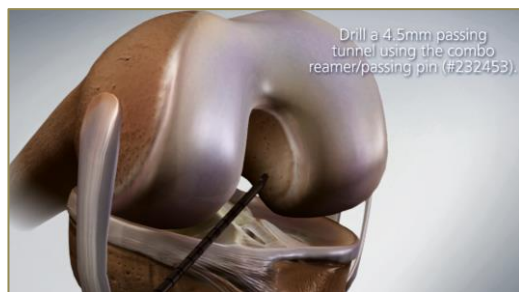


- 1. Drill the passing tunnel** using the combo beath pin/4.5mm reamer (#232453) through the lateral cortex. *(If using the femoral aimer, back load the pin through the top.)* Alternatively, use a 4.5mm reamer and a standard beath pin to prepare the passing tunnel.



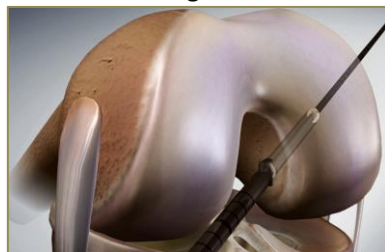
- 2. Measure the total transosseous femoral tunnel length** by hooking the combo reamer on cortex (can also use a standard depth gauge or the 4.5mm reamer).

- 3. Mark the suture loops** according to the total femoral tunnel length. This mark signals when the button is ready to be flipped.

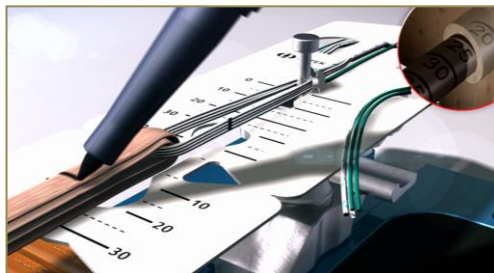


Note: Steps 3 and 5 are optional.

- 4. Ream the femoral socket:** Select the reamer that corresponds to the graft size and ream a socket to the desired graft in tunnel depth.



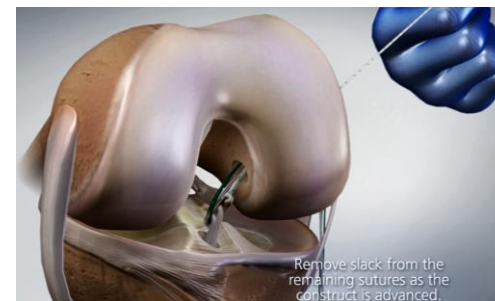
- 5. Mark the graft** according to the socket depth. When this mark is flush with the tunnel aperture, the graft has completely filled the socket.



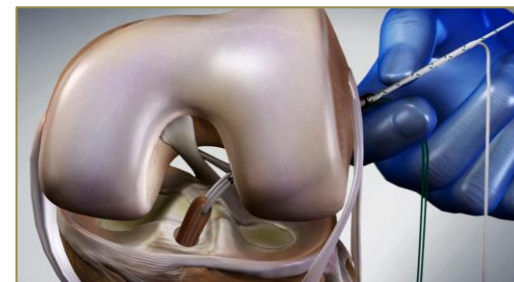
- 6. Pull suture tails through the tunnels:** Place about 3-4" of the implant's suture tails through the passing loop. Pull the suture tails through the tibial and femoral tunnels and out through the thigh.



- 7. Pull on green/white striped leading suture** to advance the implant/graft construct through the tibial tunnel and femoral socket. Remove any slack from the remaining sutures as you advance the construct.

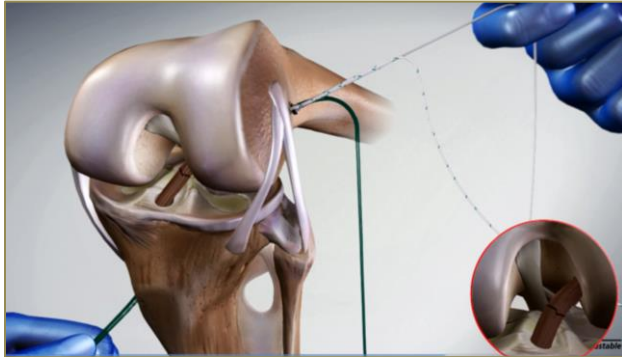


- 8. Flip the button with the green suture:** Watch for the markings on the suture loops as they approach the aperture which will indicate that the button is ready to be flipped. Pull on the green suture to flip the button.



- 9. Firmly pull on the distal graft to confirm the button is on the cortex.**

**10. Pull on the WHITE suture** to adjust the suture loops and advance the graft into the femoral socket. Pull proximally, in line with the graft. When the graft markings are flush with the aperture, the graft has completely filled the socket.



**\*\* IMPORTANT: Apply counter tension on the graft to ensure the button stays on the cortex.\*\***

**11. “Lock the Knot”** and remove excess laxity of loops by doing the following.



- **Firmly pull on the tibial graft ends**
- **Cycle the knee**
- **Complete tibial side fixation** (this may be done at this point or after re-tensioning below)
- **Re-tension the white adjusting suture**

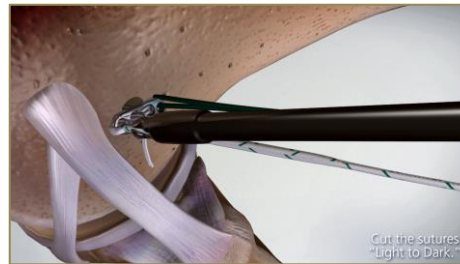
**12. Remove sutures after tibial fixation is completed.** To maintain integrity of the knot, remove sutures in the correct order:

**\*\*Light to Dark\*\***

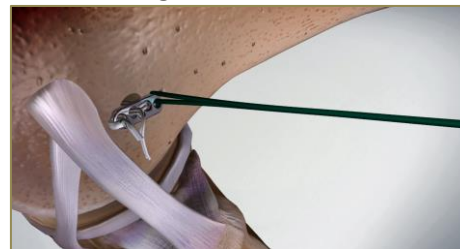
**1st.** Remove the **white** suture first. Cut with a cord cutter (#214646) or by dimpling the skin and using scissors. (If the guard is visible outside the skin, do not cut it.)



**2nd.** Remove the **green/white striped** suture as with previous technique.



**3rd.** Remove the **green** suture.



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