

# YDFIX Proximal Humerus Plate



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The **YPH (Ydfix Proximal Humeral)** plate system is the upgraded version of the angle stabilized humeral head plate. It ensures all the Ydfix advantages besides the even wider fixation range compared to other products. The problem-free healing is guaranteed by the modern and multifunctional targeting system, the resized plate adapted for polyaxial technique and the standardized polyaxial screws.

1.1 | The implant

- Polyaxial angle stabilized system in step - free  $\pm 15$  deg angulation of insertion



- Maximum 3 times of correction possibility when misidentifying the correct screw direction
- Optimal, pre-determined screw directions in the holes
- Thinned head, the implant does not interfere with the soft tissues
- Rounded edges to protect nearby soft tissues
- Ability to perform minimally invasive surgery
- Oval hole for plate positioning
- Self tapping but blunt ended screws to avoid tissue irritation
- Anodized Titanium raw material
- Torx headed screws

1.2 | Instrumnets

- Capable of drilling in preset and  $\pm 15$  deg directions step - free
- Easy to assemble targeting head for choosing either polyaxial or monoaxial fixation in the pre-determined directions.



1.3 | Indications

- Dislocated fractures of the proximal humerus
- Pseudoarthrosis on proxima humerus
- Osteotomy on proximal humerus

2.1 | Ydfix Proximal Humerus plate

Holes on the tail	Length (mm)
3H	84
4H	96
6H	120
8H	144
10H	168
12H	192



Raw material  
**Anodised Titanium**

2.3 | Corticalis screw - TX Ø3,5 mm

Length (mm)
10 - 50
Raw material <b>Anodised Titanium</b>
Colour <b>Grey</b>



2.2 | Ydfix screw Ø3,5

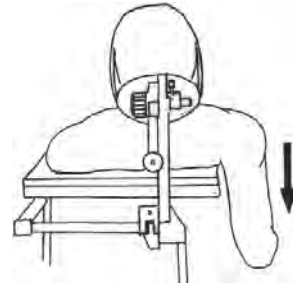
Length (mm)
10 - 50
Raw material <b>Anodised Titanium</b>
Colour <b>Green</b>



# 3 | Surgical description

## 3.1 | Patient positioning

In beach chair position in such a way the multiple directional images can be made of the fracture area with the image intensifier.



## 3.2 | Incision

In case of minimally invasive operation vertical transdeltoid approach paying attention to nervus radialis or typical frontal approach near to sulcus deltoideo pectoralis.

## 3.3 | Temporary fixation

Identify the fragments and fix them temporarily with 2 mm Kirschner wires. Use image intensifier to confirm correct position of the fragments.

## 3.4 | Selecting the plate

Select the most appropriate plate for the given fracture.



## 3.5 | Targeting options in YPH system

The surgeon can select between two methods.

### Monoaxial fixation

The holes on the plate head can be drilled and locked in the pre-determined directions. The aiming is facilitated by a targeting jig which can be easily put on the plate.

### Polyaxial fixation

You can fix the holes of the plate on the head by polyaxial method. The conical side of the double sleeve has to be used without the targeting jig.

## 3.6 | Assembly of the targeting jig and the plate

The positioning of the plate is enhanced by the targeting jig, therefore, we recommend its usage in all cases. The jig shall be fixed with a screw on the plate. The screw shall be tightened by the screwdriver.

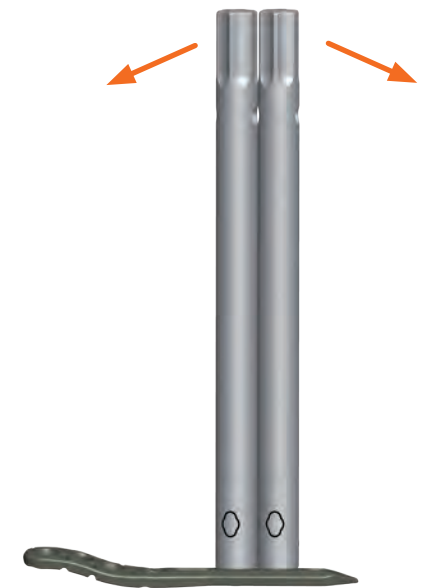


## 3.7 | Modelling of the plate

For optimal fit we can modellate the plate- in case it is needed. There are two bending irons for this purpose. For the round holes of the head use the device with round marking, while for the oval holes of the shaft use the ones with keyhole marking. Drive the bending tools fully in the respective holes and always use two neighbouring holes. Perform bending.

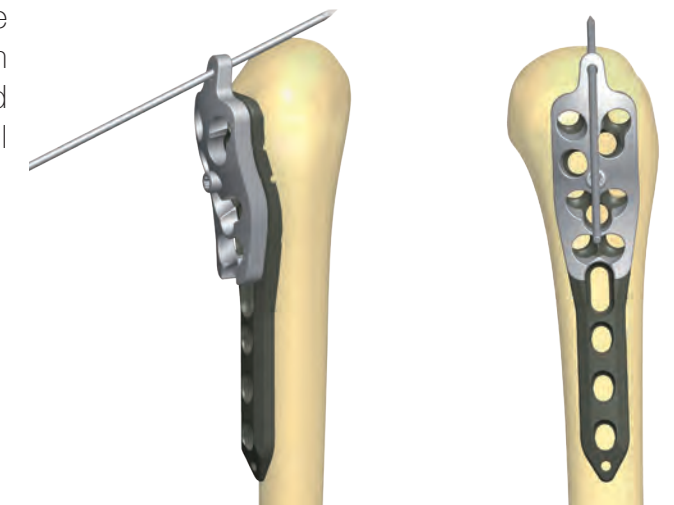
### Attention

The bent plate cannot be targeted with the head targeting device!



## 3.8 | Positioning of the plate

The optimal position of the plate is 8 mm from the upper edge of the tuberculum maius. Put a 2 mm Kirschner wire into the guide hole of the jig and position the plate in such a way that the wire shall lay on the proximal joint surface.



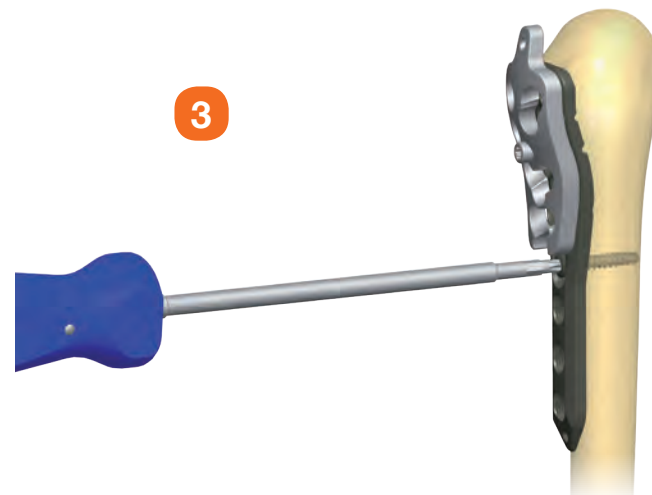
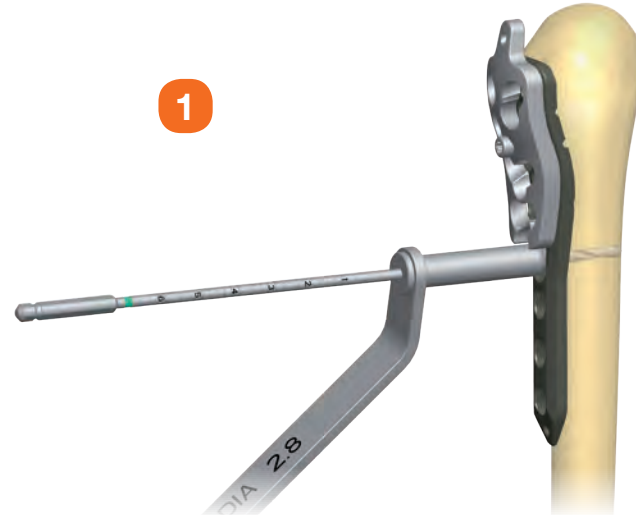
## 3 | Surgical description

### 3.9 | Fixation in the oval hole

After approximate positioning remove the Kirschner wire and use the straight side of the double drill sleeve to drill a 2.8 mm hole into the middle of the oval hole. (1)

Measure screw length. Remove the 2.8 mm drill sleeve and push the hook of the gauge through the hole while pushing its moving part to the bone surface. Select screw accordingly. (2)

Fix the screw in such a way that the fine positioning of the plate is possible. In the final position tighten the cortical screw. (3)



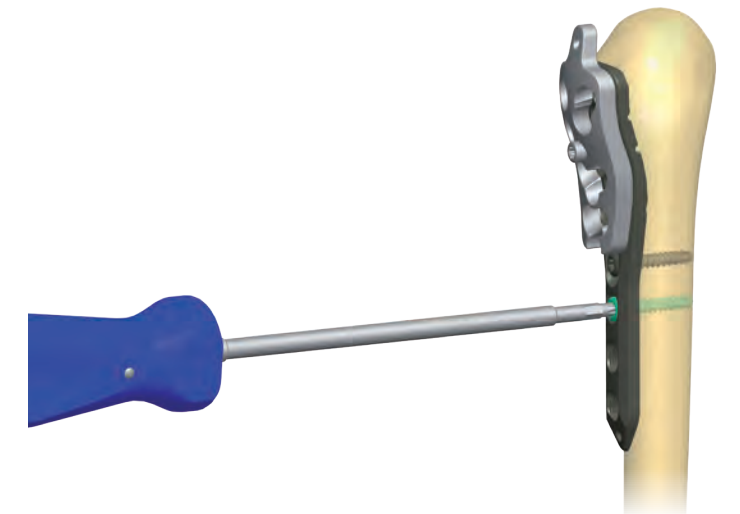
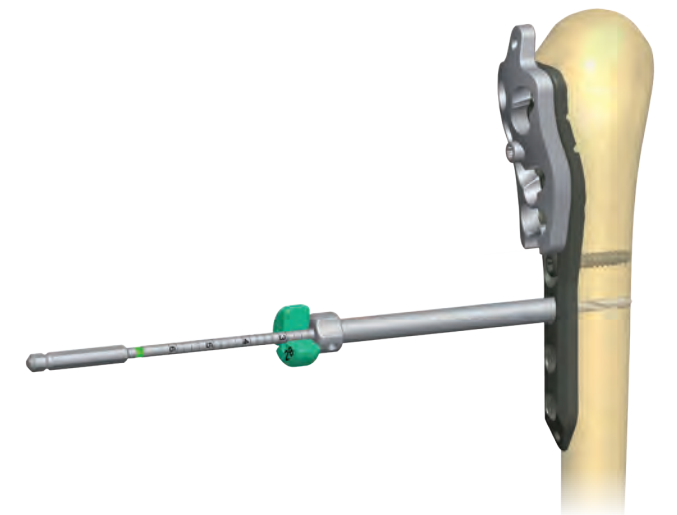
### 3.10 | Distal locking I.

After positioning place a 3.5 mm polyaxial screw into the fix distal bone. The rest of the fragments shall be built onto this.

Using the soft tissue protector and the drill sleeve the monoaxial drilling can be made.

To measure length place the green drill stop on the 2.8 mm drillbit prior to drilling just above the spiral part. After drilling the required screw length can be read on the side of the stop which hit the sleeve.

Drive the screw in with the T15 screwdriver. In case we use polyaxial locking screws apply T15/1,5 Nm torque limiting screwdriver.



### 3.11 | Proximal locking

3-4 proximal screws ensure motion-stable fixation. The number of screws to be used depends on the number and positions of the fragments.

There are holes for Kirschner wires and for tendon and bone stitching.



# 3 | Surgical description

## 3.11.1 | Polyaxial technique

Remove the targeting jig used for positioning.

Use the conical side of the 2.8 mm double drill sleeve and the 2.8 mm drillbit. The tip of the sleeve fits into the hole and the axis of the conical sleeve is in the optimal direction. This ensures the  $\pm 15$  degree deviation from the optimal direction.

Drill with the 2.8 mm drillbit up to 5 mms from the subchondral zone. Use image intensifier control.

If you wish to use monoaxial locking together with the polyaxial then use the straight side of the double sleeve.

Use the gauge as per the image, without the sleeve.

### Attention

After drilling through the conical side of the double drill sleeve the length gauging with the scaled drillbit is not possible.

After gauging drive the screw in with the T15/1.5 Nm torque screwdriver. Repeat the above steps in case of all hole that we wish to use.



## 3.11.2 | Monoaxial technique

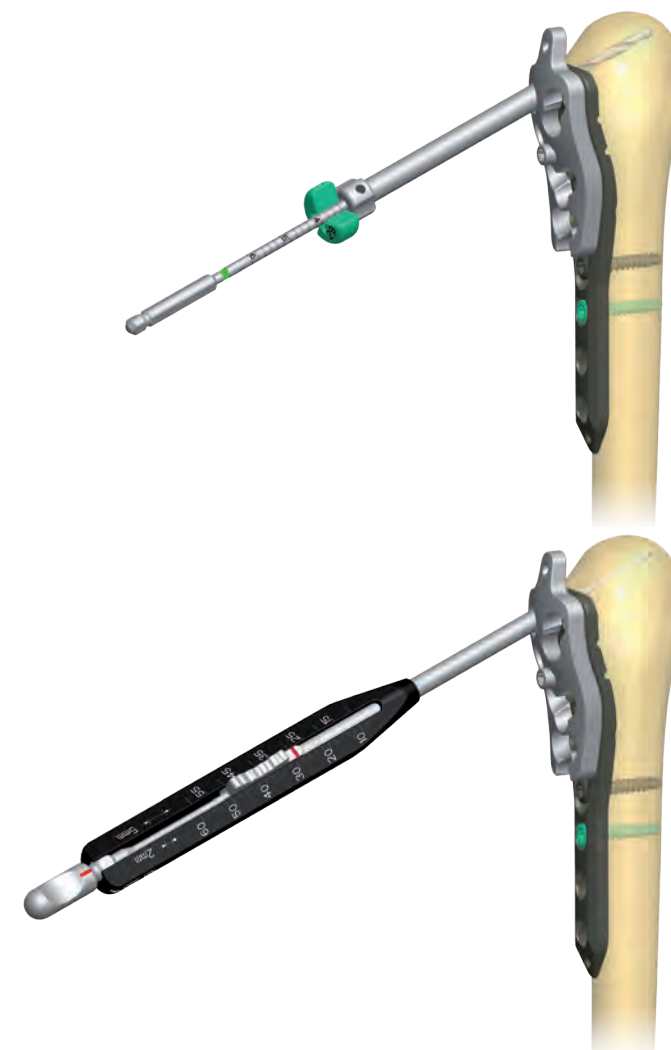
Put the soft tissue protector and the 2.8 mm drill sleeve into the appropriate hole and drill under image intensifier control up to 5 mm from the subchondral zone.

Mind that the most distal drilling shall be at least 5 mm above the medial arch of the surgical neck.

Confirm the correct direction of the drilling and measure screw length. Use the hooked gauge or the drill with the stop as described previously. In case of blind holes subtract 2 mm from the read value.

After gauging drive the screw in with the T15/1.5 Nm torque screwdriver.

Repeat the above steps in case of all hole that we wish to use.



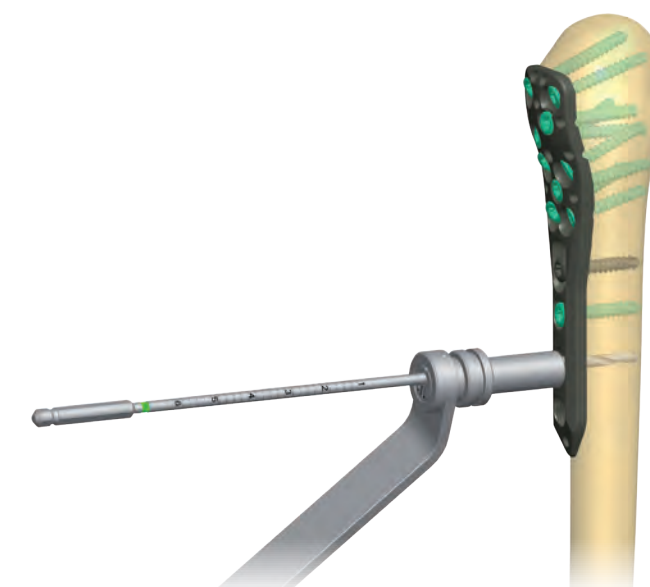
## 3.12 | Distal locking II.

Fix the rest of the tail holes as per indicated in Distal locking I.

When locking the holes on the tail there is a compression possibility. Use the double drill sleeve. One side of the sleeve is marked with 1,0, which is the compression side, while the other is the neutral one. Put the sleeve into the chosen hole with the respective end (i.e: compression vs neutral while paying attention to the marked arrow. It should point into the direction of the fracture. Perform drilling and length gauging.

### Attention

Only the hooked gauge can be used with this method!



4.1 | Ydfix Proximal Humerus plate



Holes (F+SZ)	Length (mm)	Anodised Titanium
9 + 3	84	3001403000
9 + 4	96	3001404000
9 + 6	120	3001406000
9 + 8	144	3001408000
9 + 10	168	3001410000
9 + 12	192	3001412000

4.3 | Cortical screw - TX Ø3,5 mm



Length (mm)	Anodised Titanium
10	1032435010
12	1032435012
14	1032435014
16	1032435016
18	1032435018
20	1032435020
22	1032435022
24	1032435024
26	1032435026
28	1032435028
30	1032435030
32	1032435032
34	1032435034
36	1032435036
38	1032435038
40	1032435040
42	1032435042
44	1032435044
46	1032435046
48	1032435048
50	1032435050

4.2 | Ydfix screw Ø3,5 mm

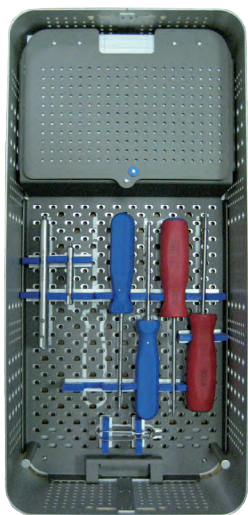
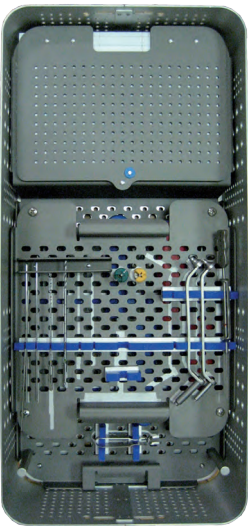
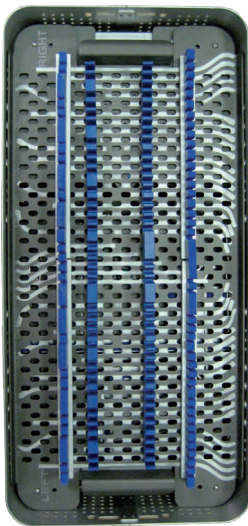


Length (mm)	Anodised Titanium
10	1017435010
12	1017435012
14	1017435014
16	1017435016
18	1017435018
20	1017435020
22	1017435022
24	1017435024
26	1017435026
28	1017435028
30	1017435030
32	1017435032
34	1017435034
36	1017435036
38	1017435038
40	1017435040
42	1017435042
44	1017435044
46	1017435046
48	1017435048
50	1017435050

5.1 | Filled-up tray


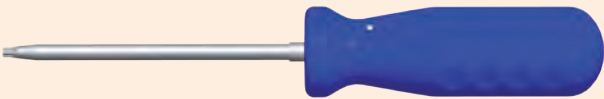
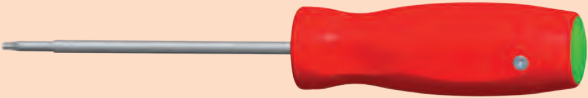




Surgical instruments

Description	Size	Quantity	Cat.no.
Target device - YPH plate		1	5240300903
Screwdriver	T15	1	5210720015
Torque screwdriver	T15/1.5 Nm	1	5210510044
Double drill sleeve	2.8 mm	1	5280122903
Double drill sleeve - V	small	1	5275212902
Length gauge	2.7-3.5 mm	1	5280114905
Plate bender	6 mm	2	5280122907
Plate bender	6 mm	2	5280122914
Spiral drill with quick-connecting end	2.8x165 mm	2	5240300904
Screw forceps		1	5939999002
Drill stop	2.8 mm	2	5210510227
Kirschner wire	2x150 mm	2	5937520150
Tray (empty) YPH		1	5233800021
Filled-up tray - YPH		1	5233800020








# 5 | Instrument list

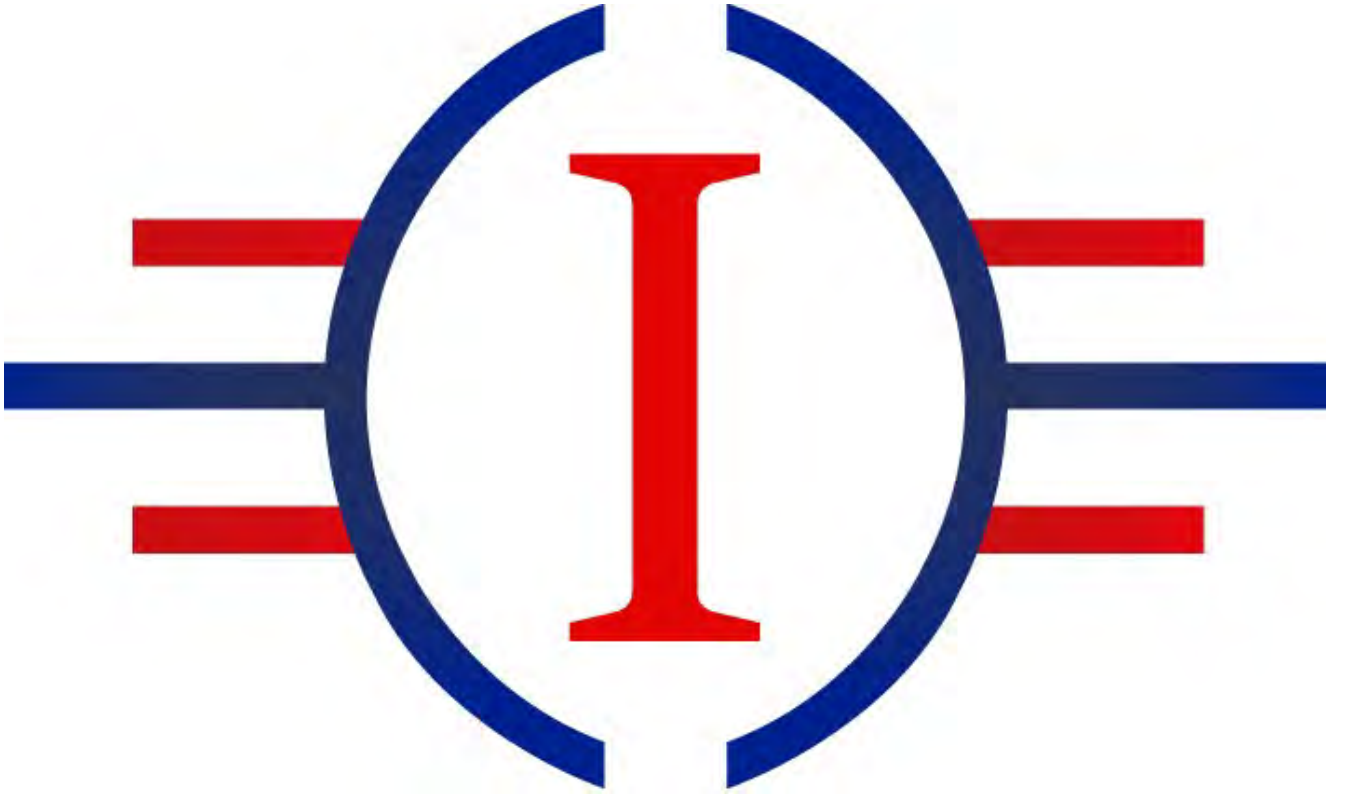
## 5.2 | Instruments

Targeting device - YPH plate	 5240300903
Screwdriver (T15)	 5210720015
Torque screwdriver (T15/1.5 Nm)	 5210510044
Double drill sleeve (2.8 mm)	 5280122903
Double drill sleeve - V (small)	 5275212902
Length gauge (2.7-3.5 mm)	 5280114905
Plate bender (6 mm)	 5280122907

## 5.2 | Instruments

Plate bender - V (6 mm)	 5280122914
Spiral drill with quick-connecting end (2,8x165 mm)	 5240300904
Screw forceps	 5939999002
Drill stop (2.8 mm)	 5210510227
Kirschner wire (2x150 mm)	 5937520150





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