



**GEMINI® SL®** Total Knee System  
with SPAR-K™ Instruments



FEMORAL  
ALIGNMENT  
GUIDE

Fast lock / unlock  
mechanism  
with colour code

Self-explaining  
fine tune adjustment



The GEMINI® SPAR-K™ Instruments  
meet the need of today's knee surgeons

The GEMINI® SPAR-K™ Instruments

- are clear and easy to use
- are intuitive and efficient instruments.
- assure precise and reliable bone resections

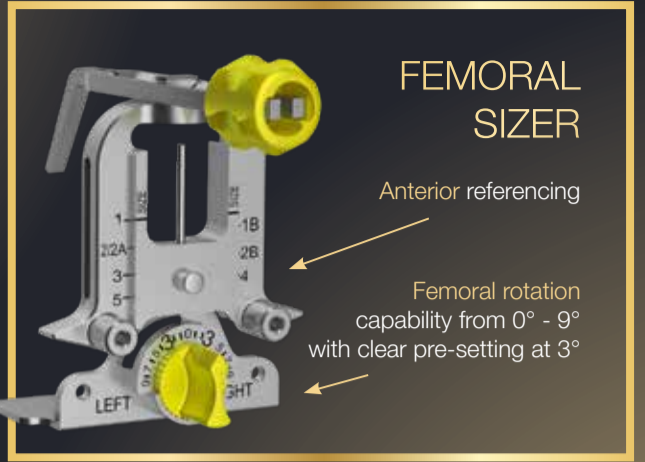


Efficient

Precise

Reliable

spar-  
INSTRUMENTS



# SPAR-K™ Instruments

## for GEMINI® SL® Total Knee System

*The instruments assure precise and reliable bone resections.*

The GEMINI® SPAR-K™ Instruments are designed to help the surgeon to consistently achieve optimal outcomes. They enable the surgeons to precisely control the implant position and fit for each patient.

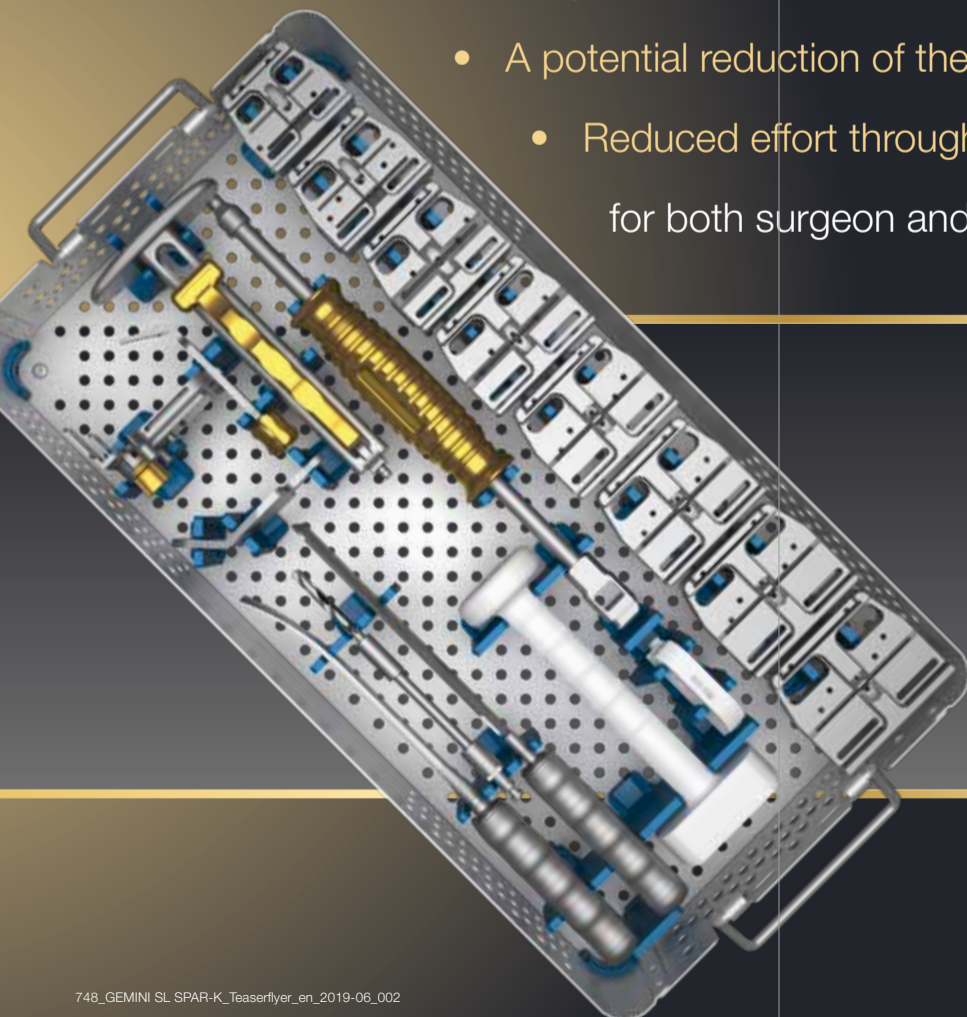
The GEMINI® SPAR-K™ Instruments allow a variety of surgical options such as:

- Femur first
- Tibia first
- Gap balancing



The colour coded actuators, the quick set/release functions and the single layer trays, allow for:

- A potential reduction of the learning curve
- Reduced effort throughout the surgical process for both surgeon and scrub-tech personal



Please feel free to visit our SPAR-K™ Instruments Website



# GEMINI® SL® Knee

received a

**7A\*** ODEP rating



A rating of 7A\* is given to implants that have demonstrated at least

**95% survival at 7 years** based on data meeting ODEP's criteria for the strongest data quality. <sup>1\*</sup>

The Mobile Bearing configuration of the **GEMINI® SL®** received this high quality rating for a knee implant awarded by the United Kingdom's Orthopaedic Data Evaluation Panel.

1. Latest ODEP ratings can be found at <http://www.odep.org.uk>

ODEP rating received in Spring 2018

\* A minimum cohort of 350 hips/knees at the start of the study (consisting of data from beyond the developing centre and from more than 3 centres/surgeons) with a minimum of seven years follow-up and an actual revision rate of less than 5%. All deaths, loss to follow-up, failures and indications for revisions are recorded. A maximum of 20% loss to follow-up is permitted.