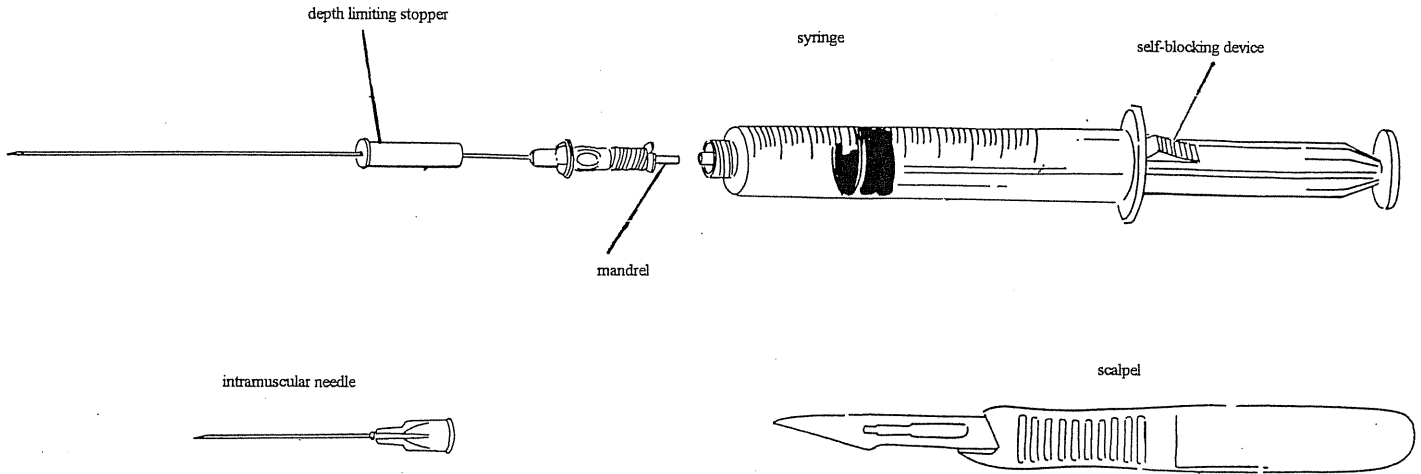




INSTRUCTIONS FOR USE OF THE MENGHINI LIVER BIOPSY SET HEPA-CUT®



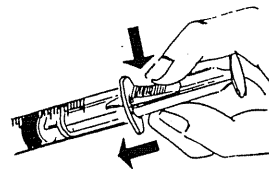
- WARNING:**
- Store in a dry clean place away from heat sources
 - Before use ensure that the packaging is intact: if perforated, damaged or open discard the instrument
 - Check the expiry date and that the model corresponds
 - Peel open the package
 - Pay attention to not compromise the sterility of the instrument before use
 - In the event of a product defect or malfunction complete the yellow claim form to be found in the product carton and conserve the defective instrument

N.B.:
The use of this instrument is reserved to qualified medical personnel who are aware of its application.
The instrument is sterile (sterilized by ETO GAS) single use and should be discarded after use (Circ.Min:Sanità 403/9.5/1146-L. 10.81)
Sterylab declines any and all responsibility in the event of improper use or reutilisation.

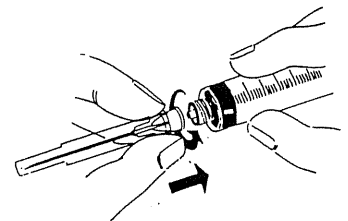
BIOPTIC PROCEDURE

- 1) Lower the tongue of the self-blocking device and push the piston to the bottom of the syringe
- 2) Attach the intramuscular needle and aspirate approximately 3 cc. of 0.9% NaCl solution

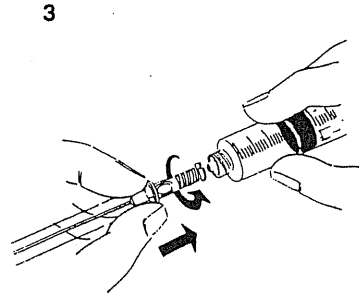
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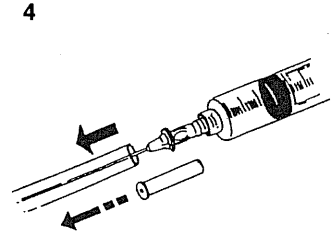
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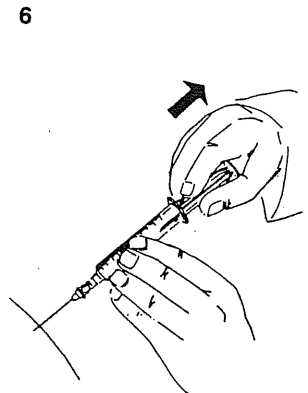
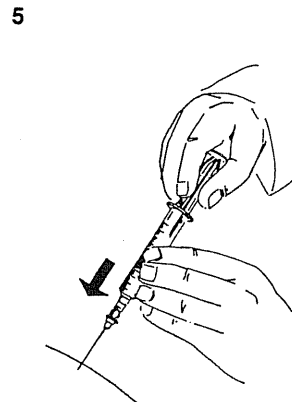
- 3) Attach the bioptic cannula inside of which is located a mandrel (to arrest the cylinder of biopsy tissue) and expell all air from the syringe



- 4) Remove the protective cover and, if necessary, the depth limiting stopper

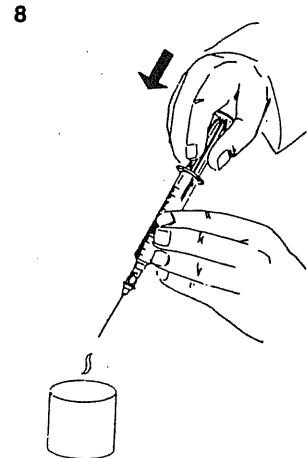
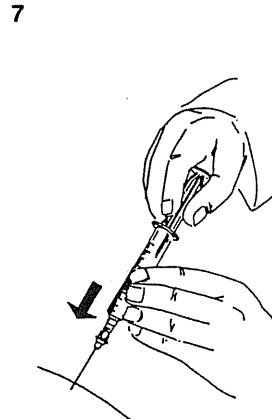


- 5) Penetrate between the ribs (after local anaesthesia and performing a skin incision with the scalpel) until the peritoneal cavity is reached. Flush the cannula with approximately 2cc. of saline solution (a flow resistance indicates that the cannula tip is still within the intercostal muscle: advance a little further).
N.B. Some doctors pass through the intercostal muscle while pressing on the syringe piston. A sudden loss of resistance indicates that the peritoneal cavity has been reached.



- 6) Create a vacuum by pulling the piston back until it locks into position

- 7) Ask the patient to hold his breath, penetrate rapidly into the liver and extract the needle



- 8) Lower the tongue of the self-blocking device and expel the liver cylinder by depressing the syringe piston