Introduction

Since 1826, physicians and surgeons have depended on George Tiemann & Co.

Statement of Policy

George Tiemann & Co., has manufactured fine surgical instruments since 1826. Since then, we have supplied the medical profession with high quality, correctly styled products.

In addition to our own products, we represent other manufacturers and importers, and therefore welcome inquiries concerning instruments not shown in our catalog. While we feel that the patterns shown are the most widely used and accepted, occasionally another style may be preferred. In this event, we can usually supply the instrument if either a catalog number, sample or description can be provided.

Returns for credit can be made without permission. However, this must be done within 30 days from date of billing. Items are subject to a restocking fee if they are not in original packaging material, or, have been autoclaved/sterilized. Instruments older than 30 days require approval and are also subject to restocking charges. When returning items, please provide the original invoice number, your order number (if any) and other pertinent information.

Claims for shortages must be made within 5 days of package receipt. To avoid short shipments, all orders are computer weighed and double checked for accuracy by two separate individuals.

Ordering Information

1) Please use catalog number and supply size, style and quantity. Some catalog numbers cover more than one size or style.

2) Include complete invoicing and shipping address information. New York and Florida residents are subject to applicable sales tax.

3) If you have a preferred shipping method, please inform us. We will use the best method if no instructions are given.

4) Terms are Net 30 FOB Hauppauge NY, unless other arrangements are made at time of sale. Delinquent accounts are subject to a 1 1/2% per month (total 18% annum) service charge.

5) Due to the increased cost in processing orders, it is necessary to enforce a $25.00 minimum billing charge.

6) We accept Mastercard, Visa and American Express

New Surgical Procedures, Improved Techniques, Refinements in Tooling Skills and Advancements in Metallurgy, emphasize the continuing need for change. We reserve the right to ship the most current models, which will always reflect the wishes of the medical profession.

Quality Surgical Instruments and Repairs since 1826

www.GeorgeTiemann.com

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Modified Kolbel Self-Retaining Glenoid Retractor with Hinge

Kolbel Retractor Blades
(sold as set of 2 blades)

A 080-7021 Kolbel Retractor Blade 20 x 36 mm
B 080-7022 Kolbel Retractor Blade 20 x 53 mm
C 080-7023 Kolbel Retractor Blade 20 x 68 mm
D 080-7024 Kolbel Retractor Blade 20 x 85 mm
E 080-7017 Kolbel Retractor Blade 36 x 36 mm
F 080-7018 Kolbel Retractor Blade 36 x 53 mm
G 080-7019 Kolbel Retractor Blade 36 x 68 mm
H 080-7020 Kolbel Retractor Blade 36 x 85 mm
Modified Kolbel Self-Retaining Glenoid Retractor with Hinge

080-7015 Tiemann-Kolbel Self-Retaining Retractor ONLY; **NO BLADES**

080-7016 Tiemann-Kolbel Self-Retaining Retractor with blades; set includes 1 pair each of 080-7017 (36 mm x 36 mm) & 080-7018 (36 mm x 53 mm)

080-7025 Tiemann-Kolbel Shoulder Retractor, Square Frame ONLY; **NO BLADES**

080-7026 Tiemann-Kolbel Shoulder Retractor, Square Frame with blades; set includes 1 pair each of 080-7017 (36 mm x 36 mm) & 080-7018 (36 mm x 53 mm)
## Kolbel Glenoid Lever

Prongs designed to sit securely in the glenoid neck to provide traction. Also useful in securing the medial flap during capsule repair.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>080-7034</td>
<td>15 mm wide Kolbel Glenoid Lever, 12”, double prong</td>
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<tr>
<td>080-7035</td>
<td>22 mm wide Kolbel Glenoid Lever, 12”, double prong</td>
</tr>
<tr>
<td>080-7036</td>
<td>15 mm wide Kolbel Glenoid Lever, 12”, single prong</td>
</tr>
<tr>
<td>080-7037</td>
<td>22 mm wide Kolbel Glenoid Lever, 12”, single prong</td>
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## Kolbel Instruments

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>080-7002</td>
<td>Suture Passer- small hole at tip is used to pass suture through a prepared tunnel; 18.5 cm length</td>
</tr>
<tr>
<td>080-7003</td>
<td>Suture Passer- Crochet style hook; 25 mm diameter, 23.5 cm length</td>
</tr>
<tr>
<td>080-7004</td>
<td>Suture Passer- Crochet style hook; 30 mm diameter, 23.5 cm length</td>
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<tr>
<td>080-7038</td>
<td>Awl 25 mm diameter; 23.5 mm length</td>
</tr>
<tr>
<td>080-7039</td>
<td>Awl 30 mm diameter; 23.5 mm length</td>
</tr>
</tbody>
</table>

George Tiemann & Company

25 Plant Avenue, Hauppauge, N.Y. 11788-3804
Telephone 1-800-843-6266 or 631-273-0005
Fax 1-800-577-6050 • www.georgetiemann.com
**Kolbel Retractors**

**080-7001 Subscapularis Spreader**, 15 cm length. This retractor reaches deep to help split the subscapularis in a Jobe approach. It also is used for retracting a split deltoid in mini rotator cuff repairs.

**080-7014 Tiemann-Kolbel Soft Tissue Retractor**, 18 cm length. This shallow retractor is helpful in the early phase, helping retract soft tissue comprising of the gleno-humeral joint. The use facilitates the introduction of deeper retractors which are required for sufficient visibility of the glenoid, acromion and rotator cuff.
**080-248 Glenoid Punch.** For Bankart repair.

Overall Length: 8"

**080-252 Ligature Carrier.** For Bankart repair.

Overall Length: 7.25"

**080-7005 Percussion Awl with Metal Handle.**
Used to begin tunneling the cortical bone during rotator cuff repairs or Bankart procedure.

Overall Length: 8.625"

**080-7007 Crochet Hook Suture Passer.** Notched at the tip to hook looped sutures and pull through tunneled bone. Used in conjunction with Penetrating Awl (080-7006)

Overall Length: 7"
Handle Length: 4"

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Telephone 1-800-843-6266 or 631-273-0005
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**080-1263 Mallet, 28 mm, 1lb head, phenolic handle.**
Used with percussion awl to create tunnels.

[Image of Mallet]
Overall Length: 9.5"

**080-7006 Penetrating Awl with phenolic handle.**
Used to assist in clearing and expanding of tunnels in the glenoid or humerus.

[Image of Penetrating Awl]
Overall Length: 7"

**080-250 Reaming Forceps.** For Bankart repair.

[Image of Reaming Forceps]
Overall Length: 7"
Kolbel Deep Soft Tissue Retractor

080-7014-2 Kolbel Deep Soft Tissue Retractor, 2 prong, 7.25" long
Kolbel Retractors

**080-7011** Tiemann Humeral Head Retractor, 12" long, strong curve.

**080-7012** Tiemann-Kolbel Glenoid Lever, 15 mm wide blade.

**080-7013** Tiemann-Kolbel Glenoid Lever, 20 mm wide blade. These two retractors sit in the glenoid neck and retract medially the subscapularis. Also, during instability, they assist in tacking down the medial flap of the incised capsule.
080-7009 Glenoid Perforation Tenaculum, slight angle, 17 cm.
080-7010 Glenoid Perforation Tenaculum, strong angle, 17 cm.

These two instruments are designed to assist in the reaming process. Available in 2 angles.

110-943 Tissue Forceps, 1 x 2 teeth and serrated platform, 20cm. Used to obtain a firm non-slip grip on tough capsules.
The Tiemann-Fukuda Retractors are designed to retract the humeral head while exposing the glenoid. The retractor is placed in the gleno-humeral joint. The oval ring then retracts the humeral head to allow exposure of the glenoid rim and its articular surface.

080-1869S Fukuda Style Retractor, 8", Small (opening is 26 mm x 42 mm)

080-1869L Fukuda Style Retractor, 8", Large (opening is 30 mm x 42 mm)
Darrach Retractors are extremely helpful in shoulder procedures. The blunt tips fit neatly beneath the acromion and deltoid musculature. Once properly positioned, they act to widen the subacromial bursa and coraco-acromial ligaments.

These retractors also allow you to safely pivot the tips beneath or against bone, such as acromion or fibula, and effectively lever. Thus retracting any muscle and soft tissue out of the operative field while they protect neurovascular structures.

080-200 Small Darrach Retractor 3/8" wide, 10 1/4" long

080-201 Medium Darrach Retractor 1/2" wide, 10 1/4" long

080-202 Large Darrach Retractor 3/4" wide, 10 1/4" long

080-203 Extra Large Darrach Retractor 1" wide, 10 1/4" long
080-256 Capsule Retractor, one prong. 10" long, 20 mm wide

080-255 Capsule Retractor, two prong. 10" long, 20 mm wide

080-254 Capsule Retractor, three prong. 10" long, 20 mm wide
The Tiemann Subacromion Spreader is used to gain optimal access to the subacromial space by distracting inferiorly the humeral head from the acromion. Perfect for massive tears and repair of a supraspinatus tear.
Originally designed by Anthony Browne, M.D.

- Ideal for arthroplasties and capsule repair procedures.
- Available in a large and small size cup.

**Small Radiotranslucent:**
080-1866R

**Large Radiotranslucent:**
080-1867R
The **Browne Deltoid Retractor** is used by slipping the convex cup end under the deltoid and over the lateral aspect of the humeral head. You can then easily retract to achieve excellent exposure to the anterior portion of the gleno-humeral joint.

**080-1866 Browne Deltoid Retractor** 11", Small. Blade width is 1 7/8"

**080-1867 Browne Deltoid Retractor** 11", Regular. Blade width is 2 1/4"
**Shoulder Retractors**

**080-207**
Fits easily under the acromion, deltoid and over the humeral head.

**080-208**
Used during osteotomy of the humeral head and approaches to the glenoid. It is designed to allow one finger retraction and contours to allow teeth to fit behind the glenoid, retracting tissue for easy access to the glenoid.

**080-209**
The retractor's teeth are specifically designed to retract the subscapularis and capsule medially during a Bankart procedure. The wide midsection retracts the soft tissue during anterior glenoid work. The curved handle allows the assistant to use minimal pressure to achieve exposure.

**080-207 Tiemann Deltoid Retractor**
**080-208 Tiemann Posterior Glenoid Neck Retractor**
**080-209 Tiemann Anterior Glenoid Neck Retractor**

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The Goldstein Retractor is placed along the glenoid rim during an open Bankart procedure to allow excellent exposure.

The advantage over existing retractors is that the convex teeth sit easily into the glenoid rim while the bend of the shaft allows the instrument to stay out of the surgeon's view.
Evans-Fukuda Retractor

080-1869-EN Evans-Fukuda Shoulder Retractor, Narrow, 8.625" long

080-1869-EW Evans-Fukuda Shoulder Retractor, Wide, 8.625" long
080-1869S-RS Fukuda Retractor, Small, with Reamer slot, 7.25" long, 25 x 40 mm opening

080-1869L-RS Fukuda Retractor, Large, with Reamer slot, 7.25" long, 32 x 40mm opening
### Scottish Rite Hospital Bone Tray

**Complete set consists of:**

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<thead>
<tr>
<th>Item Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>083-495-1</td>
<td>Reamer shaft 150mm</td>
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<tr>
<td>083-1213</td>
<td>Lewis Bone Imp. Str. Serr. Head</td>
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<tr>
<td>083-1175</td>
<td>6” Bone Impactor Round Head</td>
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<tr>
<td>080-1200</td>
<td>Stein Impactor 3mm Tip</td>
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<tr>
<td>160-1240</td>
<td>Ligature Carrier</td>
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<tr>
<td>080-154</td>
<td>Bone Clamp</td>
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<td>080-1435-3/0</td>
<td>Bone Curette 3/0 Str.</td>
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<tr>
<td>105-1437</td>
<td>D/A Bone Cutter</td>
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<td>222-DEL34S-1</td>
<td>Large Hand Gouge w/Hole</td>
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<tr>
<td>222-DEL81-1</td>
<td>Medium Hand Gouge w/Hole</td>
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<td>080-1210</td>
<td>Mallet</td>
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<td>Carroll Osteotome Cvd 1/4”</td>
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<td>Carroll Osteotome Cvd 3/8”</td>
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<td>Carroll Osteotome Str 3/8”</td>
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<td>080-855-1/4</td>
<td>Hoke Osteotome Str 1/4” W 5” L</td>
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<td>Hoke Osteotome Str 1/8” W 5” L</td>
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<td>080-120-1</td>
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<td>160-417</td>
<td>Fried Rongeur Cvd Del 1.3mm Jaw</td>
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<td>160-424X</td>
<td>Lempert Rongeur 1.4mm</td>
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<tr>
<td>080-CONTAINER-BONE</td>
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<tr>
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Scottish Rite Hospital Soft Tissue Tray

**Complete set consists of:**

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<td>200-2</td>
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<td>Double ended curette</td>
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<tr>
<td>020-931-86</td>
<td>Double ended curette</td>
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<tr>
<td>105-794</td>
<td>Jansen D/E Curette 3/4 mm</td>
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<tr>
<td>160-720</td>
<td>D/E Dissector, Oblique end</td>
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<tr>
<td>080-2054</td>
<td>Finger Nail Drill</td>
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<tr>
<td>080-2055</td>
<td>Tajima Wire Driver, 105 mm</td>
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<tr>
<td>080-1506</td>
<td>Carroll Periosteal Elev D/E</td>
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<td>222-70-184</td>
<td>D/E Elevator</td>
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<td>Freer Elev D/E 4 mm</td>
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<td>Kleinert-Kutz D/E Elev/ &amp; Dis.</td>
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<td>Adson FCP Serrated 4 3/4&quot;</td>
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<td>105-1160</td>
<td>Backhaus Towel Clamp 3 1/2&quot;</td>
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<td>105-241</td>
<td>Bishop-Harmon FCP 1x2T .6mm tip</td>
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<td>105-305</td>
<td>Brown-Adson FCP Str</td>
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<td>Halstead Mosquito Str 1x2T 5&quot;</td>
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<td>110-253</td>
<td>Petit Pt Ochsner FCP 5 1/2&quot; Cvd</td>
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<td>Right Angle Hemostat 5 1/2&quot;</td>
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<td>083-937</td>
<td>Tendon Weaving FCP Cvd 6&quot;</td>
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<td>Tendon Weaving FCP Str 6&quot;</td>
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<td>Creilwood TC Ndhlr 6&quot;</td>
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<td>Halsey TC Ndhlr Serr 5&quot;</td>
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<td>105-1233</td>
<td>Halsey Tc Ndhlr Smooth 5&quot;</td>
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<td>Tendon Passer, D/E</td>
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<td>080-2726</td>
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<td>081-243</td>
<td>Flat Nose Pliers &amp; Cutter</td>
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<td>083-926</td>
<td>Bunnell Dis OBD ANG TP</td>
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<td>080-1306</td>
<td>Tiemann Hand Rasp X-cut 6</td>
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<td>110-3030</td>
<td>Rollet Rake Ret</td>
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**083-SR-SOFT TISSUE**

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<td>Retractor 2 prong</td>
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<td>010-1160</td>
<td>Desmarres Lid Ret #0 10mm</td>
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<tr>
<td>080-120-15</td>
<td>Wide Tip Mini Hohmann Ret</td>
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<tr>
<td>083-601</td>
<td>Gelpi Ret 4 1/2&quot; Long</td>
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<td>110-3390</td>
<td>Gelpi Ret 5 1/2&quot;</td>
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<td>Mini Hohmann Ret 6mm R.H.</td>
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<td>110-3100</td>
<td>Army-Navy Ret Pair</td>
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<td>Scalpel Handle Rmd Str w/ruler</td>
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<td>Tissue Scs Str 4 1/2”</td>
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<td>Fraizer Skin hook 4 3/4&quot;</td>
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<td>Weilandt 2x3 Blunt</td>
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<td>105-DIP-RED</td>
<td>Dip 1 Ring Red</td>
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Existing bone reduction clamps for metacarpal and phalangeal fractures are merely miniaturized clamps that were developed for tibias and femurs, and as such, they have many shortcomings when applied through a dorsal approach in the hand. The existing clamps cannot apply anterior-posterior reduction forces without massive dissection and exposure, and under nearly all circumstances, the clamp handles protrude from the wound with such a high profile as to interfere with placement of drills and guides, screwdrivers and so forth.

The meals clamp has been used successfully in a wide variety of fracture applications in the hand for several years. It is quite versatile and effective in reducing and maintaining reduction of metacarpal and phalangeal fractures of various configurations when applied through a conventional dorsal approach.

The curved blades on the clamp conform closely to the cross-sectional contours of the metacarpals and phalanges. The 100 blade-arm angle allows for medial-lateral compression with the clamp handle well removed from the surgical site and maintaining a low profile so that k-wires, drills, taps, screwdrivers, etc. can have easy access to the bone. The length difference in the working arms allows for anterior-posterior compression with the clamp handle well removed from the surgical site and maintaining a low profile without requiring extensive soft tissue dissection. All angles of oblique compression between direct anterior-posterior and direct medial-lateral are also accommodated easily by slightly angling the approach of the clamp during application.

The long ratchet bar allows for versatile locking around large metaphyseal as well as narrower diaphyseal portions of the metacarpals and phalanges.
**Metacarpal & Phalangeal Bone Reduction Clamp**

**Dorsal Exposures**

One of the curved blades has a longer shank between the pivot point and the right angle bend, making the clamp extremely versatile.

Illustration No. 1 shows a metacarpal fracture in a plane that is nearly parallel to the plane of the palm. With the clamp handles nearly vertical, the fracture is neatly and easily compressed, as shown.

Illustration No. 2 shows a metacarpal bone fracture in a plane that is nearly perpendicular to the plane of the palm. Laying the clamp flat, with the blades extending down, the clamp compresses the two fracture fragments tightly together.

The blades of the clamp conform closely to actual bone contour, allowing minimal soft tissue dissection and distortion while the clamp is being applied. The clamp handles are well away from the fracture site allowing easy access for drilling and other work.

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Redler Bone Reduction Clamp with K-Wire Guide

Designed to hold small bone in position for pinning.

The REDLER clamp is designed with a proximal pin tube with a looped end to assist in holding the tube securely against the bone.

The long ratchet allows clamping on various size bone.

This clamp also aligns the K-Wire to go from tip to tip for better placement.

Designed by Michael Redler, MD

Redler Bone Reduction Clamp with K-Wire Guide

080-090-35 Bone Reduction Forceps with K-Wire Guide for 0.35 wire, 5"

080-090-45 Bone Reduction Forceps with K-Wire Guide for 0.45 wire, 5"

080-090-62 Bone Reduction Forceps with K-Wire Guide for 0.62 wire, 5"
**Redler Wrist Reduction Clamp**

The Redler wrist reduction clamp allows for reduction and holds major fragments of a wrist fracture.

This accurate guide system enables the placement of k-wires or guide wires.

K-wires can be used as the ultimate fixation or guide wires can be utilized for accurate placement of cannulated screws.

The special angular design allows for ease of use with either a C-arm or in conjunction with wrist arthroscopy and arthroscopic reduction internal fixation of a distal radius fracture.

The Redler wrist reduction clamp has also been used successfully in conjunction with elbow fractures and with internal fixation of syndesmosis injuries in the ankle.

**080-091-45** Redler Wrist Reduction Clamp 0.045 wire guide, 8"

**080-091-62** Redler Wrist Reduction Clamp 0.062 wire guide, 8"
**Fakhouri Reduction Clamp**

Tiemann Exclusive
Two long ratchets allowing clamp to close on ALL hand bones

Extra-Long Ratchets

**080-120-1 Fakhouri Reduction Clamp.** With double long ratchets, 6", 35mm wide max extension

**080-120-2 Fakhouri Reduction Clamp, Heavy tips.** With double long ratchets, 6", 25mm wide max extension. Heavy tips are shorter for strength in the 25mm.

Improvement over standard clamps in most hand trays. These have two extra long ratchets to hold all type fractures. Most other bone clamps have only one long ratchet.
Ikuta Bone Clamp

**Ikuta Bone Clamps, Straight, 5 1/2" Long**

- **080-106** 1.6mm, prong space opening
- **080-107** 5.0mm, prong space opening
- **080-108** 6.5mm, prong space opening

**Ikuta Bone Clamps, Angled, 5 1/2" Long**

- **080-106-1** 1.6mm, prong space opening
- **080-107-1** 5.0mm, prong space opening
- **080-108-1** 6.5mm, prong space opening

Drill, Tap and set screws with 5.0 & 6.5mm size 1.6mm K-wire only

Drill, tap and place screws with clamp in place.
The unique cloven shaped jaws provide 8 point stabilization.
The space between the prongs allows for Drill, Tap and set screws to be used.
Stable internal fixation of intra-articular and periarticular fractures of the hand allows early joint mobilization. Open reduction requires soft tissue dissection including subperiosteal stripping, extensor mechanism disruption, possible joint capsule stripping and joint invasion. This, in turn, may lead to extensive soft tissue and periarticular adhesions, particularly if rigid fixation is not achieved and early mobilization is not initiated. Percutaneous fixation avoids additional surgical insult to the soft tissues, thus minimizing adhesions and devascularization of the osseous structures. The percutaneous reduction and internal fixation (PRIF) techniques described herein accomplish each of these goals, i.e. rigid internal fixation without soft tissue stripping. Early mobilization is possible, adhesions are minimized and skin scarring is eliminated altogether.

The percutaneous reduction technique reduces the fracture by ligamentotaxis with one clamp and holds the reduction with a second. Under an image intensifier, the fracture is provisionally reduced with a clamp and stabilized with a screw introduced through a stab incision. If necessary, further stabilization may be obtained by using additional screws or K-Wires. This avoids soft tissue stripping, eliminates the need for immobilization, allows early range of motion of the joints and prevents periarticular contractures.

The clamps are available in four sizes. They are simple in design and easy to use. They allow for easy and expeditious manipulation and reduction of the fracture. These clamps can also be used for the closed reduction of distal radius fractures and foot fractures. They can also facilitate open reductions of hand and foot fractures, scaphoid fractures and scapholunate dissociation. The use of the percutaneous clamps significantly reduces intraoperative time.

Please see the following cases
CASE A

Intra-articular spiral fracture of the proximal phalanx of the little finger (figs. 1 & 2). Stab incisions are made on the radial and ulnar side of the fracture for the application of the clamps (fig. 3). Two clamps are used to reduce the fracture (fig. 4 & 5). Two screws are inserted percutaneously (figs. 6-9). The stable fixation allowed for early mobilization of the finger.
CASE B

Intra-articular fracture of the proximal phalanx of the middle finger (fig. 1). The fracture is provisionally reduced using the percutaneous technique (figs. 2 & 3). Stable fixation is obtained with percutaneously inserted screw (figs. 4 & 5).
080-099-1
Fakhouri Bone Clamp #1
with Extra Long Ratchet

CASE C

Intra-articular fracture of the base of the fifth metacarpal (fig. 1). The fracture is percutaneously reduced with the clamp and pinned (figs. 2 & 3).
Stable internal fixation of intra-articular and periarticular fractures of the hand allows early joint mobilization. Open reduction requires soft tissue dissection including subperiosteal stripping, extensor mechanism disruption, possible joint capsule stripping and joint invasion. This, in turn, may lead to extensive soft tissue and periarticular adhesions, particularly if rigid fixation is not achieved and early mobilization is not initiated. Percutaneous fixation avoids additional surgical insult to the soft tissues, thus minimizing adhesions and devascularization of the osseous structures. The Percutaneous Reduction and Internal Fixation (PRIF) techniques accomplish each of these goals, i.e. rigid internal fixation without soft tissue stripping. Early mobilization is possible, adhesions are minimized and skin scarring is eliminated altogether.
The percutaneous reduction technique reduces the fracture by ligamentotaxis with one clamp and holds the reduction with a second. Under an image intensifier, the fracture is provisionally reduced with a clamp and stabilized with a screw introduced through a stab incision. If necessary, further stabilization may be obtained by using additional screws or K-Wires. This avoids soft tissue stripping, eliminates the need for immobilization, allows early range of motion of the joints and prevents periarticular contractures.
The clamps are available in four sizes. They are simple in design and easy to use. They allow for easy and expeditious manipulation and reduction of the fracture. These clamps can also be used for the closed reduction of distal radius fractures and foot fractures. They can also facilitate open reduction of hand and foot fractures, scaphoid fractures and scapholunate dissociation.

The use of percutaneous clamps significantly reduces intraoperative time.
080-099-3
Fakhouri Bone Clamp
#3 with 2 long ratchets

CASE D

Metacarpal head fracture of the index finger (fig. 1). The percutaneous clamps are applied through stab incisions (fig. 2). Provisional reduction of the fracture is performed with the clamps under mini-image intensifier (fig. 3). The fracture is percutaneously pinned (fig 4 & 5).
Fracture subluxation of the base of the thumb (fig. 1). Percutaneous reduction is performed under image intensifier (fig. 2 & 3). Multiple pins are introduced (fig. 4 & 5). Final intraoperative radiographs (fig. 6 & 7).
080-099-1
Fakhouri Bone Clamp #1
with Extra Long Ratchet

CASE F
Intra-articular fracture of the proximal phalanx of the thumb (fig. 1). The fracture was percutaneously clamped and pinned (figs. 2 & 3).
CASE G

The distal radius fracture is displaced and translated radially after it was closed reduced (fig. 1 & 2). A stab incision is made radially and another made ulnarly for the insertion of the tips of the large percutaneous clamp. The fracture is reduced with the clamp (fig. 3 & 4). Percutaneous pinning is performed while the fracture is held in a reduced position by the clamp (figs. 5 & 6).
Fakhouri Hand and Foot Percutaneous Reduction Clamp

080-099-5 #5 Extra Large, Distal Radius Fractures, 6 1/4" long

All Fakhouri Clamps have 2 extra long ratchets

diameter when fully closed, 40mm
maximum opening (when 1st ratchets catch) 42mm
CASE H

Scaphoid nonunion (fig. 1). Through a palmar approach a wedge-shaped iliac bone graft is inserted (fig. 2). The scaphoid and the bone graft is compressed and held in stable position with the clamp (fig. 3&4). Under image intensifier a temporary K-wire is introduced and checked for appropriate position and length (fig. 5). A Herbert screw is inserted parallel to the K-wire (fig. 6). Immediate postoperative radiographs (fig. 7).
Tiemann Bone Clamp with Drill Guide

080-098 Tiemann Bone Clamp with k-wire Guides 0.62 / 1.6mm, 5 1/2" long

Designed with the drill guide on the superior portion of the bone clamp allowing the surgeon to reduce the fracture with the tips and then introduce the k-wire.
Bone Reduction Clamp with Long Ratchet

080-112
Bone Reduction Clamp with Long Ratchet, 6" long, medium. 10mm - 50mm bone. Ball tipped for less penetration.

080-113
Bone Reduction Clamp with Long Ratchet, 9" long, large. 20mm - 70mm bone. Ball tipped for less penetration.
**Finger and Hand Retractors**

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**083-BLADE Tiemann Finger Retractor** provides exposure without an assistant.

**083-630 Tiemann small hand retractor**, smooth blades with third blade. Commonly used for open carpal tunnel release along with many other procedures that require shallow retraction. The third blade allows for additional retraction. It slides over the frame of the retractor and is held in place by the pressure of the opposing tissue.

**083-632 Tiemann medium hand retractor, 2 blunt prongs with 3rd blade** popular in wrist area

**083-634 Tiemann large hand retractor, 3 blunt prongs with 3rd blade** popular in wrist and forearm area

*most popular of the two models

**This blade is included with models 083-630, 083-632, 083-634**

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George Tiemann & Company

25 Plant Avenue, Hauppauge, N.Y. 11788-3804
Telephone 1-800-843-6266 or 631-273-0005
Fax 1-800-577-6050 * www.georgetieman.com
Weinraub Joint and Calcaneal Spreader, 1.6mm tube, 7" long

080-080 Weinraub Joint and Calcaneal Spreader, 2.8mm tube, 7" long

080-081

This instrument provides excellent joint exposure without blocking intra-articular or osteotomy access. Helps prevent slippage or falling out of the joint by placing the arms on either side of the area to be distracted, driving two pins and opening the joint.
Anderson Bone Grafting Retractor
Narrow tips for easy penetration into smaller incisions
Serrated tips for non-traumatic tissue abrasion
Great for spreading metacarpal or metatarsal

080-1806S Inge Lamina Spreader Child 6 3/8"

080-1806-1 Thinned Inge Spreader 3 teeth tip

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Telephone 1-800-843-6266 or 631-273-0005
Fax 1-800-577-6050 • www.georgetiemann.com
Scottish Rite Retractor

083-650 Scottish Rite Retractor, 5" long
Bone Awl

083-495 Tiemann Awl, four sided, short, 5" long
Chang Pin Clamp

Designed to allow accurate insertion of pins for internal fixation.

080-092 Chang Pin Clamp, 6" long

Used for small bones, the clamp allows accurate insertion of pins for internal fixation. The cannula has a 1.8mm internal diameter.
O’BRIEN BONE CLAMPS

Allows for placement of the bone clamp where it can best stabilize bone fragments. The drill guide allows for screw placement through the top of the clamp. Calibrations on the handle help eliminate the use of a depth gauge.

080-189 Large, 9.25” overall length

080-188 Small, 6” overall length

080-187 Extra Small, 4” overall length

O’BRIEN BONE CLAMP WITH DRILL GUIDE

Calibrated handle measures bones from 6mm to 24mm.
Guide accommodates 1.5, 2.0 and 2.7mm screws.

Overall Length: 9.5”
Guide diameter: 6.2mm
Ratchet Calibrations: 6mm to 24mm
Medial Malleolar / Bone Fragment Clamps

Quick tightening and release low profile clamp with unlimited settings.

080-098 Large; overall length 8", clamp end length 3"

080-097 Medium; overall length 6", clamp end length 2"

080-096 Standard; overall length 5.5", clamp end length 1"

George Tiemann & Company
Separates the calcaneal osteotomized bone for placement of tricortical bone graft.

Pads have a large surface area, which easily separates the calcaneal osteotomized bone for placement of tricortical bone graft. Large pad surface area helps prevent the compression of soft calcaneal cancellous bone.

**080-1940** Calcaneal Spreader with grooves

**080-1939** Calcaneal Spreader smooth
Watson-Cheyene Elevator Probe

This instrument gives surgeons both a periosteal elevator and a probe tip.

160-704 Watson-Cheyene Dissector Elevator

Rankin Ragnell Retractor

This modified Ragnell has a longer and thinner blade to allow more exposure using a smaller incision. Extremely useful for carpal tunnel release.

030-437 Rankin Ragnell Retractor
Tendon Weaving Forceps

Designed with one long jaw. Longer jaw extends 5mm and pierces the host tendon. The jaw then grasps the graft, when pulled back it draws the graft through the host to complete the 1st weave.

083-937 Tendon Weaving forceps, 6 1/4" straight

083-936 Tendon Weaving forceps, 6 1/4" curved
Chago Distal Radial Retractor

The newly designed instrument is very effective for gaining excellent exposure of the distal radius on large patients (mostly men) during surgery.

110-3379-1
Chago Distal Radial Retractor, 5 1/2"

Mengato Trigger Finger Retractor

"Replace 2 Ragnells or similar small blunt retractors AND the 2 hands needed to hold them with this ONE, simple, effective, small, blunt self-retainer.

Great for hand surgeons doing trigger digit release, DeQuervain's release or other similar cases with small incisions in the hand and forearm.

Free the assistant's 2 hands for other tasks.

Especially useful when help is limited."

083-605
Mengato Trigger Finger Retractor, solid blades 5 x 20mm
Meals Custom Mallet Splints

These custom splints are designed to allow the surgeon to create an exact sized splint for each patient. For proper insurance reimbursement it is suggested to use the CPT #99090, plus description.

This illustration shows the Mallet Splint submerged into boiling water. This is done for 10-15 seconds. The splint will become transparent and pliable.

This illustration shows the splint being applied by wrapping the splint around the D.I.P. joint.

This illustration shows the splint in a 3 point fixation with full extension of the D.I.P. joint.

This illustration shows the splint in place at work.

Mallet Mender Splints support the D.I.P. joint in extension after a mallet finger injury. Generally 6-8 weeks needed for successful outcome.

Description: Thermoplastic splint, custom fit around the end of the patient's finger to support the D.I.P. joint.

083-477-SMALL  Small splint (5/8" x 1 5/8")
083-477-MEDIUM  Medium splint (3/4" x 1 3/4")
083-477-LARGE  Large splint (7/8" x 1 7/8")
Meals Tenolysis Knives

The shafts of the knives are curved to allow the blades to enter and pass through the flexor tendon sheath and lyse adhesions when present. The shaft-blade orientations allow passage of selected knife circumferentially with minimal trauma to the sheath and tendon(s).

Tenolysis knife #3 should be introduced first in all 4 quadrants. This defines planes between the tendon and sheath and between the tendon and bone.

Tenolysis Knives #1 and #2 can then be used to extend the normal plane of gliding around the tendon. They have a concave cutting edge to capture and cut dense adhesions.

Alternating proximal and distal traction on the tendon while introducing knives 1 and 2 proximally and distal to critical pulleys will reveal residual adhesions that can be cut under direct vision. Once the tendons are gliding through the pulleys, any adhesions between the flexor digitorum superficialis and profundus can be released under direct vision.

083-475-1  Meals knife #1 (for Tenolysis Superficial and Deep to the tendon)

083-475-2  Meals knife #2 (for Tenolysis Medial and Lateral)

083-475-3  Meals knife #3 (a Tissue Plane Seeker/Preliminary Knife)
The Redler retractor employs a design feature that allows for outstanding balance in soft tissue retraction. The angled Hayes type retractor barely requires any pressure on its handle while giving the surgeon excellent exposure. The angled design also keeps the assistants hands far out of the surgical field which gives significant increases in visibility and room in which to operate. The fenestrated handle gives the option of placing a penrose drain through the opening which when attached to the hand table can give the option of hands free retraction. Once you have used this Hayes type retractor, no other option will come close to the ease of use and outstanding exposure.

083-509 Redler-Hayes Modified Retractor, 4mm tip, 8mm hole, 5" long
Replace 2 Ragnells or similar small blunt retractors and the 2 hands needed to hold them with this ONE, simple, effective, small blunt self-retainer.
Great for hand surgeons doing trigger digit release.
Free the assistant's 2 hands for other tasks.
Especially useful when help is limited.

160-557 Gutow-Heiss-Ragnell self-retaining retractor
**Bone Holding Clamps**

*Designed for proximal phalanx to provide joint distraction or hold bone for drilling or cutting application.*

080-159

*Smallest bone clamp with a longer ratchet.*

080-120

*Thin tips with extra long ratchets allow user to always be able to reduce fracture and lock the ratchets.*

080-157

*Allows user to reduce fracture and stabilize bone plate.*

080-156

*Standard bone reduction clamp now with extra long ratchets.*

080-153

080-120  Tiemann small fragment bone clamp 3 3/4”
080-153  Tiemann bone holding clamp with long ratchet 6”
080-156  Tiemann bone holding clamp with long ratchet 1 sharp tip, 1 platform tip 4 3/4”
080-157  Branigan proximal forceps 3/8” I.D. 5 1/2” with long ratchet
080-159  Tiemann forceps small 1/8” I.D. 5 3/4” with long ratchet

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Telephone 1-800-843-6266 or 631-273-0005
Fax 1-800-577-6050 • www.georgetiemann.com
K-Wire Bender / Cutter

080-2754 K-Wire Bender / Cutter

George Tiemann & Company
Lawton Broken Screw Extractor

Overall length: 4”
Handle Width: 3”

080-3157 Lawton Broken Screw Extractor

Wire Tightener with T-Handle

Overall length: 4.5”
Handle Width: 2.625”
End Diameter: 15mm

080-3158 DMP Wire Tightener with T-Handle
**CHARNLEY STYLE RETRACTORS**

**080-1780** Charnley Style Retractor Set

*Set includes:*

- Qty 1 of **080-1780-SMB** Small blade 1 x 1 1/4" deep
- Qty 1 of **080-1780-LGB** Large blade 1 x 1 1/2" deep
- Qty 1 of **080-1783** Weight with chain

*These pieces can also be sold separately*

**080-1780-3** Charnley Ret Blade, 3" deep

**080-1780-4** Charnley Ret Blade, 4" deep

**080-1780-6** Charnley Ret Blade, 6" deep

**080-1781-02** Charnley Ret Blade, Rounded, 2" deep

**080-1781-03** Charnley Ret Blade, Rounded, 2.5" deep

**080-1781-04** Charnley Ret Blade, Rounded, 3.5" deep

**080-1780-01** Charnley Frame ONLY

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Telephone 1-800-843-6266 or 631-273-0005
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H.S.S. Right Angled Hohmann Retractors

080-1831-1 Hohmann Retractor, right angled, 18mm wide, 5" from tip to angle, 5 1/2" from angle to handle. Narrow blade usually designed for retracting around the knee.

080-1834-1 H.S.S. C-Retractor. The "C" retractor is designed to retract the femur anteriorly during total hip arthoroplasty. Placement is made over the pelvic brim for best exposure.

080-1832-1 Hohmann Retractor, right angled, 43m wide, 5" from tip to angle, 5 1/2" from angle to handle. Wide blade designed for retracting around the hip. Very useful for retracting tissue in the posterior acetabular brim.
These instruments are sturdy, durable and well-crafted for the rigors of hip arthroscopy. For Grade IV articular lesions, they are used to remove remnants of the calcified layer, which prepares the bony bed for microfracture. They also allow excision of the fragmented articular edges, creating stable cartilage shoulders around the defect. They are also useful for debriding subchondral cysts and herniation pits.

During the surgical correction of cam impingement with femoroplasty, the curettes are used to excise the fibrocartilaginous tissue that covers the abnormal bone. Precise excision of this overlaying soft tissue layer demarcates the edges and provides the template of excision for the abnormal bone. The elevators are versatile and allow freeing up of any soft tissue around bone. They assist in removing the fibrous layer off the cam lesion and can be used to elevate capsules. They are also useful for mobilizing the labrum in preparation for repair or acetabular rim trimming.

080-BYRD-CURETTE-2 Byrd Curette, Ex-Long, 13 5/8"

080-BYRD-CURETTE-2/0 Byrd Curette, Ex-Long, 13 5/8"

080-BYRD-ELEVATOR-1 Byrd Elevator, Ex-Long 13 5/8"

080-BYRD-ELEVATOR-2 Byrd Elevator, Ex-Long 13 5/8"
This retractor is used to hold the hip capsule out of the way to achieve better visualization and to allow reaming of the acetabulum without catching the capsule in the reamer. The ends of the retractor have dull tips to help avoid soft tissue damage. Wider separation occurs at the deep capsule level holding the muscle out of the way while retracting the capsule.

080-1776 Romanelli Retractor Deep 7 1/4" long, 12cm deep

080-1776-1 Romanelli Retractor Deep, 7 1/4" long, 9cm deep
Paulson Knee Retractor

Designed for total knee retraction, the blade fits above the capsular ligament at the joint line. Also useful in revisions, as it fits nicely around the implant.

080-PAULSON Paulson retractor, 7 1/4" length, 2 1/4" x 1/2" blade
080-ACETABULAR-L  Acetabular Ret. Left, 10" L, 50mm W; used to expose the acetabulum of the left hip

080-ACETABULAR-R  Acetabular Ret. Right, 10" L, 50mm W; used to expose the acetabulum of the right hip

080-ACETABULAR-L-1  Acetabular Ret Left, 12" L, 50mm W; used to expose the acetabulum of the left hip

080-ACETABULAR-R-1  Acetabular Ret. Right, 12" L, 50mm W; used to expose the acetabulum of the right hip
This femoral neck elevator is a simple effective instrument to improve exposure of the proximal femur during preparation for, and implantation of the femoral component. The anatomic curve, and stout construction allows for usage under any circumstance. Furthermore, it's low profile allows for easy insertion and removal, and is particularly useful when space is limited. This feature is also helpful when the retractor is placed in the instrument tray.

Slender size is also ideal for mini open total hip procedures.

080-1818 Slender Femoral Neck Elevator, 13" long, 1 1/2" wide
Femoral Neck Elevator

080-1880 Femoral Neck Elevator, Narrow; 12 3/4" long, 1" wide blade

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Femoral Neck Elevator

080-1885 N.M. Femoral Neck Elevator; 15" long, 1 3/4" wide blade, notch is 30mm
**Cobra Retractor**

080-1881 Cobra Retractor, Blunt, Narrow, Extra Long;
14 1/2" long, 1" wide blade, front point is 1 1/2"

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Telephone 1-800-843-6266 or 631-273-0005
Fax 1-800-577-6050 • www.georgetiemann.com
080-1712-2  Aufranc Cobra Retractor, Special, 14" long

Designed for retracting tissue around the femur or acetabulum on extremely large and obese patients.
Hohmann Retractor, Wide, Extra Long, Slotted; 14" long, 1 1/4" wide blade, point is 1" and 4mm at tip
Hohmann Retractor, Narrow, Extra Long, Slotted;
13" long, 1" wide blade, point is 1" and 4mm at tip
080-1884 Striking Device; 11 1/4" long
Tiemann Knee Retractor

Tiemann Knee Retractor

080-755
Tiemann-Schlessinger meniscus grasper,
2 x 10mm jaws, 5 1/2" shaft.

080-756LS
Tiemann-Schlessinger meniscus grasper,
2 x 10mm jaw, 5 1/2" shaft with locking screw.
Special Order.
ACL Knife

Available in sizes, 9, 10 & 11mm wide. Specify size when ordering.
Cobb Bone Hooks

Useful for proximal femoral elevation during total hip replacement and other procedures that require large bone manipulation.

080-1900  Cobb Bone Hook, sharp, 12", 1 3/4" radius

080-1901  Cobb Bone Hook, blunt, 12", 1 3/4" radius

080-1898  Cobb Bone Hook, sharp, 8", 1 3/4" radius
**Femoral Neck Retractors**

080-1817 Femoral Neck Retractor, 13" long, 50mm wide at tip, 68mm wide at widest point of retractor blade.

080-1809 Femoral Neck Retractor, 13" long with suction holes, 30mm wide at tip, 72mm wide at widest point of retractor blade. Blade is slightly concave.

These instruments are used to improve the exposure of the femoral canal prior to reaming or rasping for femoral prosthesis. Designed to elevate the proximal femur while retracting tissue during total or hemi-arthroplasty the design provides excellent access to the intermedullary canal. The serrations at the tip grip and elevate the proximal femur.
**Craig Biopsy Set**

**065-3660 Craig Biopsy Set**

Complete set consists of:
- Qty 1 of **065-3660-10** Sterilization Rack
- Qty 1 of **065-3660-1** Socket Wrench
- Qty 1 of **065-3660-2** 20 Gauge Needle
- Qty 1 of **065-3660-3** 22 Gauge Needle
- Qty 1 of **065-3660-4** 20 Calibrated Cannula
- Qty 2 of **065-3660-8** Blunt Trocars, Calibrated
- Qty 2 of **065-3660-5** Trephine Cutters
- Qty 1 of **065-3660-6** Stylet Pusher
- Qty 1 of **065-3660-7** Twist Hook

**Tiemann Rod Bender**

**080-2755 Rod Bender**

Tiemann Rod Bender with offset handles for comfort will bend 5mm and 6mm rods. No more hurting your hands!
Waugh Retractor for Spine

Designed to retract and give exposure to the iliac crest for graft harvesting.

Blade: 50mm wide
Depth: 5 1/4" (a-b)
Length: 6" (c-d)
Handle: 4"

080-1792 Waugh Retractor for Spine
080-1508 10" Freer Elevator, special. 5mm wide. Ideal when a standard Freer is too short.

080-1517-SIZE Cobb Elevator, 9" (4" handle). Available in sizes: 1/4", 1/2", 3/4" & 1". Please specify size when ordering. *Special lengths and widths available on a custom order basis.*

080-1513-SIZE Cobb Elevator, 11". Available in sizes: 1/4", 1/2", 3/4", 1" & 1 1/4". Please specify size when ordering. *Special lengths and widths available on a custom order basis.*
160-421-1 Mini Rongeur for synovectomy, straight, 1.1mm jaw, extremely delicate, 6" 

160-424-1 Mini Rongeur for synovectomy, curved, 1.1mm jaw, extremely delicate, 6"
**080-842-SIZE** Cobb Gouge, 11" straight. Available in sizes: 1/4", 1/2", 3/4", 1", 1 1/4" & 1 1/2". *Please specify size when ordering.*

**080-843-SIZE** Cobb Gouge, 11" curved. Available in sizes: 1/4", 1/2", 3/4", 1", 1 1/4" & 1 1/2". *Please specify size when ordering.*

**080-844-SIZE** Cobb Gouge, 11", bayonet shaft. Available in sizes: 1/4", 1/2", 3/4", 1", 1 1/4" & 1 1/2". *Please specify size when ordering.*
George Tiemann & Co.
25 Plant Avenue
Hauppauge, NY 11788-3804
(800) 843-6266
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