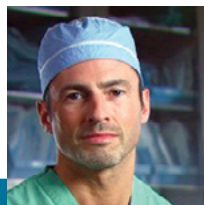


SINEFIX™

REVOLUTIONIZING ROTATOR CUFF REPAIR

**Addressing biomechanical fixation
and critical role of blood circulation
on tendon to bone healing.**

- Simple surgical technique that does not require suture management or knot tying.
- Anticipate improved tendon to bone fixation with less implants.
- Higher pull-out forces than double row fixation using less implants.
- Even pressure load over the tendon ensuring good blood circulation.
- Minimize punctual pressure aiming to reduce risk of loosening post-surgery.
- Demonstrates less gap formation than double row fixation to optimize contact pressure.



Brian Cohen, MD
Orthopedic Surgeon

“Rotator cuff surgery requires biomechanical stability, but excessive tension can compromise blood flow and slow healing. Despite improved fixation methods, retear rates remain high. My initial use of the SINEFIX implant indicates that it controls compression without straining the tendon, preserving blood flow and potentially setting a new standard in rotator cuff repair.”



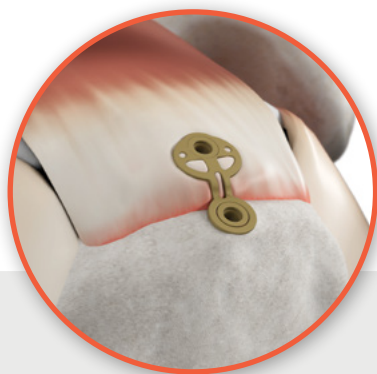
No Knots.
No Sutures.
No Compromise.

THE SINEFIX IMPLANT

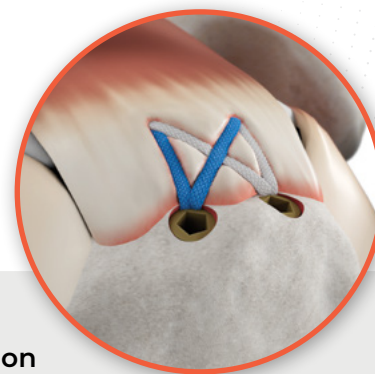
**SINEFIX is designed to
be a simpler, more effective
surgical technique that is:**

- Easy and quick for surgeons to learn.
- Expected to reduce surgery time and contribute to cost reductions.
- Aimed at improving outcome quality and increasing patient satisfaction.

Pursuit of Innovative Solutions: Simple Surgical Technique



VS



SINEFIX

Designed for precise control of the optimal (low) compression pressure without causing strangulation maintaining the blood flow essential for tendon healing.

Structured underside prevents tendon pull-out and ensures sufficient tensile strength.

Secures tendon to bone over a surface area almost recreating the perfect footprint of the tendon.

Eliminates the complexities associated with traditional suture-based techniques potentially reducing operative time and improving reproducibility for surgeons.

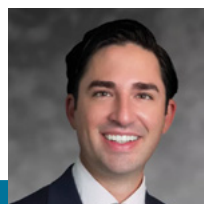
Double Row Fixation

Fixation with suture anchors creates stress concentrations on the suture.¹

Double-row suture bridge repair techniques exert pressure on the tendon over a fairly large portion (78%) of the bone footprint.¹

Force from the muscle to bone is primarily transferred through the medial anchor points, resulting in punctual stress peaks.¹

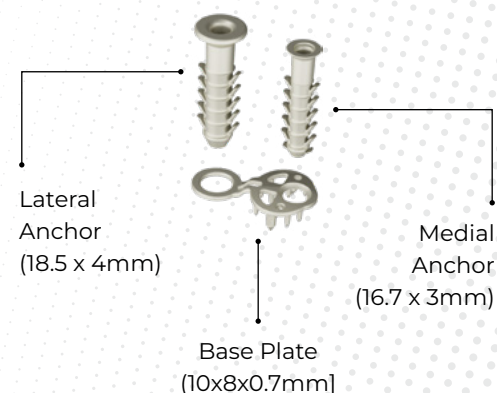
The use of double-row and suture-bridge techniques have been reported to increase the risk of medial cuff failure.²



Kevin Nayar, MD
Orthopedic Surgeon

"SINEFIX was designed to replace traditional suture anchors that require complex and time-consuming procedural steps. This simplified technique uses one implant to replace multiple suture anchors and does not require knot tying or suture management, appearing to be easier and quicker for surgeons to learn and potentially reduce surgery time and cost."

TECHNICAL SPECIFICATIONS



Inovedis

Learn more at www.inovedis.com

CAUTION: SINEFIX is intended for soft tissue to bone reattachment in rotator cuff repairs for tendon ruptures up to 2 cm. U.S. Federal law restricts this device to sale by or on the order of a physician. Indications, contraindications, warnings, and instructions for use can be found in the product labelling supplied with each device.

Models used for illustrative purposes only. SINEFIX is not approved for sale outside the U.S.

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