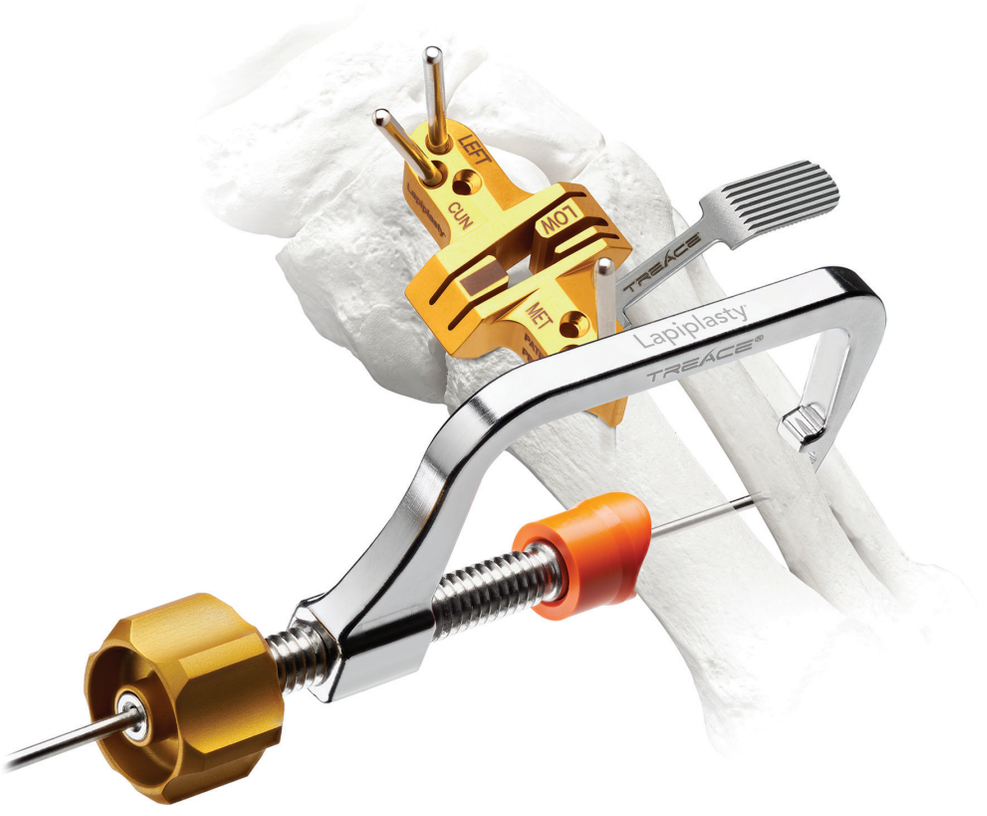
The #1 Bunion Product in the US[1]

Lapiplasty®

3-Plane Correction at the CORA



Instrumented Reproducibility.

Rapid Weight-Bearing.[2]

Low Recurrence.[2,3]

TREACE®
Medical Concepts, Inc.

The Leader in Hallux Valgus Surgery™

What is the Lapiplasty® Procedure?

An instrumented, reproducible approach to 3-plane correction with rapid return to weight-bearing[2]

Correct.

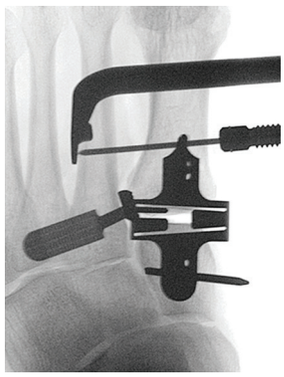
Make your correction ***before*** you cut

The **Lapiplasty® Positioner** is engineered to quickly and reproducibly correct the alignment in all three planes, establishing and holding true anatomic alignment of the metatarsal and sesamoids.[2]

Cut.

Perform precision cuts with confidence

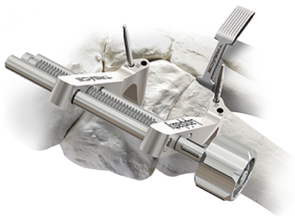
The **Lapiplasty® Cut Guide** delivers precise cuts with the metatarsal held in the corrected position, ensuring optimal cut trajectory with 2.4–3.1mm of average metatarsal shortening.[4]



Compress.

Achieve controlled compression of joint surfaces

The **Lapiplasty® Compressor** delivers over 150N of controlled compression[5] to the precision-cut joint surfaces, while maintaining the 3-plane correction.



Fixate.

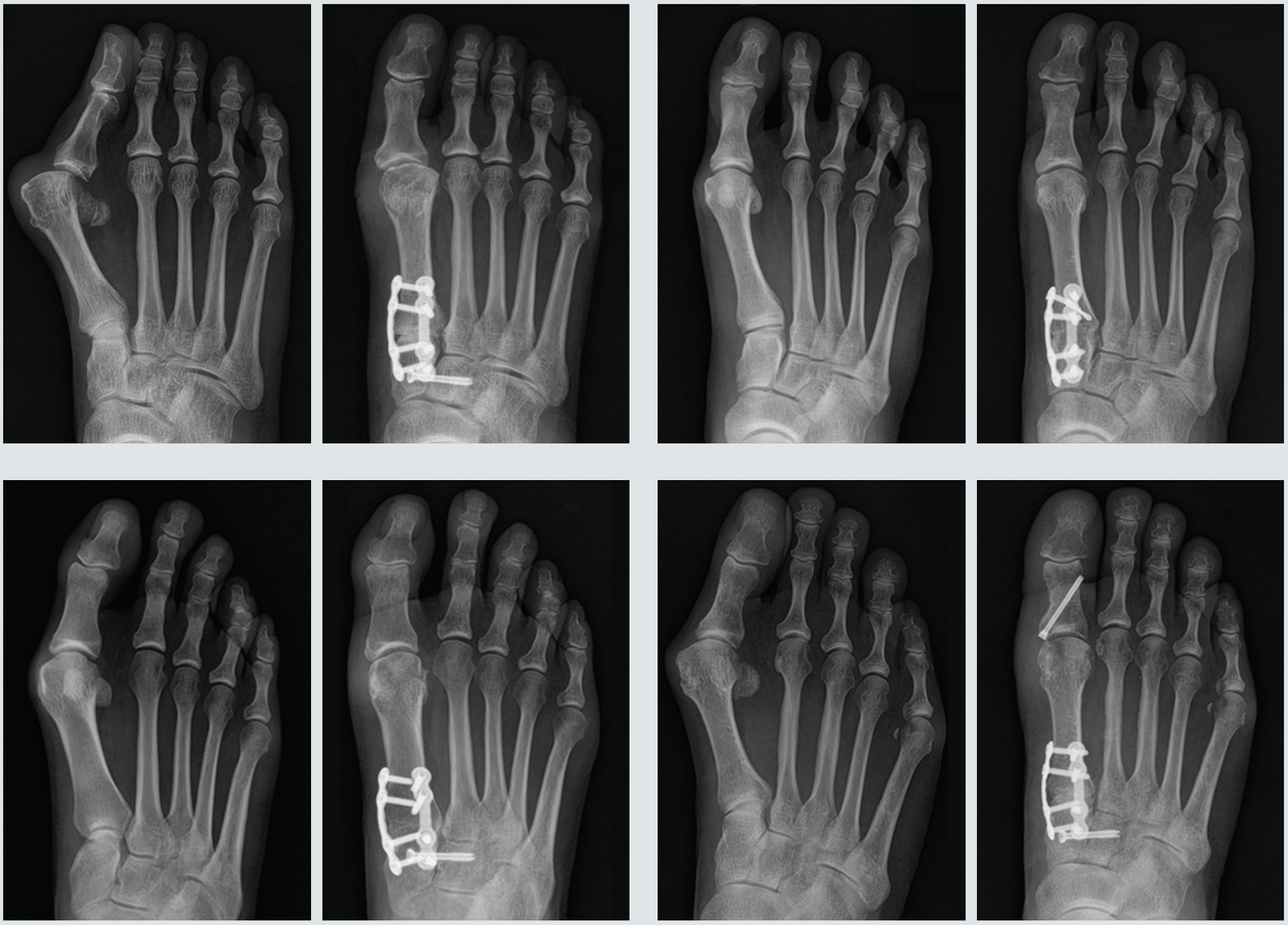
Apply multiplanar fixation for robust stability

Low-profile **Biplanar™ Plating** provides biomechanically-tested[6,7] multiplanar stability for rapid return to weight-bearing.[2]

1. Trailing 12mo. revenue based on company market estimates. | 2. Ray J, et al. *Foot Ankle Int.* 2019 Aug;40(8):955-960. | 3. Dayton P, et al. *J Foot Ankle Surg.* 2020, 59(2): 291-297. | 4. Hatch D, et al. *Foot & Ankle Ortho.* 2020, 5(4): 1-8. | 5. Data on file. | 6. Dayton P, et al. *J Foot Ankle Surg.* 2016. 55:567-71. | 7. Data on file.

The Reproducible Solution for Your Bunion Patients

Patented ***correct before you cut*** approach for reproducible results



The Triplanar Solution Patients Are Searching For

250K+

Patient website visits to Lapiplasty.com each month

Data on file

40K+

"Find a doctor" searches on Lapiplasty.com each month

Data on file

1K+

Surgeons growing their bunion practice with Lapiplasty®

Lapiplasty® System

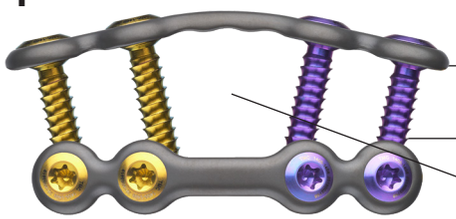
Anatomic Biplanar™ Implants

Lapiplasty® System 1

S1

Sterile-packed Biplanar™ Plating kit for versatility to fit each patient's anatomy, while delivering superior multiplanar strength.[3]

SK12



- **Low-profile, anatomic shape contoured to fit the 1st TMT joint**
- **2.7mm standard-sized locking screws eliminates intra-operative measuring**
- **Biplanar™ configuration for multiplanar stability**

Plate Width	**3.6mm**	Locking Screws	**2.7x12mm** (5)	**2.7x14mm** (4)

Lapiplasty® System 2

S2

An evolution of Biplanar™ Plating with increased cross-sectional width for additional construct strength.

SK14

- **Anatomic contour and low-profile thickness maintained**
- **2.7mm star-drive screws for excellent screw driver engagement; compatible across systems**
- **Increased cross-sectrional width for improved stability**

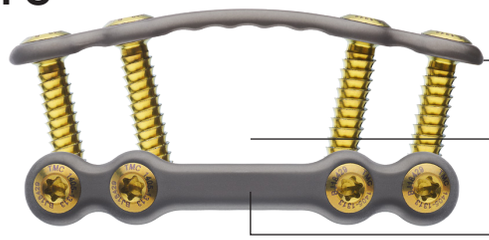
Plate Width	**3.9mm**	Locking Screws	**2.7x12mm** (5)	**2.7x14mm** (4)

Lapiplasty® System 3R

S3R

Versatile Biplanar™ Plating option with widest cross-section, 3.0mm screws, and increased span to address revision cases and challenging anatomy.

SK23



- **Low-profile thickness maintained**
- **Increased center span (+5mm) to accommodate grafts and challenging anatomy**
- **Most cross-sectional width for robust stabilization**

Plate Width	**4.3mm**	Locking Screws	**3.0x12mm** (4)	**3.0x16mm** (8)

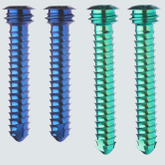
Plantar Python® 2 Plate

Sterile-packed, pre-contoured, easy-to-apply tenside-side fixation.
SD14/15 (L/R)

Lapiplasty® Long Locking Screws

2.7mm Long Screw Pack SD16
2.7x16mm (2) + 2.7x18mm (2)

3.0mm Long Screw Pack SD17
3.0x18mm (2) + 3.0x20mm (2)



See Instructions for Use LBL 1405-9005

One System for All Your Hallux Valgus Needs

Sterile-packed kits for operational efficiency

Lapiplasty® Accessory Kits

Headless Screws*

Headless titanium compression screws for Akin osteotomies, tarsal-metatarsal fusions, & other applications

SK20
2.5x20mm
2.5x28mm

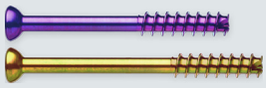
SK26
4.0x36mm
4.0x40mm

Headed Interfrag Screws*

Low-profile headed, titanium cannulated compression screws for tarsal-metatarsal fusions & other applications

SK18
3.0x36mm
3.0x40mm

SK25
4.0x36mm
4.0x40mm



Transverse Screws*

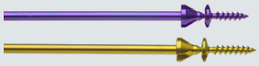
Low-profile headed, titanium cannulated compression screws for tarsal fusion & other applications

SK19
3.5x23mm
3.5x26mm

Snap-Off Screws**

Titanium snap-off screws for Weil osteotomies & other applications

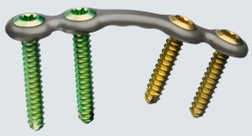
SK21
2.0x12mm
2.0x14mm



Lesser TMT Fixation Pack

Single low-profile S1 plate w/ locking screws for lesser TMT fusions (metatarsus adductus) & other applications

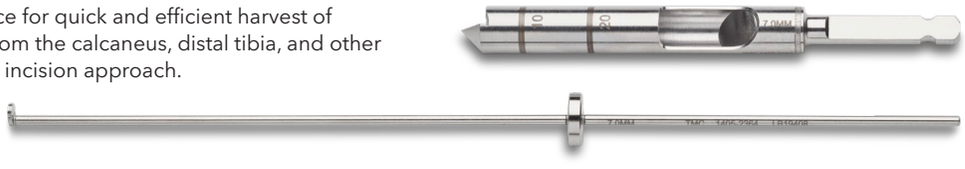
SK28
S1 Plate | 2.7x14mm (2) | 2.7x18mm (3)



FastGrafter® Autograft Harvesting System (7mm)

Sterile-packed, single-use device for quick and efficient harvest of cancellous autogenous bone from the calcaneus, distal tibia, and other harvest sites through a minimal incision approach.

SK27



See Instructions for Use LBL 1405-9056 or LBL 1405-9110***

Biomechanically Proven for Rapid Weight-Bearing

Biomechanical test specimens were constructed using Sawbones® surrogate bone models (Pacific Research Laboratories Inc, Vashon, WA) and tested in cantilever bending to simulate functional 1st TMT joint loading. The testing included both static ultimate failure and cyclic load to failure. Three different studies were performed under this test protocol, which are detailed below.

Gen1 vs. Conventional Plating

Biplanar™ Plating Gen 1

vs

Anatomic Dorsal Locking Plate w/ 4.0 Interfrag Screw

130%
Increase in Ultimate Failure Load

30%
Increase in Cycles to Failures

Dayton et al, *J Foot Ankle Surg.* 2016, 55:567-71.

S1 vs. Gen1

S1 Biplanar™ Plate

vs

Biplanar™ Plating Gen 1

50%
Increase in Ultimate Failure Load

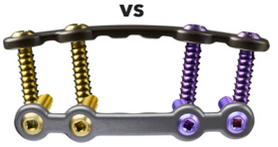
100%+
Increase in Cycles to Failures

TMC Data on file.

S2 vs. Gen1

S2 Biplanar™ Plating

vs



Biplanar™ Plating Gen 1

78%
Increase in Ultimate Failure Load

179%
Increase in Cycles to Failures

TMC Data on file. (M171A)

The Evidence-Based Solution for 3-Plane Correction

Treace Medical Concepts is dedicated to advancing the understanding of the Lapiplasty® Procedure through research studies and publications in the peer-reviewed literature. The Lapiplasty® procedure is directly supported by 15 publications, demonstrating rapid weight bearing, low recurrence, and instrumented reproducibility.

#1 Leader in the s**cientific study** of hallux valgus

PearlDiver Independent Survey

15 **Clinical publications** directly supporting the Lapiplasty® Procedure

Refined, Tested & Validated

	Lapiplasty® offers:
97–99% reproducible 3D correction[1,2]	✓
<2 weeks return to weight-bearing[1,2,5]	✓
10.4mm average reduction in foot width[3]	✓
2.4–3.1mm average shortening of first ray[4]	✓
2-3% non-union rate[1,5]	✓
3% hardware removal rate[5]	✓
1–3% recurrence rate[1,2]	✓
30% increase in cycles to failure with Biplanar™ Plating[6] (compared to dorsomedial Lapidus plate + compression screw)	✓

Multicenter Early Radiographic Outcomes of Triplanar Tarsometatarsal Arthrodesis With Early Weightbearing[7]

Multicenter, retrospective study of 57 hallux valgus (62 feet) patients treated with the Lapiplasty® Procedure and early return to weight-bearing at mean follow-up of 13.5 months.

Highlights of the study:

- Mean return to weight-bearing at 10.9 days in a walking boot
- 96.8% of study patients maintained their 3-plane bunion correction as assessed by Intermetatarsal Angle (IMA), Hallux Valgus Angle (HVA) and Tibial Sesamoid Position (TSP)
- Symptomatic non-union rate of 1.6% (1 foot)

Progression of Healing on Serial Radiographs Following First Ray Arthrodesis in the Foot Using a Biplanar Plating Technique Without Compression[8]

Multicenter, retrospective study of bone healing with accelerated weightbearing protocol in 195 patients undergoing TMT or MTP fusions with Lapiplasty® biplanar plating at mean follow up of 9.5 months.

Highlights of the study:

- Patients began weight-bearing at 5 days post-op in a walking boot
- 97.4% of the patients demonstrated a successful bony fusion and 98.9% of the patients maintained a stable joint position
- 3.1% overall implant removal rate for irritation and hardware failure

1. Ray J, et al. *Foot Ankle Int.* 2019;40(8):955-960. | 2. Dayton P, et al. *J Foot Ankle Surg.* 2020, 59(2): 291-297. | 3. Vaida J, et al. Foot & Ankle Othopaedics. 2020. Vol. 5(3) 1-5. | 4. Hatch D, et al. *Foot & Ankle Ortho.* 2020, 5(4): 1-8. | 5. Dayton P, et al. *J Foot Ankle Surg.* 2019; 58(3):427-433. | 6. Dayton P, et al. *J Foot Ankle Surg.* 2016. 55:567-71. | 7. Ray J, et al. F*oot Ankle Int.* 2019 Aug;40(8):955-960. | 8. Dayton P, et al. *J Foot Ankle Surg.* 2019. 58:427-433.

Lapiplasty® Mini-Incision™ System

The Power of Lapiplasty®

Now Through a 3.5cm Incision

Mini-Incision™ NEW

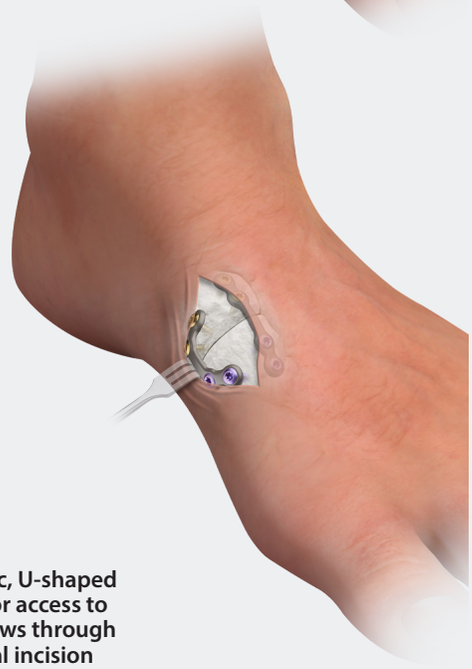
Precision Instrumentation Set

Mini Incision + Triplanar Correction Minus the Compromise

By applying the Mini-Incision™ Positioner over the skin of the 1st metatarsal, the Lapiplasty® Mini-Incision™ System is designed to deliver the patented **Correct Before You Cut** approach for precision 3-plane correction through a 3.5cm dorsal incision.

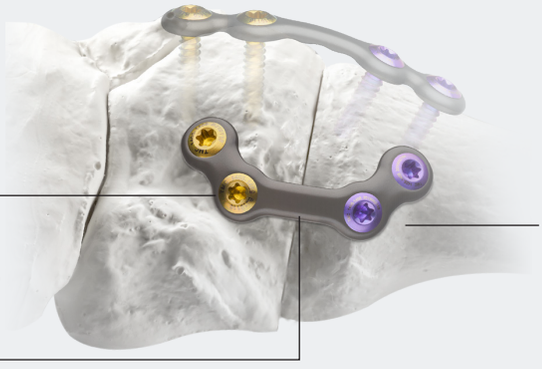
PlantarPower™ NEW

Anatomic Tension-Side Plate



Powerful Tension-Side Fixation Designed for a Mini Incision

The PlantarPower™ Plate is uniquely contoured to span plantarly across the tension-side of the 1st TMT joint, while providing easy access to each locking screw without the need for extensive retraction of the mini dorsal incision.



Anatomic contour accommodates tibialis anterior tendon insertion

Center span extends plantarly across tension-side of 1st TMT joint

3D anatomic, U-shaped curvature for access to locking screws through a mini dorsal incision

The Leader in Hallux Valgus Surgery™

TREACE® Medical Concepts, Inc.