection is positioned axially on said shaft and said second, third and fourth pivot points are positioned relative to each other to position the central axis of the holder with respect to said mounting element axis at said fixed angle.
7. The positioning tool as set forth in claim 6, wherein the distance between said first pivot connection at said shaft first end and said second pivot point equals the distance between said third and fourth pivot points.
8. The positioning tool as set forth in claim 7, wherein the distance between said first pivot connection on said first end of said shaft and fourth pivot point is equal to the distance between said second and third

pivot points.

9. The positioning tool as set forth in claim 5, wherein said mounting element is a rod extending from said first arm along said mounting element axis 5
10. The positioning tool as set forth in claim 9, wherein said holder central axis is parallel to said rod axis for all positions of said first arm with respect to said shaft 10
11. The positioning tool as set forth in claim 1, wherein said first arm, includes a handle
12. The positioning tool as set forth in claim 1, wherein said shaft, said holder, said first arm and said second arm form a four bar linkage in the form of a parallelogram 15
13. The positioning tool as set forth in claim 12, wherein the simultaneous movement of said positioning tool and pivoting of the first arm with respect to said shaft causes said holder to be oriented in any desired position with respect to a bony target 20  
25
14. The positioning tool as set forth in claim 13, wherein said first arm includes a mounting rod extending along an axis at a fixed angle to said first arm which angle maintains said mounting rod parallel to said holder central axis as said first arm pivots about said second pivot point. 30
15. The position tool as set forth in claim 14, wherein a tracker for an optical tracking system is mounted on said mounting rod 35
16. The positioning tool as set forth in claim 15, wherein said tracker array is a light emitter diode array
- 17 The positioning tool as set forth in claim 16, wherein said light emitting diodes are tracked by an optical tracking system which is able to locate the position of said holder with respect to said bony target from the tracked location of said array 40  
45
- 18 The positioning tool as set forth in claim 1, wherein said shaft is a drive shaft having a second end adapted to be coupled to a drive source
19. The positioning tool as set forth in claim 1, wherein a range of angular movement of said holder with respect to said first shaft is at least to 90° 50

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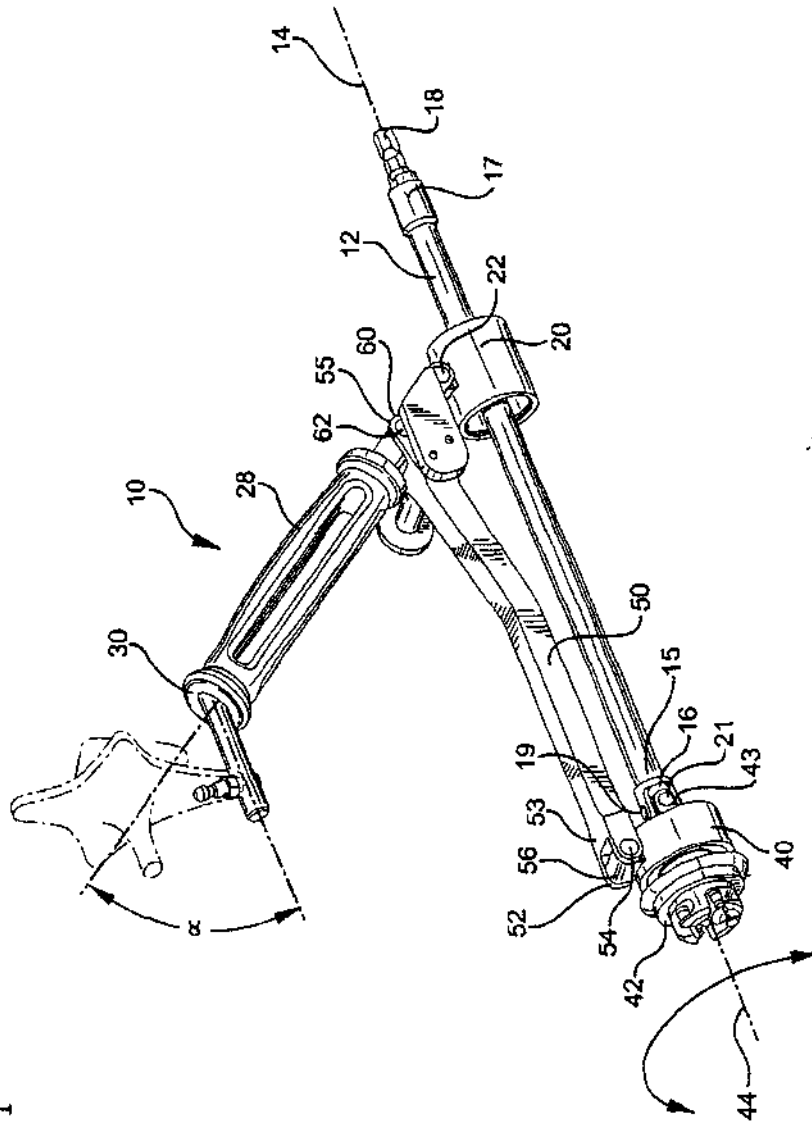


FIG. 1

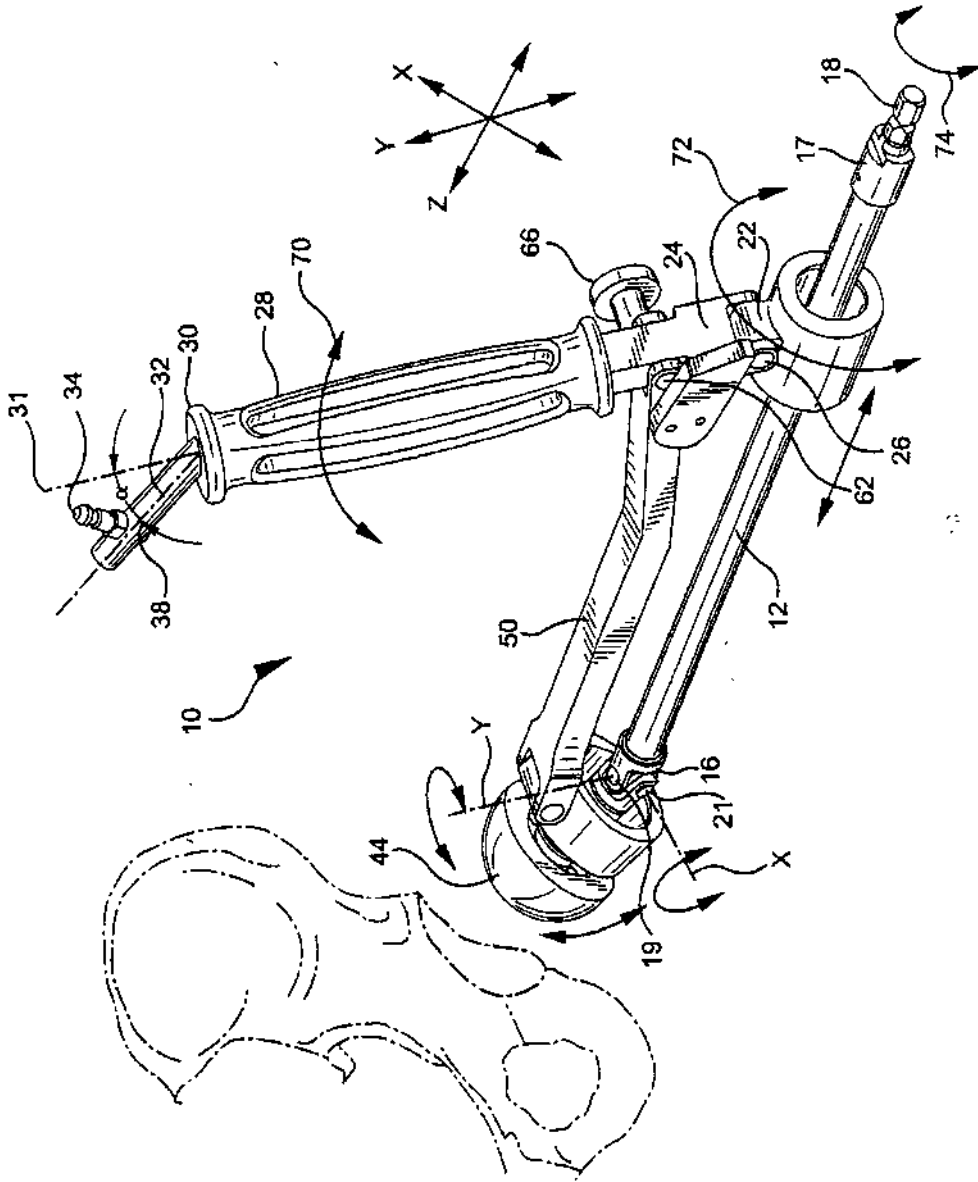
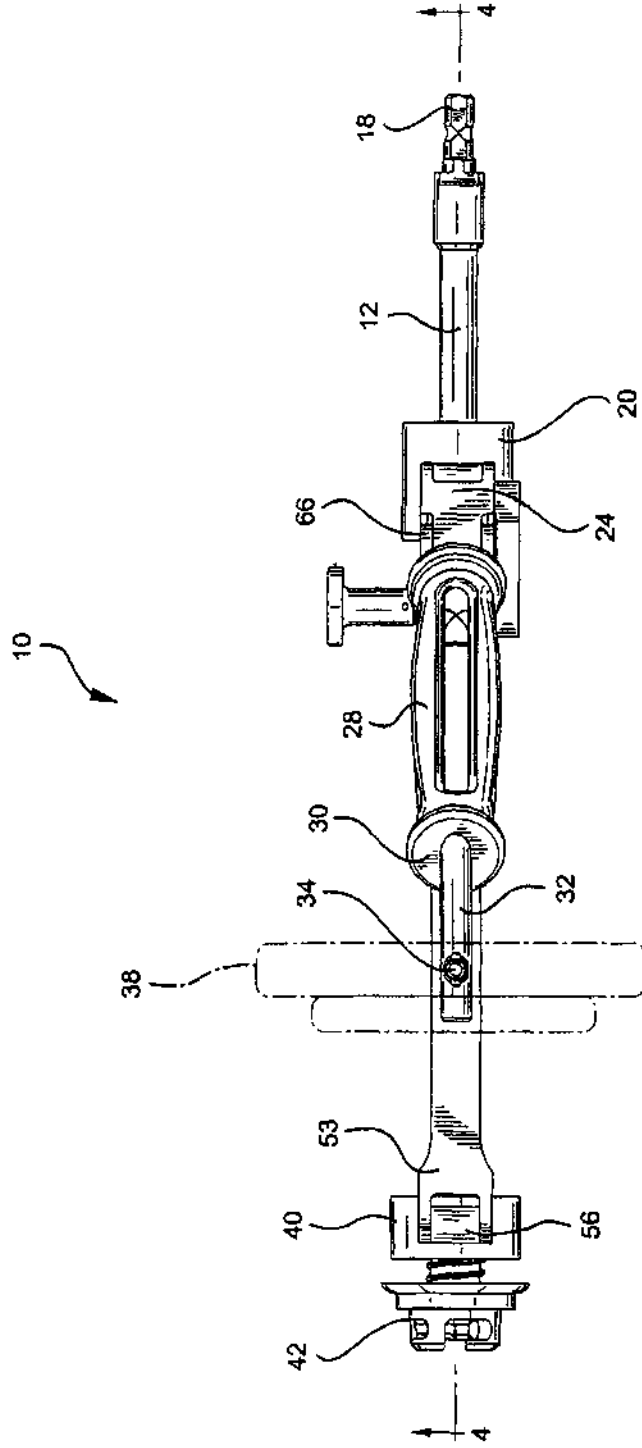


FIG. 2

FIG. 3





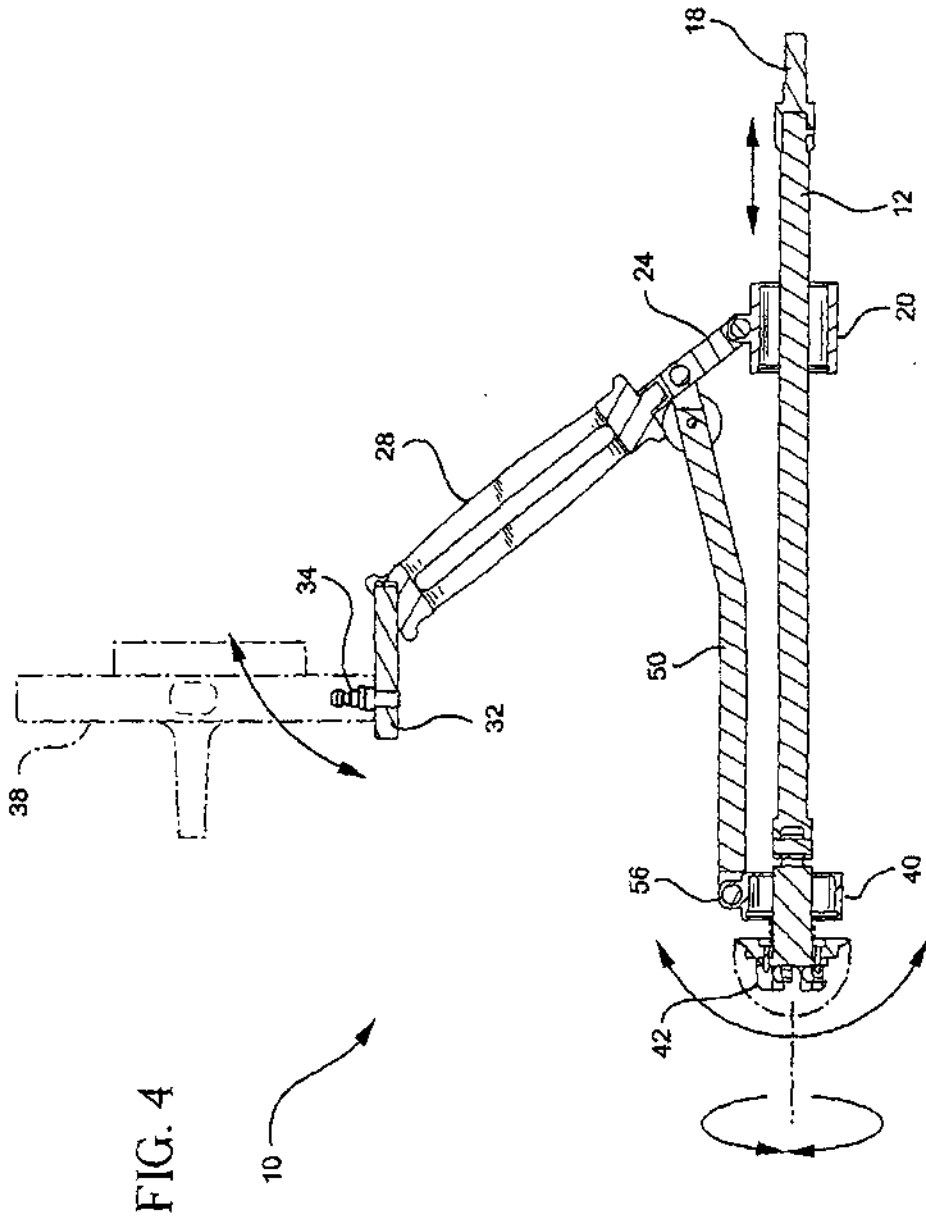


FIG. 4

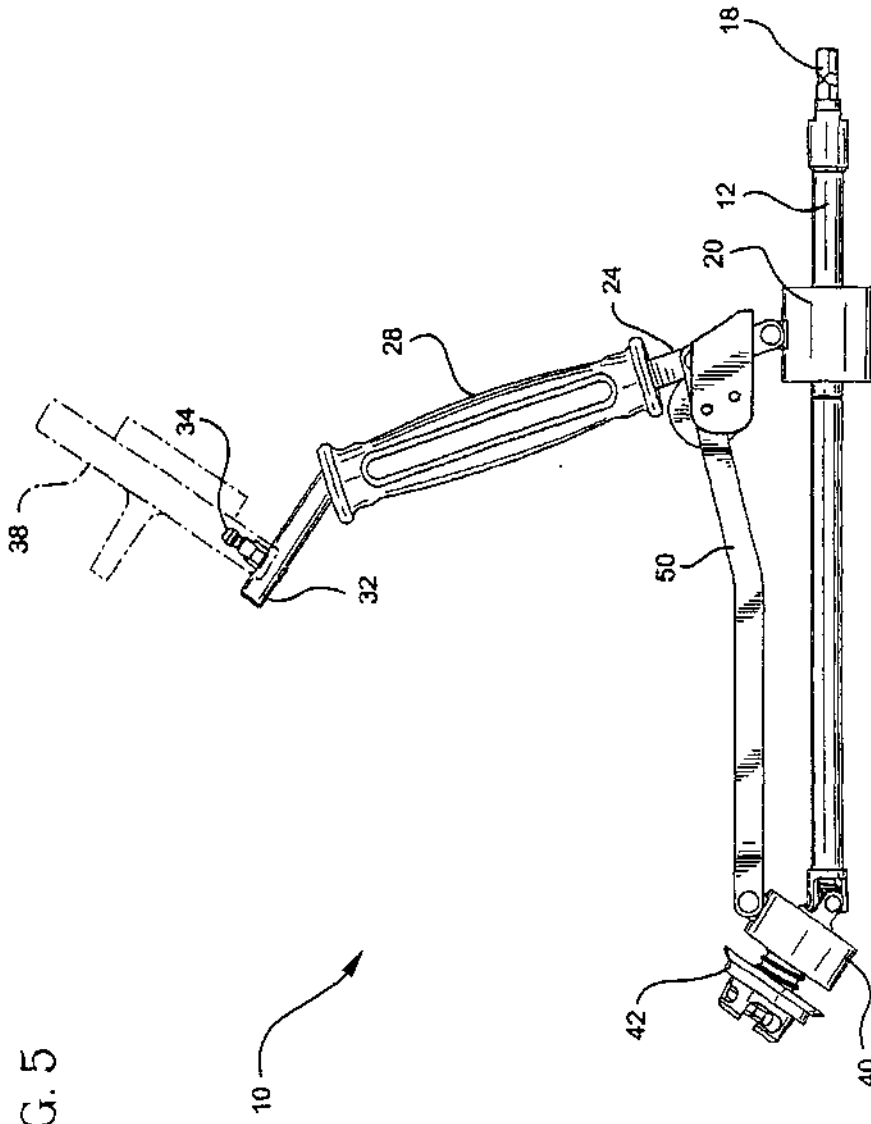


FIG. 5

FIG. 7

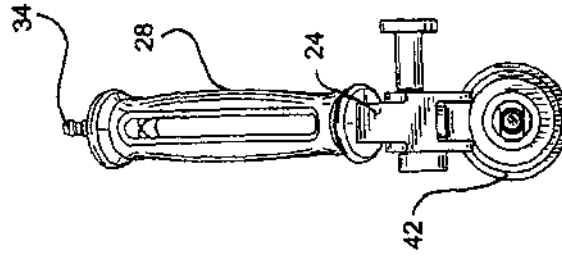
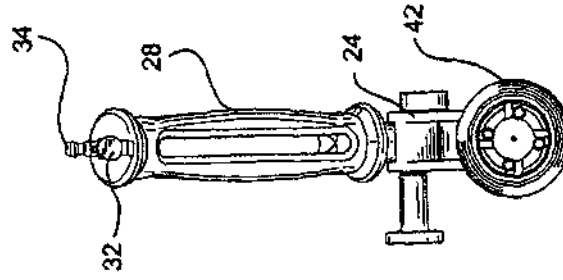
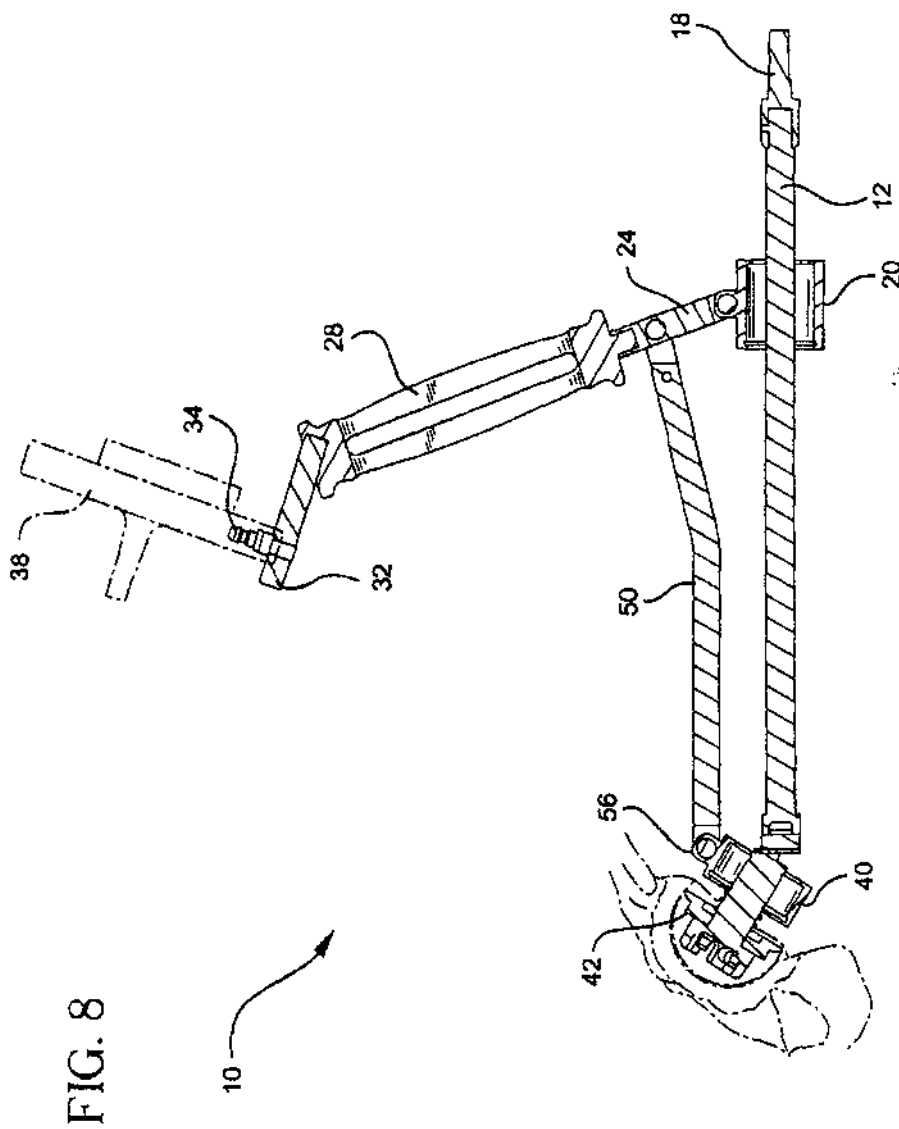


FIG. 6









European Patent  
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EUROPEAN SEARCH REPORT

Application Number  
EP 04 25 0312

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Category	Citation of document with indication, where appropriate, of relevant passages	Relevant to claim	CLASSIFICATION OF THE APPLICATION (Int.Cl.7)
A	FR 2 721 502 A (LANDANGER LANDOS) 29 December 1995 (1995-12-29) * page 4, line 11 - page 5, line 20 * * page 8, line 32 - page 9, line 8 * * figures 1,5 * ---	1-19	A61F2/46 A61B17/16
A	DE 199 64 009 A (UNIV HEIDELBERG) 12 July 2001 (2001-07-12) * column 3, line 17 - column 4, line 6 * * figures 1A,2 * ---	1	
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The present search report has been drawn up for all claims			
Place of search <b>THE HAGUE</b>		Date of completion of the search <b>19 April 2004</b>	Examiner <b>Compos, F</b>
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X particularly relevant if taken alone Y particularly relevant if combined with another document of the same category A technological background O non-written disclosure P intermediate document		T theory or principle underlying the invention E earlier patent document, but published on, or after the filing date D document cited in the application L document cited for other reasons & member of the same patent family, corresponding document	

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**ANNEX TO THE EUROPEAN SEARCH REPORT  
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This annex lists the patent family members relating to the patent documents cited in the above-mentioned European search report. The members are as contained in the European Patent Office EDP file on  
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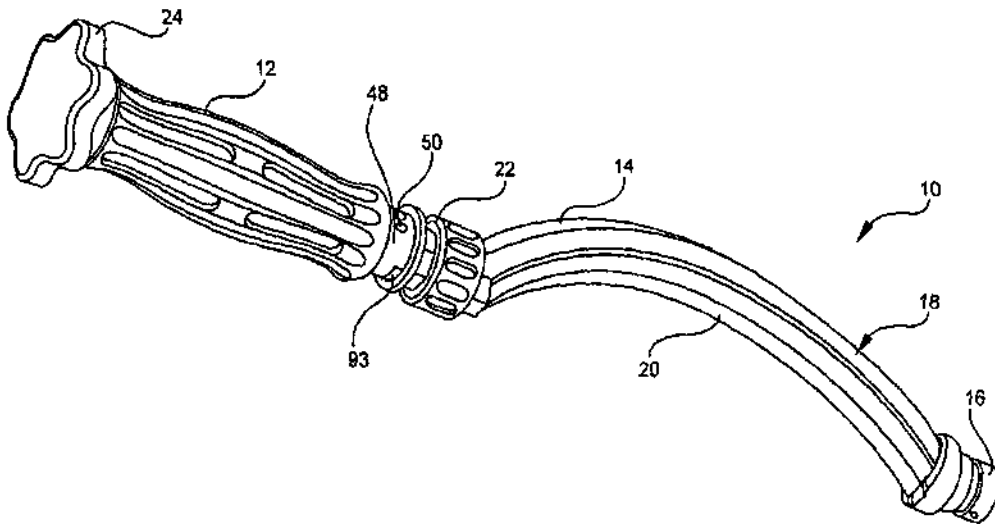
For more details about this annex see Official Journal of the European Patent Office, No. 12/82



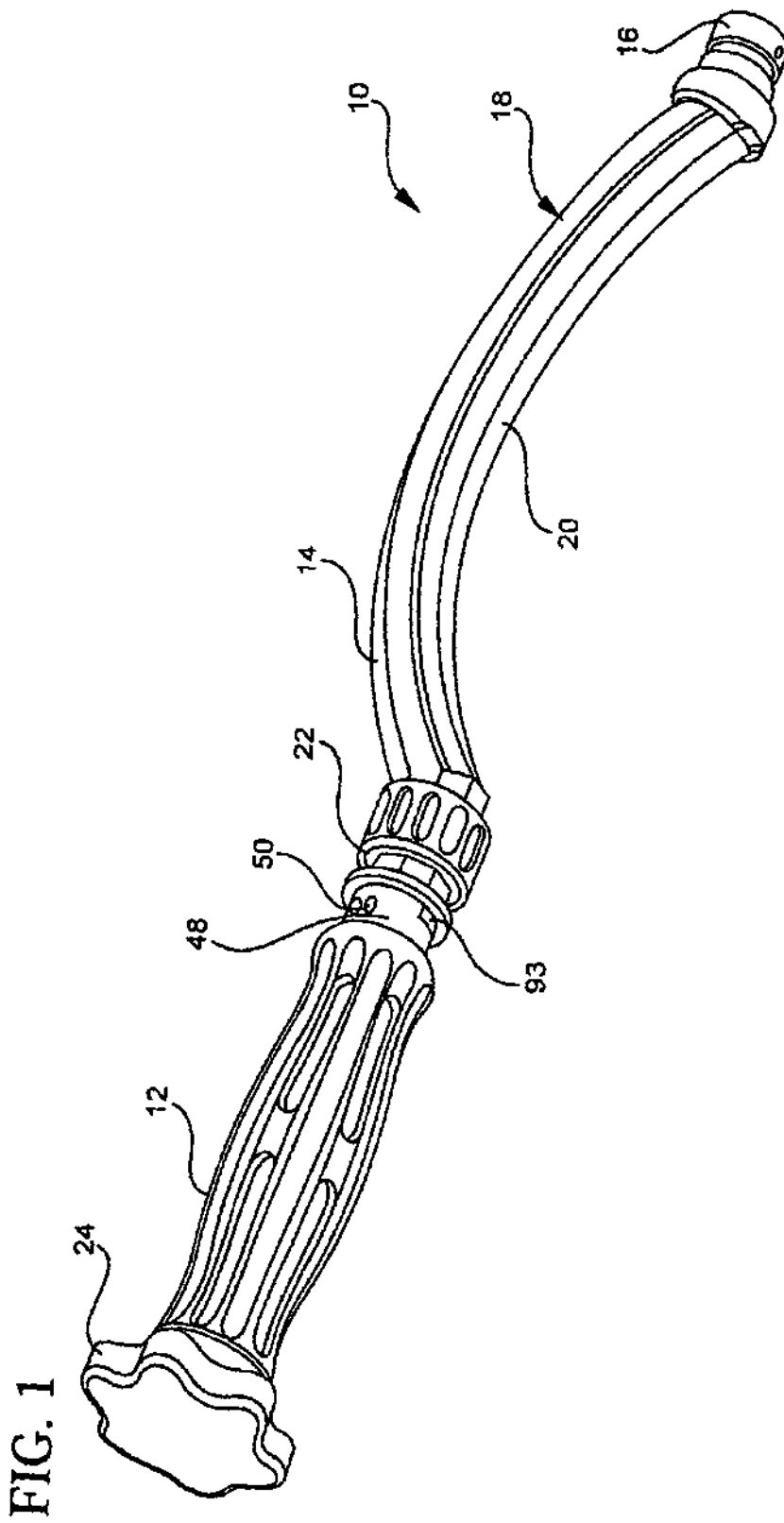
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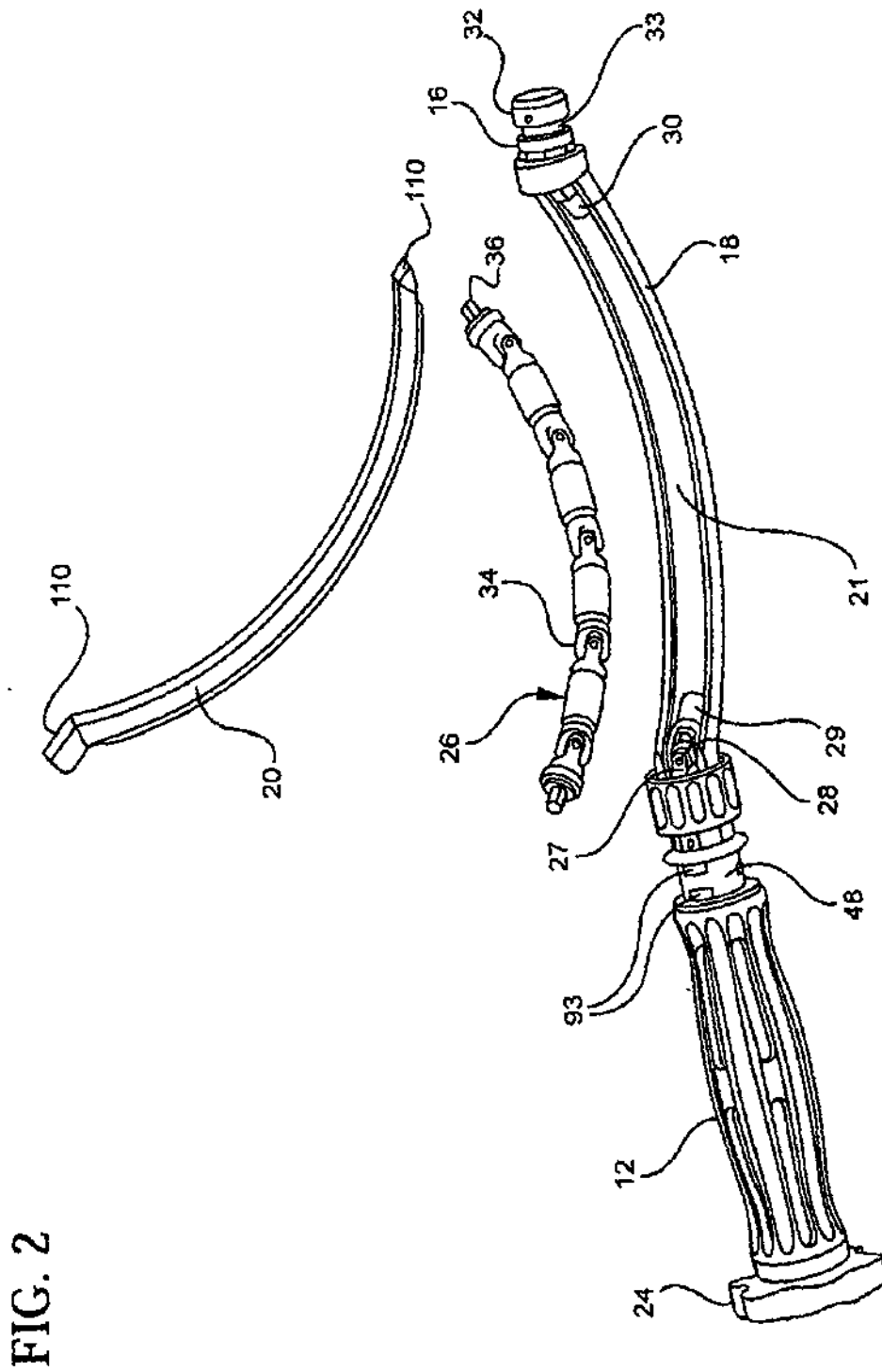
(19) **United States**(12) **Patent Application Publication** (10) **Pub. No.: US 2007/0293869 A1****Conte et al.**(43) **Pub. Date: Dec. 20, 2007**(54) **CURVED ACETABULAR POSITIONER,  
IMPACTOR AND REAMER HANDLE****Publication Classification**(75) **Inventors** John Conte, Prospect Park, PA (US),  
Joseph C. Jenkins II, Lindenhurst, NY  
(US)(51) **Int. Cl.**  
**A61B 17/56** (2006 01)  
(52) **U.S. Cl.** 606/91(57) **ABSTRACT****Correspondence Address****LERNER, DAVID, LITENBERG,  
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An acetabular instrument has a handle portion having one or more solid nonflexible drive shaft elements therethrough. The shaft elements are connected by a U-joint at one of both ends to form a flexible curved drive shaft. One end of a solid shaft element is connected to a knob so that rotation of the knob drives the flexible shaft. The flexible shaft is housed within a hollow curved body preferably made of stainless steel. One end of the curved body it is connected to the handle portion and at the other end to an acetabular cup or acetabular reamer holder. The reamer holder is rotatably driven by the flexible drive shaft. The knob may be made so that it may receive blows from a mallet allowing the instrument to be used as an impactor. The drive shaft may be used to actuate a locking mechanism within the cup or reamer holder which connects the reamer cup to the instrument.

(73) **Assignee** Howmedica Osteonics Corp., Mahwah,  
NJ(21) **Appl No.** 11/641,599(22) **Filed** Dec. 19, 2006**Related U.S. Application Data**(60) **Provisional application No.** 60/752,154, filed on Dec  
20, 2005







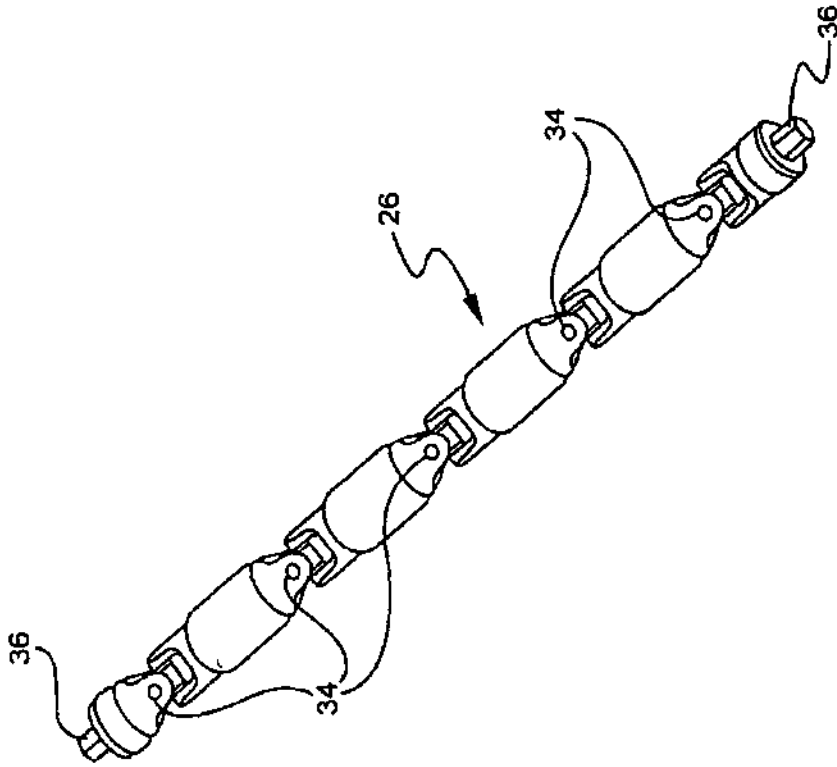
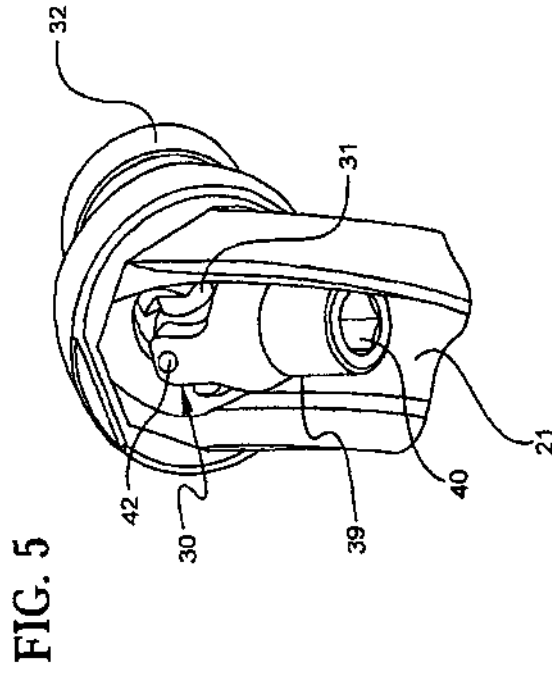
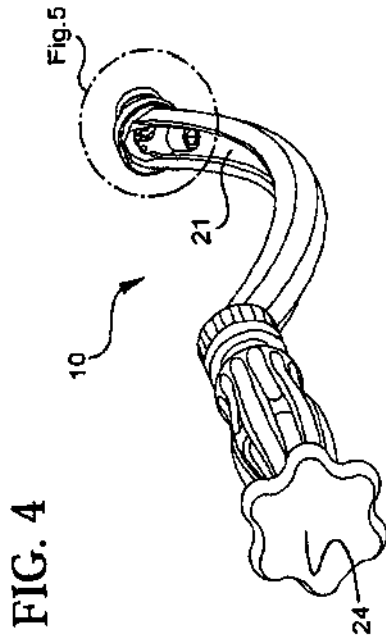


FIG. 3



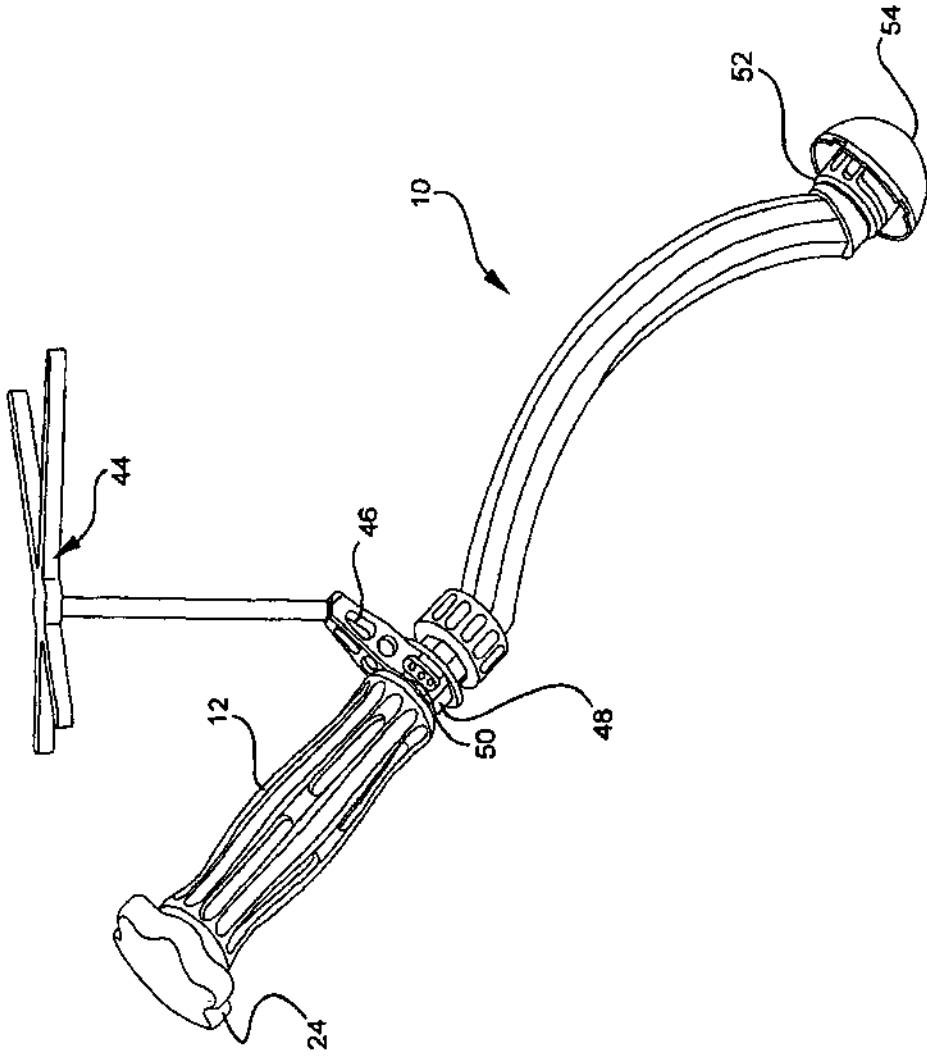


FIG. 6

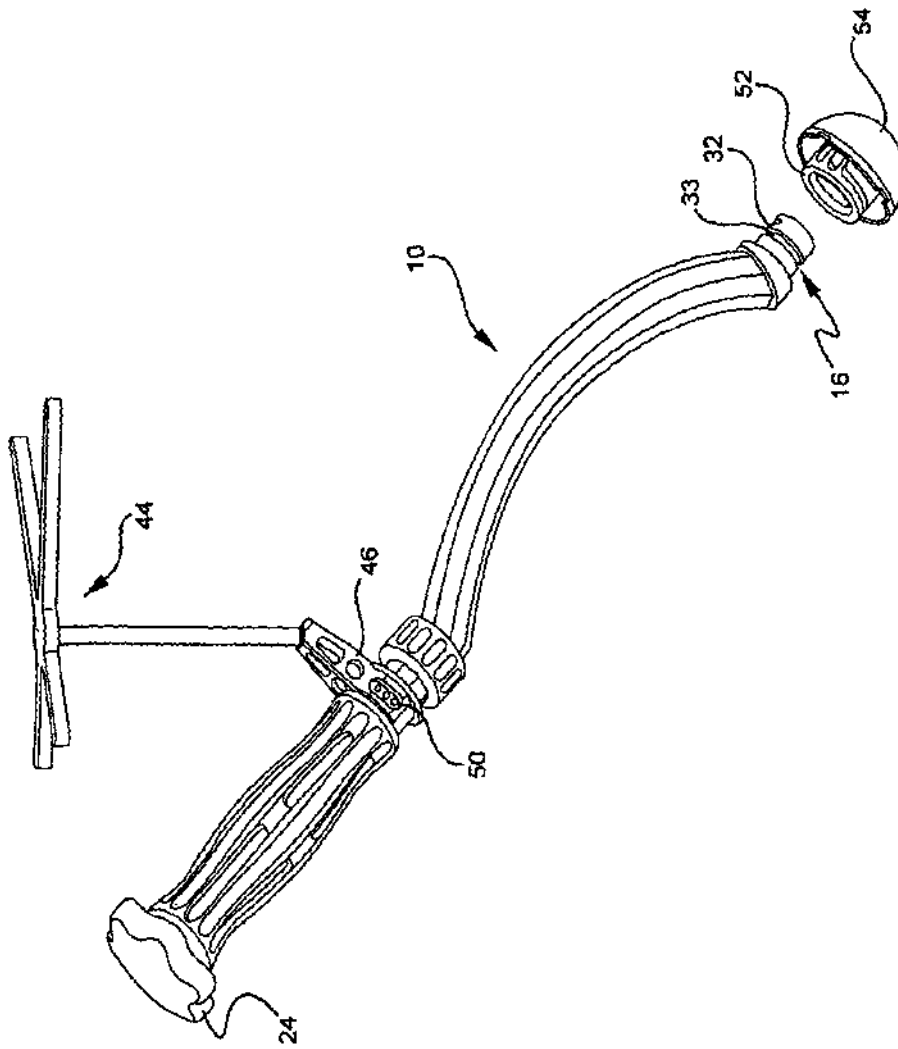


FIG. 7

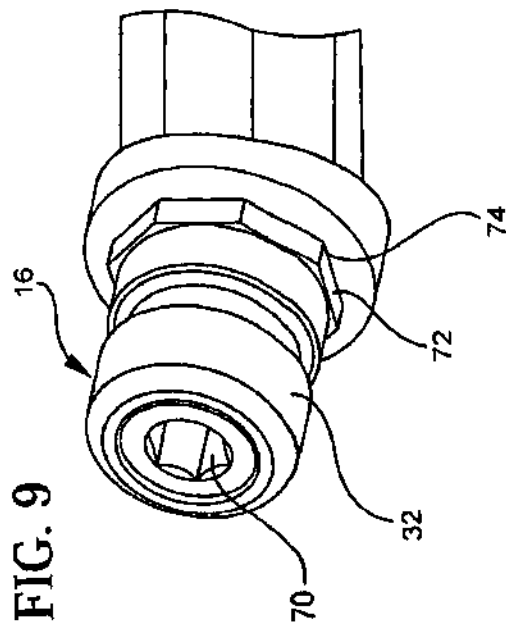
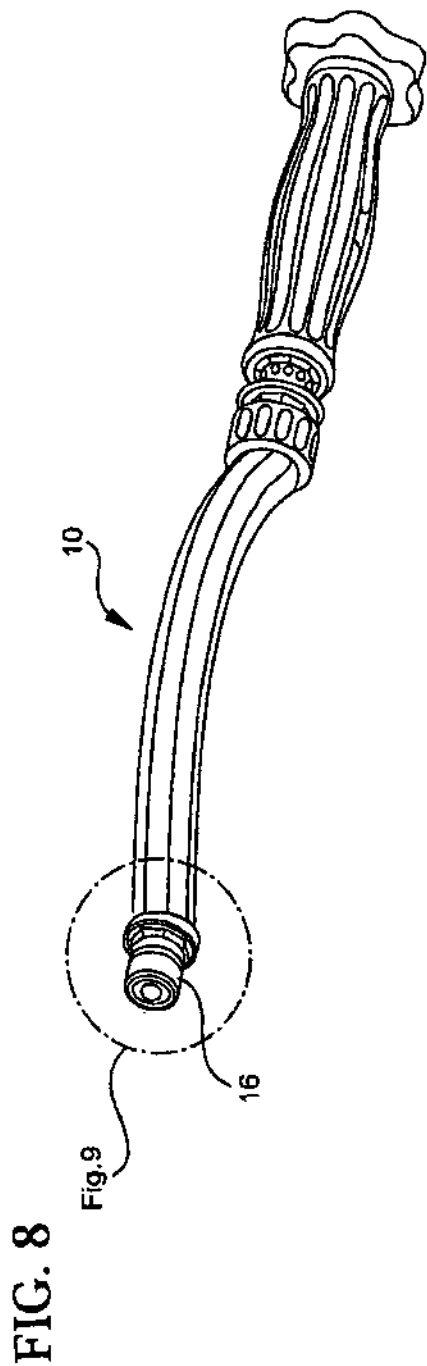


FIG. 11

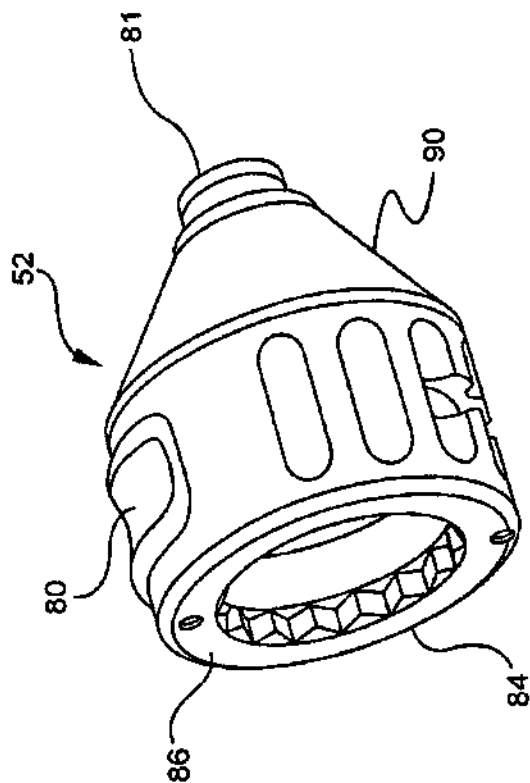
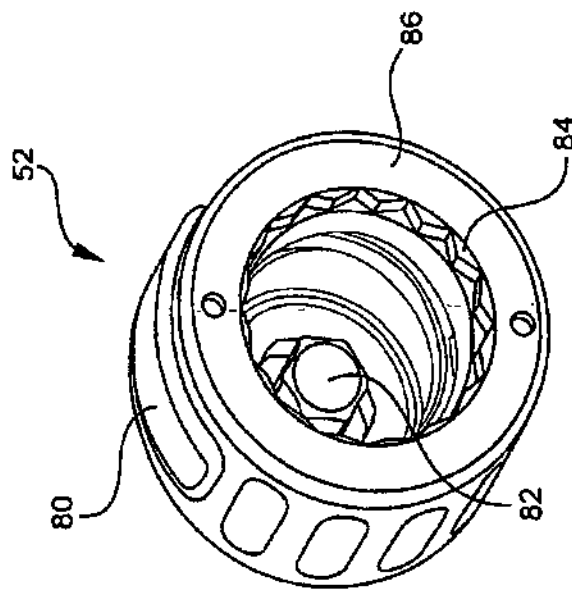
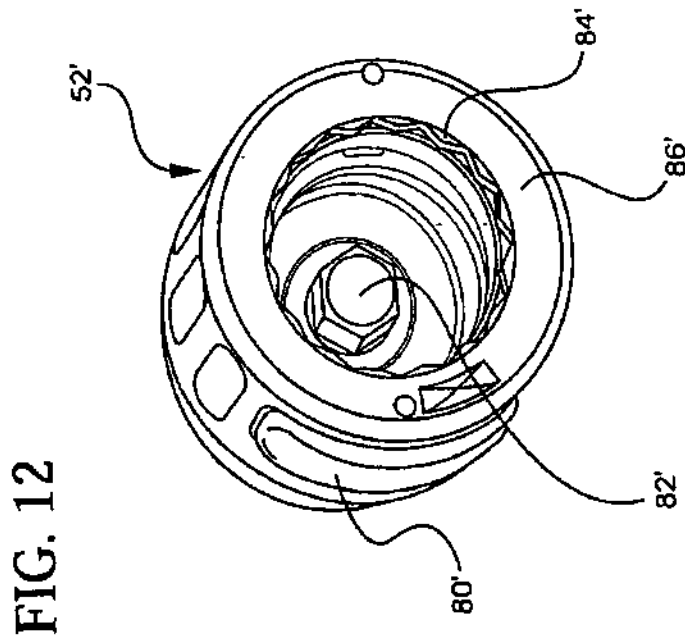
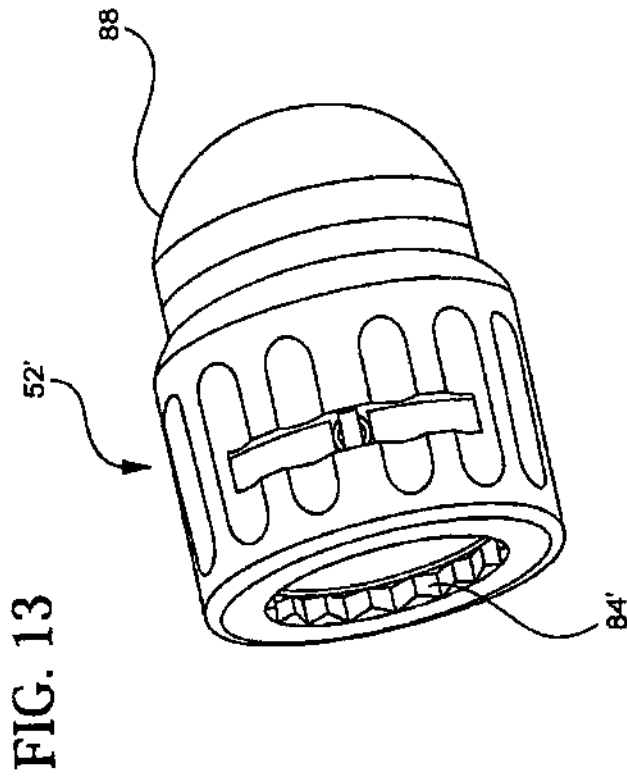
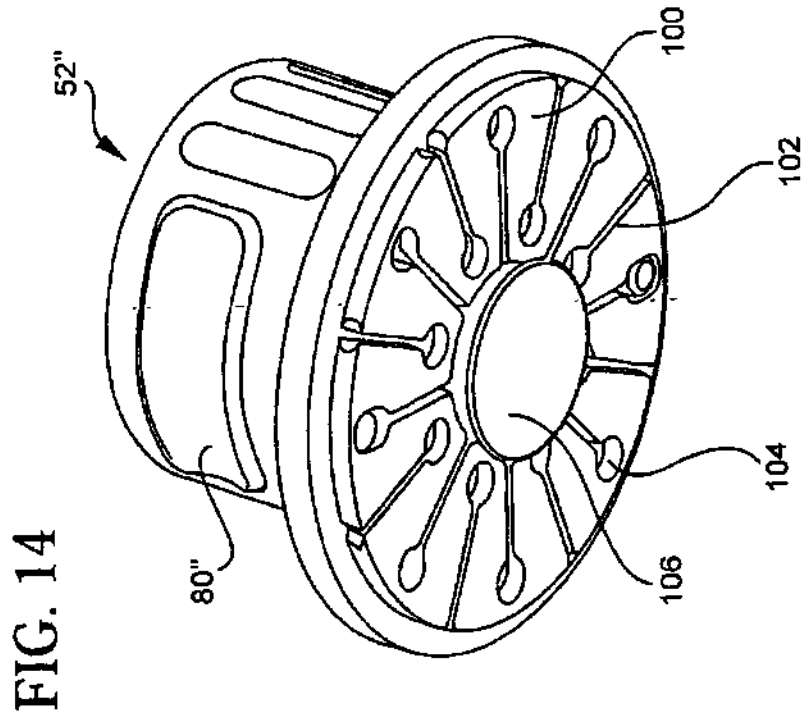
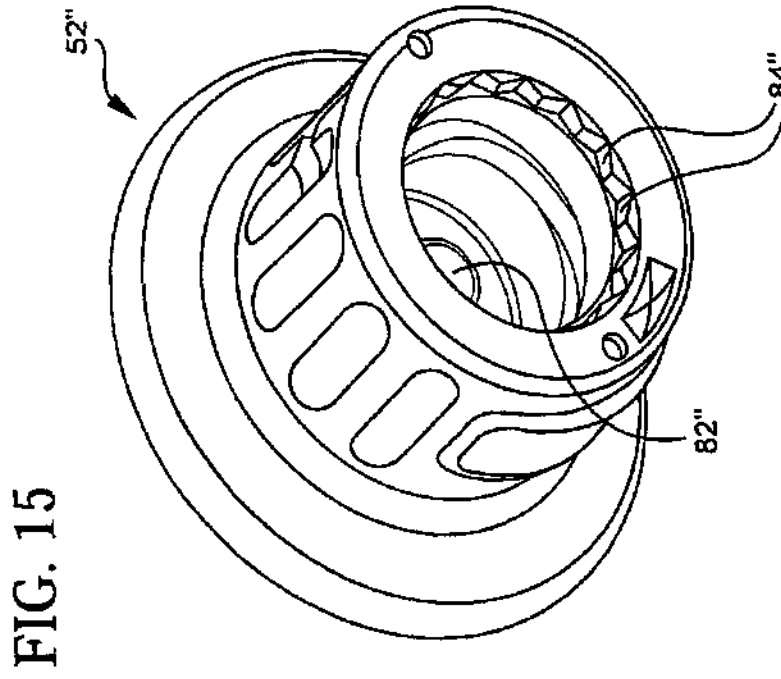


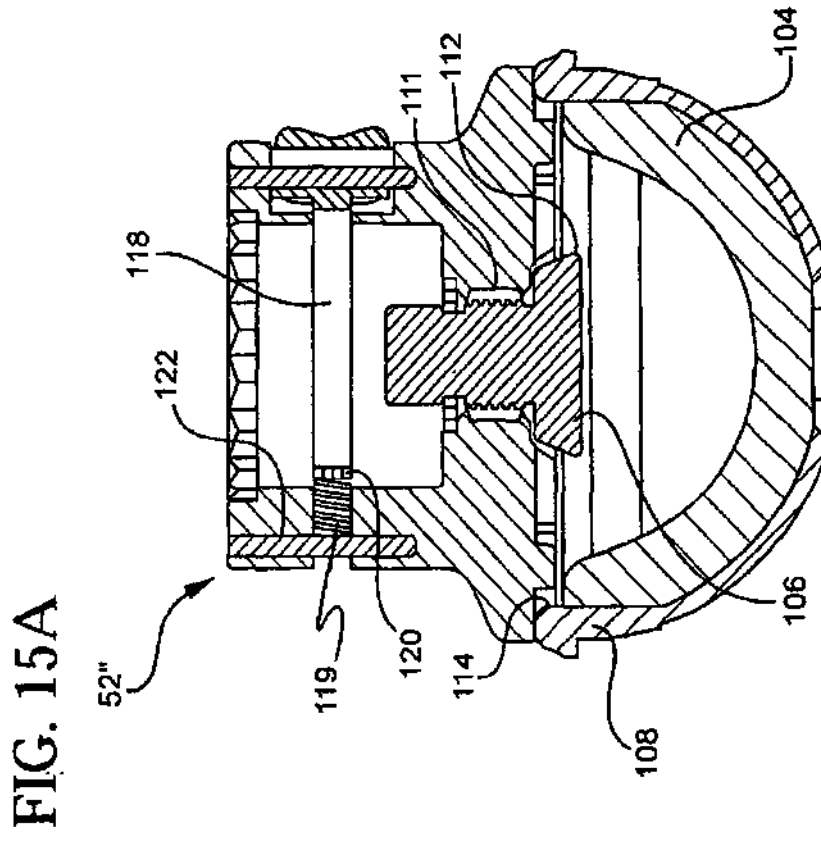
FIG. 10

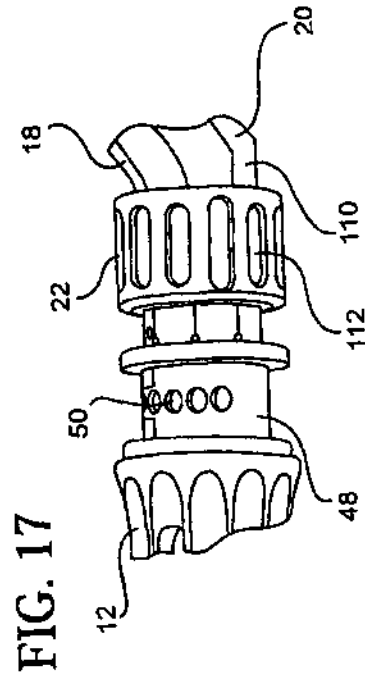
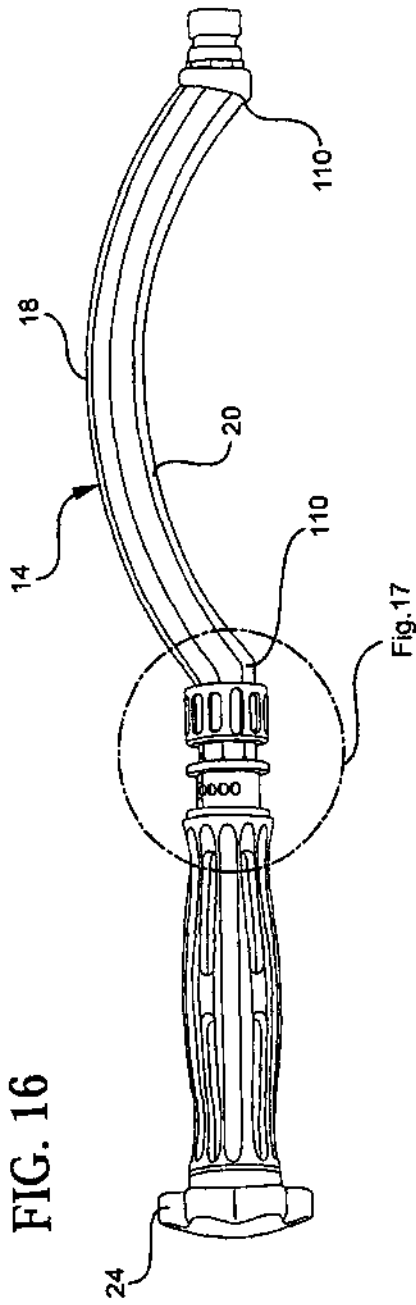












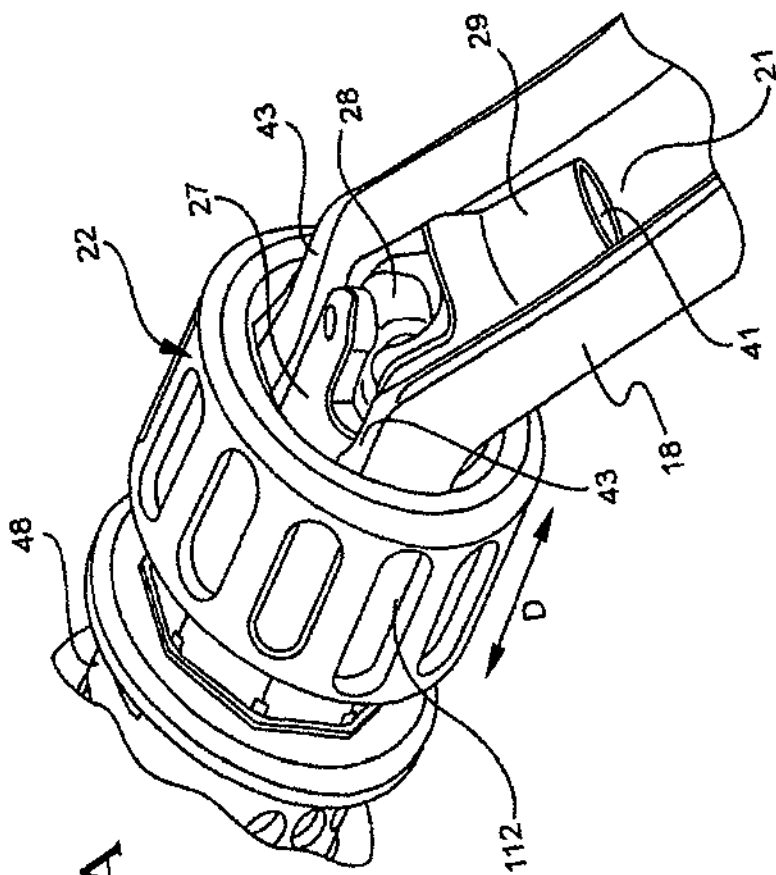
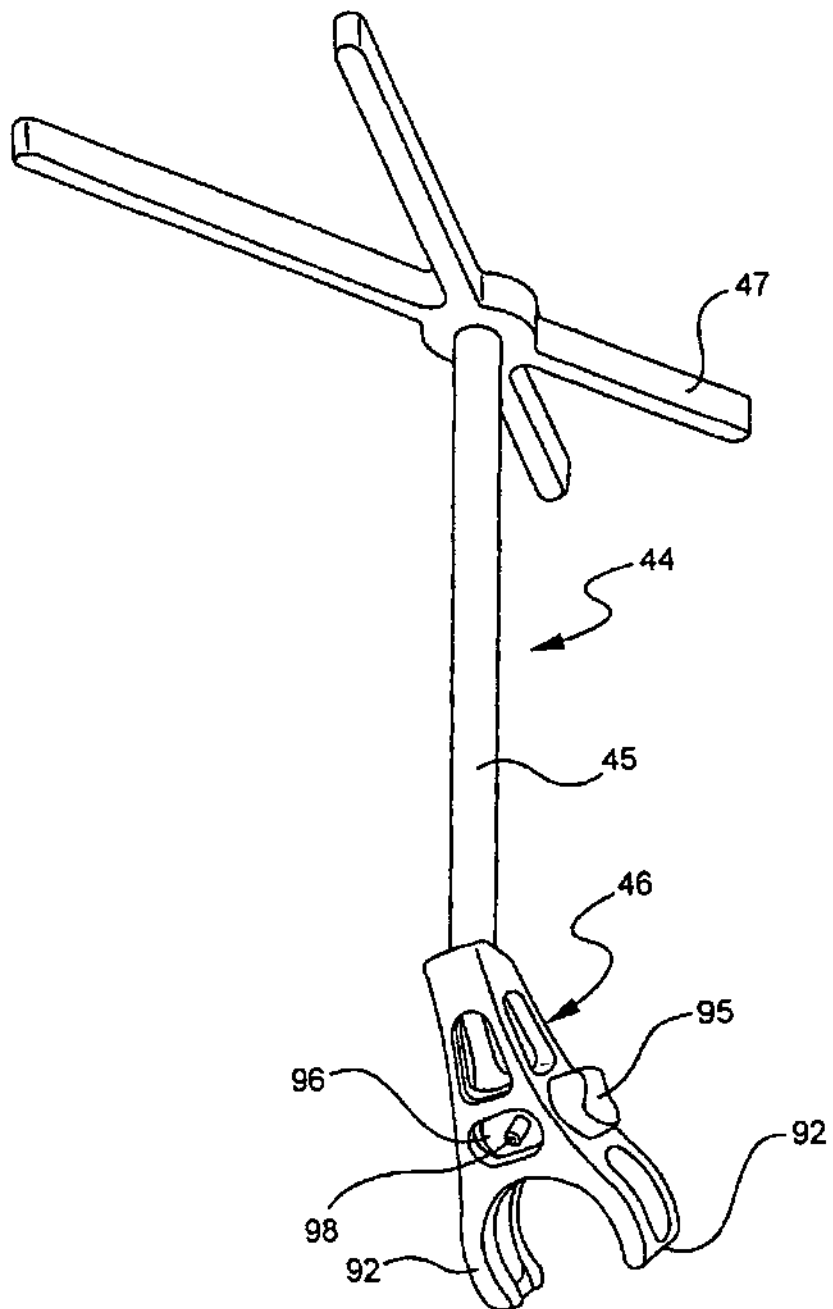


FIG. 17A

FIG. 18



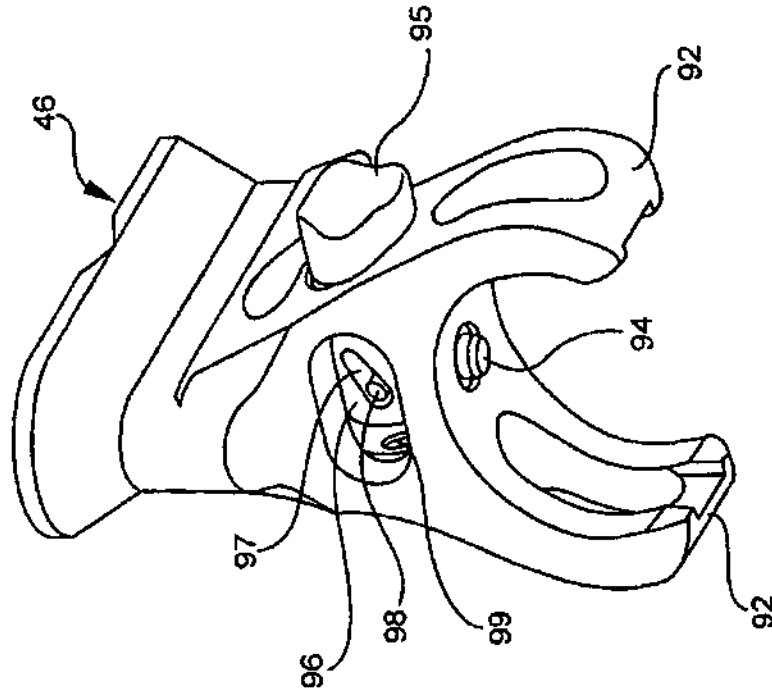


FIG. 19

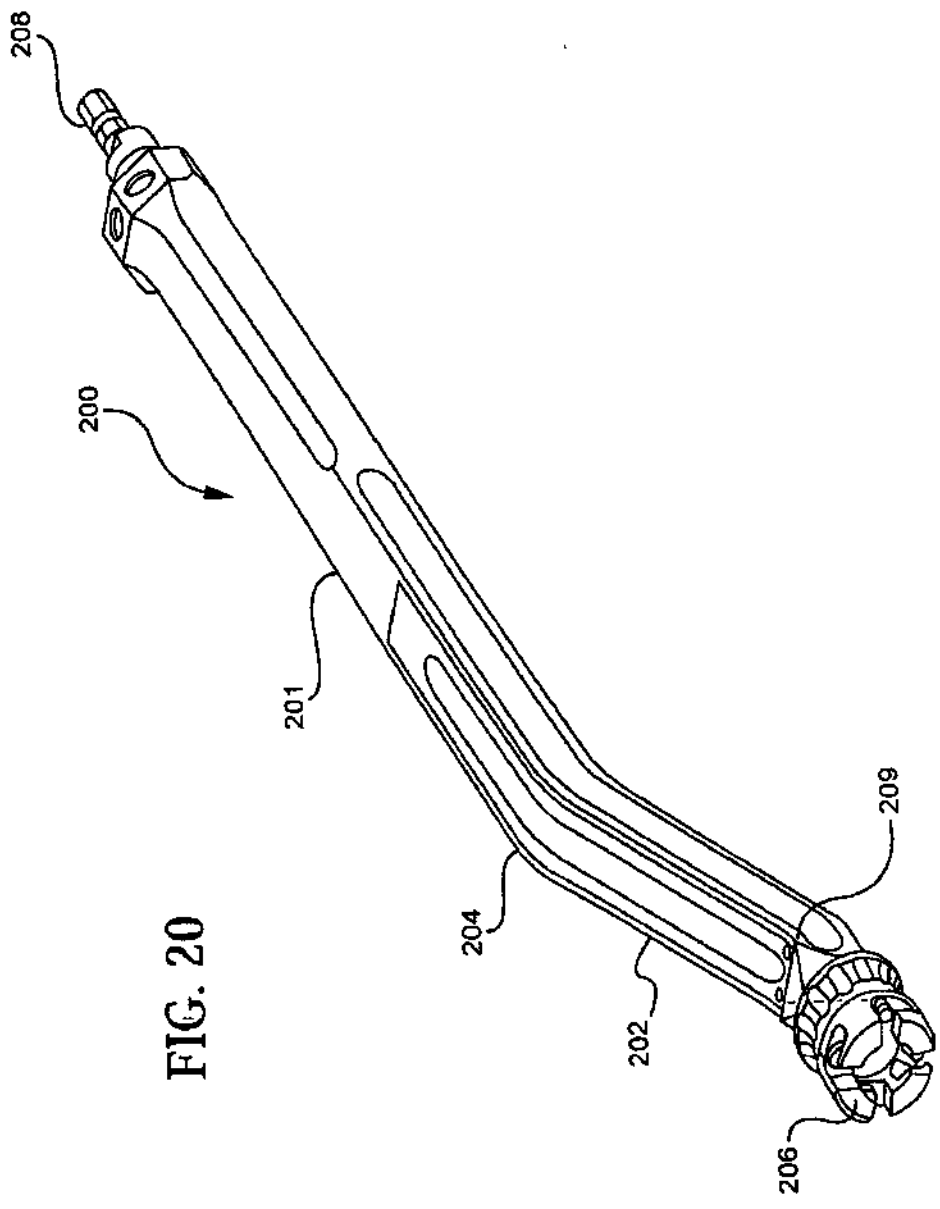


FIG. 20



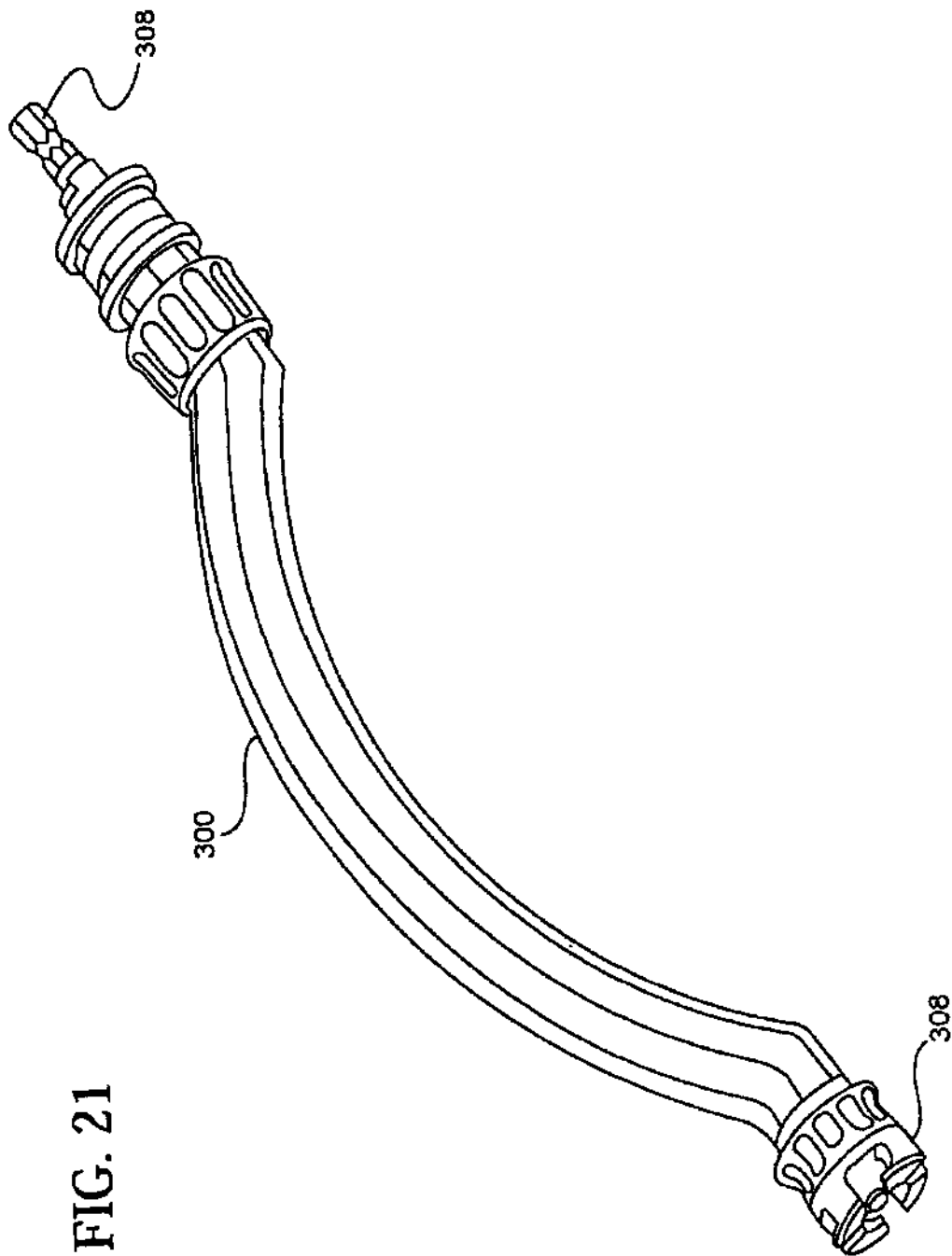
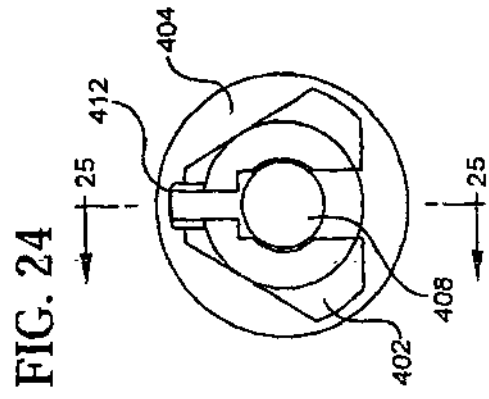
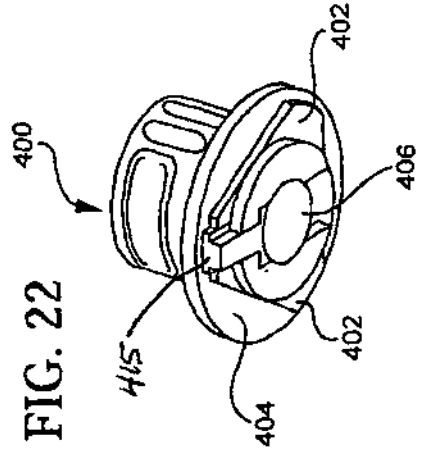
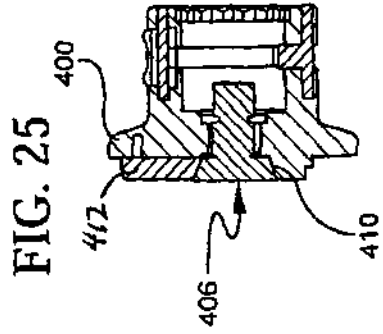
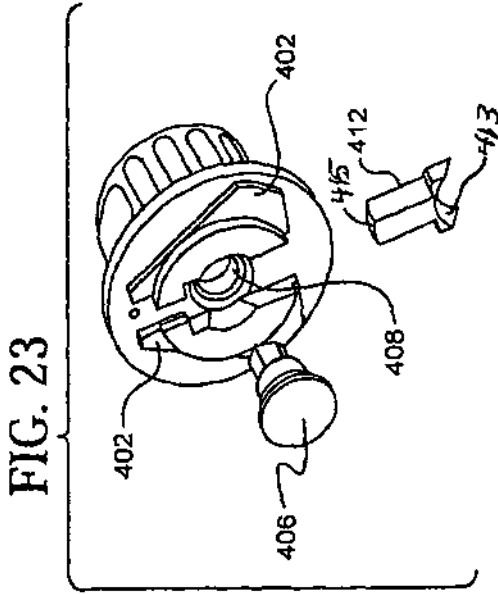
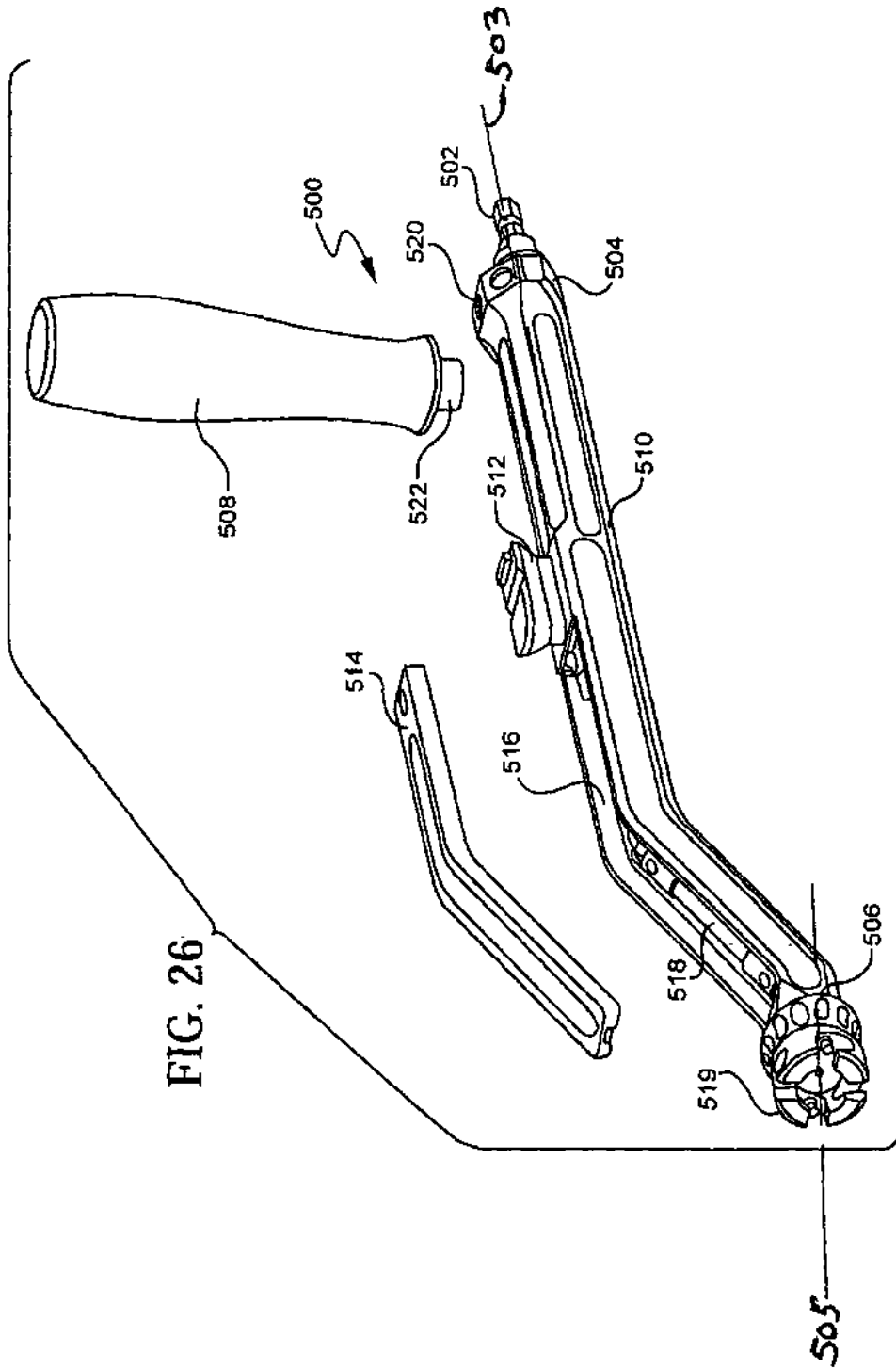


FIG. 21





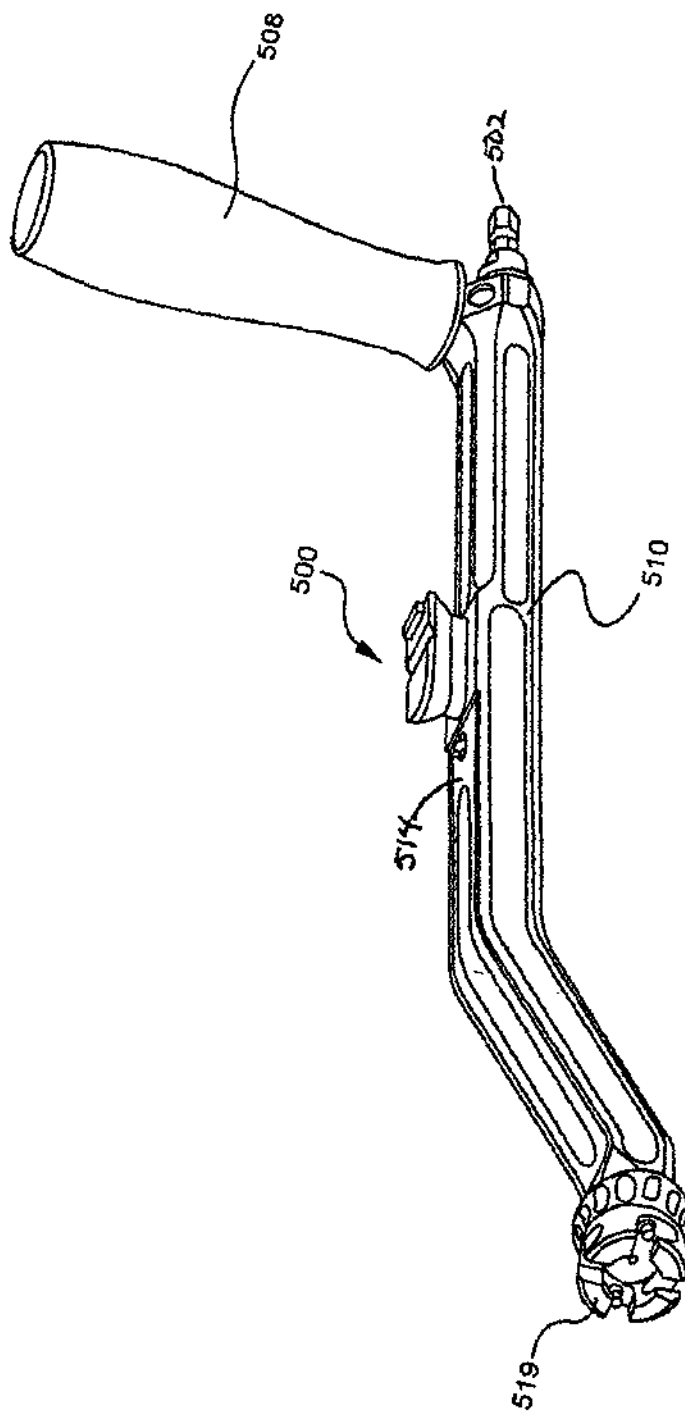


FIG. 27

