Advantages of Image Guidance in Complex Spinal Surgery

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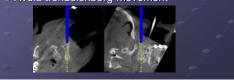
Placement of Reference Arc in Posterior Occipitocervical cases



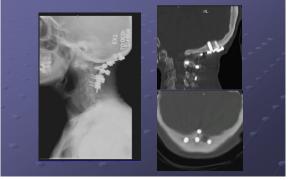


Image-guided Placement of Occipitocervical Instrumentation Using a Reference Arc Attached to the Headholder To minimize intersegmental movement

- in upper cervical spine
- Scan with retractors in place
- Drill all holes prior to tapping and placing screws
- Hold respirations during spin
- Avoid trendelenberg movement

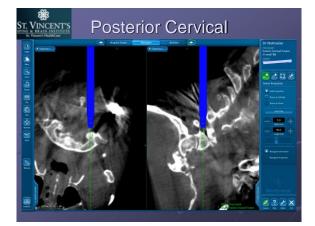


Occipitocervical

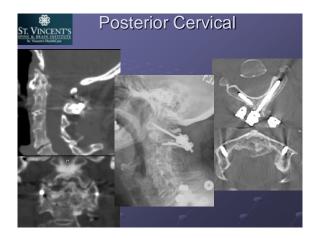


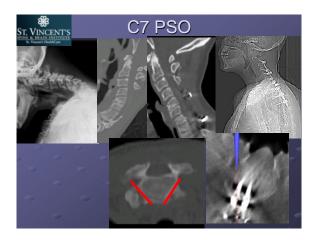








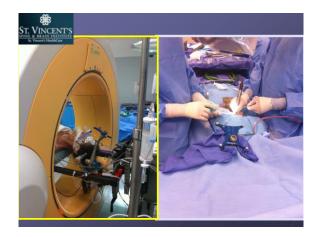










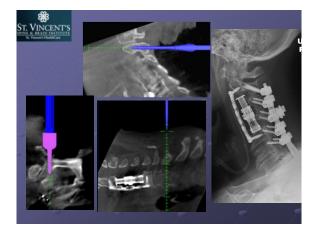


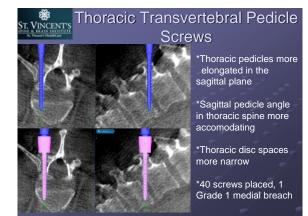


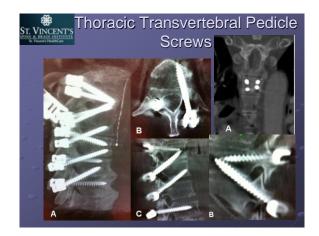












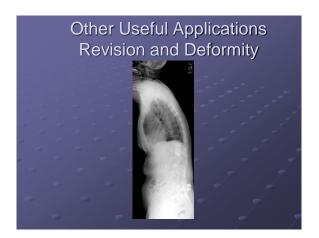


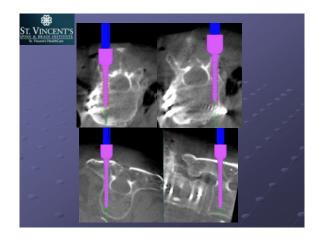


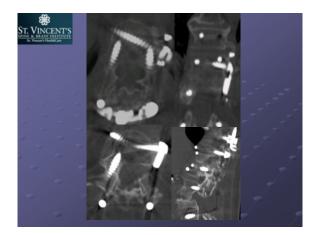


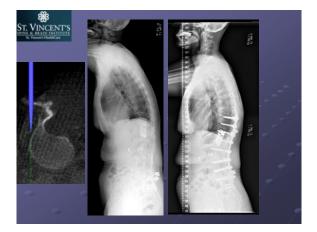




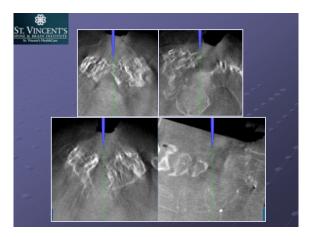


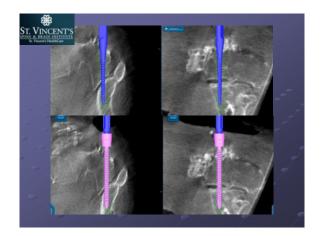


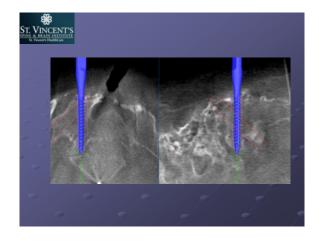


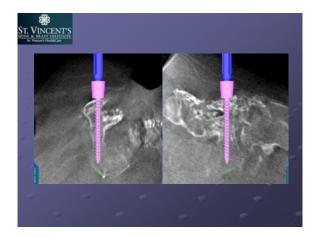


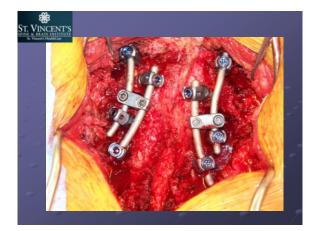








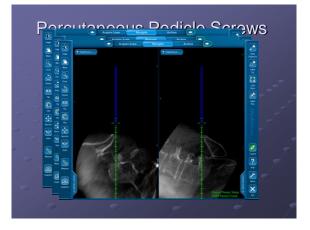


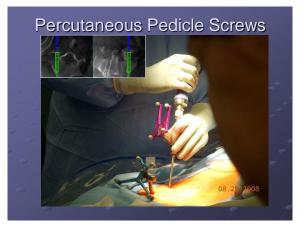




Percutaneous Pedicle Screws



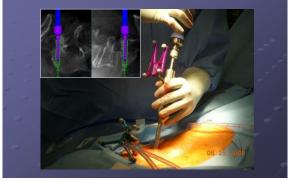




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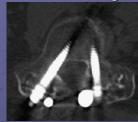


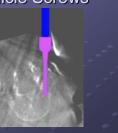






Redirecting Pedicle Screws





*35 screws redirected in 20 patients *28/35 screws into or against nerve roots (5 pts symptomatic-unaware of screw) *All screws redirected successfully without breach (radiologist grading)

