Published clinical data supporting the use of Mazor Robotics technology in spine surgery

**PATIENT OUTCOMES**
Perioperative course and accuracy of screw positioning in conventional, open robotic-guided and percutaneous robotic-guided, pedicle screw placement.\(^1\)

Compared to open, conventional procedures, patients that underwent spine surgery with Mazor Robotics technology had:

- Average length of hospital stay reduced by **27%**
- Complication rates reduced by **48%**
- Reduced revision procedures by **46%**
- Less postoperative infections

**ACCURACY**

- Robotic-assisted pedicle screw placement: lessons learned from the first 102 patients.\(^2\) **98.9%** accuracy for 960 implants
- Clinical acceptance and accuracy assessment of spinal implants guided with SpineAssist surgical robot: retrospective study.\(^3\) **98.3%** accuracy
- Robotic assisted vertebral body augmentation - a radiation reduction tool.\(^5\) **98.8%** accuracy
- First 27 cases for surgeons and hospital staff **98.5%** accuracy (40% of cases performed percutaneously)

14 medical centers, 3,271 implants:

**www.MazorRobotics.com**
Clinical evidence

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FLUOROSCOPY

Clinical acceptance and accuracy assessment of spinal implants guided with SpineAssist surgical robot: retrospective study. Reduced use of fluoroscopy by 50%.

14 medical centers, 3,271 implants

Perioperative course and accuracy of screw positioning in conventional, open robotic-guided and percutaneous robotic-guided, pedicle screw placement. Reduced use of fluoroscopy by 56%.

Robotic spine surgery: a preliminary report. First 27 cases for surgeons and hospital staff

Robotic assisted vertebral body augmentation - a radiation reduction tool.

Compared to fluoroscopy guidance, procedures in this study using Mazor Robotics technology had:

74% LESS RADIATION exposure

Compared to navigation technology, procedures in this study using Mazor Robotics technology had:

50% LESS RADIATION exposure