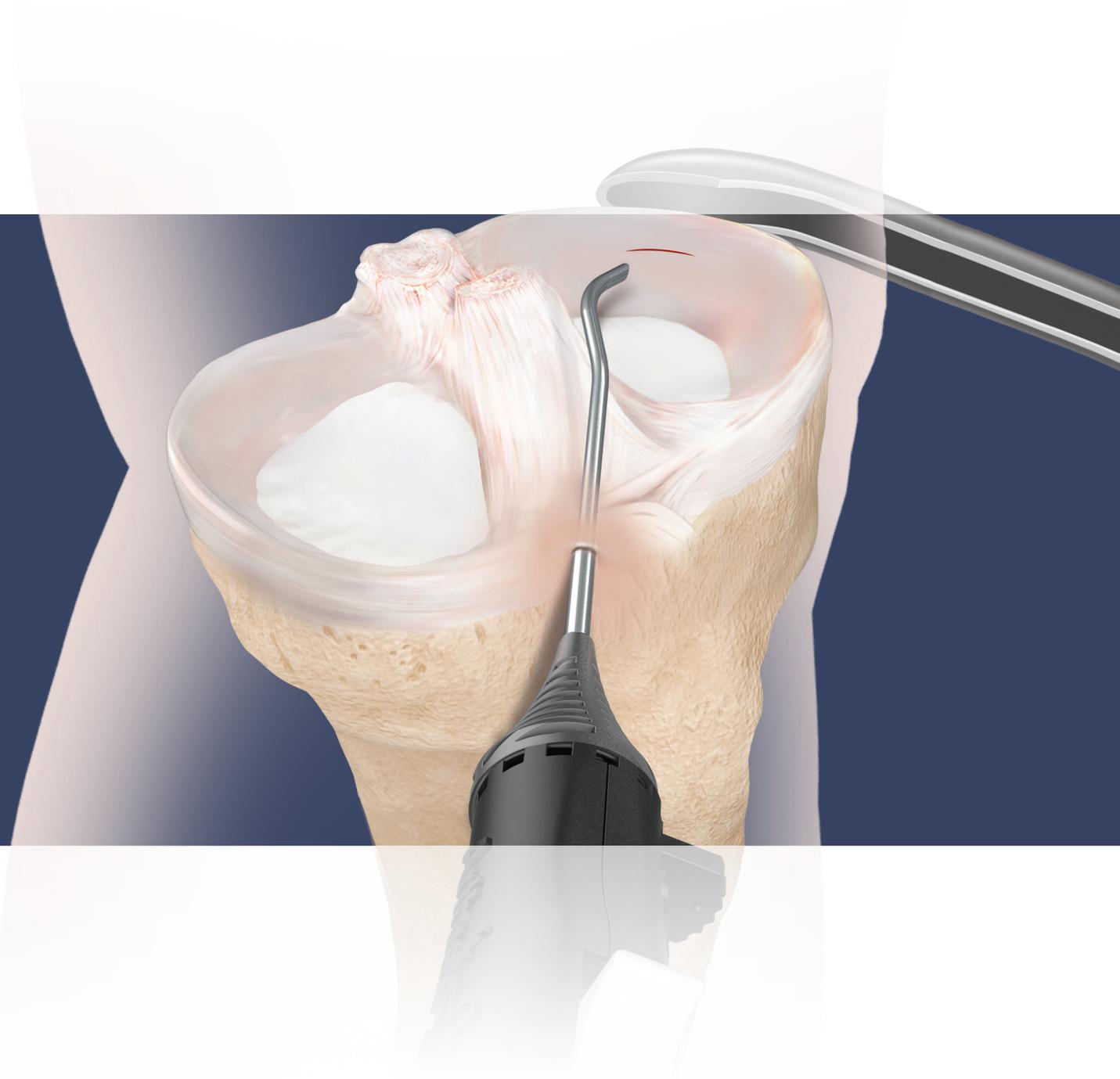


ZoneNavigator™ System

Surgical Technique



ZoneNavigator™ System

The ZoneNavigator system allows precise placement and passing of horizontal and vertical suture constructs for inside-out meniscus repairs. The multiple-cannula system is interchangeable and optimized for specific suture placement in the posterior, middle, and anterior zones of the meniscus.

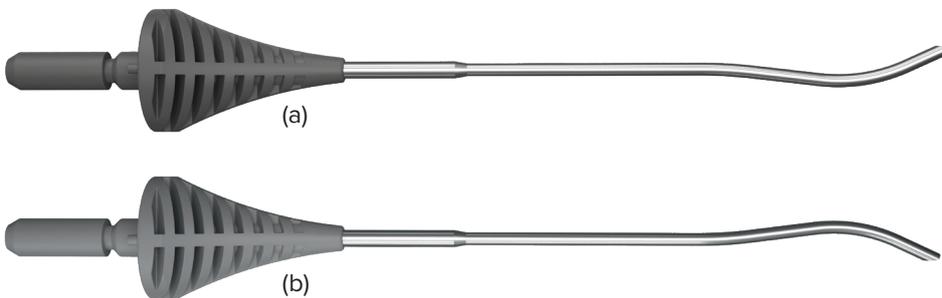
Anterior Cannula

The anterior cannula is optimal for inside-out meniscus repair, from the anterior horn to the middle zone of the meniscus. Introduce the cannula through the contralateral portal for extreme anterior meniscus repair.



Middle / Posterior Cannula

Specific left **(a)** and right **(b)** cannulas target the posterior and middle zones of the meniscus.



- **Mini SutureTape With Meniscal Repair Needles:** The 0.7 mm Stainless Steel needles with Mini SutureTape are specifically designed for use with the ZoneNavigator system. The 0.9 mm-wide SutureTape disperses forces over a greater area compared to smaller round suture.

Ergonomic Handle

Control suture placement and needle advancement in 1 cm increments with the ergonomically designed handle. This allows the surgeon to hold the arthroscope with one hand and insert sutures with their other hand.



Surgical Technique



Select the appropriate cannula relative to the tear location. Attach the cannula to the handle and introduce it into the joint. The posterior/middle cannula is designed to enter the joint from the contralateral portal, allowing direct visualization from the ipsilateral portal with the arthroscope.



The needle catcher facilitates 2 options for guiding needles safely away from neurovascular structures. The concave, curved retractor may be inserted through a small accessory incision as a retractor or it can serve as a needle deflector when a classic mini-open inside-out procedure is performed. Insert the ZoneNavigator™ cannula into the joint and feed the first meniscus repair needle through the end of the handle.



Advance the needle slightly by depressing the button and advancing it forward. **Note: Exposing the tip of the needle can aid with precise placement of the stitch.** Continue to advance the needle under direct visualization until the needle can safely be retrieved from the posterior accessory incision.



Move the cannula to the next position on the meniscus. Load the second meniscus repair needle into the handle and advance similarly to the first needle. **Note: Maintain slight tension on the previously passed suture to facilitate easy passage through the cannula.** Complete the repair by tying the sutures over the capsule.

Ordering Information

ZoneNavigator™ System

Product Description	Item Number
ZoneNavigator System Handle	AR-7900
ZoneNavigator System Anterior Cannula	AR-7905
ZoneNavigator System Middle Cannula, left posterior	AR-7910L
ZoneNavigator System Middle Cannula, right posterior	AR-7910R
Needle Catcher	AR-6660

Suture

Product Description	Item Number
2-0 Mini SutureTape Meniscus Repair Needles, qty. 2	AR-7523
2-0 FiberWire® Suture Meniscus Repair Needles, small, qty. 2	AR-7223SM

Products may not be available in all markets because product availability is subject to the regulatory approvals and medical practices in individual markets. Please contact Arthrex if you have questions about the availability of products in your area.



This description of technique is provided as an educational tool and clinical aid to assist properly licensed medical professionals in the usage of specific Arthrex products. As part of this professional usage, the medical professional must use their professional judgment in making any final determinations in product usage and technique. In doing so, the medical professional should rely on their own training and experience, and should conduct a thorough review of pertinent medical literature and the product's directions for use. Postoperative management is patient-specific and dependent on the treating professional's assessment. Individual results will vary and not all patients will experience the same postoperative activity level and/or outcomes.

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