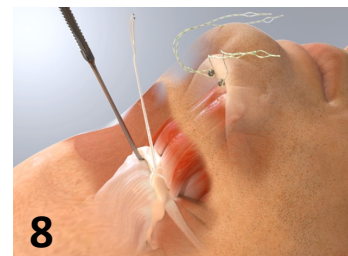
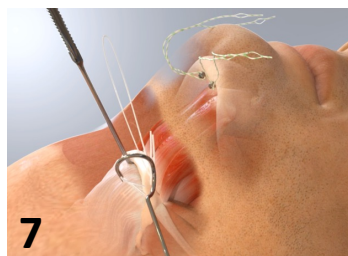
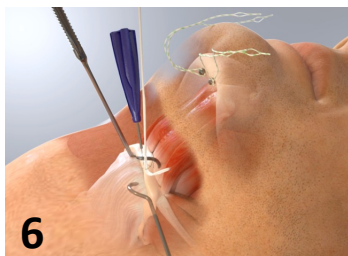
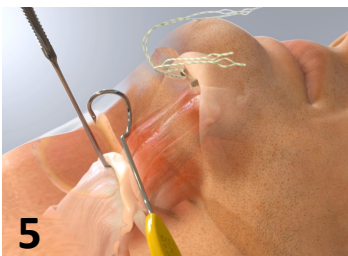
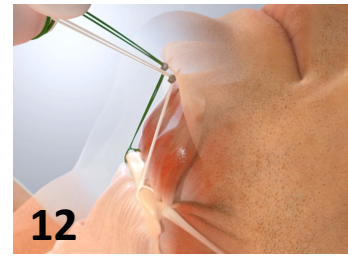
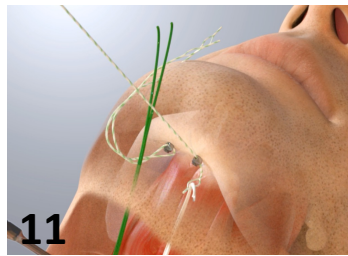
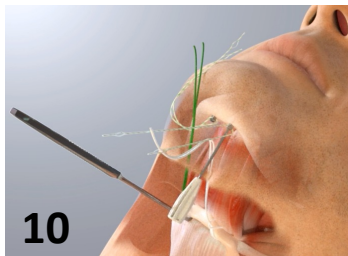
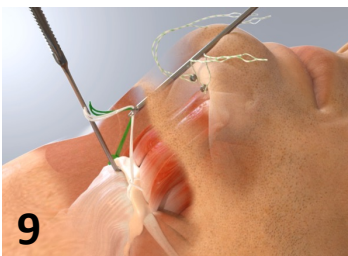


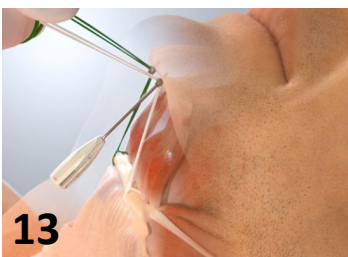
1. Through a 2 - 3 cm submental incision, dissect to the lingual surface of the mandible. **2.** Pre-drill two 1.5 – 1.7 mm dia. pilot holes approximately 1 cm lateral of midline. **3.** Insert Encore bone anchors into pre-drilled holes. Ensure that through hole on bone anchors is in A-P orientation. **4.** Tag the looped threader line ends away from the incision.



5. Make a 2-3 cm incision over the hyoid bone. Dissect down to the hyoid bone. Elevate and stabilize the hyoid bone with a tracheal hook, Allis clamp or similar. **6.** Using the Revolution suture passer, pass around the hyoid bone and thread a suspension line loop through the eyelet. **7.** Pass the suspension line tails around the hyoid bone by backing the Revolution Suture Passer out, leaving the looped suture portion above the hyoid bone. **8.** Pass the tails through the looped suture portion to create a girth hitch knot. Cinch knot tightly upon the hyoid bone. Repeat steps 6 to 8 as needed to have two suspension lines cinched to the hyoid bone.

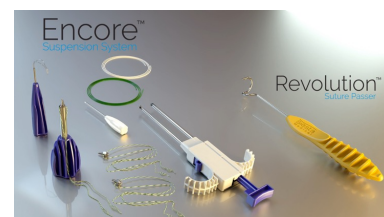


9. Using a suture passer, hemostat or similar instrument, subcutaneously pass the suspension lines up to the submental incision. **10.** Place ~3 cm of suspension line tails into the posterior loop of the threader line. With the lock tool, back out the bone anchor set screw until the anchor eyelet is fully open. **11.** Pull the threader line to pass the suspension line tails through the eyelet. Repeat for contralateral side. **12.** With head in a neutral position, tension suspension lines to tighten the girth hitch knots.

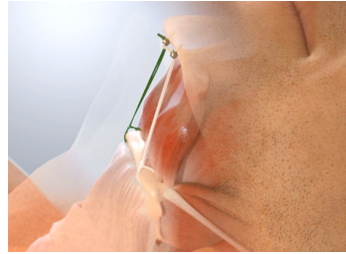
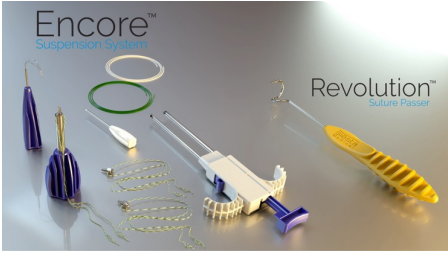


13. Pull tension on both Suspension Lines to suspend the hyoid bone and lock in place by tightening the Lock Screw with the Lock Tool as shown. **14.** Adjust as necessary then tie back up knots & trim excess suture to 0.5 to 1.0 cm length. **15.** Irrigate copiously with antibiotic solution. Perform layered closure. Use compression dressing to minimize postoperative swelling (can also consider topical steroid).

Procedure
Video:



<http://www.siestamedical.com/physicians>





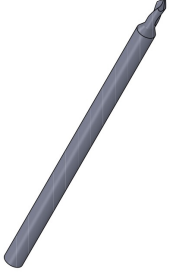


Vendor: Siesta Medical, Inc.

Case Support: _____

Cell Phone: _____

Email: _____

<p>Instruments required: "Head & Neck Dissection Tray"</p>	<p>Specifics: * Physician preference</p> <p>Lidocaine w/Epinephrine 1:100,000 Freer or Hurd Elevator Sein Retractors (2) Army/Navy (2) Scalpel (15 blade) Allis Clamp Monopolar Bovie Neck & Jaw Compression Dressing</p> <p>Bipolar electrocautery* Scissors Pickups Mosquito snaps (4) Kryocid Bone Hook (BD #BE390)* Hemostat, Schmidt or Hewson Retriever (S&N #71111579)*</p>  
<p>Powered Drill Pistol or Axial w/ Jacobs chuck for 1.5-1.7mm Drill Bit</p>	  
<p>Patient Prep</p>	<p>General Anesthesia (Nasal or Oral Intubation) Tonsillectomy Position Shoulder Roll Sterile Skin Prep: chin & neck from bottom of nose to clavicle</p>
<p>Other needed Materials:</p>	<p>Encore Procedure Kit (PN FG0002) Encore Revolution Suture Passer (PN FG0008)</p>
<p>Optional, Physician Preference</p>	<p>Antibiotic Rinse (i.e. Clendamyacin, Bacitracin) Topical steroid to reduce inflammation at incision sites Small Positive Suction Drain (i.e. TLS/Jackson Pratt)</p>

Catalog No.	Description
FG0002	Encore System
FG0008	Revolution Suture Passer