

# EUS DIAGNOSIS AND TREATMENT



### EUS-FNB TRIDENT™ NEEDLE

#### FOR HISTOLOGICAL TISSUE STRUCTURE

- The stylet can be securely attached to the Luer lock attachment.
  The grid spacing has been reduced from 2.5 to 1 mm so that the penetration depth of the needle can be tuned more precisely.
- Designed for cases where cytology is insufficient and histological tissue structures are required.
- Co-Cr alloy needle utilized for enhanced needle flexibility, durability and target accessibility.
- Unique Trident™ multi-blade three-prong tip facilitates histological quality tissue sampling.
- Innovative one-button adjusters for needle depth and sheath length provide easy and precise one-hand control.
- V-notch laser etched markings for enhanced needle echogenicity under ultrasound.
- The smooth catheter ensures that it can be pushed through the angled EUS endoscope and that the working channel is protected.
- Compatible with the full range of EUS endoscopes.



### EUS-FNA AREUS PREMIUM NEEDLE

#### FOR DIAGNOSTIC AND THERAPEUTIC INTERVENTION

- The stylet can be securely attached to the Luer lock attachment. The grid spacing has been reduced from 2.5 to 1 mm so that the penetration depth of the needle can be tuned more precisely.
- Co-Cr alloy needle utilized for enhanced needle flexibility, durability, and target.
- Accessibility, designed for diagnostic and therapeutic intervention at challenging anatomies.
- V-notch laser etched markings for enhanced needle echogenicity under ultrasound.
- Innovative one-button adjusters for needle depth and sheath length provide easy and precise one-hand control.
- The smooth catheter ensures that it can be pushed through the angled EUS endoscope and that the working channel is protected.
- Compatible with the full range of EUS endoscopes.



#### FOR STANDARD EUS PUNCTURES

- The stylet can be securely attached to the Luer lock attachment. The grid spacing has been reduced from 2.5 to 1 mm so that the penetration depth of the needle can be tuned more precisely.
- The stainless steel needle ensures good flexibility, resilience and access to the needle for standard EUS punctures.
- The angled tip makes it easier to obtain meaningful tissue samples.
- The innovative one-button adjustment for needle depth and catheter length ensures simple and precise one-hand operation.
- Sandblasting needle treatment technology delivers clearneedle echogenicity.
- The smooth catheter ensures that it can be pushed through the angled EUS endoscope and that the working channel is protected.
- Compatible with the full range of EUS endoscopes.
- The EUS-FNA Areus ECO needle combines good functionality and economy for standard EUS procedures.

#### **SPECIFICATIONS**

REF	Needle Ø Gauge	Sheath Ø mm	Maximum needle length mm	Needle material	Channel size Ø mm	Working length mm
EUS-FNB TRIDENT	™ NEEDLE (CO-CR A	LOY)				
EUS-25-1-N	25	1.8	80	Co-Cr Alloy	≥2.8	1375 ~ 1415
EUS-22-1-N	22	1.8	80	Co-Cr Alloy	≥2.8	1375 ~ 1415
EUS-19-1-N	19	1.8	80	Co-Cr Alloy	≥2.8	1375 ~ 1415
EUS-FNA AREUS PF	REMIUM NEEDLE (CC	-CR ALLOY)				
EUS-25-0-N	25	1.8	80	Co-Cr Alloy	≥2.8	1375 ~ 1415
EUS-22-0-N	22	1.8	80	Co-Cr Alloy	≥2.8	1375 ~ 1415
EUS-19-0-N	19	1.8	80	Co-Cr Alloy	≥2.8	1375 ~ 1415
EUS-FNA AREUS EG	CO NEEDLE (SANDBL	ASTED)				
EUS-25-0	25	1.8	80	Stainless steel	≥2.8	1375 ~ 1415
EUS-22-0	22	1.8	80	Stainless steel	≥2.8	1375 ~ 1415
EUS-19-0	19	1.8	80	Stainless steel	≥2.8	1375 ~ 1415

MICRO-TECH 3



### **GUIDE WIRES**

#### THE RELIABLE CHOICE FOR STENT PLACEMENT AND EUS

All guide wires are manufactured out of bending-resistant guide wires are not only meant for sophisticated stent and torsion-proof Nitinol. Their hydrophilic coated tips, allow the wires to safely find their way even into areas and stenoses which are hard to reach. This is supported by the wire's high rigidity and controllability. Hence the

placements, but are also perfectly suited for EUS. The high X-ray density of the flexible hydrophilic tip ensures precise placement when viewed radiologically.

#### **SPECIFIC CHARACTERISTICS**

- Non-kinking nitinol wire
- High level of rigidity and guidability
- Hydrophilic, atraumatic tip
- Working length: 4500 mm
- High level of radiopacity



#### SUCCESSFUL IN PRACTICAL ROUTINE WORK

Bending resistance and rigidity account for the very good feeding properties of guide wires. In daily applications they convince by their precision, which is primarily guaranteed by the efficient transmission of the rotatory and translatory motion all the way to the tip of the wire, as applied by the surgical assistant. This makes it possible to reach into even anatomically difficult passages with ease. In addition, the tip of each wire can be perfectly seen in the X-ray control image, allowing for optimal stent positioning.







#### **DISPENSER FOR EASY OPERATION**

The wire can be easily ejected and retracted by means of this innovative dispenser. Owing to its compact design, the dispenser is handy and easy to operate. Rinsing the wire is also easy and fast when using the dispenser.



Dispenser guide wires

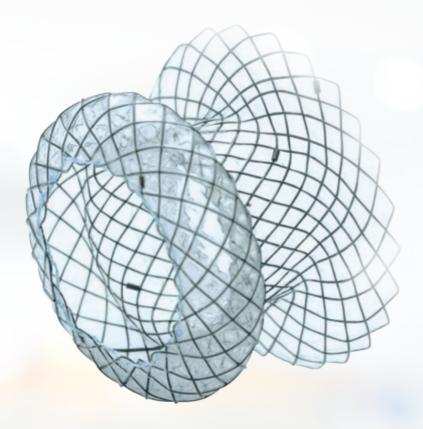
#### **SPECIFICATIONS**

REF	Ø inches	Total length mm	Tip length mm	Tip form	Set-up	Covering
HYDROSLIDE GUIDE WIRI	Ē					
MTN-BM-89/45-A	0.035"	4500	60	straight	hydrophilic, radiopaque	blue-yellow covering
MTN-BM-89/45-A-J	0.035"	4500	60	J-form	hydrophilic, radiopaque	blue-yellow covering
MTN-BM-63/45-A	0.025"	4500	60	straight	hydrophilic, radiopaque	blue-yellow covering
MTN-BM-63/45-A-S	0.025"	4500	60	straight	hydrophilic, radiopaque	extra stiff $\triangleq 0.035$ "
MTN-BM-63/45-A-J	0.025"	4500	60	J-form	hydrophilic, radiopaque	blue-yellow covering
MTN-BM-63/45-A-J-S	0.025"	4500	60	J-form	hydrophilic, radiopaque	extra stiff $\triangleq 0.035$ "
MTN-BM-53/45-A	0.021"	4500	60	straight	hydrophilic, radiopaque	blue-yellow covering
MTN-BM-45/45-A	0.018"	4500	60	straight	hydrophilic, radiopaque	blue-yellow covering

Packaging unit: 2 pieces

0.035 Ø inches guide wires can only be used for needles in 19 Ø gauge

4 MICRO-TECH MICRO-TECH 5



## PSEUDOCYST STENT (GEN-II)

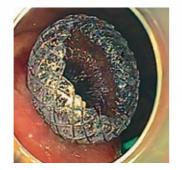
### SECURE HOLD FOR RELIABLE DRAINAGE

The Pancreastic pseudocyst stent is used for reliable drainage of endoscopically removed concrement. The design of the stent with its distal umbrella and proximal tulip shapes, ensures that during an eventual migration a dislocation would only occur into the stomach and not into the cyst. The large diameter of 16 mm in the middle of the guarantee excellent identification on radiological images.

stent allows for endoscopic removal of concrement. The 10.5 French TTS (through-the-scope) insertion system is brought into position through the working channel of the endoscope with the aid of a guide wire. When the stent is released, 4 radiopaque markers at each end of the stent

#### **SPECIFIC CHARACTERISTICS**

- Stent with complete silicone covering
- High degree of positional stabilityl
- Atraumatic tips
- High level of radial force
- Tantalum radiomarkers
- Guide wire passage up to 0.035 inches
- TTS insertion system with 3.5 mm diameter, 1,800 mm length, two x-ray markings, rinsing attachment and lock to secure the introducer set during transport, storage and insertion



Transgastric access from stomach into pseudocyst

#### **SPECIFICATIONS**

REF	Ø centre mm	End Ø mm proximal/distal	Total length mm	Covering mm	End design proximal-distal	System length mm	System Ø mm
PSEUDOCYST STENT							
NST33-544-16.015	16	26/30	15	15	mushroom-umbrella	1800	3.5 (=10.5F)
NST33-544-16.020	16	26/30	20	20	mushroom-umbrella	1800	3.5 (=10.5F)
NST33-544-16.025	16	26/30	25	25	mushroom-umbrella	1800	3.5 (=10.5F)
NST33-544-16.030	16	26/30	30	30	mushroom-umbrella	1800	3.5 (=10.5F)
		Ø mm/fr.	Length mm	Guide wire	RM*1	IC*2	Lock*3
INTRODUCER SYSTEM							
		3.5/10.5	1800	0.035 inch	2	Yes	Yes

Recommended guide wire: 600358-5

REF	Tip length mm	Needle length mm	Partly insulated cutting wire	Preloaded guide wire	Ø working channel mm
NEEDLE KNIFE					
DSP-30505-121111	0	5	No	No	2.8
DSP-30505-121211	0	5	Yes	No	2.8
DSP-30507-121111	0	7	No	No	2.8
DSP-30507-121211	0	7	Yes	No	2.8

6 MICRO-TECH MICRO-TECH 7

<sup>\*1</sup> RM – radiopaque markings / \*2 IC – irrigation channel / \*3 Lock – secures the introducer system during storage, transportation and introduction

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