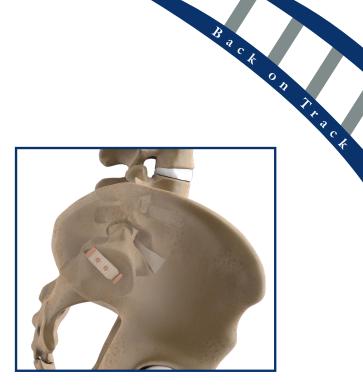




Why SI Joint Stabilization?

- Like all orthopedic joints, the SI joint can degenerate and become a pain generator. This is why surgeons have been treating SI joint dysfunction since the early 1900's.
- 15-25% of patients presenting with low back pain actually have SI joint dysfunction.¹
 - Up to 75% of postoperative lumbar fusion patients will develop significant SI joint degeneration after 5 years.²



Why PsiF?

- Simple: Single implant size (8x10x25mm) made of structural allograft bone and shaped for easy posterior insertion into the SI joint.
- Reproducible: Familiar prone patient position for identifiable landmarks and instrumentation that helps provide consistent implant placement into the SI joint.
- Flexible: PsiF allows for variable implant placement based on patient's pathology.

"I have used a number of SI joint fusion systems on the market, both lateral and posterior, and find the PsiF system to be a simple, time efficient, minimally invasive procedure. Key advantages are less instrumentation, less radiation and welldesigned implant. My patients are experiencing less pain and ambulatory sooner."

Mokbel Chedid, M.D.

Neurological Surgery, Henry Ford Health System

Reference:

 Cohen SP. Sacroiliac joint pain: a comprehensive review of anatomy, diagnosis, and treatment. Anesth Analg, Nov '05, 101(5):1440-53
Kee-Yong Ha, MD; Jun-Seok Lee, MD; Ki-Won Kim, MD. Degeneration of Sacroiliac Joint After Instrumented Lumbar or Lumbosacral Fusion: A Prospective Cohort Study Over Five-Year Follow-up. Spine. May '08, Vol 33-11, pp1192-1198



ORDERING INFORMATION:

CATALOG NUMBER	PRODUCT DESCRIPTION
OM-SIK-1	Unilateral PsiF Kit (Includes Implants, K-wires, BMA Needle and Drill)



Back on Prack

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