

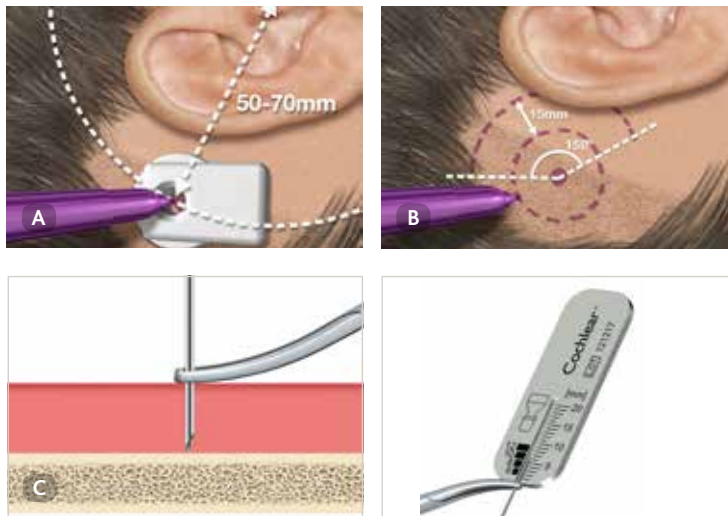
Surgery Quick Guide

BI300 Implants & BIM400 Implant Magnet

Before surgery: Prepare the patient as for any surgical procedure, i.e. sterilise the incision area. General anaesthesia is recommended.

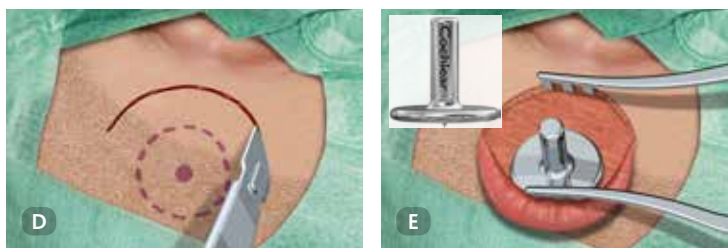
●●● STEP 1 Prepare the site

- A** • Identify the implant site with the Indicator for Baha Attract. It is usually 50-70 mm from the ear canal, and the superior edge of the processor should be in line with the top of the pinna. Ensure the sound processor does not touch the pinna.
- B** • Mark the C-shaped incision anterior of the position of the magnet, at least 15 mm from the edge of the magnet. The length of the incision can be extended for easier access.
- C** • Before local anaesthesia is injected, measure the tissue thickness in several positions around the planned implant site. A thin hypodermic needle, a clamp and a ruler should be used. If the soft tissue is thicker than 6 mm, soft tissue reduction will be necessary later in the procedure. Inject local anaesthesia with adrenalin in the marked incision area.



●●● STEP 2 Make the incision

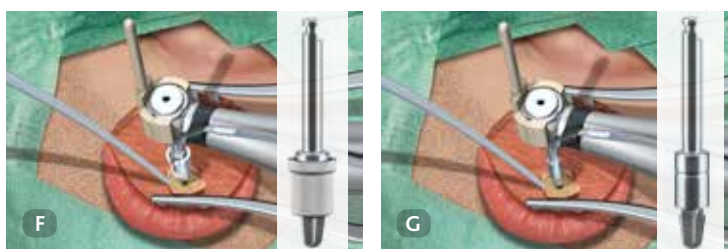
- D** • Use a scalpel to make an incision down to the periosteum. Retract soft tissue posteriorly and superiorly via blunt dissection. The temporalis is retracted superiorly down to the periosteum.
- E** • Open up the incision using self-retaining retractors. Place the Implant magnet template on the periosteum to ensure good positioning of the implant magnet in relation to the incision and the bone. Mark the selected position of the implant on the periosteum with a pen or the sharp tip on the Implant magnet template.
- Make a cruciate incision (6 mm square) in the periosteum to expose enough bone for the implant flange. Raise the edges with the raspatorium.



●●● STEP 3 Drill with the guide drill

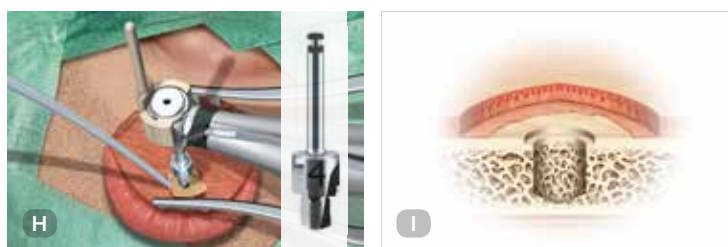
Be certain to drill at an angle perpendicular to the bone surface. The drill indicator facilitates the correct drill orientation and should be used during drilling and implant placement.

- F** • Begin drilling with the guide drill with 3 mm spacer (2000 rpm). Ensure there is abundant irrigation during all drilling procedures.
 - Move the burr up and down to ensure visual inspection and that coolant reaches the tip of the drill.
 - Check the bottom of the hole repeatedly for bone.
- G** • If there is adequate bone thickness, remove the white spacer and continue drilling to a depth of 4 mm.



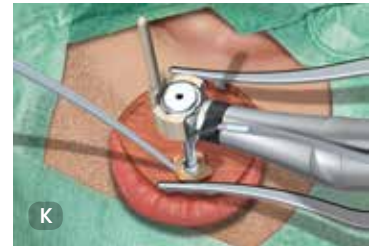
●●● STEP 4 Drill with the widening drill

- H** • **Be certain to drill at an angle perpendicular to the bone surface.** Widen the hole with the relevant widening drill, 3 or 4 mm (2000 rpm). Ensure abundant irrigation during all drilling procedures.
 - Move the widening drill up and down during drilling to ensure that coolant reaches the tip of the drill.
- I** • Create a small countersink in the bone. The widening drill is designed to allow early detection when countersinking is complete.



●●● STEP 5 Place the implant

- J** • Change the drill program to a low-speed setting and select the correct torque according to the bone quality. Pick up the implant using the Implant inserter.
 - K** • Place the implant without irrigation until the first threads of the implant are inserted in the bone. Continue implant insertion with abundant irrigation.
 - L** • Place the Bone bed indicator on the implant and gently hand tighten it to the implant threads by turning the top knob. Make sure that it is properly tightened. Rotate it to ensure it does not touch the bone. This will allow sufficient clearance for the correct mounting of the Implant magnet.
 - M** • If the Bone bed indicator touches bone, remove the excess bone. First, open up the periosteum in that area and polish the bone using a standard otologic high-speed drill and a coarse diamond drill bit. Check repeatedly that sufficient bone has been removed using the Bone bed indicator.
- When sufficient bone has been removed, put the periosteum back over the area and, if necessary, suture it in place.



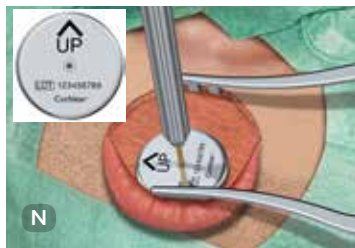
●●● STEP 6 Attach the implant magnet

- N** • Pick up the Implant magnet and place it over the conical connection on the implant. Make sure the arrow on the Implant magnet is orientated towards the top of the patient's head. Hand tighten the screw with the Unigrip screwdriver, while holding the magnet with your fingers.
- O** • Continue to tighten to 25 Ncm with the Machine screwdriver Unigrip and the Multi wrench with ISO adapter, while holding the magnet with your fingers.
- P** • Evaluate the thickness of the flap over the magnet using the Soft tissue gauge. The skin flap should not be thicker than 6 mm and should fit loosely in the Soft tissue gauge.

NOTE:

If local anaesthesia has been infiltrated in the soft tissue, this can increase the flap thickness and affect the results when the thickness of the flap is measured.

- Q** • If the skin flap is thicker than 6 mm, carefully thin the flap down to 6 mm, i.e. until it fits loosely in the Soft tissue gauge.



●●● STEP 7 Close and suture

- R** • Place the flap over the Implant magnet and suture. Be sure to suture the deep layer to the periosteum, or suture the skin to the periosteum and back to the skin. Do not suture over the Implant magnet where pressure will later be applied.
- S** • Apply a pressure dressing over the wound for 24-48 hours.

NOTES:

Do not remove the sutures before the incision is sufficiently healed.

Do not fit the SP Magnet before the wound is sufficiently healed.

Do not attach the Implant magnet over a sleeper implant as this may interfere with the implanted magnet.



*The Cochlear™ Baha® Attract System consists of: Cochlear™ Baha® B1300 Implant, Cochlear™ Baha® BIM400 Implant Magnet, Cochlear™ Baha® SP Magnet, Cochlear™ Baha® Sound Processor

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