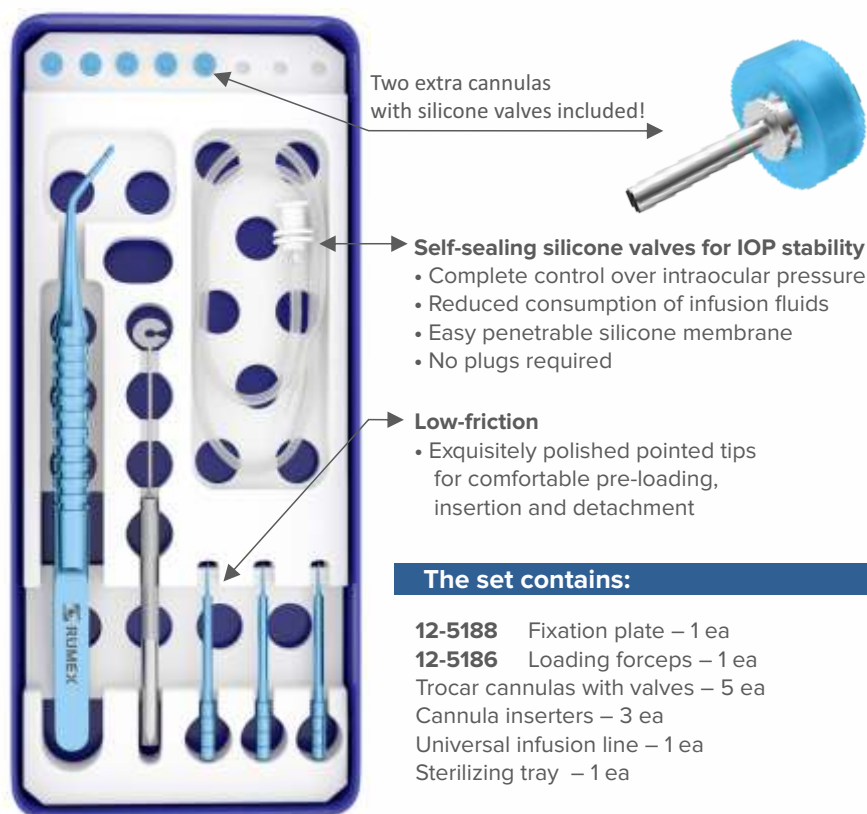


REUSABLE TWO-STEP TROCAR SYSTEMS

Eliminate superfluous contacts of surgical devices with patient's sclera!



12-5173-23 23 Ga

12-5173-25 25 Ga

The best choice for transconjunctival sutureless vitrectomy!

Instruction for use:

1. Mark the spot of the incision with a caliper.
2. Use **fixation plate** (12-5188) to move the conjunctiva $\pm 1-2$ mm sideward and stabilize the sclera. Perform a transconjunctival/scleral incision with an MVR blade at an angle of about 30 degrees.
3. Introduce valved trocar cannula with the help of a sharply pointed inserter. To overcome resistance while introducing the cannula, the inserter must be positioned perpendicular to the sclera to prevent the eye from rotating away when pressure is applied. Fixate the cannula with the **loading forceps** (12-5186) and retract the inserter.
4. Adjust infusion cannula to the cannula to ensure normal intraocular pressure.
5. Introduce two more valved trocar cannulas as described in points 2 and 3.
6. Insert fiber optic probe to provide ocular fundus with light.
7. Vitrectomy cutter and intraocular instruments can now safely enter the posterior segment through trocar cannulas.
8. When surgery is completed, instrument cannulas should be removed by **loading forceps** (12-5186) and finally the infusion cannula can be disconnected.
9. In case of a small subconjunctival hemorrhage from episcleral vessels, use a PVA spear to press it gently to the area of the scleral tunnel.

No sutures required!

You might also be interested:

MVR knives with safety lids

Multifacet blade	Sterile
23 Ga	Box of 6



VRS-23	Straight
VRA-23	Angled