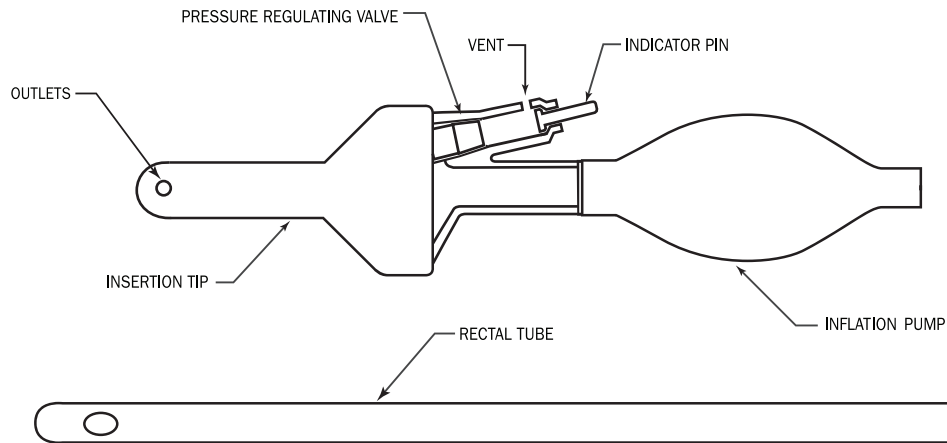


# ANASTOMOSIS LEAK TESTER-LP

Catalog No. ALT-50



## INDICATIONS:

For intraoperative air leak testing of a colorectal anastomosis in LAPAROSCOPIC and ROBOTIC surgery.

## CONTRAINDICATIONS:

The ANASTOMOSIS LEAK TESTER-LP is not intended for use in open surgery.

## INSTRUCTIONS FOR USE:

### TO TEST AN ANASTOMOSIS:

1. With the abdomen insufflated to 15 mmHg, fill the pelvis with saline, and completely occlude the bowel above the anastomosis.
2. Push the INDICATOR PIN in, occlude the two INSERTION TIP OUTLETS with your fingers, and test-fire the device by compressing the INFLATION PUMP until the INDICATOR PIN pops out. **WARNING: Always test-fire the ANASTOMOSIS LEAK TESTER-LP before performing an air leak test in order to ensure proper VALVE and INDICATOR PIN function.**
3. Hold the ANASTOMOSIS LEAK TESTER-LP so that the VENT and INDICATOR PIN are upward, insert the INSERTION TIP into the anus, and press inward to form a seal at the anal verge.
4. Reset the INDICATOR PIN by pressing it in.
5. Compress the INFLATION PUMP to inflate the bowel. Inflate the bowel with a volume of air according to the surgeon's preference, or to a pressure of 50–60 cmH<sub>2</sub>O. Each full compression of the INFLATION PUMP delivers approximately 45 mL of air. Observe the bowel above the saline pool and distal to the bowel occluding clamp to monitor the degree of bowel distention. **WARNING: Overdistention of the bowel may injure the anastomosis. Underdistention of the bowel may result in the failure to identify an anastomotic defect or weakness. Ensure that the bowel is completely occluded above the anastomosis in order to prevent distention of proximal bowel.**
6. To inflate to a pressure of 50–60 cmH<sub>2</sub>O (37–44 mmHg), compress the INFLATION PUMP slowly and repeatedly. Do not occlude the VENT aperture. Feel for the INDICATOR PIN with your thumb as you pump. The INDICATOR PIN pops out when intraluminal pressure reaches 50–60 cmH<sub>2</sub>O. The PRESSURE REGULATING VALVE and VENT maintain the intraluminal pressure at 50–60 cmH<sub>2</sub>O, resulting in a transmural pressure of 30–40 cmH<sub>2</sub>O when the abdomen is insufflated to 15 mmHg (20 cmH<sub>2</sub>O).
7. Observe the pool of saline for bubbles, which indicate an air leak.
8. Repair the anastomosis if necessary, and repeat the air leak test.
9. Deflate the bowel with the RECTAL TUBE.

STERILE | EO

## Rx only

U.S. Patent No. 8,216,159 and 10,123,712



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