



Peer-reviewed Journal Articles for Similar Flat Tapered Wedge Design Philosophy Stems (Biomet Taperloc)

1. Total Hip Arthroplasty with an Uncemented Tapered Femoral Component Jeffrey R. McLaughlin and Kyla R. Lee. *J Bone Joint Surg Am.* 2008;90:1290-1296. Doi:10.2106/JBJS.G.00771

2. McLaughlin, J.R. and K.R. Lee, Uncemented total hip arthroplasty with a tapered femoral component: a 22- to 26-year follow-up study. *Orthopedics*, 2010. 33(9): p. 639.

3. Parvizi, J., et al., Primary total hip arthroplasty with an uncemented femoral component: a long-term study of the Taperloc stem. *J Arthroplasty*, 2004. 19(2): p. 151-6.



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*Simply Versatile.*

PROFEMUR® TL  
Hip System





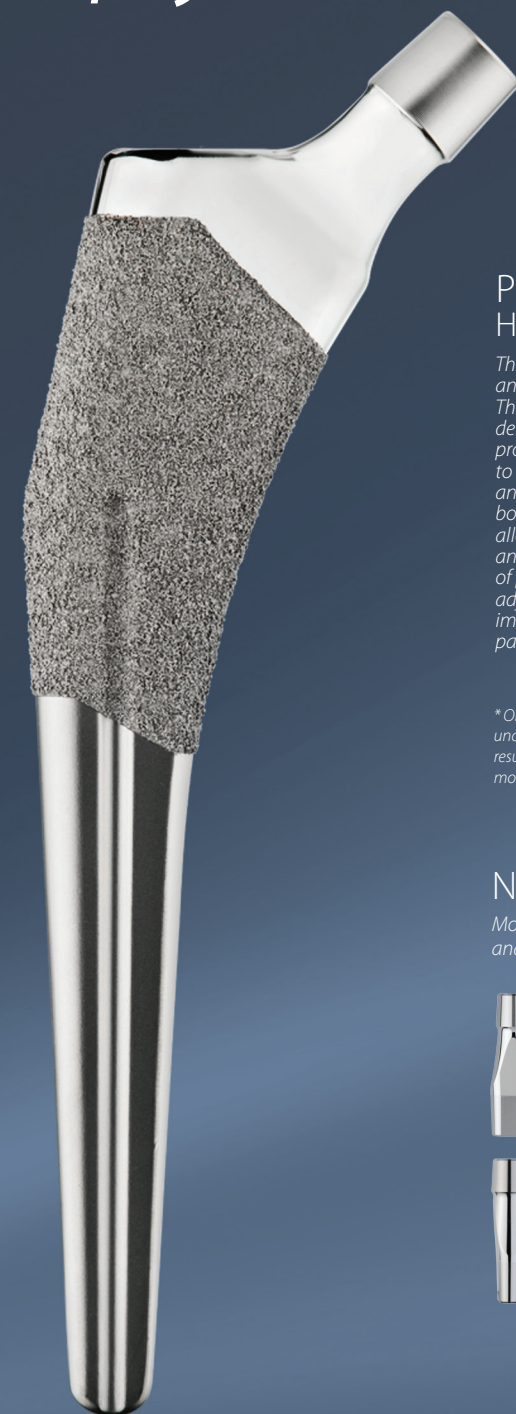
# PROFEMUR® TL Hip System

## Simply Versatile.

*Intra-operative Flexibility*  
One set of instruments for multiple stems

*Multiple Neck Options*  
Monolithic and modular necks accommodate anatomical differences

*Established Stem Philosophy*  
Incorporating features that have been in the market for several years



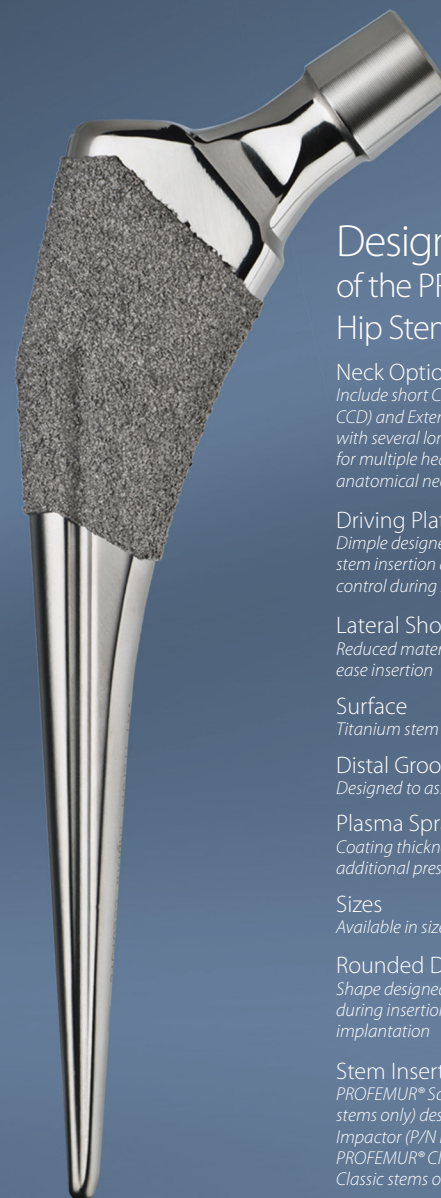
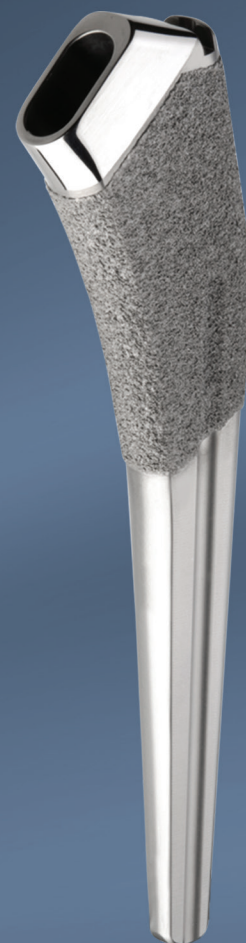
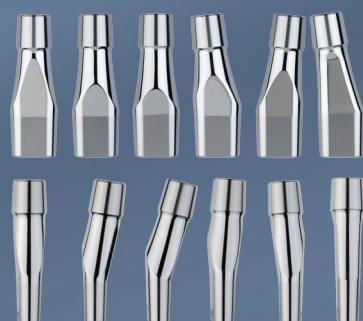
### PROFEMUR® TL Hip Stems

The PROFEMUR® TL stem offers simplicity and flexibility in total hip arthroplasty. The flat tapered wedge stem geometry is designed to provide primary fixation via a proximal femur fit with a reduced geometry to help conserve bone at the lateral shoulder and in the A/P dimension. The versatility of both monolithic and modular neck designs allow for a customizable reconstruction\* and address soft tissue tension for a range of patient anatomies. With modular necks, adjustments can be made after stem implantation to address a range of patient anatomies.

\* Omlor, et al; Summary: A stature-specific concept for uncemented, primary total hip arthroplasty: 10-year results in 155 patients using two stem shapes and modular necks; Acta Orthopaedica Nov. 2010

### Neck Options

Modular necks to accommodate anatomical differences.



### Design Features of the PROFEMUR® TL Hip Stems

#### Neck Options

Include short Classic versions with Standard (135° CCD) and Extended (127° CCD) neck angles, along with several long and short modular versions allowing for multiple head center positions to meet range of anatomical needs

#### Driving Platform

Dimple designed for uni-directional loading during stem insertion and oval slot designed for rotational control during stem insertion

#### Lateral Shoulder

Reduced material helps to conserve bone and ease insertion

#### Surface

Titanium stem surface has glass-beaded texture

#### Distal Groove

Designed to assist rotational stability

#### Plasma Spray

Coating thickness of 1mm (0.5mm per side) for additional press-fit

#### Sizes

Available in sizes 1-12

#### Rounded Distal Tip

Shape designed to reduce the risk of fracture during insertion and minimize point contact after implantation

#### Stem Inserters

PROFEMUR® Screwdriver Inserter (P/N PRFS0460; for modular stems only) designed to provide rotational control; Final Stem Impactor (P/N PPF60200) designed for uni-directional loading; PROFEMUR® Classic Stem Impactor (P/N PRCLIMPT; for short Classic stems only) designed to provide rotational control

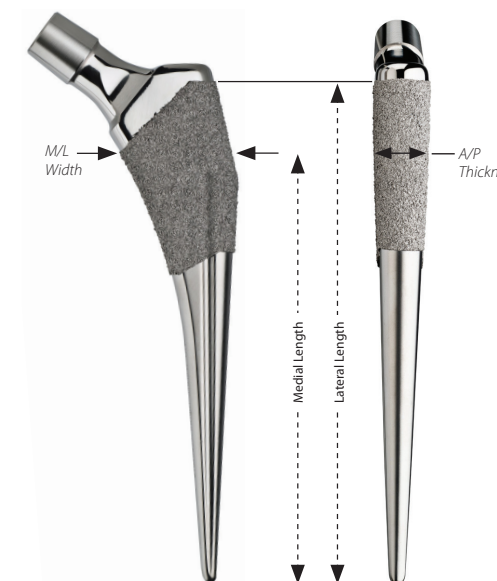
## PROFEMUR® TL Stems General Specifications

- Stems are made of Titanium alloy with commercially-pure Titanium plasma spray over the proximal region (0.5mm/side)
- M/L Width: 27 – 39mm
- A/P Thickness: 13 – 15mm
- Classic Standard neck angle is 135°
- Classic Extended neck angle is 127°

### PROFEMUR® TL Modular and Classic Stems

Size	Medial Length	Lateral Length	Neck Angle (Classic)	M/L Width	A/P Thickness
1	109	130	135°/127°	27	13
2	111	132	135°/127°	28	13
3	114	135	135°/127°	29	13
4	116	142	135°/127°	30	13
5	119	144	135°/127°	30	13
6	122	147	135°/127°	31	14
7	125	150	135°/127°	32	14
8	126	151	135°/127°	33	14
9	129	154	135°/127°	34	14
10	134	159	135°/127°	36	14
11	139	166	135°/127°	38	14
12	146	172	135°/127°	39	15

NOTE: The dimensional chart above represents the PROFEMUR® TL and PROFEMUR® TL Classic stems. The Neck Angles are representative of the Classic stems only.



Individual results and activity levels after surgery vary and depend on many factors including age, weight and prior activity level. There are risks and recovery times associated with surgery and there are certain individuals who should not undergo surgery.

