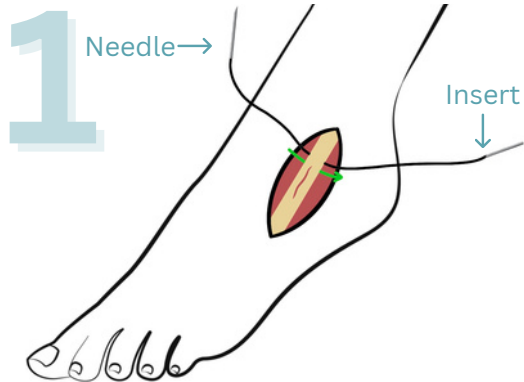
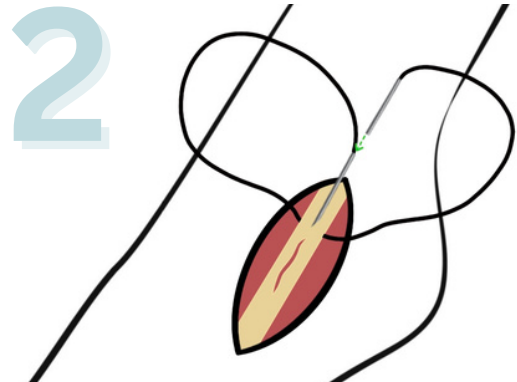




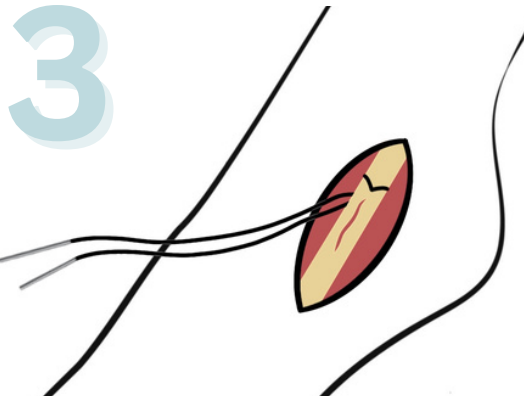
# EasyGuide™: Peroneal Tendon Repair



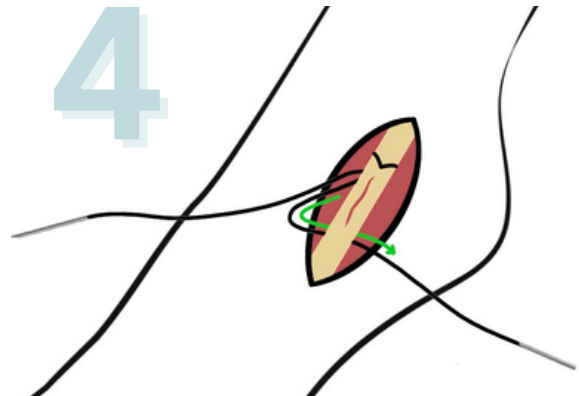
With the peroneal tendon still attached on both ends, pass the Insert behind the tendon so the suture is around the tendon.



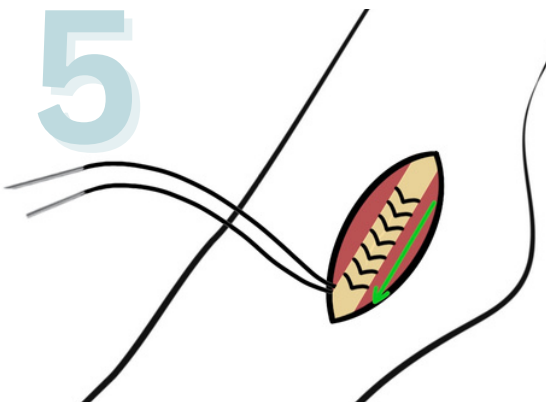
Connect EasyWhip® by sliding the Insert into the back end of the Needle.



Create a **whip stitch** by passing EasyWhip® through the tendon, bringing both the Insert and Needle to one side of the tendon. Tension the sutures then separate the Insert from the Needle.



Pass the Insert back behind the tendon.



Repeat steps 2-4 to continue creating whip stitches. Once the desired number of stitches are placed, tie the sutures to repair the tendon and secure the tubularization.



If desired, connect EasyWhip® and pass through the tendon to bury the knot. Cut both suture tails, discard the Insert and Needle.



[www.winter-innovations.com](http://www.winter-innovations.com)  
[info@winter-innovations.com](mailto:info@winter-innovations.com)

©2024 Winter Innovations.  
All rights reserved.  
MKT506A 2024-3

This surgical technique is provided to aid clinicians using EasyWhip® for standard of care procedures. EasyWhip® is indicated for use in approximation and/or ligation of soft tissues, including the use of allograft tissue for orthopedic surgeries. EasyWhip® simplifies and standardizes the same suture ties that can be performed manually. Reference: Sobel, M. The Peroneal Tendons: A Clinical Guide to Evaluation and Management. (Springer International Publishing, 2020).

Content is intended for educational purposes only. Surgeons should rely on their professional expertise, review product guidelines, and be trained on products before use in surgery. Refer to the Instructions For Use for full prescribing information [www.winter-innovations.com/eifu](http://www.winter-innovations.com/eifu) EasyWhip® is protected under granted and pending US and international patents. More at [www.winter-innovations.com/patents](http://www.winter-innovations.com/patents)