DEVICE DESCRIPTION

The VTI InterLink™ Pedicle Screw System is comprised of polyaxial pedicle screws in various diameters and lengths, spinal rods in various lengths, cross-connectors and set screws. The VTI InterLink™ Pedicle Screw System can be used for single or multiple level fixation. All implant components are manufactured from titanium alloy (Ti-6Al-4V ELI) that conforms to ASTM F136.

SURGICAL PROCEDURE

The surgical technique associated with this system is a thoracolumbar pedicle screw fixation procedure. Depending on surgeon preference, a preoperative CT scan should be considered where anatomical variability could affect the stability of an implant, determination of proper sizing of implants and choice of implants or procedures. View the full surgical technique at vti-spine.com/file-library.
SIZING OPTIONS

ROD OPTIONS & SIZES
CURVED ROD: 40 mm, 45 mm, 50 mm, 60 mm, 70 mm, 80 mm, 90 mm
STRAIGHT ROD: 40 mm, 50 mm, 70 mm, 80 mm, 90 mm, 100 mm, 110 mm, 120 mm, 150 mm, 180 mm, 200 mm, 400 mm

PEDICLE SCREW SIZES

| 4.5 x 30 mm | 5.5 x 30 mm | 6.5 x 30 mm | 7.5 x 30 mm |
| 4.5 x 35 mm | 5.5 x 35 mm | 6.5 x 35 mm | 7.5 x 35 mm |
| 4.5 x 40 mm | 5.5 x 40 mm | 6.5 x 40 mm | 7.5 x 40 mm |
| 4.5 x 45 mm | 5.5 x 45 mm | 6.5 x 45 mm | 7.5 x 45 mm |
| 4.5 x 50 mm | 5.5 x 50 mm | 6.5 x 50 mm | 7.5 x 50 mm |

INDICATIONS
The VTI InterLink™ Pedicle Screw System is intended to provide immobilization and stabilization of spinal segments in skeletally mature patients. The system is intended for posterior, pedicle fixation as an adjunct to fusion in the treatment of the following acute and chronic instabilities or deformities of thoracic, lumbar, and sacral spine: degenerative disc disease (DDD) (defined as back pain of discogenic origin with degeneration of the disc confirmed by history and radiographic studies); spondylolisthesis; trauma (i.e., fracture or dislocation); spinal stenosis; curvatures (i.e., scoliosis, kyphosis, and/or lordosis); tumor; pseudoarthrosis; and failed previous fusion.

CONTRAINDICATIONS
Disease conditions which have been shown to be safely and predictably managed without the use of internal fixation devices are relative contraindications to the use of these devices.

Active systemic infection or infection localized to the site of the proposed implantation are contraindications to implantation.

Severe osteoporosis is a relative contraindication because it may prevent adequate fixation of spinal anchors and thus preclude the use of this or any other posterior spinal instrumentation system.

Any entity or condition that totally precludes the possibility of fusion, i.e. cancer, kidney dialysis or osteopenia, is a relative contraindication. Other relative contraindications include obesity, pregnancy, certain degenerative disease, and foreign body sensitivity.

In addition, the patient’s occupation or activity level or mental capacity may be relative contraindications to this surgery. Specifically, some patients may, because of their occupation or lifestyle, or because of conditions such as mental illness, alcoholism or drug abuse, place undue stresses on the implant.