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CARE AND HANDLING

.188-189





10 ml



WELCOME to the PMS World of Vítreo Retínal Products.

PMS offers one of the widest ranges of stainless steel and special alloy products for a unique engineering miracle: THE HUMAN EYE.

PMS *EZ*Grip, *EZ*Change[®] and *EZ*Cut[®] vitreoretinal forceps and scissors offer the specialist the perfect instruments for grasping, manipulating and cutting intraocular tissue.

PMS VR instruments are welded to attain the extra durability, longevity and reliable performance that makes PMS known around the world as quality leader in ophthalmic surgical instrumentation and related products and equipment.

To protect these instruments we are able to offer an intelligent solution. The PMS sterilising tray system is designed to hold delicate instruments securely and allow them to be thoroughly cleaned by automated washer/disinfector machines.

> We invite you to learn about all the outstanding products we have to offer.

20GA/0.9 MM EZCut[®] STANDARD SCISSORS



scissors have sharp tipped blades, unless otherwise indicated

Straight Scissors E25-600S blunt tips E25-602S sharp tips

sharp blades allow cutting of peripheral membranes; blunt blades are ideal for cutting near the retinal surfaces

lightweight titanium handle reduces hand fatique while providing lasting durability

Curved Scissors E25-603S

curved to a 4 mm radius blades enable safe cutting along the contour of the retina surface

> Horizontal Scissors E25-604S

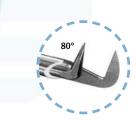
allow easy cutting and dissection parallel to the retina and delaminating membranes adherent to the surface

> Vertical Scissors E25-605S 45°, 1.6 mm long E25-608S 80°. 1.9 mm long

for cutting vertical to the retina surface and resection of delicate membranes

Kroll (Vertical) Scissors with Membrane Pick angled 45° hooked blade E25-605SK

hooked blade for lifting and manipulation of membranes during cutting process





20GA/0.9 MM SCISSORS SPECIFICATIONS

Straight scissors blade length 2.9-3.0 mm Curved scissors blade length 2.9-3.0 mm Angled scissors blade length 1.5-1.6 mm Vertical scissors blade length 1.6-1.9 mm



20GA/0.9 MM EZGrip® STANDARD FORCEPS

"squeeze handle" design offers synchronous, safe and smooth tip closure (important when working close to the retina) Crocodile Forceps serrated 4 mm jaws *E30-672S

ideal for general purpose membrane peeling and manipulating thicker and more fibrotic membranes

End Gripping Forceps small tip 4 mm jaws *E30-674S

for grasping and manipulating fine membranes, ideal for (PVR) and difficult macular pucker cases

Hockeystick Forceps grooved 2mm/45° jaws *E30-679S

for gripping and peeling membranes along the retina surface with good visualization

Pic Forceps smooth 2mm/45° jaws

E30-681S

for grasping and elevating membranes

Side Gripping Forceps smooth 2mm/45° jaws, flat 0.7 mm wide tips

E30-683S

for gripping and pulling peripheral membranes

GA/MM CONVERSION DATA & MODELS 19GA/1.1 mm, ID 0.70 mm, illuminated 20GA/0.9 mm, ID 0.60 mm, standard 23GA/0.6 mm, ID 0.33 mm, micro 25GA/0.5 mm, ID 0.25 mm, miniature

*also available with titanium tips

20GA/0.9 MM EZGrip® STANDARD ILM FORCEPS

excellent for "maculorhexís" and ILM peelíng

rounded grip area enables easy 360° rotation and freedom for manipulation and optimal surgical control

End Gripping Forceps fine tip 3.5 mm jaws *E30-673S

for grasping of thin membranes in the macular region, particularly in cases with detached retina

End Gripping Forceps pointed tipped 4.0 mm jaws *E30-676S straight shaft

effective at lifting, stripping and peeling fine membranes

End Gripping Forceps nail-like tipped 3.5 mm jaws *E30-687S Eckhardt style 90°

for precise grasping of thin membranes near the macula

End Gripping Forceps delicate 3.5 mm jaws with 0.7 mm pick at tip ***E30-678S**

NOTE:

The medical informational contained in this catalogue is for informational purposes only. It is not intended as instructional material for the use of the instruments, procedures or techniques.

*also available for 23GA/0.6 mm trocar cannula system, see page 198





20GA/0.9MM EZGrip® SUBRETINAL INSTRUMENTS



'ITREORETINAL INSTRUMENTS

Tip Protector for instruments with stationary tips E15-022

Horizontal Subretinal Scissors sharp 3.5mm/45° blades

E25-604SR

for cutting and dissecting in the subretinal space

Horizontal Subretinal Forceps narrow 3.0mm/45° jaws E30-681SR

angled 45° long thin jaws are ideal for grasping...

Horizontal Subretinal Forceps picked 3.5mm/45° jaws E30-682SR

subretinal membranes through a small retinotomy

Vertical Subretinal Forceps thin 3.5mm/45° jaws E30-683SR

> Diamond Subretinal Knife titanium bajonet handle with J-lock mechanism, 0.17 thick x 6 mm blade with double cutting edges

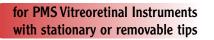
> > E10-301SR 20°/0.5mm wide E10-302SR 45°/0.9mm wide

> > > excellent for cutting of subretinal membranes

182 To Order: Contact Cooper Medical Ltd - Freephone: 0800 800 823 - Email: admin@coopermedical.co.nz - www.coopermedical.co.nz

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CARE AND CLEANING ACCESSORIES





Tip Protector for stationary instrument tips E15-022

for protecting instrument tips during sterilisation, storage and transportation

Protective Cap for removable instrument tips E15-023

> Vitreo Flushing Tubes for stationary instrument tips E20-424 metal adaptor E20-424T titanium adaptor

for cleaning/flushing instrument tips after each use to avoid encrustations

Vitreo Cleaning Adaptor for removable instrument tips E20-426T

Cleaning Syringes for Cleaning Tube and Adapter available in 20, 30 and 50 ml, disposable, sterile (sold singly)

on request

All PMS reusable instruments are supplied with detailed instructions for cleaning and sterilisation. General cleaning and sterilisation advice can also be found on page 10 and 71.

1:2

20GA/0.9 MM EZChange® STANDARD SCISSORS TIPS



scissors have sharp tipped blades, unless otherwise indicated

> removable instrument tips (360° rotatable)





Horizontal Scissors Tips straight 3.4 mm blades E25-600R blunt tips E25-602R sharp tips

> titanium "squeeze handle" with thread for removable instrument tips, 10.0 cm E10-010T

Horizontal Scissors Tip curved 2.7 mm blades

E25-603R

curved by 12 mm radius blades enable easy cutting along the curvature of the eye ball

Horizontal Scissors Tips angled 1.7 mm blades E25-604R2 25°

E25-604R4 45°

gentle angle of blade allows cutting and dissection parallel to the retinal surface

Vertical Scissors Tips angled 1.5 mm blades E25-605R 45° E25-607R 70° E25-609R 90°

vertical scissors allow powerful, controlled cutting action; distal blade remains stationary during use

Kroll (Vertical) Scissors Tip with Membrane Pick hooked 1.1mm/45° blade

E25-605RK

tips and handle sold singly

20GA/0.9 MM EZChange® STANDARD FORCEPS TIPS



EINALI

instrument tips are coloured for easier identification; Crocodile Forceps Tip BLUE for forceps and serrated 3.3 mm jaws **MAGENTA** for scissors E30-672R titanium "squeeze handle" with thread for removable instrument tips, 10.0 cm E10-010T **End Gripping Forceps Tip** fine tipped 3.3 mm jaws E30-673R **Hockeystick Forceps Tip** grooved 2.3mm/45° jaws E30-679R **Pic Forceps Tip** smooth 2.3mm/45° jaws E30-681R Eckhardt Style Forceps Tip nail-like tipped 3.3 mm jaws, E30-687R



TREORETINAL INSTRUMENT

23GA/0.65 MM EZChange® MICRO INSTRUMENT TIPS

23GA/0.65 mm diameter EZChange® instrument tips are excellent for pediatric and other microsurgical procedures Horizontal Scissors Tips delicate 1.6 mm blades *E25-602R23 straight E25-603R23 curved

> titanium "squeeze handle" with thread for removable instrument tips, 10.0 cm E10-010T

Vertical Scissors Tips blunt 0.8 mm blades E25-605R23 45° E25-607R23 70°

for 20GA/0.9 mm Trocar Cannula System

Crocodile Forceps Tip serrated 1.7 mm jaws *E30-672R23

ecellent for peeling and manipulating membranes

End Gripping Forceps Tip fine tipped 1.7 mm jaws *E30-673R23

end gripping tips are ideal for maculorhexis...

End Gripping Forceps Tip nail-like tipped 1.7 mm jaws (Eckhardt Style)

*E30-687R23

and to peel ILM

tips and handle sold singly

* fits through 23GA/0.65 mm trocar cannula system

20GA/0.9 MM EZChange® IOFB FORCEPS AND MAGNET

reverse action basket style forceps ideal for objects of irregular shape

Foreign Body Forceps three 1.9 mm long arms, slightly angled inwards

E30-693F removable tip E30-693S stationary tip



removal of lead shot using E30-692F18 Foreign Body Forceps

E30-692F18 E30-692F20

Foreign Body Forceps removable tip (360° rotatable), blunt, two prongs grasping jaws 18GA/1.2 mm tube, 2.5 mm jaws 20GA/0.9 mm tube, 1.9 mm jaws



essential instruments for managing IOFB, two sizes 18 & 20GA are ideal to remove most foreign bodies of any shape, size and material

Intraocular Foreígn Body Magnet

for atraumatic removal of non-encapsulated metallic invaders

Tagawa Precision Magnetic Probe gold plated, 13.3 cm

I.O. MAGNET

I.0-1000



sleek 19GA/1.1 mm probe can be utilized with a limbal, open sky and/or pars plana approach

IOFB MAGNET SPECIFICATIONS

Probe: 19GA/1.1 mm x 33 mm Handle: ø 10 mm x 100 mm long Power: 1.000 gauss (at tip only) Life expectancy: Indefinitive Sterilisation: Autoclave and ETO



CARE AND HANDLING TIPS

for PMS Vitreoretinal Instruments with EZGrip[®] stationary tips

(1)

All PMS vitreoretinal forceps and scissors have a very thin shaft with a delicate working mechanism. Intraocular fluids may enter this mechanism during surgery. If these fluids are not promptly and properly cleaned out, it will lead to the possibility of instrument malfunction, because salt, cellular debris, protein and viscoelastic can accumulate the inside of the mechanism.

Additionally protein may coagulate inside the instrument if not flushed out before sterilisation and thus can completely stop the mechanism from functioning. • Clean the instrument immediately after use with distilled/sterile water to remove blood, tissue or other contaminants.

• Remove any debris from the instrument tip very carefully. A fine soft bristled brush may be used for this.

(2)

• Clean the exterior of the instrument carefully with a moistened surgical sponge #37-900 (page 70).

• Place syringe with vitreo flushing tube E20-424 (1) over instrument tip and push over front of handle (2).

• Gently press the syringe plunger and flush instrument two or three times with purified destilled water.

• Replace the empty purified water syringe with a syringe filled with Isopropyl Alcohol, and flush the instrument to remove any remnants of water.

 Remove the empty Isopropyl Alcohol syringe then attach an empty syringe to the cleaning flush tube. To remove the alcohol blow through the instrument with one or two syringes with air.

 Cover instrument tip with Protective Sheath E15-022 and place separately on a wash/sterilising tray (see section), then clean in a Washer/Disinfector or Ultra Sonic Cleaner.

• The mechanism and the handpiece should be oiled occasionally with a hospital approved medical grade instrument lubricant

> Sterilise the instruments in suitable trays using flash autoclave, (steam) autoclave, high vacuum steriliser. Autoclaving 135°C/276°F is the preferred method of sterilisation.

INSPECTION

• Before sterilisation instruments should be inspected for cleanliness and suitability regarding:

- Any physical damage to the device, bent blades, chipped tips, misalignment, scratches.
- Smooth action, blades and arms should move smoothly and not jerk.
- Instrument surface should be clean, without any staining and pitting.
- All blades should be sharp and cut along the full length. Cutting performance can be tested against tissue paper and/or rubber dam.
- Any damaged instruments should be disposed of or repaired following the hospital approved procedures.

REPAIR

• PMS can also offer a high quality repair service for all types and makes of vitreoretinal instruments. Estimates are free and prices extremely competitive.

CARE AND HANDLING TIPS





- Unscrew the tip from hand piece and attach cleaning adapter E20-426T.
- Ultrasonically clean both parts, if possible.
- Attach syringe filled with distilled or sterile water to adapter and flush the tip two/three times.
- Flush the tip with alcohol. This will remove any remnants of water and facilitate drying.
- Dry the tip by forcing one or two syringes full of air through tip to remove any remaining alcohol.
- Force special heat-resistant instrument milk through the tip, following instruction in article number three above.
- Dry with air following instruction in article number five above.
- Immerse handle in distilled or sterile water for two minutes, and then clean and dry with surgical sponge.
- Lubricate joints in handpiece with hospital approved and medical grade agent.
- Store and sterilise the instrument in a protective tray #E45-112. Instruments should not touch each other, to avoid contact corrosion.



Vitreo Cleaning Adapter titanium case with LL cone E20-426T

for flush-through cleaning of removable instrument tips immediately after each surgery

RECOMMENDED HANDLING

• The scissors and forceps are microsurgical instruments and must be handled with care at all times.

• NEVER DROP YOUR PMS VITREOUS AND RETINAL INSTRUMENTS.

• When cleaning care should be taken to prevent chemicals or human debris contaminating the user.

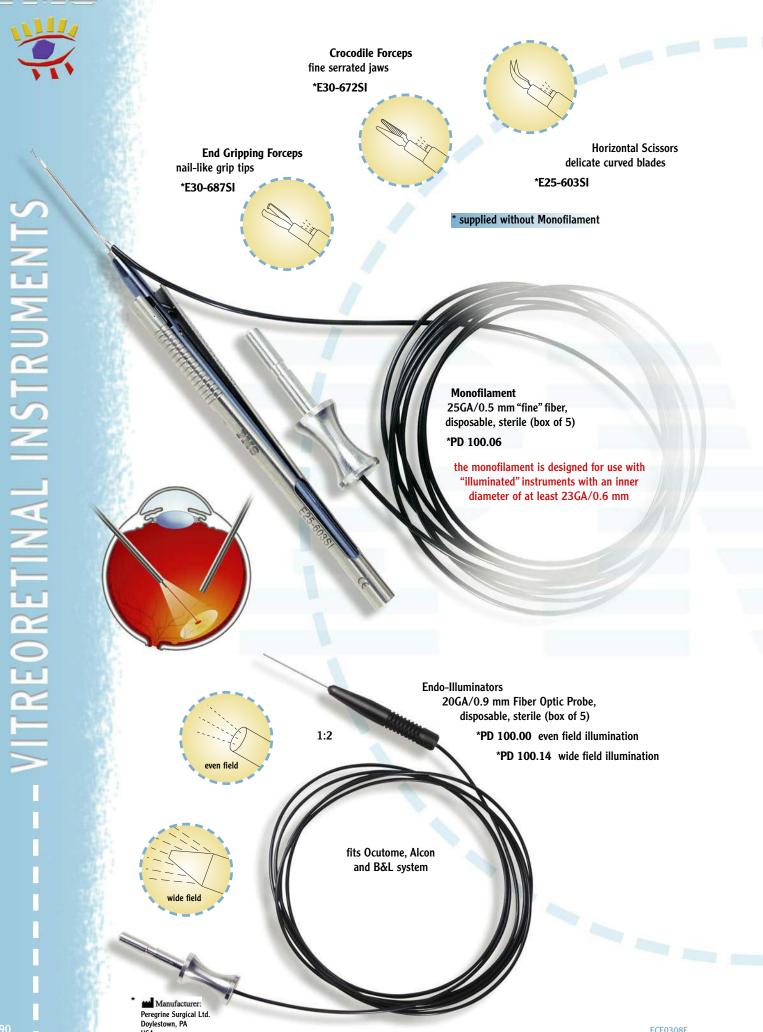
• Only handle devices using personal protective equipment, e.g. gloves, etc.

• All cleaning to be carried out in a suitably controlled environment.

• Hospital approved procedure for handling, cleaning and sterilising must be strictly followed.

PMS EZWash® Sterilising Trays are designed to hold micro surgical instruments securely and allow them to be thoroughly cleaned by automated washer disinfector machines which are now popular in many hospitals.

19GA/1.1 MM ILLUMINATED INSTRUMENTS



ILLUMINATED CHANDELIER AND INFUSION CANNULAE

66 Chandelier illumination ... gives excellent illumination and visualization, and it allows one to perform a proper bimanual vitrectomy 77

- Amar Agarwal, MS, FRCS,



Wide Angle Chandelier Cannula with adaptor for Ocutome system, self-retaining 20GA/0.9 mm cannula, disposable, sterile (box of 5)

*5037

Chandelier illumination is a technique using a 20GA/0.9 mm or smaller illumination fibre that is inserted into the vitreous cavity transconjunctivally through the pars plana. It increases the surgeons visibility making anterior and posterior segment surgery safer and easier to perform.

Chandelier Cannula is placed in the pars plana area without the need of sutures for fixation.

> **Removal of dislocated IOL** with chandelier illumination and vitreoretinal forceps.

> > Ocutome adaptor

ETINAL INSTRUM

Illuminated Infusion Cannulae 18GA/1.2 mm bevelled 45° tip, disposable, sterile (box of 5) fits the following systems: *5038 Ocutome *5096 Alcon *5128 B&L

> fibre optic light cable incorporated into the infusion cannula



Removable Instrument Tips

Hold the tip gently but firmly and screw the handle onto the tip! Make sure that the handle is turned only, NOT THE TIP!

tips and handle sold singly

Aluminium Handle for removable tips E15-100AB

۲

other colours see pages 94 & 130

Membrane Spatula/Knife Tip angled sharp 5 mm blade E15-347R

for dissection and excision of membranes from the surface

Membrane Peeler Tip blunt recessed shaft *E15-350R

for lifting and locating the edge of epiretinal membranes in PVR cases

Membrane Rake Tip angled 1 mm blade

E15-355R

to clear fine membranes from the retinal surface

Membrane Knob Tip curved round end

E15-365R

for manipulation of detached retina

also available with stationary tips in all titanium (*) and/or stainless steel

20GA/0.9 MM EZChange® MEMBRANE INSTRUMENT TIPS





Membrane Spatula Tip angled 130° blunt spatula

*E15-363R

for blunt dissection and delamination of membranes from the retina surface

tips and handle sold singly

Aluminium Handle for removable tips E15-100AB

> Membrane Spatula Tip angled 130° triangular pick *E15-371R

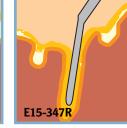
ideal for blunt dissection and epiretinal membrane peeling

Membrane Pick Tip angled 130° blunt spatula *E15-373R



PMS EZ Change® picks, rakes, and spatulas can meet all your needs for easy, controlled membrane manipulation and peeling around the retina surface.





E15-350R E15-363R

...locating, lifting, stripping...

...dissection, delamination...

...dissection and excision...

... cleaning and peeling.

20GA/0.9 MM REUSABLE BACKFLUSH INSTRUMENTS

PMS Backflush Instruments are useful for passive or active aspiration of intraocular fluids and reflux of incarcerated tissue, atraumatic "brushing" of the retinal surface and repositioning of retinal folds or breaks.

> Backflush Instrument for passive aspiration (manual control)

E20-730 complete, consisting of: E20-731 handpiece E20-700 flute tip cannula E20-732 silicone reservoir

Blunt Tip Cannula *E20-700

Tapered Tip Cannula *E20-704

Soft Tip Cannula

*E20-710

* also available with Luer-Lock cone add "L" to cat. no., e.g. E20-710L

Brush Tip Cannula *E20-720

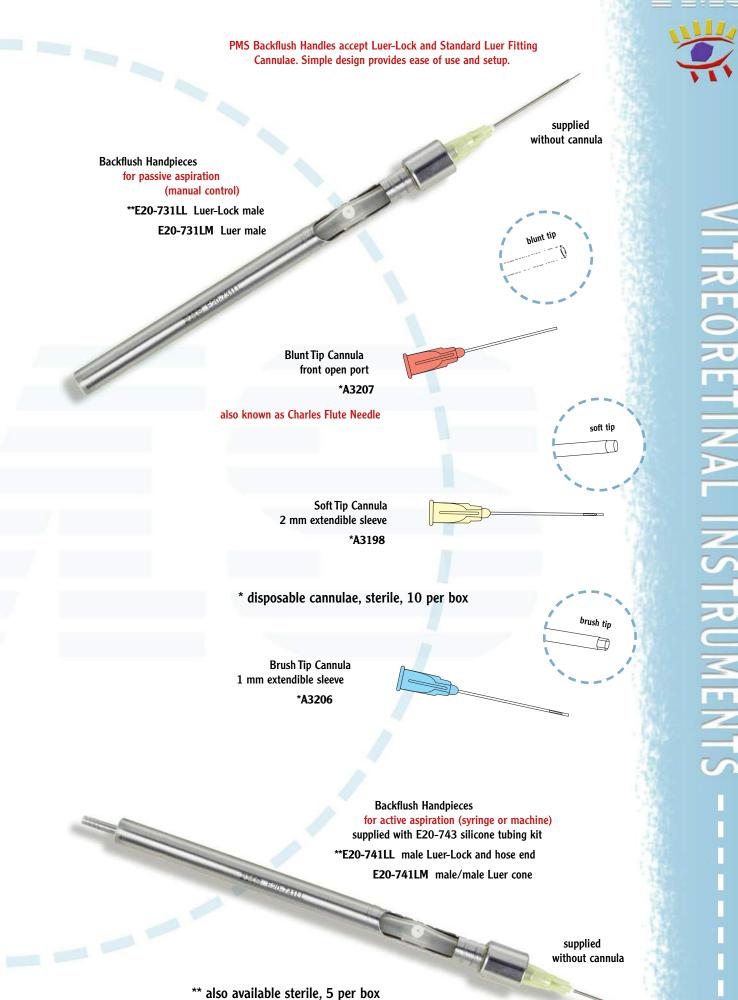
> Silicone Backflush Reservoirs with "cut-off" aspiration control port **E20-732 for passive aspiration (sealed end) **E20-742 for active aspiration (open end)

Backflush Instrument for active aspiration (syringe or machine) E20-740 complete, consisting of: E20-741 handpiece E20-700 flute tip cannula E20-742 silicone reservoir E20-743 silicone tubing kit

** also available sterile, 10 per box

ØE

BACKFLUSH HANDLES AND 20GA/0.9 MM DISPOSABLE CANNULAE



TINAL INST

CLEANING AND HANDLING INSTRUCTIONS



The PMS range of backflush instruments are produced of high quality materials including stainless steel, silicone rubber and teflon. These instruments will provide long service if properly cleaned after each surgical procedure.

PMS backflush instruments consist of four basic parts:

- stainless steel handle
- stainless steel tip cannula
- stainless steel retaining nut
- silicone rubber backflush reservoir with white teflon aspiration control port

silicone backflush reservoir

REASSEMBLY After all of the parts have dried completely the instument

can be reassembled as follows:

 Install the silicone backflush reservoir by inserting the open end of the reservoir into its fitting at the distal end of the opening within the handpiece (be sure to push it all the way on to the fitting). After the open end has been secured, the sealed

cannula

cannula retaining nut

DISASSEMBLY

After use the instument should be disassembled and cleaned before being sterilised. The following is a brief description of the disassembly procedure to be followed prior to cleaning.

1) Unscrew and remove the cannula retaining nut and remove the cannula.

2) Remove the silicone backflush reservoir from the handpiece by pulling up the center of the tubing.

MANUAL CLEANING

1) Wash the handpiece and backflush reservoir thoroughly, rinse well and allow to dry before reassembling. The silicone backflush reservoir should be inspected under magnification to be sure that it does not show any signs of wear or damage. Confirm that the teflon "washer" is in the aspiration control port and that the proximal end of the reservoir tubing is sealed.

2) If a silicone "brush" or "soft tip" cannula is used, it should be inspected under magnification for wear or damage and replaced as necessary. If the inspection reveals an intact silicone tip carefully wash the cannula and brush/soft tip. Then reinspect the brush/soft tip to be sure that it has not been damaged while cleaning. The cannula should be thoroughly flushed and rinsed during the cleaning procedure.

3) After all of the parts have been rinsed thoroughly with distilled water, allow them to dry completely before being reassembled.

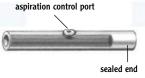
end ot the reservoir is inserted into the proximal end of the opening within the handpiece (it is necessary to "crimp" the tubing while inserting the proximal end). After the backflush reservoir is in its proper position, there should be no crimps in the reservoir tubing.

handle

2) Insert the cannula in the distal tip of the handpiece and secure with the cannula retaining nut.

BACKFLUSH RESERVOIRS

If the backflush reservoir shows any signs of wear or damage or if it contains tissue remnants, blood, etc., which cannot be removed, it must be replaced.



SILICONE OIL is extremely difficult to completely remove from silicone tubing. Therefore if silicone oil is used in a surgical procedure, the silicone parts of the backflush instrument must be replaced after the procedure.

CLEANING AND HANDLING INSTRUCTIONS



Sterilisation Containers

OPTIONAL CARE & CLEANING

Only hospital approved detergents and cleaners are acceptable for use in the cleaning process. If a detergent or cleaner is used, steps 1 through 3 of the Manual Cleaning Procedure should be followed immediately afterwards.

AUTOMATED CLEANING

Automated wash/disinfector machines and ultrasonic cleaner are an acceptable method to use in the instrument cleaning process, but should not be used as the sole cleaning method. However, the instrument should, at the very least, be cleaned with purified water prior to being placed into the mentioned systems. Follow the automated cleaning with steps 1 to 3 for the Manual Cleaning Procedure.

STORAGE

We highly recommend the utilisation of PMS EZWash® sterilisation trays and PMS EZLoad® sterilisation containers to sterilise, store and protect all of your delicate PMS vitereoretinal instruments. For more details refer to relevant section.

STERILISATION

The PMS backflush instruments (stainless steel handles and stainless steel cannulae) can be gas, flash or steam sterilised (in autoclave). The temperature should not exceed 273°F/134°C.

E45-221B 310 x 190 x 40 mm for storage of $1 \ge 1/1$, $2 \ge 1/2$ or 3 x 1/3 size Sterilisation Trays





20GA/0.9 MM INFUSION CANNULAE

for Gas, Líquíds and Sílícone Oíl

PMS

Standard Infusion Cannulae attached to silicone tubing with LL cone, reusable, non-sterile (sold singly)

E20-752 2.5 mm tip

E20-754 4.0 mm tip **E20-756** 6.0 mm tip

🚵 sterilise before use

Reusable cannulae are constructed of stainless steel material; 380 mm extra long infusion tubing enables individual location of the silicone oil syringe.

Standard Infusion Cannulae attached to silastic tubing with LL cone, disposable, sterile (box of 10)

*175-25 2.5 mm tip

*175-40 4.0 mm tip

*175-60 6.0 mm tip

for injection of viscous fluids during posterior segment procedures

High Viscosity Infusion Cannulae attached to silicone tubing with LL cone, disposable, sterile (box of 10)

*175-14 4.0 mm tip

*175-16 6.0 mm tip

designed for easy injection of high viscosity substance such as silicone oil

further VFI instruments for manual delivery of heavy liquids are shown on pages 212 - 213

ITREORETINAL INSTRUMENT

Manufacturer: EAGLE LABS Rancho Cucamonga,

SCLERAL PLUGS, TABLETS AND FORCEPS





A Sterilize (gas or steam autoclave) scleral plugs. Artization, open pouch onto sterile field. Acoss action forceps, grasp plug head and lift from retaining block. Af forceps attached to head, place tip of plug into sclerotomoy. With scleral plug properly positioned in sclerotomy, remove forceps.

Directions for use tem is sold as NON-STERILE

REMOVAL 1) Grasp scleral plug head

gently remove form sc

Reusable Scleral Plugs non-sterile (4 per tablet) *R19-1000 19GA/1.1 mm, gold *R20-1000 20GA/0.9 mm, silver



Disposable Scleral Plugs (2 x 20GA/0.9 mm & 2 x 19GA/1.1 mm) sterile (4 per tablet) *RDP-1000

Scleral Plug Forceps angled 9 mm grooved jaws with side gripping tips, 10.5 cm

E30-777T

for standard 20GA/0.9 mm scleral plugs

cross-action handle, ideal for picking up the plug from the holder and easy insertion and removal

Scleral Plug Forceps angled 9 mm notched jaws with side and end gripping tips, 10.5 cm E30-778T

for micro 23GA/0.65 mm scleral plugs and trocar cannulae

Manufacturer: Howard Instruments, Inc. Tuscaloosa, AL

23GA/0.65 MM REUSABLE TROCAR SYSTEM



affordable, economícal...

> **Trocar Fixation Plate** multiple atraumatic teeth, central 2.75 mm opening and side port, 11.0 cm

E15-727 stainess steel

E15-727T titanium

ideal for conjunctiva fixation around the general area of the pars plana incision site

Cannula Inserter titanium, blunt tip, 10.0 cm E20-723T

Trocar Cannulae non-sterile (4 per tablet) E20-723C

sterilise before use

Cannula Plugs non-sterile (4 per tablet) E20-723P

Universal Infusion Cannula 4 mm bevelled tube attached to silicone tubing with LL cone, non-sterile (sold singly)

E20-723U

Cannula Loading Forceps titanium, angled 9 mm shanks with biconvex curved jaws,

10.5 cm E30-779T

cross-action design for insertion and removal of 23GA/0.65 mm trocar cannulae



... efficient, two step technique

23GA/0.65 mm Trocar System

complete, consisting of: 1 x Trocar fixation plate 1 x Cannula inserter 3 x Trocar cannulae 3 x Cannula plugs 1 x Universal infusion cannula 1 x Cannula loading forceps 1 x Sterilising case with ... E20-723R ...removable lid E20-723S ...sliding lid

PMS

Reusable Trocar Cannula Kit non-sterile (4 per retaining block) E20-720K 20GA/0.9 mm E20-723K 23GA/0.65 mm

Replacement Cannula Kit 23GA/0.6 mm, consisting of 2 each: instrument cannulae and cannula plugs *5189 reusable, sterile (1 kit per tray) *5190 disposable, sterile (5 trays per box)

> Disposable Closure Valve Set for 23GA/0.65 mm cannulae, consisting of 4 valves per tray, sterile (5 sets per box) *5209

> > EAGLE

Stiletto MVR Knives 23GA/0.65 x 30 mm shaft, 0.75 mm wide lancet blade, disposable, sterile (box of 6)

EG-5563 straight

EG-5663 angled

For sclerotomy incisions with smooth, easy penetration through the limbus or pars plana. Tip provides a fluid-tight seal and is tapered for easy withdrawal.

23GA/0.65 mm Disposable ONE STEP & TWO STEP Trocar Cannula Systems are shown on pages 200-201



5189

23 Ga MVR

Manufacturer: MicroVision, Inc. Seabrook, NH

23GA/0.65 MM MICRO SCISSORS AND FORCEPS



smaller ís better, less traumatic, less paín

> Micro Scissors sharp tipped blades *E25-602S23 straight *E25-603S23 curved *E25-605S23 vertical 45°

Crocodile Forceps serrated micro jaws *E30-672S23

ideal for macular applications...

End Gripping Forceps micro tips platform *E30-673S23

fine membrane grasping...

Eckhardt Style Forceps end gripping nail-like tips *E30-687523

and peeling of ILM

Tano Style Forceps asymmetrical jaws *E30-689S23

* fits through 23GA/0.65 mm Trocar System

VITREORETINAL INSTRUMENTS

23GA/0.65 MM BACKFLUSH INSTRUMENTS AND ACCESSORIES



Retaining Ridge Self-Retaining Infusion Cannulae 23GA/0.65 mm x 4.0 mm tip, disposable, sterile (box of 5) *5144 infusion cannula *5165 silicone oil cannula designed for sutureless fixation; retaining ridge holds cannula securely in place soft tip brush tip Disposable Backflush Cannulae 23GA/0.65 x 30 mm tube, sterile (box of 10) A3209 blunt tip, Charles Flute Cannula A3195 soft tip, 2.0 mm silicone sleeve blunt tip A3208 brush tip, 0.6 mm silicone sleeve **Backflush Handpiece** for passive aspiration (manual control) with XL silicone reservoir, male Luer-Lock connector E20-731XL extra large reservoir for increased capacity, Fluid-air exchange with simultaneous aspiration of intravitreous fluid allows reflux of greater through blunt tip extrusion cannula. volumes of fluid **Replacement Reservoir** E20-732XL ____ **Charles Flute Cannula** A3209

* Manufacturer: MicroVision. Inc.

MicroVision, Inc. Seabrook, NH



ITREORETINAL INSTRUMEN

23GA/25GA DISPOSABLE TROCAR CANNULA SYSTEMS

cannula inserter

trocar knife 23GA/0.65 mm **TWO STEP Cannula System**

complete, each package includes: 3 x cannula inserter with preloaded cannula with self-sealing valve, 1 x trocar knife and 1 infusion line disposable (pack of 6)

5700

sterilise before use

The unique cannula inserter works together with an ergonomically designed knife to accomplish oblique cannula insertion directly into the eye via pars plana.

DIRECTION FOR USE

Self-sealing cannulae are pre-mounted on the trocar insertion tools. Slide the trocal needle forward until it locks into the handle. Introduce the cannula with the trocar needle. Forceps may be used to hold the cannula in place while removing the trocar needle. The cannula is self-sealing and will minimise fluid loss when not in use.

Attach the Luer connector of the infusion line to a source of infusion fluid. Prime the infusion line. Insert the metal connector in to the rubber cap on one of the cannulae. Immobilise the infusion line and verify that it is securely attached to the cannula before use.

25GA/0.5 mm **ONE STEP** Trocar Cannula System

complete, each package includes: 4 x inserter handles with preloaded trocar cannula and one infusion line disposable (pack of 6)

5605

À sterilise before use

Insert handle consists of sharp wire trocar mounted to plastic handle. The inserter comes with a 25GA/0.5 mm cannula preloaded and is delivered in a safe, retracted position.





in use

protected

Not for sale in Europe

23GA/25GA OBLIQUE INSERTION TECHNIQUE

for better incision closure and cannulae stability

1)



1)

The conventional method of inserting a trocar cannula vertical to the scleral surface promotes incisions that are small (0.5 to 0.6 mm), however with poor sealing ability.

2)

The oblique insertion technique with "valve" effects seals better than the traditional vertical technique. Valve-like incisions are very similar to self-sealing corneoscleral incisions performed in cataract surgery.

3)

Oblique insertion of trocar cannula can be perfomed with a straight or angled 23GA/25GA trocar inserter. Both types are designed to accomplish oblique cannula insertion directly into the eye. Straight cannula inserters are introduced at an approximate 45° angle to the scleral surface with a movement tangential to the limbus.

23GA/0.65 mm ONE STEP (without self-sealing valve) Trocar Cannula Set

complete, each package includes: 2 x trocars with instrument cannula, 1 x inserter (dark blue) with cannula for fluid/gas, 1 infusion line, 2 x scleral plugs, 1 x scleral plug forceps, 1 fixation blade, disposable, sterile (box of 20) 03VI11

4)

2)

3)

4) Using an oblique incision instead of a vertical incision helps maintain cannula stability in the eye. Oblique positioning of the trocar cannulae does not affect the maneuverability of the instruments.

Simple System available upon request:

23GA ParsMate Trocar Kit complete, kit includes: 4 x trocars with insert cannula, 1 x infusion cannula, 1 x scleral tablet with 4 plugs pressure plate may be added upon request

To Order: Contact Cooper Medical Ltd - Freephone: 0800 800 823 - Email: admin@coopermedical.co.nz - www.coopermedical.co.nz

NAL

23GA/25GA DISPOSABLE PRODUCTS ON REQUEST





Silicone Tip Cannulae 25GA/0.5 x 30 mm tube, disposable, sterile (box of 10)

A3210 brush tip A3211 blunt tip

A3196 soft tip

silicone tips ensure safe entry through a macular tear or hole for aspiration of subretinal fluids

Fiber Optic Endo-Illuminators available in 23GA and 25GA disposable, sterile (box of 5)

single purpose illuminator providing an even field and/or wide field illumination

Endo Laser Probes available in 20GA, 23GA and 25GA, straight and angled tips, sterile (box of 5)

> for Alcon, Coherent, Zeiss, HGM and Nidek systems

> > **Bipolar Cautery Pencils** 23GA/0.65 mm shaft, smooth and pointed tips, reusable and disposable

for gentle coagulation of scleral surface and intraocular hemostasis



All products shown are "Made in the USA" and carry the European Union CE Mark registration.

coagulation of small

scleral bleeders

25GA/0.5 MM MINIATURE INSTRUMENTS



Horizontal Scissors sharp tipped blades E25-602S25 straight E25-603S25 curved E25-605S25 vertical 45°

> Eckhardt Style Forceps end gripping nail-like tips E30-687S25

Berrod Style Forceps end gripping tips platform E30-673S25

Membrane Spatulae removable 130° triangular tip E15-371S23 23GA/0.65 mm E15-371S25 25GA/0.5 mm

> Aluminium Handle for removable tips E15-100AB

Membrane Picks removable 130° spatulated tip E15-373P23 23GA/0.65 mm E15-373P25 25GA/0.5 mm

tips and handle also sold singly



MISCELLANEOUS - INCISION INSTRUMENTS

Símple to use !

V.I.I.K.

Vitreous Injection Kit consisting of the following: Barraquer Adult Eye Speculum, Scleral Marker (4.0/3.5 mm), Hypodermic Needle 32GA/0.2 mm, disposable, sterile (box of 10)

*PD900.10

for office based intravitreal injections and examinations.

Universal Sclerotomy Caliper titanium, blunt tips, 4.0 cm

E40-571T

for marking 3.0, 3.5 and 4.0 sclerotomy sites

Braunstein Fixed Sclerotomy Caliper titanium, blunt tips, 7.0 cm

E40-573T 3.5-3.0 mm for aphakic eyes

E40-574T 4.0-3.5 mm for phakic eyes

- marks the distance from the limbus to sclera
- marks intravitreal injections entry PPV
- to make the mark for MVR blade incisions

EAGLE Stiletto MVR Knives 23GA/0.65 mm shaft, 0.75 mm wide lancet blade, disposable, sterile (box of 6)

23 Ga W 0.75 n disposable, EG-5563 straight

EG-5663 angled

For sclerotomy incisions with smooth, easy penetration through the limbus or pars plana. Tip provides a fluidtight seal and is tapered for easy withdrawal.

marking sclerotomy site for pars plana vitrectomy

Manufacturer

* Not for sale in Europe

MISCELLANEOUS - FLEXIBLE IRIS RETRACTOR



IrísMate® Flexíble Translímbal Irís Retractors

*IRIS-1000 reusable (6 pcs) in autoclavable case **IRIS-2000 disposable (5 pcs) in plastic tray

- Ideal for temporary iris dilation.
- Safely used in Aphakic, Pseudophakic and Phakic eyes.
- Works through 0.3 mm 0.5 mm self sealing incision.
- Specially designed silicone cinch provides superior grip.
- Nylon hook retracts iris with minimal damage to the tissue.
- Cinch is colour coded for easier viewing under microscope.

Howard Instruments, Inc. Tuscaloosa, AL USA Manufacturer: Biotech Vision Care Ltd. Khatraj, Gandhinagar India

Retinal Nails & Forceps

for temporary fixation of the retina in case of immobile retina

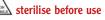
Reusable Retinal Nail 20GA/0.9 mm trocar tip of 2.85 mm working length, non-sterile (4 per tablet) E20-720NS and removed through four evenly spaced translimbal incisions

flexible nylon hooks can be easily inserted

all MEDICAL GRADE materials

Video available





Retinal Nail Holding Forceps removable tip (360° rotatable), 20GA/0.9 x 30 mm straight shaft, cup-shaped 1.0 mm jaws, 15.2 cm

> E30-690N complete E30-690R tip only

E10-010T handle only

MISCELLANEOUS - SCLERAL DEPRESSORS AND MARKERS



ITREORETINAL INSTRUMENT



MISCELLANEOUS - HOOKS AND RETRACTORS



Graefe Strabismus Hook E40-771 #1 small E40-772 #2 medium E40-773 #3 large

THE E40-771

Jameson Muscle Forceps slide lock, adult size, 6 teeth, 10.0 cm E30-700 right E30-701 left

> Gass Retinal Detachment Hook flat tip with 1.5 mm oval hole, 14.0 cm E40-777

> > Schepens Orbital Retractor curved smooth blade with 4.0 mm wide notch, 15.0 cm

E40-813

Bonn Model Orbital Retractor angled smooth blade with convex-concave surfaces, 15.0 cm

E40-815

PMS E40-777 (6

PMS E40-813

E40.815 (E



RETINAL DETACHMENT SURGICAL INSTRUMENT SET

Instrument sets are presented as guidelines only

> E42-140 RETINAL DETACHMENT SET complete, consisting of the following: E30-902 Mosquito Forceps (2x), page 16 E30-934 Dieffenbach Serrefine (4x), page 16 E40-078 Castroviejo Eye Speculum, page 17 E40-554 Castroviejo Eye Caliper, page 19 E20-001 Bishop-Harmon Irrigator, page 20 E20-031 Rycroft Infusion Cannula, page 20 E25-333 Westcott Tenotomy Scissors, page 59 E25-565 Stevens Tenotomy Scissors, page 59 E30-063 Barraquer Colibri Forceps, page 61 E30-423 Harms Tying Forceps, page 24 E30-430 Bonn Suturing Forceps, page 24 E35-132 Castroviejo Needle Holder, page 25 E35-231 Barraquer Needle Holder, page 25 E40-111 Desmarres Lid Retractor, page 17 E40-771 Graefe Strabismus Hook, page 207 E40-613 Schockett Scleral Depressor, page 206

MISCELLANEOUS TO RETINAL

E40-611U Scleral Marker & Fixation Pick, page 206 E40-777 Gass Retinal Detachment Hook, page 207 **E40-779T** Eye Thermocauter, titanium, page 208 E40-813 Schepens Orbital Retractor, page 207 E30-835 Sleeve Spreading Forceps, page 219

Nurse Scissors, 13.0 cm

E40-779T

E35-231

E40-613

E25-333

11

straight 35 mm blades E25-580 sharp/sharp E25-582 sharp/blunt

E25-584 blunt/blunt

curved 35 mm blades,

E25-581 sharp/sharp E25-583 sharp/blunt E25-585 blunt/blunt

E25-581

ITREORETINAL INSTRUMENT

VITRECTOMY SURGICAL INSTRUMENT SET



Directions for use Note: This item is sold as NON-STERILE

PLACEMENT: 1) Clean and Sterilize (gas or steam autoclave) scleral plugs. 2) After sterilization, open pouch onto sterile field. 3) With cross action forceps, grasp plug head and lift from retaining block. 4) With forceps attached to head, place tip of plug into sclerotomoy. 5.) With scleral plug properly positioned in sclerotomy, remove forceps.

8 8

R19-1000

REMOVAL 1) Grasp scleral plug head

and gently remove form sclerotomoy

E25-602S

E15-355R

E42-141 VITRECTOMY SURGICAL SET complete, consisting of the following: EG-5560 Stiletto MVR Knife 20GA, page 58 R19-1000 Scleral Plug Set 19GA, page 195 E30-777T Scleral Plug Forceps, page 195 175-40 Infusion Cannula 4 mm, page 194 E20-730 Backflush Instrument, page 190 E20-741LL Backflush Handpiece, page 191 E20-704 Tapered Tip Cannula, page 190 E25-602S Vitrectomy Scissors, page 175 E30-672S Vitrectomy Forceps, page 176

FOR MEMBRANE MANIPULATION ADDE15-350RMembrane Peeler, page 188E15-355RMembrane Rake, page 188E15-371RMembrane Pick, page 189E30-679SVitreous Forceps, page 176

FOR 23GA/0.65 MM OBLIQUE INSERTION E20-723R Reusable Trocar System, page 197 5700 Disposable Cannula System, page 200

MISCELLANEOUS TO VITRECTOMY Fiber Optic Light Probes, page 186 Bipolar Cautery Pencils, page 202 5700

Fiber Optic Endo-Illuminator



'ITREORETINAL INSTRUMENTS

naturally pure, . híghly purífíed



tubing with VFI standard connector

11 1

dimeticone 1000

REF 24-TRS

AlfaSIL TRS **Purified Silicone Oil** preloaded 15 ml syringe, sterile (box of 5) **REF 24-TRS** standard connector REF 24TRSA for Alcon + Dorc REF 24TRSB for Bausch & Lomb REF 20L32 for Fritz Ruck

for automatic pressure injection

GENERAL DESCRIPTION AlfaSIL Silicone Oil is an oil liquid, of high viscosity, used to replace the vitreous humour during vitrectomy surgeries with long time of permanence in the eye, usually more than 30 days.

> CHEMICAL COMPOSITION Formula: [-Si (CH₃)₂O-]_n] Viscosity: 1000 cSt at 25°C Refractive index 1.405 at 24°C Densitiy: 0.965 g/cm³ at 24°C

INDICATIONS FOR USE refer to page 207

PACKAGING AND STERILISATION

AlfaSIL Silicone Oil is available in preloaded 15 ml syringe or in 10 ml vial. AlfaSIL is dry heat sterilised and filled in its sterile container. The final container (syringe or vial) is sterilised by radiaton.



leticone 1000 Alfa Intes - Ca

The use of purified silicone oil as an internal tamponade is not recommended for patients with intraocular silicone lenses.

AlfaSIL **Purified Silicone Oil** sterile (vial of 10 ml) **REF 24**

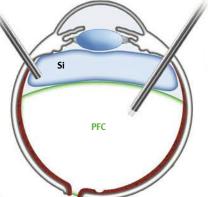
Manufacturer: Alfa Intes. Casoria, Napoli

To Order: Contact Cooper Medical Ltd - Freephone: 0800 800 823 - Email: admin@coopermedical.co.nz - www.coopermedical.co.nz

10 m

PURIFIED SILICONE OIL 1000/5000 CST

exceptional stable, and transparent



SO-1000 exchange procedure with passive aspiration through Brush Tip Cannula



CHEMICAL COMPOSITION see AlfaSIL REF 24

CE0120 APPROVED FOR SALE IN ALL EUROPEAN UNION COUNTRIES

in 10 ml sterile syringe

SO-1000-S 1000 cSt

SO-1300-S 1300 cSt

SO-2000-S 2000 cSt

SO-5000-S 5000 cSt

High Viscosity Infusion Cannulae 20GA/0.9 mm bevelled 45° tip, attached to silicone tubing with LL, disposable, sterile (box of 10)

MIS-1040 4.0 mm tip

MIS-1060 6.0 mm tip

designed for easy injection of high viscosity substance such as silicone oil

INDICATIONS FOR USE Silicone Oil SO-1000/SO-5000 is used for intraocular tamponade in severe cases of retinal detachment, e.g.

giant tears ocular trauma

in 10 ml sterile vail

SO-1000 1000 cSt

SO-1300 1300 cSt

SO-2000 2000 cSt

SO-5000 5000 cSt

• proliferative vitreo-retinopathy (PVR)

which can not be treated with other forms of therapy.

Purified Silicone Oil is available in the following:

The choice of viscosity offers an optimum balance between

easy injection and a stable temporary tamponade.

secondary RD with viral retinitis
as well as other retinal detachment.

Manufacturer: Howard Instruments, Inc. Tuscaloosa, AL

*

To Order: Contact Cooper Medical Ltd - Freephone: 0800 800 823 - Email: admin@coopermedical.co.nz - www.coopermedical.co.nz

VFI - SILICONE OIL DISPOSABLE DELIVERY SYSTEMS



STERILE EO

Peyman Silicone Oil Cannulae 8 mm tube, bevelled tip disposable, sterile (box of 10)

167-16 16GA/1.6 mm

167-19 19GA/1.1 mm

Wagner Silicone Oil Cannulae 16GA/1.6 x 8 mm tube, bevelled tip, attached to 6" (15.0 cm) high pressure extention tube, disposable, sterile (box of 3)

167-16T

for injection or aspiration of high viscosity fluids in the repair of retinal detachments

Silicone Oil Cannula (Manual Delivery System) 8 mm cannula with 6" (15.0 cm) high pressure extension tube preattached to a 10 ml ring control syringe, sterile (box of 3)

167-20TS 20GA/0.9 mm

167-19TS 19GA/1.1 mm

167-16TS 16GA/1.6 blunt tip

Subretinal/Vitreoretinal Injection Cannulae 20GA/0.9x25 mm tube, 32GA/0.25mm tip

173-32 straight 3 mm bevelled tip 175-32 curved 8 mm rounded tip

Subretinal/Vitreoretinal Aspiration Cannulae 20GA/0.9x25 mm tube, 32GA/0.25mm tip

173-34 curved 8 mm bevelled tip 175-28 straight 4 mm rounded tip

pictures shown are smaller/larger than actual sizes indicated

Z16 Califonia, USA To Order: Contact Cooper Medical Ltd - Freephone: 0800 800 823 - Email: admin@coopermedical.co.nz - www.coopermedical.co.nz

ITREORETINAL INSTRUMENT

Manufacturer: EAGLE LABS Rancho Cucamonga,

VFI - SILICONE OIL REUSABLE DELIVERY SYSTEMS





Silicone Oil Cannulae 8 mm tube, bevelled tip

> E20-716 16GA/1.6 mm E20-719 19GA/1.1 mm

for injection or aspiration of high viscosity fluids in the repair of retinal detachments

> Standard Infusion Cannulae non-sterile (sold singly) E20-752 2.5 mm tip E20-754 4.0 mm tip E20-756 6.0 mm tip

> > Silicone Oil Syringe 10 ml glass syringe with screw activated plunger, 12.0 cm E20-820

Viscous Fluid Pressure Injector 10 ml glass syringe with finger support and pressure activated plunger, 12.5 cm

E20-821

High-Flow Fluid Filter .20 Micron male/female Luer-Lock fittings, disposable sterile (50 per box)

201-20

used between syringe and cannula to filter out particulates and contaminates

pictures shown are smaller/larger than actual sizes indicated



1712078 122012

A

CE0373

VITRION PERFLUOROCARBON LIQUID

colourless, optícal clear,

VITRION Perfluorocarbon Liquid sterile (vial of 5 ml) *REF 100VTO

GENERAL DESCRIPTION

Vitrion is made by 98% of Octadecafluorodecanydronaphthalene. It is treated to reduce as far as possible its residual toxicity. Existing impurities are 100% fluorinated and are fluorinated open chains of the same kind.

CHEMICAL COMPOSITION

Formula: C₁₀F₁₈ Molecular weight: 462.08 Refractive index: 1.314 at 24°C Density: 1.941 g/cm³ at 25°C Boiling point: 141°-143°C

DESTINATION OF USE

Perfluorocarbon liquid is a high tensity liquid for vitreous chamber washing during ocular surgery with a maximum time of permanence in the eye of one hour.

INDICATIONS FOR USE refer to page 209

PACKAGING AND STERILISATION

Vitrion is packaged in 5 ml bottle of pharmaceutical glass with cap and seal. The bottle is outside and inside sterile, packaged in a sealed sterile bag.

> Dual Bore PFC Coaxial I/A Cannula 19GA outer tube with 0.4 mm aspiration port, 25GA inner tube with open end irrigating port,

> > E20-325 reusable (sold singly)

149-19 disposable (box of 10)

with aspiration channel for passive aspiration of intraocular fluid during injection of PFC

BSS PFC retinal attachment with Perflurorcarbon through Dual Bore PFC Cannula

VITRI

Perfluorocarburo liquido Liquid Perfluorocarbon

cut-off aspirating port allows to control constant intraocular pressure during injection

Manufacturer: Alfa Instruments

Casoria (NA),

Z18 To Order: Contact Cooper Medical Ltd - Freephone: 0800 800 823 - Email: admin@coopermedical.co.nz - www.coopermedical.co.nz

DecalineMate® PERFLUOROCARBON

100% fluorínated and purífied



PFC-air exchange using blunt tip extrusion cannula



INDICATIONS FOR USE DecalineMate® Perfluorocarbon serves perfectly as an aid in temporary

flattening of the retina and in the surgical treatment of:

- retinal detachment
- giant tears
- ocular trauma
- laser coagulation and cryotherapy
- lifting of subluxated lenses
- retinal bleeding
- short term tamponade

CHEMICAL COMPOSITION Formula: $C_{10}F_{18}$ Molecular weight: 462 Refractive index: 1.310 at 20°C Density: 1.93 g/cm³ Boiling point: 142°C Surface tension: 19.0 at 25°C Interface tension: 57.8 at 20°C

Manufacturer: Howard Instruments, Inc. Tuscaloosa, AL USA Perflourocarbon 100% fluorinated, sterile (vial of 7 ml) *PFD-2000

DecalineMate®

CE0120 APPROVED FOR SALE IN ALL EUROPEAN UNION COUNTRIES

Dual Bore PFC I/A Cannulae disposable, sterile (box of 5)

**5191 20GA/0.9 mm

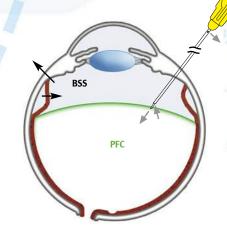
**5203 23GA/0.65 mm

for simultaneous infusion of heavy liquids and aspiration of intraocular fluids

Dual Bore Subretinal BSS Injection Needle 20GA/0.9 tube with 41GA/0.1 mm tip disposable, sterile (box of 1)

**5194

to control subretinal injection of BSS



retinal attachment with Perflurorcarbon through Dual Bore PFC Cannula

** Manufacturer: MicroVision, Inc. Seabrook, NH



GasMat

LOT

GasMate

d Instr

GasMate

Howard GasMate® Tamponades come in a kit as described below, containing a sterile 50 ml bottle gas, (your choice) and may be purchased in the following:

99.9% PURE GMC3F8-PURE C3F8 Perfluoropropane GMC2F6-PURE C2F6 Hexafluoroethane GMSF6-PURE SF6 Sulfur Hexafluoride

PRE-MIXED WITH DRY NITROGEN GMC3F8-MIXED C3F8 Perfluoropropane GMC2F6-MIXED C2F6 Hexafluoroethane GMSF6-MIXED SF6 Sulfur Hexafluoride

contact us for specific mixtures

GasMate® Kit complete, each kit includes: 1 x sterile bottle of C₃F₈, C₂F₆ or SF₆ (your choice) 1 x sterile disposable syringe (60 ml), 1 x sterile high quality filter, 1 x sterile valve

CE0120 APPROVED FOR SALE IN ALL EUROPEAN UNION COUNTRIES

1)

-E-F-

2)

INJECTION OF GAS MIXTURE

There are two possible techniques for replacing intraocular air by the gas mixture. Following fluid-air exchange, the gas mixture can be injected via the infusion line before the final closure of sclerotomies 1) or with the globe closed, using a 30GA/0.3mm needle cannula.



DISPOSABLE VITRECTOMY LENSES

optimal for routine vitrectomy procedures



clear view of the fundus in an airfilled vitreous

Flat Lens ***RSL-2000**

for 36° field of view of the central posterior pole and vitreous

Magnifiying Lens *RSL-3000

for throrough viewing central posterior fundus and structures deep in the vitreous cavity, on the vitreous cavity and on the retinal surface

> Wide Field Lens *RSL-4000

48° field of view when observing central posterior pole and vitreous

30° Prism Lens *RSL-5000

viewing of the periphery and vitreous beyond the equator

Landers Vitrectomy Lens Forceps angled 45° shaft, curved grooved blades, 11.5 cm

E30-837T

for holding the Landers Vitrectomy Lenses

* HOWARD RSL-LENSES

- Manufactured of optically clear silicone
- High resolution PMMA optics
- Self-retaining silicone flange in place of sew-on ring
- Economical back up for reusable lenses
- · Single use, eliminates risk of contamination
- Individually sterile packaged (box of 10)

ITREORETINAL INSTRUMENTS



RETINAL IMPLANTS ON REQUEST

Bands

Mo Strips Tires

sleeves sponges

FOR DECADES

medical grade silicone materials for scleral buckling surgery have been the gold standard in the treatment of retinal detachment throughout the world with great success.

MATERIAL FEATURES:

- Soft and elastic
- Biocompatible and non-toxic
- Non-antigenic
- Tailored to size

INDICATIONS FOR USE

Silicone retinal implants are used for intrascleral and episcleral buckling in retinal reattachment surgery.

STERILISATION AND PACKAGING

Solid Silicone Implants and Silicone Sponges are gas sterilised with 100% ethylene oxide (ETO) and are guaranteed to be sterile unless the package has been damaged or opened. Individually sterile packaged (box of 5).

SCLERAL BUCKLING

Circular Scleral Buckling is useful when the vitreous is hemorrhagic, in order to prevent late retraction of the base of the vitreous and secondary retinal detachment. This can be performed at the beginning of the procedure or after vitrectomy.

> Sapphire Crescent Knives angled, facet-free blade (bevel up)

> > E10-191 1.5 mm

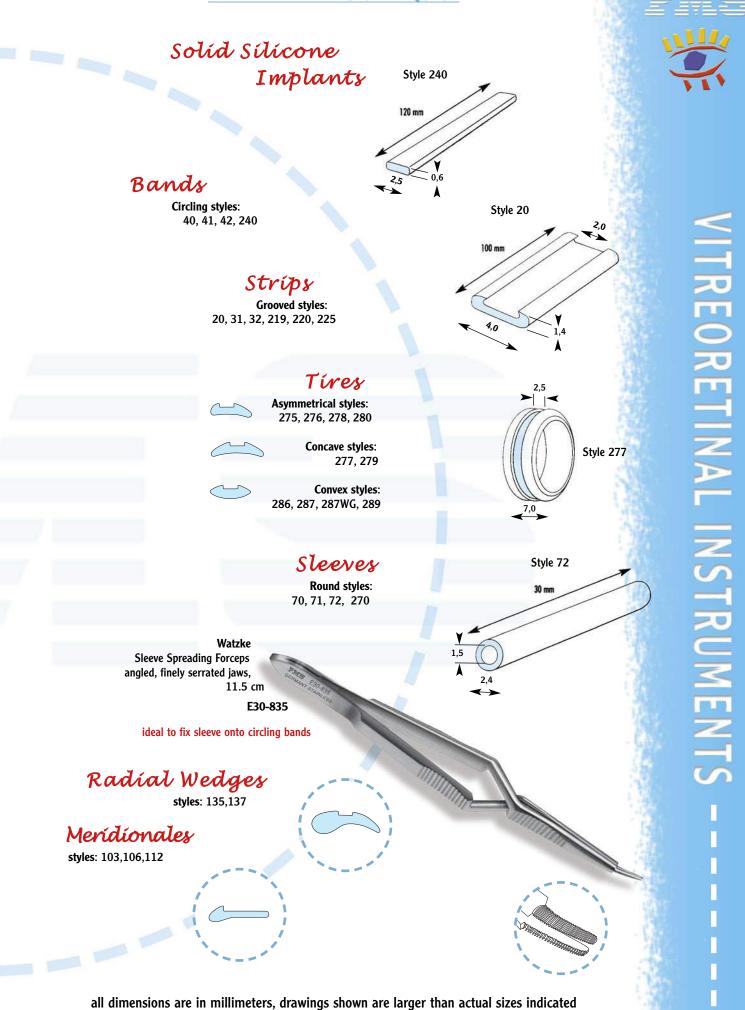
E10-192 2.0 mm

E10-193 2.8 mm

ideal for scleral dissection in scleral buckling procedure

Circular scleral buckling.

RETINAL IMPLANTS ON REQUEST



To Order: Contact Cooper Medical Ltd - Freephone: 0800 800 823 - Email: admin@coopermedical.co.nz - www.coopermedical.co.nz



SCLERAL SPONGE IMPLANTS ON REQUEST

Style 508G

Style 510

Gooved

Styles: 506G, 507G, 508G, 509G, 516G, 519G

Part-Thickness

Styles: 510, 511, 515, 517

MATERIAL Scleral Sponges are made of soft silicone elastomer composed of closed micro cells.

LENGTH Silicone sponge implants are pre-cut to a length of 80 mm unless otherwise specified.

PACKAGING Individually sterile packaged (box of 5).

> **Round Styles**: 503, 504, 505

> > Oval/Oblong

Styles: 501, 506, 507, 509

Y 4 2,5 **A** Style 501

5

Style 505

all dimensions are in millimeters, pictures shown are larger than actual sizes indicated