

## FUSE RIGHT™ HAMMER TOE FUSION SOLUTION

- A new generation device for *hammer toe fusion reamers*
- More than **500 procedures performed** over **10 year time frame**
- Greater ease of use and **precise peg and socket** formation
- **Less worry of removing too much bone**
- **Quicker healing times, with less revisions**
- **Predictable** and precise results lead to a **stable fusion**



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Patent Pending



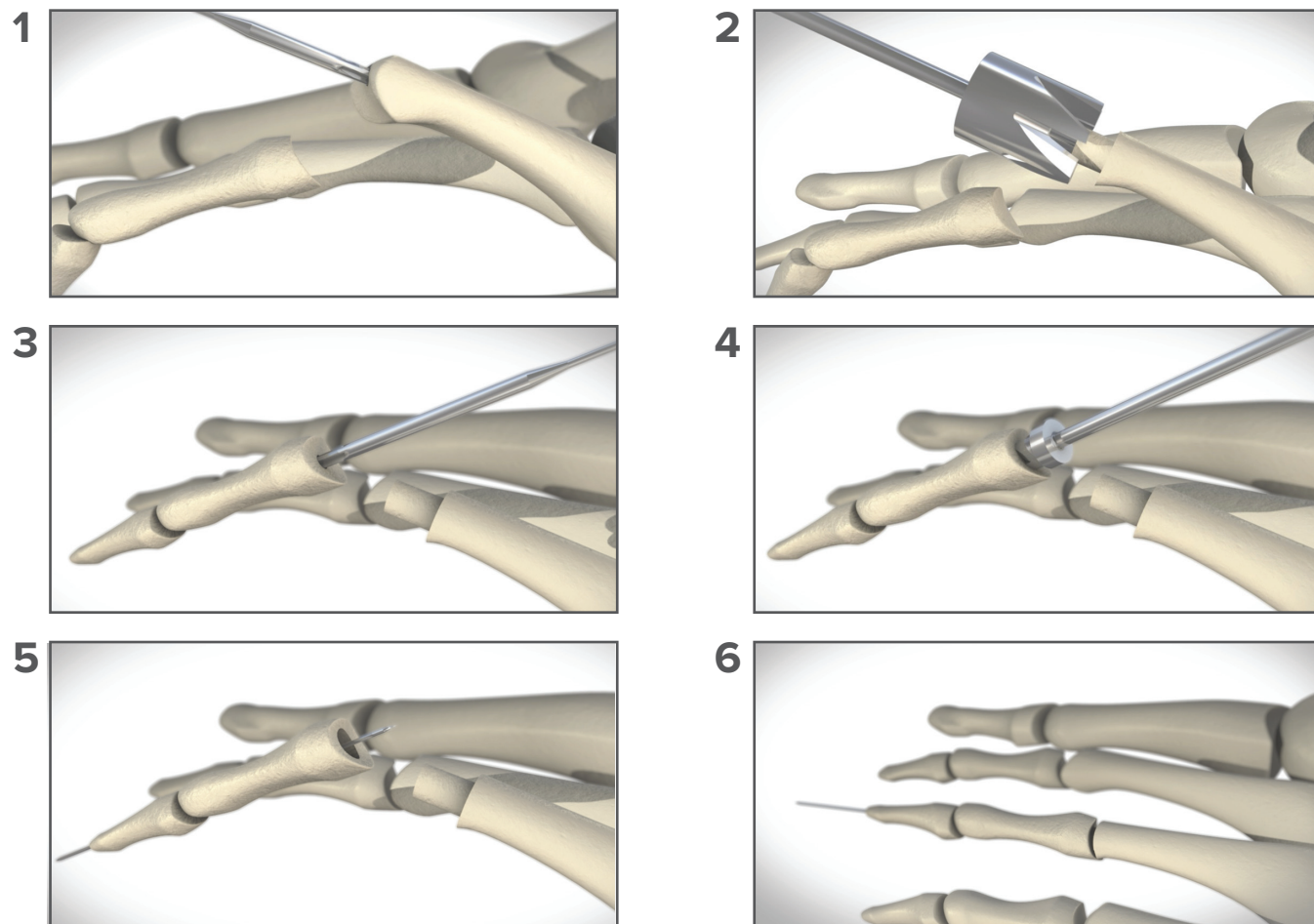
# FUSE RIGHT™ HAMMER TOE FUSION SOLUTION

## FUSE RIGHT IS IDEALLY SUITED FOR THE FOLLOWING CONDITIONS:

1. Classic hammer toe deformity.
2. Minimal transverse plane deviation (varus/valgus), associated with a rigid flexion contracture of the PIP joint.
3. A revision hammer toe procedure where “molding” has occurred and the toe has deformed after a prior attempted intervention. **Using Fuse Right, the toe can be salvaged and stabilized, reliably resisting deformation at the PIP joint over time.**
4. Any Proximal Interphalangeal (PIP) joint deformity, rigid or flexible with early dislocation or subluxation of the Metatarso-phalangeal (MTP) joint.

Experience with this class of device encompasses over 500 procedures over 10+ years. Revision procedures are less common than with conventional PIP arthroplasty results. Fuse Right represents a new generation of this class of device, its designed for greater precision, ease of use and precise peg and socket creation without the worry of removing excessive bone Fuse Right controls for incremental toe shortening. Post-operative toe stability and repeatability of outcomes are the critical features of Fuse Right.

## THE FUSE RIGHT™ PROCESS



## PATIENT COMFORT / CONVENIENCE / HEALING TIME:

While any hammer toe procedures require about 4 weeks for initial recovery, the almost immediate stability of using Fuse Right results in the following preliminary observations:

- **Less pain in the early stages of healing**
- **Reduction in the healing time of soft tissue**
- **Reduced risk of infection**
- **Reduced non-compliance complications**
- **Early walking, enhancing patient mobility**
- **Decreased incidence of revision surgery**

## EASE OF USE:

Practitioners will generally achieve full comfort and proficiency between 6-10 hammer toe procedures. A competent surgical assistant will be valuable in ensuring soft tissue protection. Review of the surgical video is recommended prior to first use.

## CAMPARISON TO OTHER PROCEDURES:

1. Tendon transfer (Girdlestone-Taylor) is a justifiable alternative to Fuse Right when intervening on a “flexible hammer toe”.
2. Arthroplasty (Flat-Cut): Often leads to molding, and the toe remains vulnerable to gradual deformity, and eventual dysfunction.
3. Fusion without peg is also much more vulnerable to non-union and molding that with the use of Fuse Right.
4. In patients with adequate bone stock, fusion with Fuse Right in rare instances may be accomplished without the use of an implant.



ROBERT FAUX  
M.D.

## STABILITY:

*“I have found the stability of Fuse Right to be markedly better than traditional Duvrie arthroplasty procedures. If there is good bone stock, it could be easily managed without a k-wire or any other internal fixation because of the intrinsic stability of the procedure. In my experience, such stability reduces non-union rates, molding, and post-op infection rates dramatically. In general, Fuse Right reamers routinely provide a procedural result that will seldom, if ever require revision.” - Robert Faux, M.D.*

For additional information please visit our website [www.footmind.com](http://www.footmind.com).

