

Needle Preparation and Operation for BF-UCP190F Quick Reference Guide (QRG)

Disclaimer: This sheet is for quick reference only. Please refer to the relevant User's Manual(s) for instructions, warnings and cautions. Nothing in this presentation is meant to supersede or replace the instructions for use applicable to each specific device, or the processes and procedures in place at your facility.

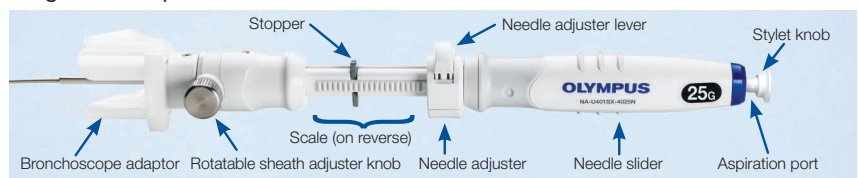
These maneuvers (Single Use Aspiration Needle adjustment technique for BF-UCP190F) will help ensure the needle sheath is outside the working channel of the bronchoscope to protect from scope damage.

Product Overview

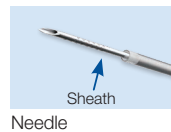
EVIS EUS ULTRASOUND
BRONCHOFIBERVIDEOSCOPE
OLYMPUS BF-UCP190F



Single Use Aspiration Needle NA-U401SX-4025N



ViziShot 2 25G aspiration needle



Single-use adaptor biopsy valve
This adaptor should be attached to the instrument channel port of the endoscope before the needle is inserted.

Procedure Steps

Preparation of the needle



Remove the red protective plate and make sure that the instrument has not become loosened and is free from other damage.



Ensure that the sheath adjuster slides and rotates smoothly. Then move the sheath adjuster as proximally (or retracted) as possible and tighten the knob.



Confirm that the needle slider is fully extended by pulling up until it clicks.



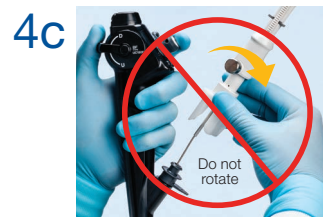
Ensure the needle adjuster is locked. Failure to do so may result in damage to the endoscope.



Ensure that the Up/Down angulation control lever is the neutral position and that the Olympus logo on the handle and the biopsy valve tab are outward facing for the entire insertion of the needle.



If the needle has been inserted in an incorrect orientation, **DO NOT** attempt to readjust the needle by rotating the bronchoscope adaptor (see step 4c).



Note: Instead, remove the needle and start over in the correct position (see steps above). If you just rotate the bronchoscope adaptor, you will run the risk of damaging the scope or the needle.



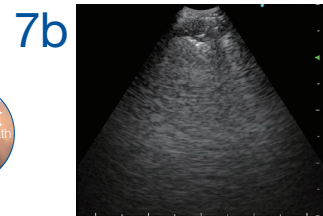
Secure the needle on the scope by pushing the bronchoscope adapter to the "lock position" until it clicks.
Tip: Pull needle handle up to confirm secure attachment.



Turn the sheath adjuster knob to release it.



Adjust the sheath so that it is visible in the endoscopic view. Tighten the knob.



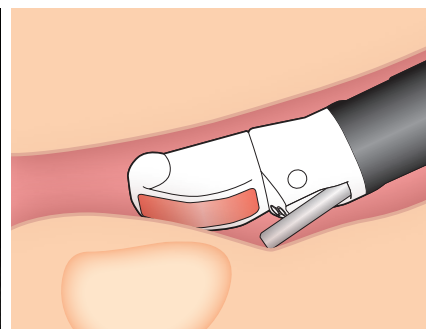
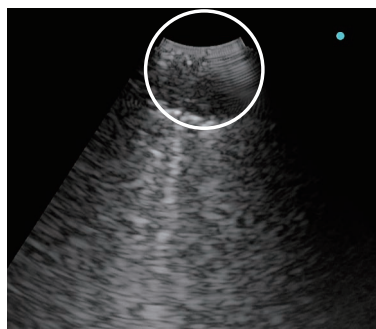
Locate the target area on the ultrasound image.

Procedure Steps (continued)

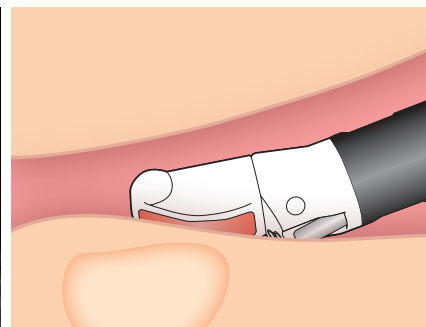
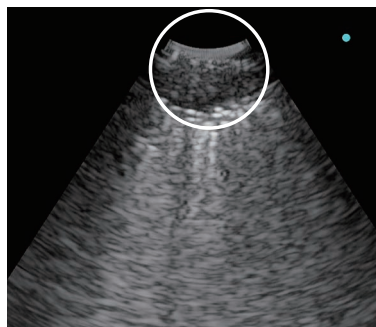
Confirming the position of the sheath *when the sheath cannot be seen on the endoscopic image

7c When the sheath cannot be seen on endoscopic image, confirm the position of the sheath on the ultrasound image. An artifact on the top side of the ultrasound image shows the position of the sheath.

The artifact could indicate that the needle sheath is pushing the transducer away from the bronchial wall, therefore losing the ultrasound image in that specific area.



After confirming the position of the sheath with an artifact on the ultrasound image, pull the sheath back slowly and adjust its position until the artifact disappears, and the ultrasound image is fully restored. Tighten the knob.

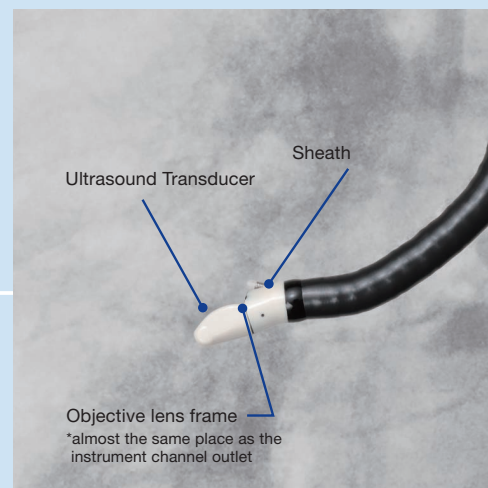
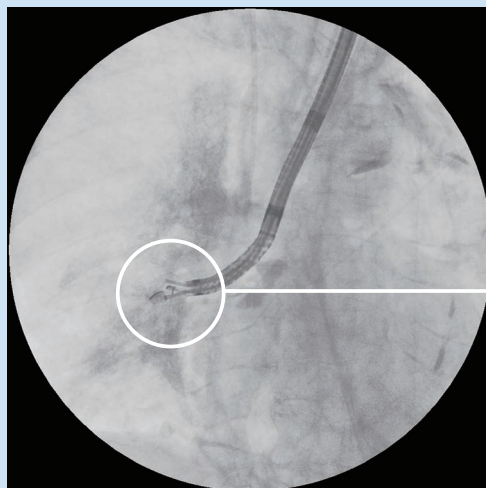


These figures show the position of the sheath and the distal end of the endoscope in each situation.

Optional

Using fluoroscopy to adjust the sheath position

This shows the position of the sheath and the distal end of the endoscope on fluoroscopic image. The actual distal end of the sheath cannot be seen on the fluoroscopic image. However, the distal end of the coil inside the sheath is visible, which aligns at the objective lens frame. This would allow approximately 1 mm of the sheath to protrude outside the instrument channel outlet. This ensures the sheath is safely outside of the instrument channel.



Procedure Steps (continued)

Piercing

8



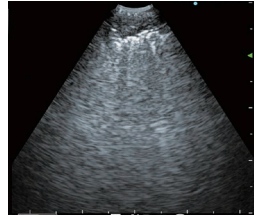
Press the needle adjuster to release it.

9



Advance the needle into the target.

10



Visualize needle entering the target lymph node.

11



Remove the stylet.

12



Attach the prepared syringe.

13



Apply suction by turning the stopcock to the parallel position.

14



Move the needle slider up and down several times while the needle is in the target area to obtain a sample.

15



Turn the stopcock to the horizontal position to release suction. Remove the syringe.

16



Pull the needle slider upwards until it clicks. This retracts the needle into the sheath.

Withdrawing the needle from the endoscope

17



Pull the needle adjuster upwards and slide to lock it into position.

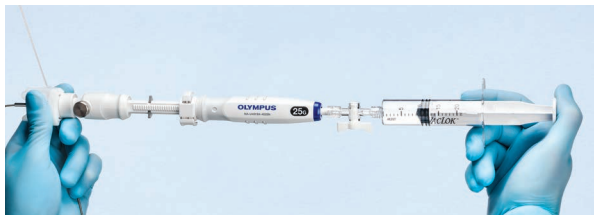
18



Place the scope in a neutral position. Unlock and remove the needle.

Extracting the specimen

19



Unlock the needle adjuster and push the needle slider to extend the needle's distal end. Then connect a 5 to 20cc air filled syringe to the aspiration port.

20



Gently push the syringe plunger to expel a small drop of specimen on the slide.

21



Dispense the remaining specimen into the cell block container. Repeat this step as needed until entire specimen is ejected.

