



# Timberline® Lateral Fusion System



## Lateral Surgical Checklist

This checklist intended as a general guide to help the sales rep prepare for and provide support for a Timberline lateral fusion case. This checklist may not be comprehensive of all potential scenarios. Sales Representatives should be in close contact with surgeons, associated HCPs, and hospital personnel to ensure all necessary preparations and precautions are taken.

3 WEEKS PRE-OP	DONE	DESCRIPTION
Confirm case approval and pricing w/ Mat Mgmt	<input type="checkbox"/>	Include Instruments, implants and disposables.
Submit any pricing exceptions if necessary	<input type="checkbox"/>	Work with _____ in contracts.
Verify OR protocols	<input type="checkbox"/>	Rep approval process, liability insurance, vaccination documentation.
Touch base with monitoring service provider	<input type="checkbox"/>	Discuss expectations, i.e. placement of electrodes, twitch test, probe to dilator and retractor interface, and monitoring protocol

2 WEEKS PRE-OP	DONE	DESCRIPTION
Conduct in-service with OR staff	<input type="checkbox"/>	Discuss surgical technique, items needed: electric bed, 3" silk tape, auxiliary roll, hip bump, mastisol.

1 WEEK PRE-OP	DONE	DESCRIPTION
View film with surgeon	<input type="checkbox"/>	Include Instruments, implants and disposables.
Confirm levels	<input type="checkbox"/>	Work with _____ in contracts.
Review surgical technique	<input type="checkbox"/>	Rep approval process, liability insurance, vaccination documentation.
Discuss importance of monitoring	<input type="checkbox"/>	Discuss expectations, i.e. placement of electrodes, twitch test, probe to dilator and retractor interface, and monitoring protocol
Education of surgical technique	<input type="checkbox"/>	Meet with PA or First Assist, Scrub techs. Have retractor available if possible.
Fluoroscopy Tech meeting	<input type="checkbox"/>	If possible, discuss technique and expectations with X-ray techs.

48 HOURS PRE-OP	DONE	DESCRIPTION
Call customer service	<input type="checkbox"/>	Order in all necessary trays, disposables, & biologics. Don't forget posterior hardware!

24 HOURS PRE-OP	DONE	DESCRIPTION
Check in all trays	<input type="checkbox"/>	Verify all instruments are in house. Check all instruments are working properly.
Check in with Neuromonitoring group (If selected)	<input type="checkbox"/>	Verify they are approved and checked in with BioMedical Engineering or Supply Chain.

2 HOURS PRE-OP	DONE	DESCRIPTION
Arrive to hospital	<input type="checkbox"/>	Make sure all trays have been sterilized
Locate Neuromonitoring tech	<input type="checkbox"/>	Oversee placement of electrodes in pre-op.

1 HOUR PRE-OP	DONE	DESCRIPTION
Help Scrub tech with set up	<input type="checkbox"/>	Pull all instruments necessary for case. Set up Mayo stand.
Give disposables to circulator	<input type="checkbox"/>	Have circulator open for scrub tech (waveguides, probes, ext. cable, leads).
Make sure C-arm is available for patient positioning	<input type="checkbox"/>	If possible, have C-arm come in on opposite side of surgeon (anteriorly).
Make sure light source is available	<input type="checkbox"/>	Standard ACMI connection.
Conversation with Anesthesiologist	<input type="checkbox"/>	Make sure they understand 4 twitches are crucial at beginning of the case!! Test at feet. Need for short acting paralytics.

## Lateral Surgical Checklist

The following steps should be completed by the surgeon, associated HCPs, or appropriate hospital personnel.



DURING SURGERY	DONE	DESCRIPTION
Help guide patient positioning process	<input type="checkbox"/>	See surgical technique - make sure bed is REVERSED!!!
Attach bed rail clamp	<input type="checkbox"/>	Place on the anterior side of the bed near the arms or as directed by the surgeon.
Help guide patient taping process	<input type="checkbox"/>	Use 3-inch silk tape, have hip bump and auxiliary roll in place.
Help guide table break, tilt	<input type="checkbox"/>	Use bed controls to get patient in true AP/lateral position, including trendelenburg, & tilt.
Mark incision lines using skin pen and k-wire	<input type="checkbox"/>	Mark posterior and anterior margins, alignment of disc space(s), and posterior 1/3 docking point.
Confirm 4 twitches	<input type="checkbox"/>	Ask IOM tech to run a twitch test. If not 4 out of 4 twitches, can they give a reversal?
Help guide transpoas approach	<input type="checkbox"/>	Target with initial dilator, Before fluoroscopy rolls in, make sure to attach arm to bed rail, otherwise C-arm is in the way.
Initial dilator in place	<input type="checkbox"/>	Test dilator in all 4 quadrants to identify any nerves. At this point look at depth of dilator and have scrub put retractor blades on.
Placement of 2nd dilator	<input type="checkbox"/>	Placement of 2nd dilator Rotate and test.
Placement of Retractor over dilator	<input type="checkbox"/>	Test posterior blade. Confirm alignment under fluoroscopy, attach articulating arm.
Advance intra-discal shim	<input type="checkbox"/>	Confirm good IOM thresholds (2nd dilator/post blade). Advance while using A/P fluoroscopy.
Open Retractor	<input type="checkbox"/>	Remove dilators, attach lights and turn on, probe to make sure nerves are out of way, advance shim under fluoroscopy.
Help guide tissue dissection	<input type="checkbox"/>	Use penfields to move any tissue in the way. Use nerve root to identify anterior border. Affix anterior blade if applicable.
Confirm adequate space for implant placement	<input type="checkbox"/>	Use Disc cutter to confirm enough working room for implant insertion.
Help with disc prep	<input type="checkbox"/>	Stand at head or foot of bed. Make sure all instruments are used perpendicular to the floor. Contralateral release
Implant trialing	<input type="checkbox"/>	Use trials for sequential distraction. Confirm true AP/ lateral positioning of patient with fluoroscopy.
Guide with implant sizing	<input type="checkbox"/>	Lordotic/standard? 18/22 mm? Length?
If doing multiple levels...	<input type="checkbox"/>	Make sure to adjust patient (not fluoro) for next level.

  

POST-OP	DONE	DESCRIPTION
Remove bedrail clamp	<input type="checkbox"/>	
Remove light cable	<input type="checkbox"/>	
Place Instruments back into appropriate trays	<input type="checkbox"/>	Helps SPD know where to put instruments after processing.
Remember disposable items	<input type="checkbox"/>	Access Kit, Monitoring Kit, K-wire, Anchoring screw (optional). <b>Don't forget disposable serial numbers!!</b>
Charge sheets to circulator	<input type="checkbox"/>	
Charge sheets to Zimmer Biomet	<input type="checkbox"/>	Don't forget Disposable Kit lot numbers and set ID numbers for the implants.

**Timberline interbody implants are intended to be used with supplemental spinal fixation.**

***Sales representative involvement in a Timberline lateral fusion surgery should be limited to consultation with the surgeon and applicable surgical staff on the use of the Timberline System as it relates to the procedure. Sales representatives should not come into direct physical contact with the patient.***

**Caution:** Federal (USA) law restricts this device to sale by or on the order of a physician. Rx Only. Please see the product Instructions for Use for a complete listing of the indications, contraindications, precautions, warnings and adverse effects.

Unless otherwise indicated, as referenced herein, all trademarks and intellectual property rights are the property of ZimVie Inc. or an affiliate; and all products are manufactured by one or more of the spinal subsidiaries of ZimVie Inc. (Zimmer Biomet Spine, Inc., Zimmer Spine, LDR Medical, etc.) and marketed and distributed by ZimVie Spine and its authorized marketing partners. Product clearance and availability may be limited to certain countries/regions. This material may not be copied or reprinted without the express written consent of ZimVie. ZV1402 REV A 06/23 ©2023 ZimVie Inc. All rights reserved.