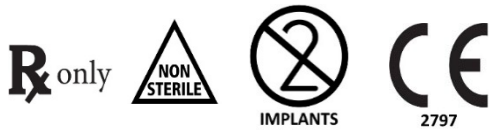





Ambassador® Anterior Cervical Plate System Instruction for Use



 ChoiceSpine, LLC
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USA

General Description:

The ChoiceSpine Ambassador Anterior Cervical Plate System is intended for anterior cervical fixation (C2-T1) for the following indications: degenerative disc disease (DDD) (defined as neck pain of discogenic origin with degeneration of the disc confirmed by history and radiographic studies), spondylolisthesis, trauma (i.e., fracture or dislocation), spinal stenosis, deformities, or curvatures (i.e., scoliosis, kyphosis, and/or lordosis), tumor, pseudoarthrosis, and failed previous fusion.

Indications for Use:

The ChoiceSpine Ambassador Anterior Cervical Plate System is intended for anterior cervical fixation (C2-T1) for the following indications: degenerative disc disease (DDD) (defined as neck pain of discogenic origin with degeneration of the disc confirmed by history and radiographic studies), spondylolisthesis, trauma (i.e., fracture or dislocation), spinal stenosis, deformities, or curvatures (i.e., scoliosis, kyphosis, and/or lordosis), tumor, pseudoarthrosis, and failed previous fusion.

Contraindications:

Contraindications include, but are not limited to:

- Active infectious process in the patient, particularly in or adjacent to the spine or spinal structures
- Signs of local inflammation
- Morbid obesity
- Pregnancy
- Grossly distorted anatomy due to congenital abnormalities
- Any medical or surgical condition which would preclude the potential benefit of spinal implant surgery
- Rapid joint disease, bone absorption, osteopenia, osteomalacia, or osteoporosis. Osteopenia or osteoporosis is a relative contraindication since this condition may limit the degree of obtainable correction and/or the amount of mechanical fixation
- Suspected or documented metal allergy or intolerance
- Any patient in which implant utilization would interfere with anatomical structures or expected physiological performance
- Use of these implants is relatively contraindicated in patients whose activity, mental capacity, mental illness, alcohol or drug abuse, occupation or lifestyle may interfere with their ability to follow post-operative instructions
- Any time implant utilization would interfere with anatomical structures or expected physiological performance
- Any case not needing a bone graft and fusion or where fracture healing is not required

Warnings and Precautions:

The ChoiceSpine Ambassador Anterior Cervical Plate System should only be implanted by surgeons who are fully experienced in the use of such implants and the required specialized spinal surgery techniques. Further, the proper selection and compliance of the patient will greatly affect the results. The surgeon should consider the patient conditions (e.g., smoker, malnutrition, obesity, alcohol and drug abuse, poor muscle, and bone quality), which may impact system performance. The ChoiceSpine Ambassador Cervical Plate System is only a temporary implant used for the correction and stabilization of the cervical spine. The system is also used to augment the development of a spinal fusion by providing temporary stabilization. This system is not intended to be the sole means of spinal support. Autogenous bone grafting must be part of the spinal fusion procedure in which the ChoiceSpine Ambassador Anterior Cervical Plate System is used. Use of this product without an autogenous bone graft may not be successful. The spinal implant cannot stand body loads without the support of bone. In this event, bending, loosening, disassembly and/or breakage of the device will eventually occur.

Based on fatigue testing results, when using the Ambassador Cervical Plate, the physician/surgeon should consider the levels of implantation, patient weight, patient activity level, other patient conditions, etc., which may impact on the performance of this system.

Magnetic Resonance Environment:

Non-clinical testing has demonstrated that the Ambassador Anterior Cervical Plate System is MR Conditional. A patient with these constructs can be safely scanned in an MR system under the following conditions:

- Static magnetic field of 1.5 Tesla (1.5T) or 3.0-Tesla (3.0T).
- Maximum spatial gradient field of 19 T/m (1900 G/cm).
- Maximum MR system reported, whole-body averaged specific absorption rate (SAR) of 1.0 W/kg. Note: 1.0W/kg whole-body SAR is less than the limitations of normal operating mode.

Under the scan conditions defined above, the device is expected to produce a maximum temperature rise of less than or equal to 4.1°C after 15 minutes of continuous scanning.

In non-clinical testing, the image artifact caused by the device extends radially up to 1.8cm and 2.4cm (respectively) from the device when imaged with a gradient echo pulse sequence in a 1.5T MR system and a spin echo pulse sequence in a 3.0T MR system.

Preoperative:

A successful result is not achieved in every surgical case, especially in spinal surgery where many extenuating circumstances may compromise results. Preoperative planning and operating procedures, including knowledge of surgical techniques, proper reduction, and proper selection and placement of the implant are critical considerations in achieving a successful result. Only patients that meet the criteria described in the indications should be selected. Patient conditions and/or predispositions such as those mentioned in the contraindications should be avoided.

Care should be used in the handling and storage of the implant components. The implants should not be scratched or otherwise damaged. Implants and instruments should be protected during storage, especially from corrosive environments. The type of construct to be assembled for the case should be determined prior to beginning the surgery. An adequate inventory of sizes should be available at the time of surgery, including sizes larger and smaller than those expected to be used.

Since mechanical parts are involved, the surgeon should be familiar with the various components before using the equipment and should personally assemble the devices to verify that all parts and necessary instruments are present before the surgery begins. All components and instruments must be cleaned and sterilized prior to use. Additional sterile components should be available in case of unexpected need. Prior to surgery, the patient must be informed of all potential risks and adverse effects contained in the present instructions for use.

Intraoperative:

The vertebral levels to be fixated should be well visualized with a linear anterior surface so that the plate will mount flush with the anterior cervical spine. The ChoiceSpine Ambassador Anterior Cervical Plate comes with a standard lordotic curve. When the configuration of bone cannot be fitted with an available temporary fixation device, and contouring is absolutely necessary, it is recommended that such contouring be gradual and great care be used to avoid notching or scratching the surface of the device(s). The components should not be repeatedly or excessively bent more than absolutely necessary. The components should not be reverse bent at the same location. Bending near the screw holes should be avoided.

The surgeon should follow established practices and specific instructions for implant of the system. Whenever possible or necessary, an imaging system should be utilized to verify proper component placement.

Extreme caution should be used around the spinal cord and nerve roots. Damage to the nerves will cause loss of neurological functions.

Always orient the Ambassador Cervical Plate as close as possible to the spinal midline.

The appropriately sized plate should be selected with the plate holes directly anterior to the vertebrae to be fused.

Before closing the soft tissues, ensure that the locking cam has been rotated to the lock position. Autogenous bone grafts must be placed in the area to be fused. Bone cement should not be used since this material will make removal of the components difficult or impossible. The heat from the curing process may cause neurological damage and bone necrosis.

Some degree of corrosion occurs on all implanted metal and alloys. Mixing of dissimilar metals can accelerate the corrosion process.

Stainless steel and titanium implants must NOT be used together in building a construct.

Different manufacturers use different materials, varying tolerances, and design configurations. Components of the ChoiceSpine Ambassador Cervical Plate System must not be used with components from any other system or manufacturer.

This device is not approved for screw attachment to the posterior elements (pedicles) of the cervical, thoracic, or lumbar spine.

Postoperative:

The physician’s postoperative directions and warnings to the patient and the corresponding patient compliance are extremely important.

Detailed instructions on the use and limitations of the device should be given to the patient. The patient should be instructed to limit and restrict physical activities, especially lifting and twisting motions and any type of sport participation. Patients should be advised of their inability to bend at the point of spinal fusion and taught to compensate for this permanent restriction in body motion. The patient should be advised not to smoke or consume alcohol during the bone graft healing process.

If a non-union develops or the components loosen, bend, and/or break, the device(s) should be revised and/or removed immediately before serious injury occurs. Failure to immobilize a delayed or nonunion of bone will result in excessive and repeated stresses on the implant. By the mechanism of fatigue these stresses can cause eventual bending, loosening or breakage of the device(s).

After the spine is fused, these devices serve no functional purpose and should be removed. If the device is not removed following completion of its intended use, one or more of the following complications may occur: (1) Corrosion, with localized tissue reaction or pain, (2) Migration of implant position possibly resulting in injury, (3) Risk of additional injury from postoperative trauma, (4) Bending, loosening and/or breakage, which could make removal impractical or difficult, (5) Pain, discomfort, or abnormal sensations due to the presence of the device, (6) Possible increased risk of infection, and (7) bone loss due to stress shielding. The surgeon should carefully weigh the risk versus benefits when deciding whether to remove the implant.


Implants must not be reused. Any implant, once used, should be discarded even though it may appear undamaged.

Potential Complications and Adverse Effects:

Potential complications and adverse effects for this system are similar to those of other spinal instrumentation systems, and include, but are not limited to:

1. Early or late loosening of the components
2. Disassembly, bending or breakage of any or all of the components
3. Foreign body (allergic) reaction to the implants
4. Infection
5. Non-union(pseudarthrosis)
6. Loss of neurological function, including paralysis (complete or incomplete), radiculopathy, dysesthesia, hyperesthesia, anesthesia, paresthesia, development or continuation of pain, numbness, neuroma, tingling sensation, Dural tears, neuropathy, neurological deficits (transient, permanent, or delayed), reflex deficits, bilateral paraplegia, and/or arachnoiditis
7. Hemorrhage, hematoma, seroma, embolism, edema, stroke, excessive bleeding, phlebitis, wound necrosis, or wound dehiscence
8. Misalignment of anatomical structures or loss of spinal mobility
9. Bone graft donor complications including pain, fracture, or wound healing problems
10. Atelectasis
11. Retropulsion of graft
12. Cessation of any potential growth of the operated portion of the spine
13. Injury to the neck, including the esophagus, trachea, carotid artery, larynx, or laryngeal nerves
14. Early or late hoarseness, dysphagia, or dysphonia
15. Vascular damage resulting in excessive bleeding.
16. Loss or impairment of bowel, sexual, and/or bladder function and other types of urological compromise.
17. Fracture, damage, degenerative changes, or instability of any bone above and/or below the level or surgery.
18. Gastrointestinal system compromise
19. Bone loss due to resorption or stress shielding
20. Death

How Supplied:

 The ChoiceSpine Ambassador Anterior Cervical Plate devices are provided clean but non-sterile and must be sterilized prior to use. Implants are intended for single use only. Instruments can be reprocessed using the recommended cleaning instructions.

Cleaning and Decontamination:

All instruments and implants are supplied to the health care facility clean but non-sterile. Implants are single use only but need to be sterilized before each use.

Additionally, all instruments that have been previously taken into a sterile surgical field must first be decontaminated and cleaned using established hospital methods before sterilization and reintroduction into a sterile surgical field. Implants that have been implanted and then removed must be discarded. Cleaning and disinfecting of instruments can be accomplished by using alkali aldehyde-free solvents at high temperatures. Cleaning and decontamination can include the use of neutral cleaners followed by a deionized water rinse.

Note: Certain cleaning solutions such as those containing formalin, glutaraldehyde, bleach and/or alkaline cleaners may damage some devices, particularly instruments; these solutions should not be used.

All products should be treated with care. Improper use and handling may lead to damage and possible improper functioning of the device.

These devices are packaged in a convenience caddy/case. All devices must be removed from the case, inspected, and cleaned via one of the appropriate methods below. Where applicable, instruments should be disassembled prior to cleaning and reassembled prior to sterilization. All devices must be placed back into the caddy and case prior to steam sterilization.

Recommended Cleaning:

The terms “Steris 444”, “Enzol®” and “Prolystica®” are tradenames of ultrasonic equipment and detergents utilized on the recommended cleaning instructions. Any ultrasonic washer or equivalent ultrasonic detergent can be utilized when used in accordance with the manufacturer’s instructions and labeling.

Automated Cleaning:

1. Rinse instrument(s) under cool running tap water (< 35 °C) to remove gross soil. Use a sterile syringe to flush water through and around cracks, crevices, and hard to reach areas.
2. Use a soft bristle brush as needed to remove soil, paying close attention to threads, crevices, and hard to reach areas.
3. Transfer instrument(s) into a STERIS 444 washer with the following parameters. Incline the instrument(s) to assist in drainage. Motor speed: High

Phase	Time (min)	Temperature	Detergent
Pre-Wash 1	1:00	Cold Tap Water	N/A
Enzyme Wash	1:00	Hot Tap Water	Enzol® at 1 oz per 1 gal water
Wash 1	2:00	60°C	Prolystica® 2x Conc. Neutral at 1/8 oz per 1 gal water
Rinse 1	1:00	Hot Tap Water	N/A
Drying	7:00	115°C	N/A

4. Remove instrument(s) from washer & visually inspect for soil. Repeat if necessary.

Mechanical Cleaning (Ultrasonic):

1. Rinse instrument(s) under cool running tap water (< 35 °C) to remove gross soil. Use a sterile syringe to flush water through & around cracks, crevices, & hard to reach areas.
2. Prepare Enzol® solution of one (1) ounce per one (1) gallon of warm tap water (< 55 °C).
3. Fully immerse instrument(s) in the detergent for at least one (1) minute.
4. Use a soft bristle brush as needed to remove soil, paying close attention to threads, crevices, & hard to reach areas.
5. Use a sterile syringe to flush detergent through & around cracks, crevices, & hard to reach areas.
6. Remove instrument(s) from detergent & rinse with cool tap water (< 35°C) for at least one (1) minute.
7. Prepare the ultrasonic cleaner with an Enzol® solution of one (1) ounce per one (1) gallon of warm tap water (< 55°C).
8. Load instrument(s) into the cleaner & sonicate for ten (10) minutes.
9. Remove instrument(s) from cleaner & thoroughly rinse using reverse osmosis/deionized (RO/DI) water for at least one (1) minute.
10. Dry instrument(s) using a clean, soft towel & filtered, pressurized air (20 psi).
11. Visually inspect for soil. Repeat if necessary.

Manual Cleaning:

1. Rinse instrument(s) under cool running tap water (< 35 °C) to remove gross soil. Use a sterile syringe to flush water through & around cracks, crevices, & hard to reach areas.
2. Prepare Enzol® solution of one (1) ounce per one (1) gallon of warm tap water (< 55 °C).

3. Fully immerse instrument(s) in the detergent for at least one (1) minute.
4. Use a soft bristle brush as needed to remove soil, paying close attention to threads, crevices, & hard to reach areas.
5. Use a sterile syringe to flush detergent through & around cracks, crevices, & hard to reach areas.
6. Remove instrument(s) from detergent & thoroughly rinse with reverse osmosis/deionized (RO/DI) water for at least one (1) minute. Use a sterile syringe to aid in rinsing.
7. Dry instrument(s) using a clean, soft cloth & filtered, pressurized air (20 psi).
8. Visually inspect for soil. Repeat if necessary.

Care and Handling:

- All products should be treated with care. Improper use and handling may lead to damage and possible improper functioning of the device.
- Refer to ASTM standard F1744-96, “Standard Guide for Care and Handling of Stainless-Steel Surgical Instruments” for additional information.
- Before use, instruments should be visually inspected, and function should be tested to ensure instruments are functioning properly. If instruments are discolored, have loose screws/pins, are out of alignment, cracked, show excessive wear, or have other irregularities. DO NOT use.
- Lubricate instruments to protect instruments during sterilization and storage. This should be done with a water soluble, preserved lubricant after each cleaning.

The lubricant should contain a chemical preservative to prevent bacterial growth and be made with distilled water. Excess lubricant should be wiped off prior to storage and sterilization.

Inspection:

The implants should be inspected after processing, prior to sterilization. Any implant with damage, corrosion, discoloration, scratches, residue, or debris should be discarded.

Sterilization:

ChoiceSpine instruments are provided non-sterile and must be sterilized prior to use. All packaging materials must be removed prior to sterilization. Instruments are recommended to be steam sterilized by the hospital using the following process parameters:

Steam Sterilizer Type: Pre-vacuum

Temperature: 132°C

Duration: 4 minutes

Drying Time: 40 minutes

All devices are to be wrapped in two-layers of 1-ply polypropylene wrap (Kimguard KC600 or equivalent) using various wrapping techniques per ANSI/AAMI ST79.

This steam sterilization cycle is not considered by the FDA to be a standard sterilization cycle. It is the end user’s responsibility to use only sterilizers and accessories (such as sterilization wraps or pouches, chemical or biological indicators, and sterilization cassettes) that have been cleared by the FDA for the sterilization cycle specifications (time and temperature). Alternative sterilization methods or cycles may be used but should be validated according to hospital practices and procedures. The use of an FDA cleared wrap is recommended to ensure devices remain sterile prior to implantation.

Patient Education:

It is essential to provide preoperative instructions to the patient. S/he should be made aware of the potential risks of the surgery and the implant limitations. The patient should be instructed to limit postoperative activity, as this will reduce the risk of bent, broken or loose implant components. The patient must be made aware that implant components may bend, break, or loosen even though restrictions in activity are followed.

Storage and Handling:

Implants should be stored in the implant sterilization case in clean, dry, well-ventilated conditions away from floors, ceilings, and outside walls. Store and transport sterile implants in such a way as to maintain sterility and functional integrity. Do not use implants if the sterilization wrap is opened, damaged or wet. Implants should remain covered until needed to avoid contamination. Only those to be implanted should be handled.

Limitations and Restrictions:

Repeated sterilization according to these instructions has a minimal effect on ChoiceSpine devices. Sterilization equipment varies in performance characteristics and must be validated accordingly.

The sterilizing facility is responsible for the routine validation and monitoring of all equipment, materials and personnel used in their facility to ensure the desired results are achieved. These instructions have been validated as being capable of sterilizing

these ChoiceSpine implants. Any deviations from these procedures must be evaluated for efficacy by the sterilizing facility.

Device Retrieval Efforts:

Should it become necessary to remove any or all of the Ambassador® Anterior Cervical Plate components, please call ChoiceSpine at the number below to receive instructions regarding data collection, including histopathological, mechanical, and adverse event information.

Surgical Technique Manual:

The ChoiceSpine Ambassador Anterior Cervical Plate System Surgical Technique Manual is available by contacting ChoiceSpine Customer Service.

Caution:

Federal Law (USA) restricts this device to sale by or on the order of a physician.

Product Complaints:

Any dissatisfaction with the product quality, labeling, or performance should be reported to ChoiceSpine immediately by the customer or health care provider. Furthermore, ChoiceSpine should be notified immediately of an implant malfunction by telephone, fax, or written correspondence. When filing a complaint, the name, part number, and lot number of the part should be provided along with the name and address of the person filing the complaint.

Some components may not be currently available. Please contact your ChoiceSpine representative for additional information.

The products discussed herein may be available under different trademarks in different countries. All copyrights and pending and registered trademarks are property of ChoiceSpine. For more information on a specific product or trademark, please contact your local ChoiceSpine representative.

Information:

See choicespine.com for more information.

See choicespine.com/patents/ for patent information.

Summary of Safety & Clinical Performance and Periodic Summary Update Report can be found at <https://ec.europa.eu/tools/eudamed>

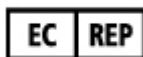
A notice to the user and/or patient that any serious incident that has occurred in relation to the device should be reported to the manufacturer and the competent authority of the Member State in which the user and/or patient is established.

For product complaints please contact:

ChoiceSpine, LLC
 Quality/Regulatory Department
 400 Erin Drive
 Knoxville, TN 37919
 Phone: 865-246-3333; Fax: 865-588-4045



















For additional product information please contact:

ChoiceSpine, LLC
 Sales Support
 400 Erin Drive
 Knoxville, TN 37919
 Phone: 865-246-3333 or fax: 865-588-4045
salesupport@choicespine.com



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 Netherlands

Symbol Legend:

Symbol	Definition
	Do not reuse
	Caution, consult instructions for use for warnings and precautions
	Consult instructions for use
	Do not use if package is damaged
	Lot number
	Reference number
	Serial Number
	Sterilized by irradiation
	Use by
	Manufacturer
	Date of Manufacture
	Federal law (USA) restricts this device to sale by or on the order of a physician
	Non-Sterile
	European Medical Devices
	Authorized representative in the European Community
	MR Conditional
	Unique Device Identification
	Medical Device