

DATE OF PROCEDURE: _____

SURGEON: _____

PREOPERATIVE DIAGNOSES: _____ Sacroiliitis
(Left, Right, Bilateral)

POSTOPERATIVE DIAGNOSES: _____ Sacroiliitis
(Left, Right, Bilateral)

PROCEDURES PERFORMED: Posterior sacroiliac joint fusion using the SiLO TFX™ posterior sacroiliac fusion system. I interpreted C-arm fluoroscopy for guidance during the procedure.

INDICATIONS FOR PROCEDURE:

The patient is a _____, with a history of _____
(Gender) (Moderate/Severe) (Left, Right, Bilateral)
Sacroiliitis and has failed conservative management. After going over in detail with the patient and _____
(His/Her)
(Family Members), the natural history and all the risks, indications, limitations,
and alternatives to surgery, the patient wishes to proceed. The patient also states they have:

_____ which is being treated preoperatively, intraoperatively and postoperatively. The patient understands that
(Preexisting Conditions)
_____ in the past increased risk of developing postoperative infection or _____
(Preexisting Conditions) (Other risks)
_____, in which case a wound VAC may be required.

Knowing this the patient wishes to proceed.

DESCRIPTION OF PROCEDURE:

After agreeing to informed consent, that patient was given preoperative antibiotics and placed under type of anesthesia used and placed in the prone position. All bony prominences were tediously padded. After sterile prepping and draping, a timeout was performed to confirm proper procedure and proper anatomic levels. A needle marker was used to confirm proper anatomic level with fluoroscopic guidance. A minimally invasive incision was carried out at the level of the sacroiliac joint. Dissection was carried down to the SI joint which was directly palpated and visualized with fluoroscopic use. Irrigation was carried out. Next, the guide wire was carefully inserted into the sacroiliac joint with fluoroscopic guidance. Proper placement was confirmed in the AP and lateral planes with the fluoroscope. The joint finder was next place under fluoroscopy followed by the soft tissue protector, carefully placed into the middle 1/3 of the SI joint and confirmed in the AP and lateral plane with fluoroscopy. A reamer was then carefully inserted, and the SI joint was decorticated and recessed in preparation for the implant. Arthrodesis was promoted by use of the drill. Proper depth and position of the drill was confirmed with AP and lateral fluoroscopy. The reamings from the drill were harvested for bone grafting. The graft was packed into the SI joint as well as the TFX implant in preparation for fusion. The implant was then carefully impacted into proper anatomic position with the use of the mallet and gently impaction. Proper position of the implant was confirmed with AP and lateral fluoroscopy. The implant was confirmed to transfix both the iliac and sacral sides of the sacroiliac joint. Next the trans sacral and trans iliac fixation screws were placed. The screws were carefully and individually placed into the sacrum and then the ilium to complete the trans sacroiliac internal fixation. The screws were locked into place with the self-locking head of each screw into the implant. The entire construct was tested for stability and found to be very stable across both sides of the SI joint confirming transiliac fixation. AP and lateral fluoroscopy confirmed proper positioning of the sacral screw and the iliac screw as well as the trans sacroiliac TFX implant in proper anatomic position. Irrigation was carried out. The remainder of the bone graft harvested was combined with demineralized bone matrix and packed into the sacroiliac joint as well as the TFX implant to complete the sacroiliac fusion. A layered closure was performed, and sterile dressings were applied. The patient went to the post anesthesia recovery room hemodynamically stable.

The patient will be discharged today on pain medication and the same medication that they came in on and prophylactic antibiotics. The patient has pain medication

_____ and they have an appointment to see me in _____ at
(Prescribed Pain Medication... and Muscle Relaxer) (Time of Follow up Appointment)
the clinic for follow up or earlier should any questions or problems arise.