Instruction for Use

OSSDSIGN® Cranial PSI
Custom-made device

Please read this instruction prior to clinical application. The instructions must be followed.
OSSDSIGN® Cranial PSI

Introduction
OSSDSIGN® Cranial PSI (Patient Specific Implant, PSI) is an implanted device that replaces native bone in the cranial skeleton. Each OSSDSIGN® Cranial PSI is a patient-specific device specifically created for a patient’s unique anatomical requirements. OSSDSIGN® Cranial PSI consists of a titanium mesh that is largely covered by calcium phosphate ceramic tiles. The titanium mesh provides mechanical stability. The ceramic tiles provide favorable cosmetic outcome by more naturally following the curvature of the skull. OSSDSIGN® Cranial PSI is made from biocompatible material that allows for host tissue integration. The ceramic tiles are designed in a mosaic pattern with space between tiles that allows for circulation of fluids.

Intended Use
OSSDSIGN® Cranial PSI is intended for the reconstruction of cranial defects. It is indicated for non-load bearing applications for patients in whom cranial growth is complete.

Warnings
• OSSDSIGN® Cranial PSI is MR Conditional; see important restrictions under MRI Safety Information.
• Care must be taken to assure that screws do not protrude into the dura. Screws must be shorter than the thickness of the bone into which they are being inserted.

MRI Safety information

MR Conditional
Non-clinical testing and electromagnetic simulations demonstrated that OSSDSIGN® Cranial PSI is MR Conditional. A patient with this device can be scanned safely in an MR system after implantation under the following conditions:
• Static magnetic field of 1.5-Tesla or 3-Tesla.
• Maximum spatial field gradient of 3000 Gauss/cm (30 T/m).
• Maximum MR system reported, whole body averaged specific absorption rate (SAR) of 2 W/kg (Normal Operating Mode) and head average SAR of <3.2 W/kg (Normal Operating Mode).
• Body coil only, do not use head transmit/receive coil.
• Quadrature transmit coils only.
Under the scan conditions defined above, OSSDSIGN® Cranial PSI is expected to produce a maximum temperature rise of 2° C after 15-minutes of continuous scanning.

Artifact information
In non-clinical testing, the image artifact caused by OSSDSIGN® Cranial PSI extends approximately 7 mm from this device when imaged using a gradient echo pulse sequence and a 3-Tesla MR system.

Contraindications
OSSDSIGN® Cranial PSI is not intended for use with:
1. Patients with incomplete cranial growth.
2. Infected areas.
3. Procedures or applications other than those described in OSSDSIGN® Cranial PSI Instructions for Use.
4. Patients with foreign body sensitivity or metal allergies.
5. Patients who are potentially non-compliant with post-operative instructions common to all implants, such as observing standard wound healing instructions and to use care with the anatomical location such as avoiding blows to the head.
6. Screws of any length that may contact the dura.

Precautions
1. Before implanting OSSDSIGN® Cranial PSI the surgeon should position the device according to the procedure described in OSSDSIGN® Cranial PSI Instructions For Use. Incorrectly placed devices will affect the functional and aesthetical outcome of the procedure. Before implantation: read and understand all Contraindications, Warnings, Precautions, Procedures and the Intended Use. Before beginning the procedure, assure all necessary components for the procedure are present.
2. OSSDSIGN® Cranial PSI is delivered pre-formed to fit the defect of the specific patient for whom it was designed. The procedure can proceed even if an individual tile has been damaged or has detached from the device during operation. Up to 1 mm of ceramic may be removed at the edge of the device.
with a scalpel to improve fit. Cutting or reshaping of the titanium mesh is not permitted.

3. This device may only be used by properly trained and experienced medical personnel working in a sterile operating theater.

4. The surgeon is responsible for proper selection of appropriate patients and procedures, the adequacy of medical personnel training and experience, and all decisions to remove other implants.

5. Radiotherapy after implantation may require alternate dosing to account for the presence of the implant.

6. Excessive screw tightening may cause loose titanium or bone fragments. Any such fragment must be removed.

7. Excessive screw tightening may cause screws to strip out of the bone intended for attachment. If a screw hole strips out, emergency or self-tapping screws may be used, following the Instructions for Use of the screw manufacturer. Do not use screws of a length that may contact the dura.

8. To ensure secure fixation the screws must have a screw head that is larger than the hole in the fixation arm.

9. Screws must be removed prior to explantation. The device is integrated into neighboring bone and soft tissue over time, which may affect the surgical procedure if explantation is required.

10. Dispose of, and do not implant any product that has been explanted or damaged prior to the operation.

**Possible complications**

1. Unintended durotomy from using screws which contact the dura,
2. Titanium allergy,
3. Tile or tile chips loosening during operation. Remove tile or tile chip and proceed with implantation.
4. Device does not fit due to changes in the patient’s defect size due to either bone growth or bone resorption occurring since the CT scan was performed.

**Sterility**

OSSDSIGN® Cranial PSI is delivered sterile and is confirmed to remain sterile for one year from date of manufacture. Sterilization method used by the manufacturer is steam sterilization (20 minutes, 121°C). The manufacturer cannot guarantee device sterility if the inner package seal is broken or if the package is improperly opened or the product mishandled. The device may not be re-sterilized due to risk for contamination.

**Storage information**

Store between 4-34°C (40-93°F)

**Procedure**

*Step 1.*
Confirm OSSDSIGN® Cranial PSI product labeling and expiration date, quantity on hand and intact sterility barrier before starting surgery.

*Step 2.*
The defect is surgically exposed according to the procedure elected by the surgeon.

*Step 3.*
Care is taken to properly orient OSSDSIGN® Cranial PSI relative to the defect and the device is fitted into position with fixation arms overlapping healthy skull bone. Correct positioning of the device should be assessed perioperatively by comparing the patient anatomy with the provided visual aid.

If required, the outer edges of the device can be trimmed slightly to optimize the fit between the device and the bone surface. In such cases, a scalpel is used to carefully remove a maximum of 1 mm from the periphery of the device.

• Make sure that no debris from trimming falls into the surgical site.
• If necessary, fixation arms may be gently adjusted to improve the fit.
• Cutting or reshaping of the titanium mesh is not permitted.

*Step 4.*
OSSDSIGN® Cranial PSI is attached to surrounding bone using tapered (counter-sunk) titanium screws suitable for application in the skull, inserted into the fixation arms.

*Step 5.*
Close wound according to the procedure selected by the surgeon.
The new MR safe will be a much higher standard than currently and will be absolute. To obtain the new MR safe designation, objects must be completely free of all metallic components. It must be completely non-metallic, non-conductive, and not RF reactive. Everything that receives the new MR safe designation must be equally safe at all field strengths, gradients and sequences. Objects getting the new designation will have to be fabricated very carefully from non-conductive materials such as rubber, plastics, ceramics, select polymers, wood and fiberglass. The bulk of objects, including most contemporary medical implants and devices, will receive the MR conditional designation. This means that the object or device is safe under certain tested conditions, and those conditions should be enumerated on the product, its packaging or in the enclosed literature. Nearly everything that carries either the current MR safe or MR compatible designations would be switched to MR conditional under the new standard.

MR terms

According to the new ASTM F 2503 standard, a package insert will include the following information:

- If the device is MR conditional the device was tested under non-clinical conditions according to the worst-case scenario.
- Non-clinical testing of the worst-case scenario has demonstrated the articles of the system are MR conditional. These articles can be scanned safely under the following conditions:

  - MR conditional
  - MR unsafe – an item that is known to pose hazards in all MRI environments. MR unsafe items include magnetic items such as a pair of ferromagnetic scissors.

  - Static magnetic field of Tesla
  - Spatial gradient field of Gauss/cm
  - Maximum whole body averaged specific absorption rate (SAR) of W/kg for minutes of scanning.

  - In non-clinical testing, the (insert system/device name) produced a temperature rise of less than °C at a maximum whole body averaged specific absorption rate (SAR) of W/kg, as assessed by calorimetry for minutes of MR scanning in a (field strength) MR scanner.

OssDsing AB
Virdings Allé
SE 754 50 Uppsala, Sweden

+46(0)18-55 39 93
info@ossdsign.com
www.ossdsign.com