



The Tiger Snare

Instructions for Use



STERILE EO



INTENDED USE

The Tiger Snare is used endoscopically in the removal of diminutive polyps, sessile polyps, pedunculated polyps, and tissue from within the gastrointestinal tract.

CONTRAINDICATIONS

The device's contraindications include those specific to endoscopic polypectomy:

1. Those specific to endoscopic procedures to obtain visualization of the polypectomy site.
2. Multiple adenomatous polyps concentrated to a single area in large numbers.
3. Family neoplasia.
4. Endoscopic morphology has obvious progression suitable for surgical treatment.
5. Uncorrected clotting disorders.
6. Insufficiently prepared bowel.

POTENTIAL COMPLICATIONS

Potential complications associated with gastrointestinal endoscopy include, but are not limited to:

1. Perforation
2. Hemorrhage
3. Aspiration
4. Fever
5. Infection
6. Hypotension
7. Allergic reaction to medication
8. Respiratory depression or arrest
9. Cardiac arrhythmia or arrest

Complications which can occur with endoscopic polypectomy include, but are not limited to: transmural burns, thermal injury to the patient, explosion

PRECAUTIONS

Please follow the recommendations of the electrosurgical unit manufacturer before using the device to ensure patient safety through proper placement and utilization of patient return electrode.

The return electrode must have a proper path from patient return electrode to electrosurgical unit throughout the procedure. Polypectomy should be performed under direct endoscopic visualization.

INSTRUCTIONS FOR USE

1. Examine the active cord for kinks, bends, breaks and exposed wires. If an abnormality is noted, do not use active cord.
2. With the electrosurgical unit off, prepare equipment. Securely connect active cord to device handle and electrosurgical unit. Active cord fittings should fit snugly into both the device handle and electrosurgical unit. Position patient's return electrode and connect it to the electrosurgical unit.
3. Fully retract and extend snare to confirm smooth operation of device.
4. When polyp is in the endoscopic view, introduce sheath and retracted snare into the endoscope accessory channel. **Caution:** To ensure patient safety, power to the electrosurgical unit should remain off until snare is properly positioned around the polyp.
5. Advance device, in small increments, until endoscopically viewed exiting endoscope.
6. Spin the rotation cylinder to align the snare with the polyp. If necessary, slide the deflection piece to maximize contact between the polyp and snare.
7. Advance snare wire out of the sheath and position it around the polyp to be removed. **Warning:** When applying current, tissue must be isolated from surrounding mucosa. Failure to isolate tissue may cause fulguration of normal mucosa and/or perforation. Contact of snare wire with endoscope during electrosurgery may cause grounding, which could result in injury to patient and/or operator as well as damage to endoscope and/or snare wire.
8. Follow the electrosurgical unit manufacturer's instructions for settings, verify desired settings and activate the electrosurgical unit.
9. Proceed with polypectomy.

10. Upon completion of polypectomy, turn the electrosurgical unit off. Retract snare into sheath and remove device from endoscope.
11. Retrieve polyp and prepare the specimen per institutional guidelines.

Upon completion of procedure, disconnect active cord from device handle and dispose of this device per institutional guidelines for biohazardous medical waste. Disconnect the active cord from the electrosurgical unit. Wipe active cord with a damp cloth to remove all foreign matter. Store in a loose coil. Note: Wrapping active cord tightly may damage the device.

