Exposure

- Perform closed reduction with traction.
- Make an incision over the midshaft of either the 2nd or 3rd metacarpal.
- A second incision is made just proximal to the thumb outcropping muscles. Expose the radial shaft.
- An optional 3rd incision can be made over Lister’s to mobilize the EPL or to create a graft portal.

Plate Insertion

- Insert the plate from proximal to distal, or from distal to proximal.
- Pass the plate under the extensor tendons along the surface of the bone until it appears through the opposite incision.

Provisional Distal Fixation

- Position the plate over the desired metacarpal to allow placement of distal 2.7mm screws.
- Place a non-locking 2.7mm screw using a 2.0mm (yellow) drill in the most distal hole to lag the plate to bone.
Secure Plate and Restore Length

- With the wrist in neutral rotation, center the plate over the metacarpal and the radial shaft.
- Place a non-locking 3.2mm screw using a 2.3mm (red) drill into the distal end of the slotted hole.
- To gain additional length, loosen screw 1/4 turn, apply traction and retighten screw.

Final Fixation

- Secure the plate by placing additional screws
  - 2.7mm locking or non-locking screws distally
  - 3.2mm locking or non-locking screws proximally

TIPS

- Displaced or unstable volar ulnar corner, dorsal ulnar corner, or die-punch fragments may require augmented fixation.
- Buttress Pins, Hook or Pin Plates can be used as adjunct fixation to a Bridge Plate.
All implants made from surgical grade stainless steel

**Bridge Plate™**
BRGP

**Cortical Screw**
HEX2.7-xx  
HEX3.2-xx

**Cortical Locking Screw**
LCBS2.7-xx  
LHEX3.2-xx

**Quick Guide**
GUIDEQ-2.3

**Drill Guide**
GUIDELCBS-2.0

**X-RAYS**

Pre-Op AP  
Pre-Op Lateral  
Post-Op AP  
Post-Op Lateral

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