1. Intended Use

The AESCULAP BiPOLAR Cup is for uncemented use in conjunction with a standard cemented or uncemented femoral replacement implant for the following:

- Non-inflammatory degenerative joint disease including osteoarthritis and avascular necrosis.
- Rheumatoid arthritis.
- Correction of functional deformities.
- Treatment of non-union, femoral neck fracture and trochanteric fractures.
- The prosthetic femur with head involvement, unmanageable using other techniques.

2. Materials

The materials used are explicitly marked on the implant packing. The inner socket and the locking ring are made of ultra-high-molecular low-pressure polyethylene conforming to ISO 5834-2. The materials used are explicitly marked on the implant packing. The inner socket and the locking ring are made of ultra-high-molecular low-pressure polyethylene conforming to ISO 5834-2.

3. Sterility and Handling

Implant components come individually packed in correspondingly labelled, sterile package before use. Implant components come individually packed in correspondingly labelled, sterile package before use. Shortly before use, check the expiration date and verify the integrity of the stock package before use. Ensure that the surfaces of the implants are not damaged under any circumstances. Under no circumstances may implants that have been damaged, surgically implanted or removed again be reused.

5. Contraindications

Joint implant components should be kept in the original packaging until shortly before use; check the expiration date and verify the integrity of the stock package before use.

6. Important Information

The surgeon bears responsibility for the proper performance of surgical joint replacement and must have mastered the recognised surgical techniques both for the specific joint-replacement being performed and for the specific joint-replacement being performed.

7. Sterility and Handling

Cross-contamination of this implant prior to and during surgery is decisive for the success of joint replacements.

9. Instructions for use

Before using the BiPOLAR CUP, make sure that the surfaces of the implants are not damaged under any circumstances. Under no circumstances may implants that have been damaged, surgically implanted or removed again be reused.

10. Spheres of Application

Severe joint disease due to joint fractures or recesses of the femoral head with an axial acetabulum that cannot be treated through conservative therapy or other surgical therapies – especially through local endoprosthetic joint replacement, when the patient has been informed of and consented to the potential complications, offers no opportunity to restore joint function again.

- Articular joint replacement is always inferior to the function of the natural joint, and only a relative improvement of the prosthesis condition can be achieved.
- An artificial joint can lessen due to wearing, wear and tear or infection.
- Implant loosening can necessitate a revision operation that, under some circumstances, offers no opportunity to restore joint function again.
- Following joint replacement, the patient will have to submit to regular medical follow-up.
- The implant will not be subjected to axial stress through extreme leading, work, and sports.

2. Materials

The various nominal diameters are explicitly marked on the implant packing. The inner socket and the locking ring are made of ultra-high-molecular low-pressure polyethylene conforming to ISO 5834-2. The inner socket and the locking ring are made of ultra-high-molecular low-pressure polyethylene conforming to ISO 5834-2.

5. Contraindications

Nerve damage, haematomas and wound-healing impairment
Venous thromboses, pulmonary embolisms and cardiac arrest
Nerve damage, haematomas and wound-healing impairment
Tissue reactions to the implant material
Periarticular calcification with joint pain and restricted movement.

8. Important Information

The surgeon bears responsibility for the proper performance of surgical joint replacement and must have mastered the recognised surgical techniques both for the specific joint-replacement being performed and for the specific joint-replacement being performed.

7. Sterility and Handling

Cross-contamination of this implant prior to and during surgery is decisive for the success of joint replacements.

9. Instructions for use

Before using the BiPOLAR CUP, make sure that the surfaces of the implants are not damaged under any circumstances. Under no circumstances may implants that have been damaged, surgically implanted or removed again be reused.

10. Spheres of Application

Severe joint disease due to joint fractures or recesses of the femoral head with an axial acetabulum that cannot be treated through conservative therapy or other surgical therapies – especially through local endoprosthetic joint replacement, when the patient has been informed of and consented to the potential complications, offers no opportunity to restore joint function again.

- Articular joint replacement is always inferior to the function of the natural joint, and only a relative improvement of the prosthesis condition can be achieved.
- An artificial joint can lessen due to wearing, wear and tear or infection.
- Implant loosening can necessitate a revision operation that, under some circumstances, offers no opportunity to restore joint function again.
- Following joint replacement, the patient will have to submit to regular medical follow-up.
- The implant will not be subjected to axial stress through extreme leading, work, and sports.

2. Materials

The various nominal diameters are explicitly marked on the implant packing. The inner socket and the locking ring are made of ultra-high-molecular low-pressure polyethylene conforming to ISO 5834-2. The inner socket and the locking ring are made of ultra-high-molecular low-pressure polyethylene conforming to ISO 5834-2.

5. Contraindications

Nerve damage, haematomas and wound-healing impairment
Venous thromboses, pulmonary embolisms and cardiac arrest
Nerve damage, haematomas and wound-healing impairment
Tissue reactions to the implant material
Periarticular calcification with joint pain and restricted movement.

8. Important Information

The surgeon bears responsibility for the proper performance of surgical joint replacement and must have mastered the recognised surgical techniques both for the specific joint-replacement being performed and for the specific joint-replacement being performed.

7. Sterility and Handling

Cross-contamination of this implant prior to and during surgery is decisive for the success of joint replacements.

9. Instructions for use

Before using the BiPOLAR CUP, make sure that the surfaces of the implants are not damaged under any circumstances. Under no circumstances may implants that have been damaged, surgically implanted or removed again be reused.

10. Spheres of Application

Severe joint disease due to joint fractures or recesses of the femoral head with an axial acetabulum that cannot be treated through conservative therapy or other surgical therapies – especially through local endoprosthetic joint replacement, when the patient has been informed of and consented to the potential complications, offers no opportunity to restore joint function again.

- Articular joint replacement is always inferior to the function of the natural joint, and only a relative improvement of the prosthesis condition can be achieved.
- An artificial joint can lessen due to wearing, wear and tear or infection.
- Implant loosening can necessitate a revision operation that, under some circumstances, offers no opportunity to restore joint function again.
- Following joint replacement, the patient will have to submit to regular medical follow-up.
- The implant will not be subjected to axial stress through extreme leading, work, and sports.

2. Materials

The various nominal diameters are explicitly marked on the implant packing. The inner socket and the locking ring are made of ultra-high-molecular low-pressure polyethylene conforming to ISO 5834-2. The inner socket and the locking ring are made of ultra-high-molecular low-pressure polyethylene conforming to ISO 5834-2.

5. Contraindications

Nerve damage, haematomas and wound-healing impairment
Venous thromboses, pulmonary embolisms and cardiac arrest
Nerve damage, haematomas and wound-healing impairment
Tissue reactions to the implant material
Periarticular calcification with joint pain and restricted movement.

8. Important Information

The surgeon bears responsibility for the proper performance of surgical joint replacement and must have mastered the recognised surgical techniques both for the specific joint-replacement being performed and for the specific joint-replacement being performed.

7. Sterility and Handling

Cross-contamination of this implant prior to and during surgery is decisive for the success of joint replacements.

9. Instructions for use

Before using the BiPOLAR CUP, make sure that the surfaces of the implants are not damaged under any circumstances. Under no circumstances may implants that have been damaged, surgically implanted or removed again be reused.

10. Spheres of Application

Severe joint disease due to joint fractures or recesses of the femoral head with an axial acetabulum that cannot be treated through conservative therapy or other surgical therapies – especially through local endoprosthetic joint replacement, when the patient has been informed of and consented to the potential complications, offers no opportunity to restore joint function again.

- Articular joint replacement is always inferior to the function of the natural joint, and only a relative improvement of the prosthesis condition can be achieved.
- An artificial joint can lessen due to wearing, wear and tear or infection.
- Implant loosening can necessitate a revision operation that, under some circumstances, offers no opportunity to restore joint function again.
- Following joint replacement, the patient will have to submit to regular medical follow-up.
- The implant will not be subjected to axial stress through extreme leading, work, and sports.