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LITe®

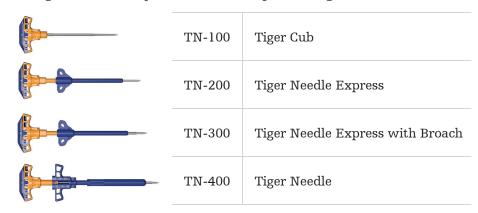
Pedicle access solution

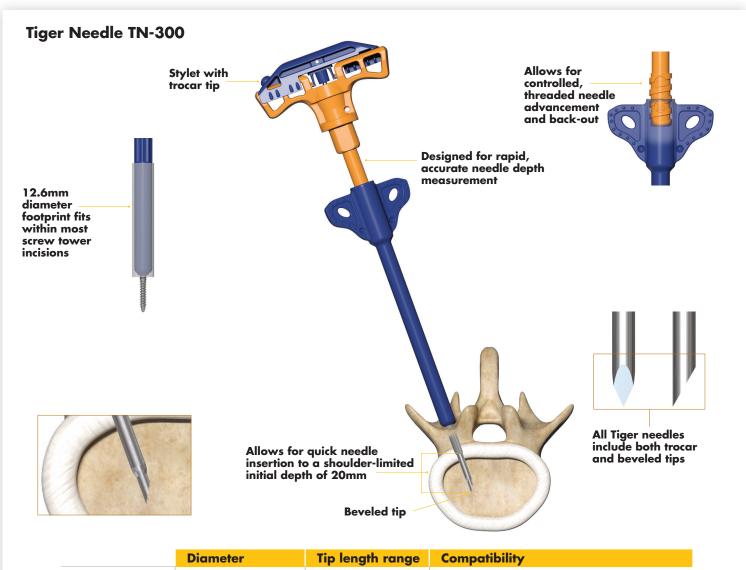


Pedicle access using Tiger needles and patented Y-Wire MIS guidewire technology

The intelligently engineered Tiger pedicle access needles are designed to provide a pedicle access solution. All Tiger needles have been engineered to deliver the Y-Wire, a patented guidewire designed to minimize inadvertent advancement of the wire through bone.

The Tiger needle family includes four unique offerings.





	Diameter	TIP length range	Comparibility
TN-100	2.9mm (11 gauge)	42mm	Compatible with Y-Wires up to Ø1.5mm
TN-200	2.9mm (11 gauge)	15mm – 35mm	Compatible with Y-Wires up to Ø1.5mm
TN-300	2.9mm (11 gauge)	15mm – 35mm	Compatible with Y-Wires up to Ø1.5mm
TN-400	3.7mm (10 gauge)	20mm – 45mm	Compatible with Y-Wires up to Ø1.5mm

Y-Wire MIS guidewire technology

Designed to minimize forward motion of wires during surgery.

Guidewires are crucial to Minimally Invasive Surgery (MIS). The Y-Wire is made from highly polished Nitinol material with a patented Y tip, and was designed to mitigate the potential issues of:

- Guidewires advancing
- Guidewires kinking
- Bending guidewires out of the surgical site



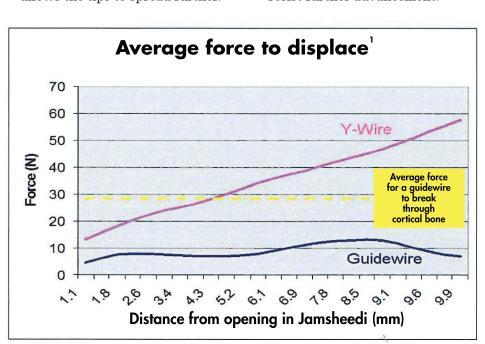
How the Y-Wire works



1. As the Y-Wire exits the pedicle access needle, its tips begin to open. Advancing the Y-Wire allows the tips to spread further.

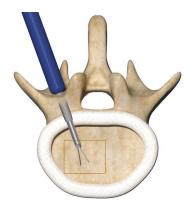


2. Full deployment generally occurs at 10-15mm. The splayed tips are designed to engage bone and resist further advancement.



¹ Hardin, C, Preiss Joshua E, Gutierrez, Sergio, Isaacs, Robert E. Redesigning a k-wire limits inadvertent advancement: a biomechanical study. Duke University Medical Center. Department of Surgery. Division of Neurosurgery.







Compare Tiger needles

Cub TN-100	Express TN-200 TN-300		Tiger TN-400
0	0	0	0
	8	8	8



Y-Wire compatibility

All Tiger pedicle access needles are designed to be compatible with Y-Wire, a patented guidewire designed to minimize inadvertent advancement of the wire through bone.



Mechanical needle control

A threaded mechanism allows the surgeon to control advancement and retraction of the needle through bone. Designed to mitigate potential issues associated with impact advancement and removal of needle. The Tiger TN-400 also features mechanical removal of the needle cannula from the tap sheath.



Integral broach

Built-in broach at the tip of the needle reams a Ø4.5mm hole 15mm into the pedicle and provides a one-step 30mm deposit of the Y-Wire into the vertebral body.



Tap sheath (Jack Screw)

Allows placement of a tap tube during initial pedicle access and cannulation.



Needle depth measurement

A built in measurement system is designed for rapid determination of needle and insertion depth.

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

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

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