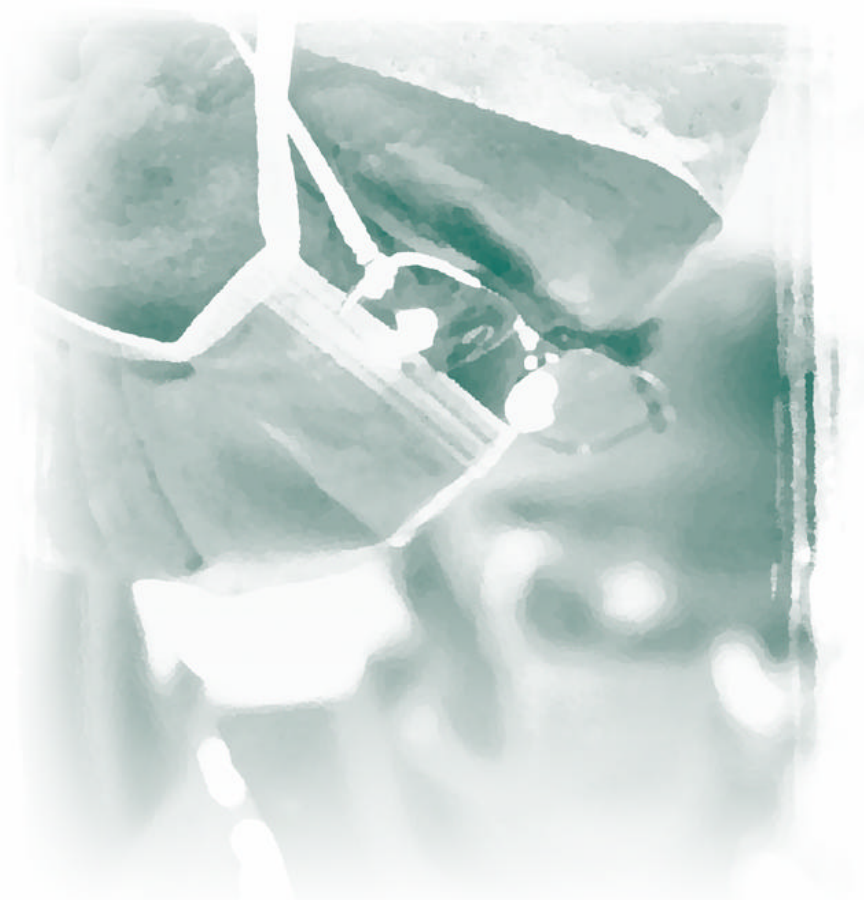


AGC Traditional Surgical Overview



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The AGC® Knee System components are marketed for use with bone cement in the United States.

The surgical techniques presented on this web site are used to demonstrate the surgical technique by a particular practicing surgeon associated with the product line. Biomet, as the manufacturer of these devices, does not practice medicine and does not recommend these or any other surgical techniques for use on a particular patient. The surgeon who performs any implant procedure is responsible for determining and utilizing the appropriate techniques for implanting a prosthesis in each individual patient. Biomet is not responsible for selection of the appropriate surgical technique to be utilized for an individual patient.

Pre-Operative Planning

Twelve years of clinical experience have evolved the AGC Tradition surgical technique into one of flexibility and simplicity. With the surgeon's preference in mind, Biomet offers both intramedullary and extramedullary instrumentation for the tibia and femur.

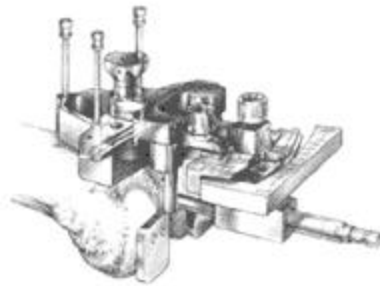
Step 1

Either an E/M or I/M tibial resection guide is used to make a flat cut perpendicular to the long axis of the tibia.



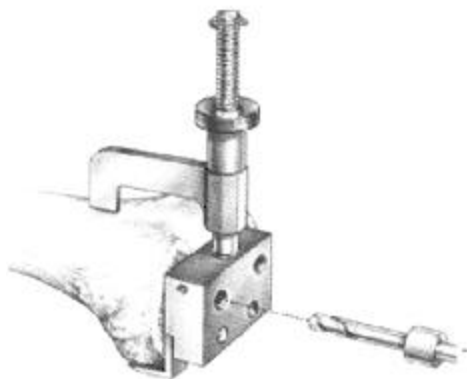
Step 2

The distal femoral resection is made, noting the distal femoral component thickness of 9mm.



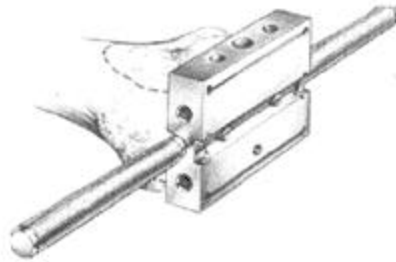
Step 3

Referencing the posterior condyles, size is determined and rotation set via the distal peg holes.



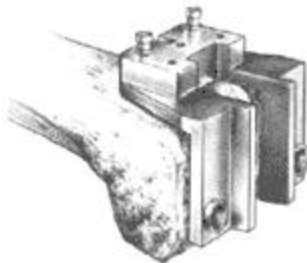
Step 4

Femoral contour cuts are made using 4-in-1 contour, surface, or dual-pivot cut blocks.



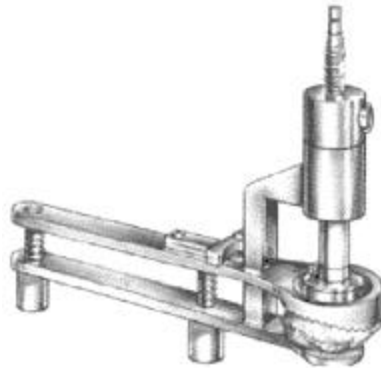
Step 5

An intercondylar box resection is made (Tradition High-Post posterior stabilized only).



Step 6

The patella is prepared.



Step 7

A trial reduction is made and tibial stem preparation is completed.



Step 8

Components are implanted.



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Form No.Y-BMT-439/020702