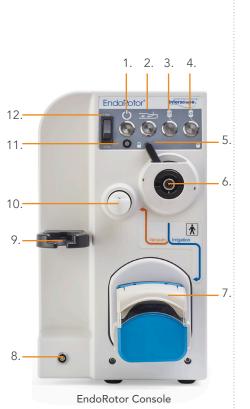
<u>Guide Content:</u> This technique guide is intended as a physician supplement to the EndoRotor System Instructions for Use (IFU). Please consult the IFU for complete details, precautions and troubleshooting.



Console Design

- 1. Standby Button
- 2. Vacuum Control Release Button
- 3. Prime Button
- 4. Irrigation On/Off Button
- 5. Catheter Interface Locking Lever
- 6. Catheter Interface
- 7. Irrigation Pump
- 8. Foot Control Interface
- 9. Accessory Holder
- 10. Vacuum Control Valve
- 11. Indicator Light
- 12. Speed Control Switch













- a. Ensure Catheter Interface on console is in unlock position. $\widehat{f d}$
- b. Insert catheter's proximal housing into connection. Ensure hex connection aligns. Gently push catheter's housing completely inward and rotate locking lever right into locked position.
- c. On bottom surface of proximal housing are 2 connected tubing sets. The shorter of the 2 is the specimen trap connection vacuum tube. To load press vacuum release button

 Stretch tube and place in to vacuum release valve until seated.
- d. Place the purge kit saddle into the accessory holder and confirm it is seated. Connect the vacuum tubing directly to smaller end of the purge kit until firmly seated. The bottom section of the purge kit must be connected to vacuum tubing. Remaining tubing will be connected to an overflow canister which will be connected to the portable Medela vacuum.
- e. Use vented spike on irrigation tubing to attach to saline bag. Open irrigation pump by lifting the irrigation pump hood. Place the irrigation tubing set on top of rollers with flow from left to right. Close irrigation pump hood. Press prime button. Once primed, amber light turns green.
- f. Tap the blue pedal once and allow the cycle to complete. Repeat this step. Place the tip of the catheter into a basin of water. Tap the blue pedal and hold down on the orange pedal to suction water through the catheter. Remove your foot from the orange pedal and tap the blue pedal to stop. The system is now ready for use.

Vacuum Start Ranges*		
EndoRotor Cutter Speed	Necrosectomy	
	Low	High
High	300–400 mmHg	450-550 mmHg
Low	300-400 mmHg	450-550 mmHg

^{*}For general reference only. Consult with the physician prior to the case to verify preferred vacuum and other system settings.

The EndoRotor® System PED Quick Start Guide

Purging the Catheter: If the primary user (the user holding the endoscope) observes that resected materials may have become clogged within the catheter during the procedure, they may elect to perform a purge. The primary user will then ask the secondary user (the user standing near the console) to perform a purge by following these steps:





Attach a user-provided syringe to the female Luer port. The syringe must have a volume of between 10 and 25 mL and a male Luer lock feature. Twist the syringe snugly into place on the fitting.



Ensure the stopcock arm is positioned such that it is pointing towards the vacuum tubing and is in Purge Configuration.

- 1. Primary user stops all cutting, positions the tip of the catheter away from tissue, and requests a Purge.

 WARNING Purging while the catheter tip is in contact with tissue may cause unintended trauma to the tissue.
- 2. Secondary user switches stopcock from Resection Configuration to Purge Configuration.
- 3. Secondary user presses the vacuum control release button on the console
- 4. Secondary user shuttles the syringe back and forth at a controlled speed. This forces air through the inside of the catheter and out of the distal tip, removing the clog. Continue to shuttle the syringe back and forth until fluid is observed exiting the tip. WARNING Use slow, smooth motions while shuttling the syringe back and forth. Do not shuttle the syringe back and forth rapidly or with jerking motions doing so may cause the tubing or fittings to rupture, exposing the user to resected materials. WARNING Do not cover the opening to the relief valve while actuating the syringe. Failure to do so will stop the relief valve from working and could burst the tubing.



Turn the stopcock arm such that it is pointing towards the purge kit and is returned to Resection Configuration.



Alert the primary user that the Purge is complete and cutting may resume.

For more information visit www.interscopemed.com or contact Customer Service:

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