

## PLANNING REPORT

<b>Patient Name:</b>	Name: XXXXXXXX	Surname: XXXXXXXX
<b>Patient ID:</b>	IDXXXXXX	
<b>Surgery date:</b>	XX / XX / XXXX	
<b>Surgeon:</b>	Dott. XXXXXX	
<b>Bone graft:</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Donor ID</b>	IDXXXXXX	
<b>Hardware required:</b>	3,5 mm cannulated screws	
<b>Other:</b>		

### Surgery notes:

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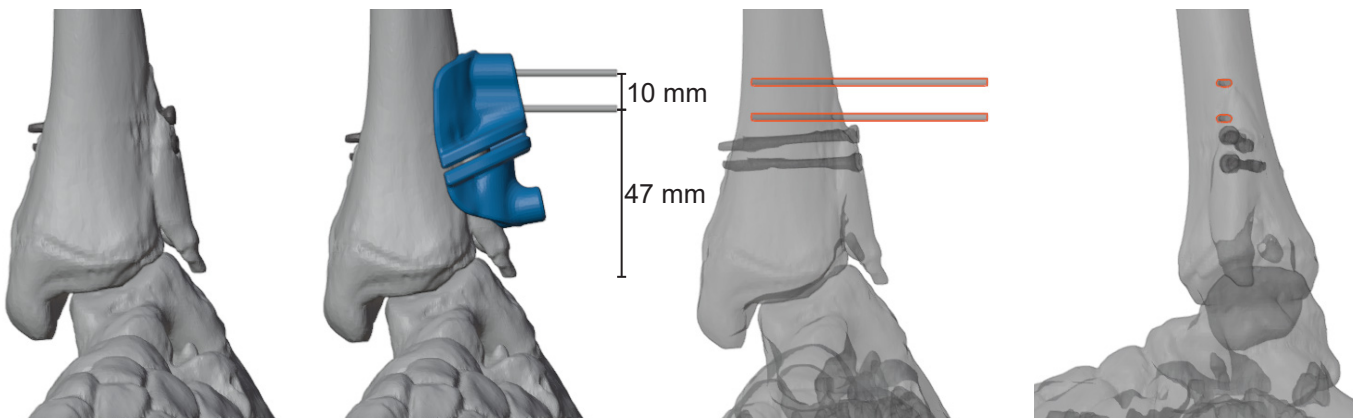
### Planned PSI: 1



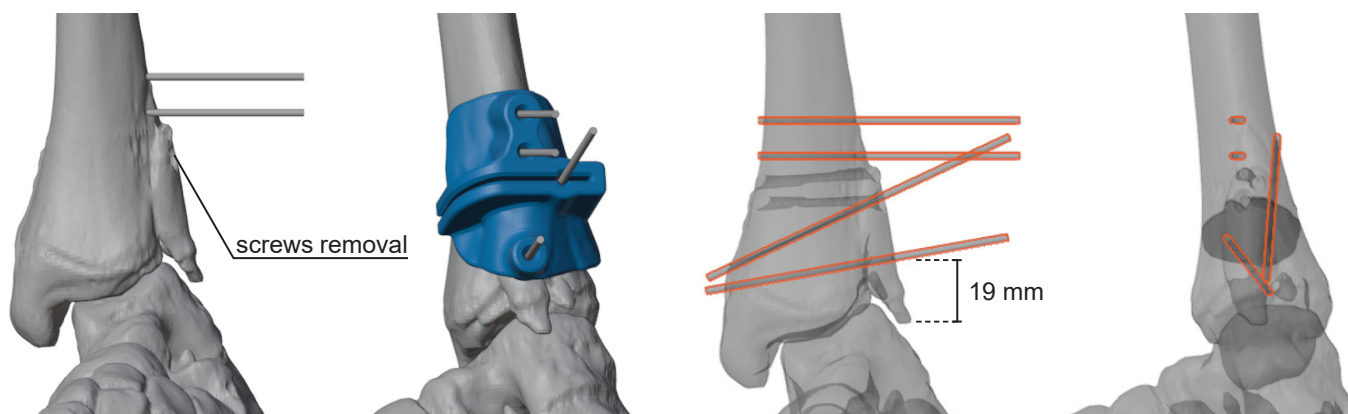
**Mask ID:**  
IDXXXXXX\_MTD

## Planning references:

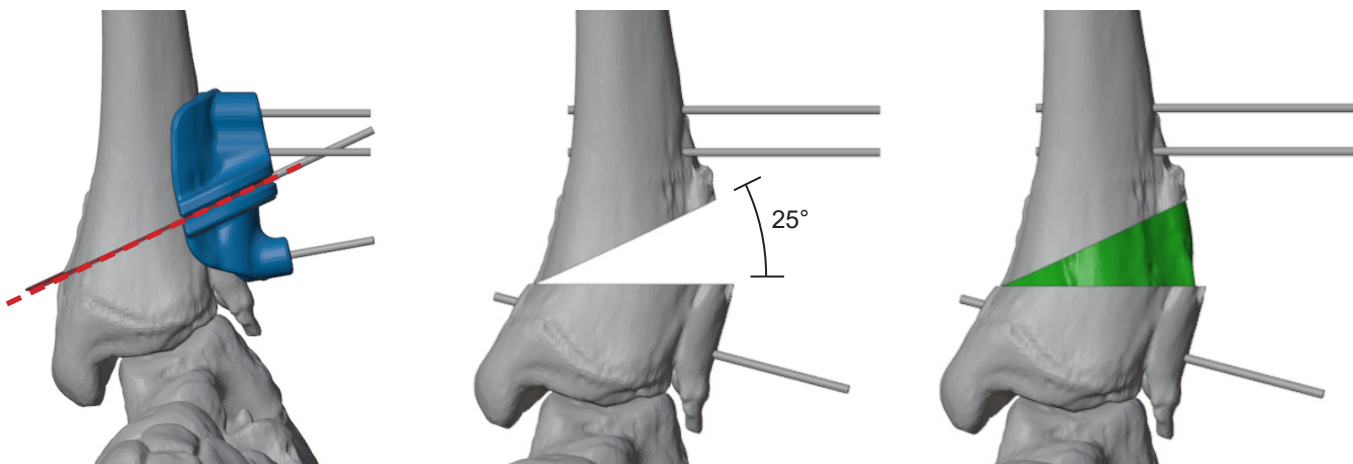
IDXXXXXX\_MTD placement, proximal  $\varnothing 2\text{mm}$  K-wire insertion, and ampliscopic control



IDXXXXXX\_MTD removal for hardware removal, IDXXXXXX\_MTD reinsertion on proximal K-wires and distal K-wire insertion (if desired, also K-wire for cutting), ampliscopic control



Osteotomy,  $25^\circ$  varus correction, bone wedge insertion



Fixation with 2 cannulated 3,5 mm screws

