

CANAVERAL PEDICLE SCREW

SYSTEM



We've Got Your Back TM

COMPLETE VERSITILITY

Key Features

- Slim Profile, Single piece Break-Off
 Extended Tabs
- √ 30mm Reduction thread option
- ✓ Open & Closed Tab Options
- Robust tab design resists premature breakage
- Rods include position identification markers and <2mm dorsal overhang
- ✓ Complete system modularity allows for on-the-fly customization

Surgeon Benefits

Reduces incision to true percutaneous option

No additional reduction instruments required

Complete Versatility for different surgical preferences in one system

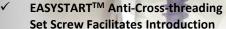
Allows aggressive manipulation and correction

Optimal rod placement reduces facet impingement

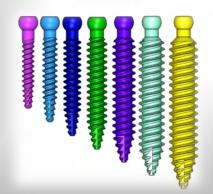
Less Clutter - Modular System reduces number of implants in the surgical area







- Self-Tapping, Duel Lead, Optimized Thread form
- 60° full conical motion provides exceptional anatomic adjustability
- ✓ Comprehensive Screw Offering,4.5mm-10.5mm



100% confidence in set screw delivery, every time

Fast Delivery, tapping is removed in many cases

Conforms to patient anatomy



FloSpine's AdVance[™] Screw design achieves 13% increased pullout over the leading manufacturer – Testing information available on request

manadatarer resumb information available on request														
		Screw Length (mm)												
		25	30	35	40	45	50	55	60	70	80	90	100	110
Screw Diameter (mm)	4.5	*	*	*	*	*								
	5.5	*	*	*	*	*	*	*						
	6.5	*	*	*	*	*	*	*	*					
	7.5		*	*	*	*	*	*	*					
	8.5			*	*	*	*	*	*	*	*	*	*	*
	9.5			*	*	*	*	*	*	*	*	*	*	*
	10.5				*	*	*	*	*	*	*	*	*	*

UNPARALLELED PRECISION

INTUITIVE INSTRUMENTATION



INDICATIONS

The FloSpine Canaveral Pedicle System is intended for posterior, noncervical pedicle fixation as an adjunct to fusion in skeletally mature patients using autograft and/or allograft for the following indications: degenerative disc disease (DDD) (defined as back pain of discogenic origin with degeneration of the disc confirmed by history and radiographic studies); spondylolisthesis; trauma (i.e., fracture or dislocation); spinal stenosis; curvatures (i.e., scoliosis, kyphosis, and/or lordosis); tumor; pseudoarthrosis; and failed previous fusion.

When used for fixation to the ilium, the offset connectors of the Canaveral Pedicle Screw System must be used in conjunction with pedicle screws placed at the S1 or S2 spinal levels.

When used for posterior non-cervical pedicle screw fixation in pediatric patients, the Canaveral Pedicle Screw System implants are indicated as an adjunct to fusion to treat adolescent idiopathic scoliosis. The Canaveral Pedicle Screw System for pediatric use is intended to be used with autograft and/or allograft. Pediatric pedicle screw fixation is limited to the posterior approach.



561-705-3080