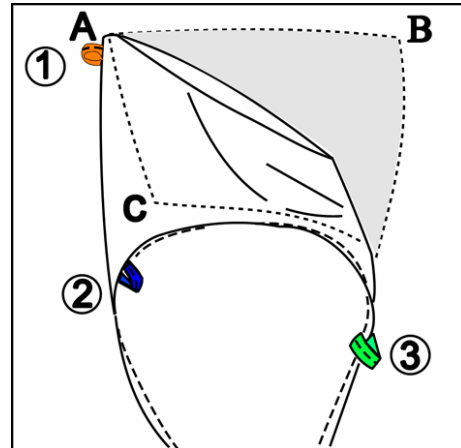


Instructions for Deployment and Retrieval of Anchor TRS180 and TRS200 Sacs Using 15/16 mm Cannula and 5mm Graspers

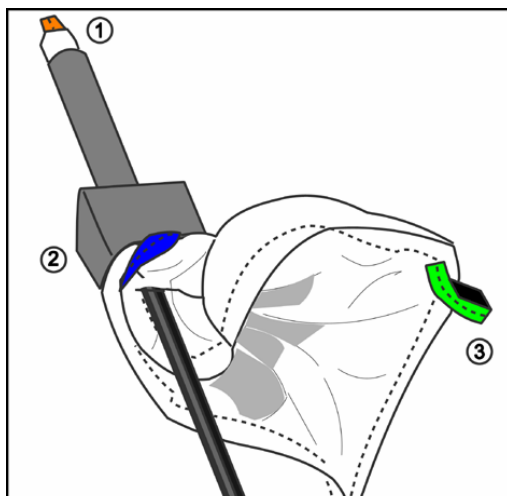
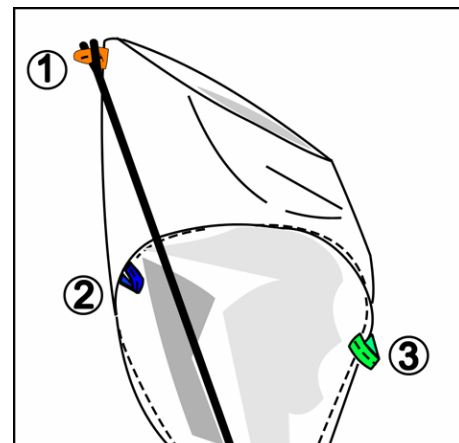
Before insertion, make sure that the corner **B** is folded back inside the sac to point **C**

Note the three holding tabs: tab 1 (orange), tab 2 (blue) and tab 3 (green). These are grasped in sequence to deliver the sac into the cannula.

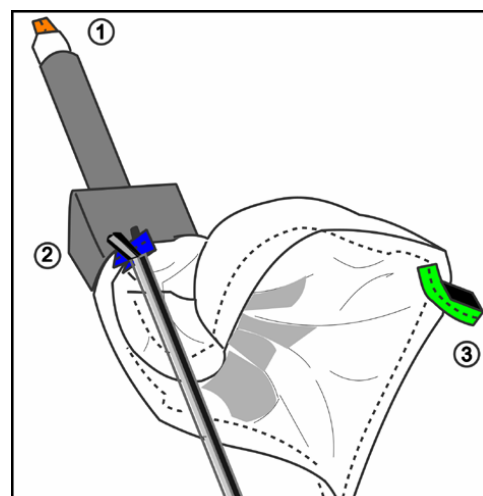


Close the jaws of the grasper through the orange tab (no.1) at the tip of the sac and push the assembly into the 15/16mm cannula.

(see note below)



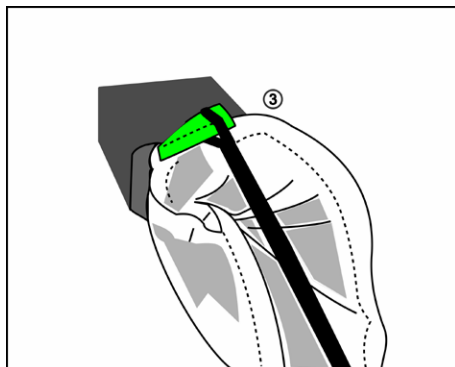
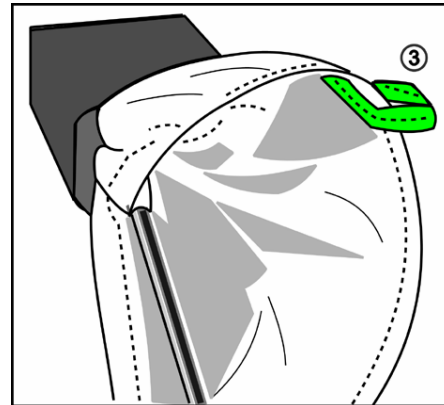
When tab1 is visible in the abdomen, take hold of it with an operating forceps and release the grasper.



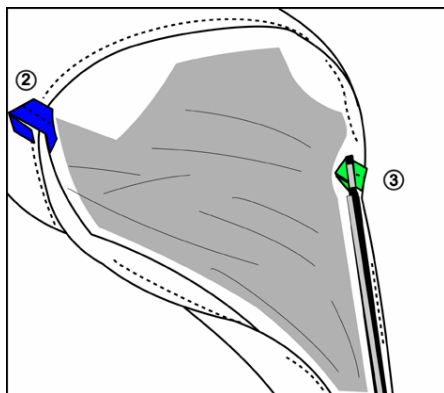
Withdraw the grasper and take hold of tab 2 (blue).

...The grasper is again pushed into the cannula to further deploy the sac.

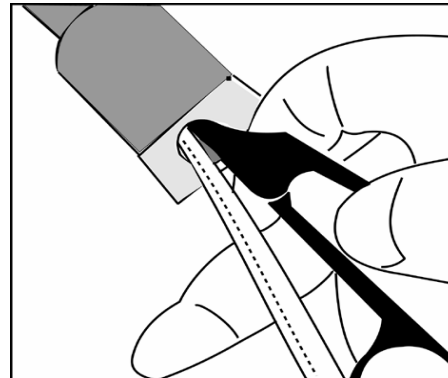
Once in the abdomen the operating forceps takes hold of the tab 2 (blue) to stabilise the mouth of the sac.



Finally tab 3 (green) is grasped and pushed into the cannula to complete deployment.



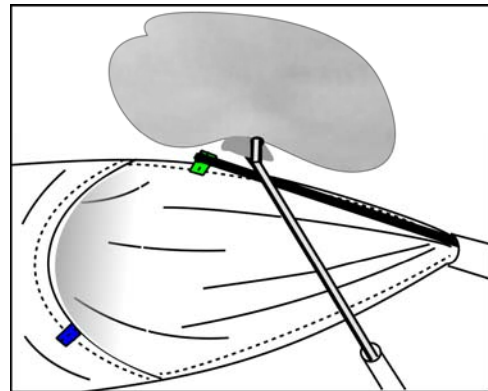
The mouth of the sac now springs open as the super-elastic wire is free to exert its tension against the retaining sleeve.



Externally the tail is held in tension against the shaft of the grasper. This stabilises the right border of the triangular "apron" and facilitates easy loading of the specimen.

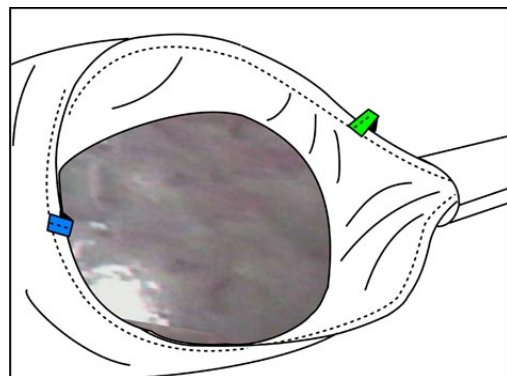
Note: If your cannula does not have a universal reducing valve, an appropriate reducer will be required. The tail of the sac must first be withdrawn through the reducer, and then the grasping forceps passed through the reducer. Draw the reducer well up the shaft of the grasper. Only push it into the cannula when the body of the sac has entered the abdomen.

Ease the organ to be removed onto the apron of the sac.

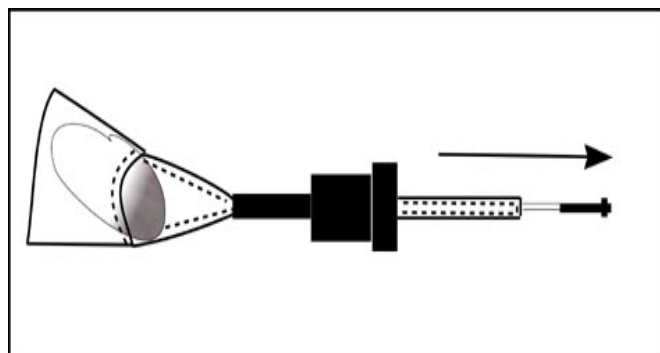


The border of the "apron" is stabilised by the grasper and the tensioned tail.

Move the specimen into the body of the sac.



Draw the sac into the end of the cannula by pulling on the tail.



Pull the tab at the end of the tail to close the mouth of the sac.

Withdraw the cannula over the tail and open the mouth of the sac externally for access to the specimen for fragmentation and extraction.

