

# PROXIMATE® Linear Cutter

## Steps to Use



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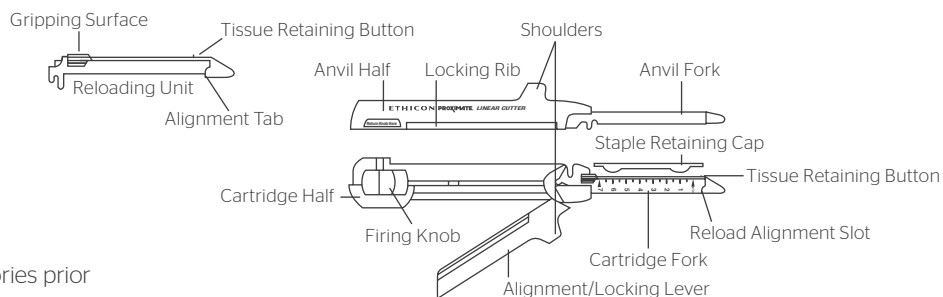
## Models available: (55mm, 75mm, 100mm)

TVC55, TLC55, TCT55, TLC75, TCD75, TCT75, TLC10, TCT10

## Reloads available:

TVR55, TCR55, TRT55, TCR75, TRD75, TRT75, TCR10, TRT10

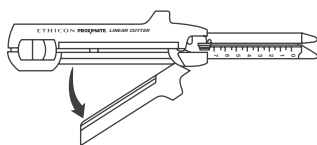
Verify compatibility of all instruments and accessories prior to using the instrument. For complete product details, see Instructions for Use.



1

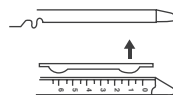
Using sterile technique, remove the instrument from the package. To avoid damage, do not flip the instrument into the sterile field.

2



Separate the instrument halves by completely disengaging the Alignment/Locking Lever.

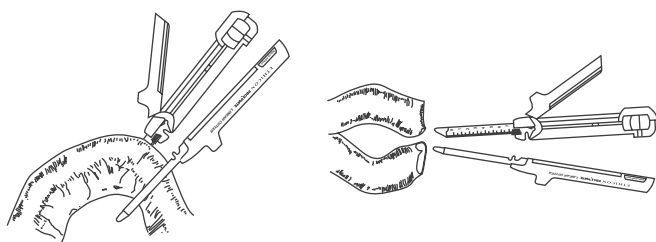
3



Grasp the edge of the Staple Retaining Cap and lift straight up from the reload. Discard the Staple Retaining Cap.

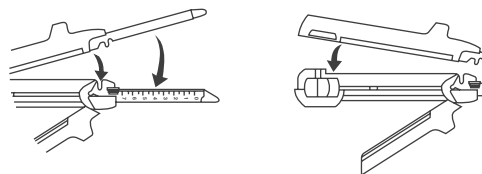
**Note:** The Staple Retaining Cap ensures proper staple orientation and protects the staple leg points during shipping and transportation.

4



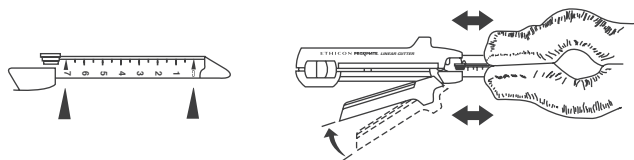
Place the instrument across the tissue for transection or into the lumen to form an anastomosis.

5



With the Alignment/Locking Lever in the completely opened position, join the instrument halves together by aligning from either the front, center or back of the instrument.

6



To adjust tissue on the Forks before firing, move the Alignment/Locking Lever to the intermediate position. This allows maneuvering of the tissue while the instrument halves are joined.

**Note:** This step is optional. The Alignment/Locking Lever may be moved from the completely opened to the completely closed position.

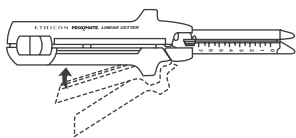
**CAUTION:** Ensure that the tissue lies flat between the Forks. Any “bunching” of tissue along the reload or scale may result in an incomplete staple line. Tissue to be transected must be located between the arrows marked on the instrument jaw. Any tissue located outside of the arrows is out of the stapling range.

**CAUTION:** When positioning the device on the application site, ensure that no obstructions such as clips, stents, guide wires, etc., are within the instrument Anvils. Firing over an obstruction may result in incomplete cutting action and/or improperly formed staples.

**Note:** When firing across thick tissue, holding the jaws in place for 15 seconds after closing and prior to firing may result in better compression and staple formation.

**CAUTION:** Before firing, ensure that the Cartridge Fork and the Anvil Fork are aligned.

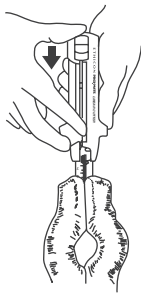
7



Close the Alignment/Locking Lever completely when the tissue is properly in place.

**Note:** The use of staple line buttressing materials with the instrument may require an increased force to close.

8



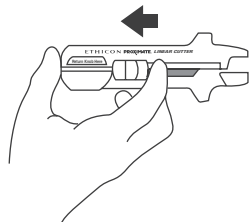
To fire the Linear Cutter, place the thumb on the Firing Knob and two fingers on the shoulders of the Linear Cutter. Fire the instrument by pushing the Firing Knob completely forward.

**Note:** The use of staple line buttressing materials with the instrument may require an increased force to fire and may reduce the number of firings.

**Note:** Crossing of staple lines may shorten the life of the instrument.

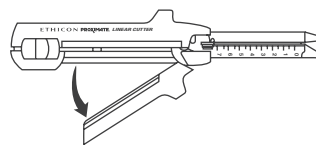
**CAUTION:** Complete the firing stroke. Failure to complete the stroke may result in incomplete staple line.

9



Completely return the Firing Knob to the original "Return Knob Here" position.

10



Separate the instrument halves by opening the Alignment/Locking Lever and remove the instrument.

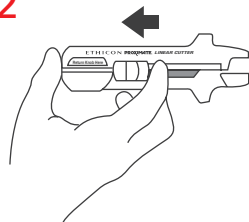
**CAUTION:** After removing the instrument, examine the staple lines for hemostasis/pneumostasis and proper staple closure. Minor bleeding can be controlled with electrocautery, manual sutures or other appropriate techniques.

# Reloading the Instruments

1

Using sterile technique, remove the Reload (cartridge) from the package. To avoid damage, do not flip the instrument into the sterile field.

2



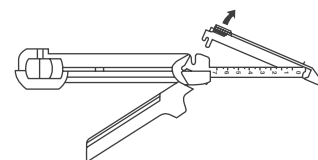
Completely return the Firing Knob to the original "Return Knob Here" position.

**Note:** The Reload cannot be inserted unless the Firing Knob is in its original position.

3

Separate the instrument halves by pulling open the Alignment/Locking Lever.

4



Pull upward on the Gripping Surface. Unsnap the used Reload from the Cartridge Fork. Discard the used Reload.

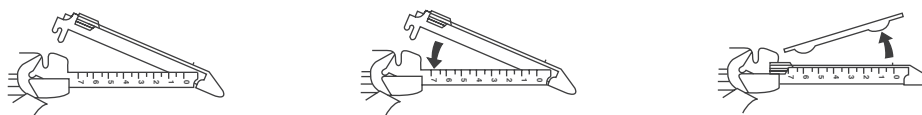
**CAUTION:** Prior to reloading the instrument, rinse the Anvil and Cartridge Jaw in sterile solution and then wipe the Anvil Fork and Cartridge Fork to clear any formed but unused staples from the instrument. Do not use the instrument until it has been visually inspected to confirm there are no staples on the Anvil and Cartridge Jaw.

5

Examine the new Reload for the presence of a Staple Retaining Cap. If the Staple Retaining Cap is not in place, discard the Reload.

**Note:** Selection of the appropriate staple Reload should be based upon the combined thickness of both the tissue and the staple line buttressing materials.

6



Insert the new Reload by placing the Alignment Tab into the Alignment Slot and pivoting the Reload into the Cartridge Fork. Snap the Reload into position. Remove the Staple Retaining Cap and discard.

**CAUTION:** After reloading, observe the surface of the new Reload. If the colored staple drivers are visible, replace with another Reload. The staple drivers are used to push the staples out of the pocket, through the tissue to be stapled and into the forming Anvil.

7

The instrument is now reloaded and ready for use.