

# CIRCULAR STAPLER SINGLE USE; FIRING

- 1** Remove device from packaging. Please note; there is an Ancillary trocar included in the packaging. Remove this first and keep safe and sterile, in case this is required during the procedure.



- 2** Remove staple protection tab, by opening the device. This is the red tab at the distal end of the device, that is between the staple housing and the anvil.

- 3** To completely open the device and to remove the anvil, turn the wing nut knob fully anti-clockwise. You will notice that there is a red band that appears. It is now safe to remove the anvil from the device. For safety only close down the device clockwise until the spike is just inside the inner tissue stop, this is done by turning the wing nut knob clockwise.

- If the device is closed down any further than the inner tissue stop position there is an increased possibility of premature firing of the stapler.



- 4** Both parts of the device will then be introduced into the patient.
- The anvil part will go in to the purse string that has been created inside the cavity of the patient
  - The CS itself will be introduced via the rectum, or the oesophagus - depending on the procedure.

- 5** Open the device completely until the red band is completely exposed. Only then will it be safe to re-attach the anvil to the device. **IMPORTANT** - if the red band is not visible, it is not safe to attach the anvil to the device.
- Successful docking of the anvil will be achieved by making sure the device has been opened fully by the user
  - Ensure that your graspers do not occlude the anvil shaft, as you will not be able to dock the device correctly otherwise.



- 6** Once the anvil has been attached to the CS device, a click will be heard to indicate successful docking. Then begin to close the device, bringing the anvil and the staple housing together with the tissue to be transected in-between.

- Please note: there is an indication gauge/ window on the device. This indicates the range, that it is safe to fire the device within. Staple closure ranges from 1mm 2.5mm. This relates to the thickness of the tissue to be transected, it's essential that optimum compression is achieved, prior to firing.

- 7** Continue to close the CS until an orange line appears within the green band in the firing window. Once within this safety range, keep the gun closed for a further 10-15 seconds, prior to firing.





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Dis-engage the red safety catch (under the firing handle).

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The gun is to be fired with one swift and confident motion.  
•When fired there is an evident sound produced when a plastic wash contained within the anvil head is divided in 2 by the cutting blade. This serves to indicate that the staples have been delivered and firing has been achieved.



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The safety catch is then re-engaged  
•IMPORTANT - please ensure this is done to avoid any accidental firing, as the blade can then be activated, without the safety of staples. There is no lock-out so it is imperative that this is done immediately after firing.



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The device is then opened by a turn of only half to  $\frac{3}{4}$  turn only. The wing nut position is an ideal guide for this.

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The device is rotated 90 deg from left and then right ensuring the anvil and housing are free of tissue within the jaws prior to removal.

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The device is then removed slowly from the patient.

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The gun is opened and donuts are then removed and inspected.



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