

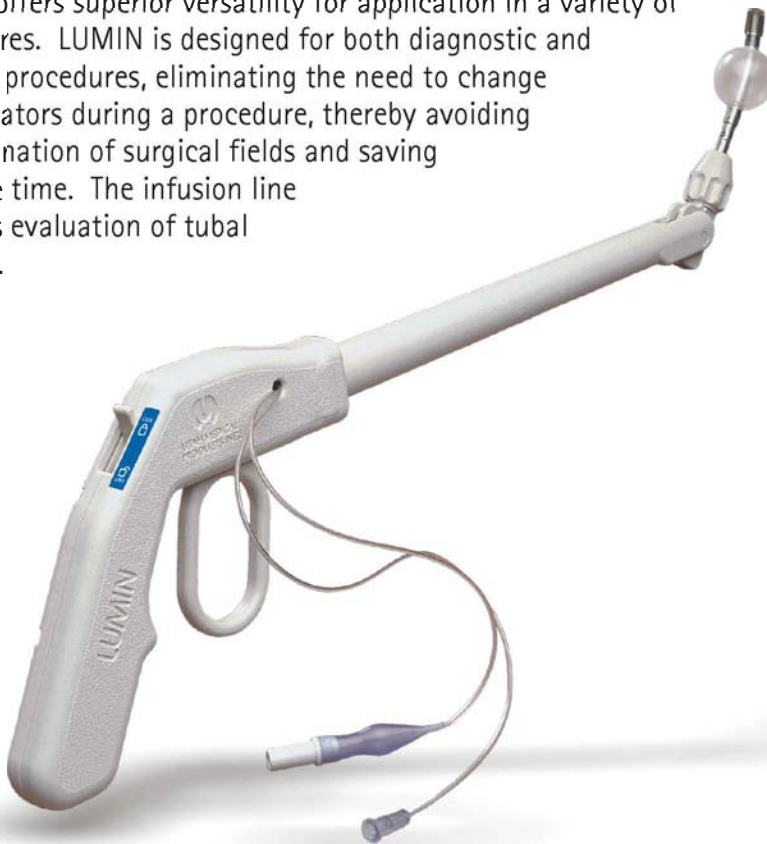
Natural 'trigger style' manipulator facilitates controlled, single-handed uterine positioning.

LUMIN™

Excellent Versatility in Uterine Manipulation

LUMIN™ (Laparoscopic Uterine Manipulator INjector) is a disposable, single-use, sterile device that has set a new standard for controlled uterine manipulation. The ergonomic and unique design of the trigger handle offers control through a wide range of manipulation angles. A positioning lock and intrauterine balloon allow the manipulator to secure uterine position, freeing the surgeon's hands during the procedure.

LUMIN offers superior versatility for application in a variety of procedures. LUMIN is designed for both diagnostic and surgical procedures, eliminating the need to change manipulators during a procedure, thereby avoiding contamination of surgical fields and saving valuable time. The infusion line provides evaluation of tubal patency.



- Cushioned 5.7mm tip reduces risk of uterine perforation without excessive cervical dilatation.
- Balloon secures uterine position without a tenaculum and prevents leakage of contrast media and fluids.
- Stainless steel cannula provides strength for confident control.
- Adjustable tip length accommodates correct uterine depth and orientation.
- Position lock securely maintains uterine position, freeing surgeon's hand during procedure.
- Trigger handle control offers easy, precise positioning.

Instructions Overview

Specifications

- Intrauterine Balloon
Maximum
Diameter/Volume
24mm/12cc
- Tip Length Range
6cm–8cm
- Tip Outer Diameter
5.7mm
- Range of Tip
Articulation
120 degrees



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1. Verify balloon patency and adjust uterine tip for appropriate uterine depth and orientation.
2. Insert the uterine manipulator, with the balloon deflated, into the cervix with the distal tip oriented in the direction of the curve of the uterine cavity (Figure 1). With the locking nut flush against the cervix, inflate the intrauterine balloon (note that the verification balloon is also inflated). The amount of air used for inflation should be determined by the clinical judgement of the operator with respect to the size of the uterus. Do not overinflate the intrauterine balloon. Underinflation should also be avoided because it reduces the degree of manipulation control and defeats the air cushion protection of the balloon. It may also allow spontaneous expulsion of the device through a large cervix.

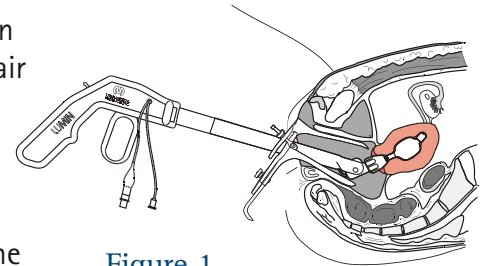


Figure 1

3. Remove vaginal speculum or retractors.
4. After positioning the laparoscope, manipulate the uterus into the appropriate position under direct visualization (Figures 2 & 3). The distal tip is manipulated by moving the trigger mechanism forward and backward. The distal tip can be locked into position by moving the locking lever to the 'lock' or up position. The tip can be unlocked by moving the lever to the 'open' or down position. **MANIPULATE THE UTERUS ONLY UNDER DIRECT VISUALIZATION.**

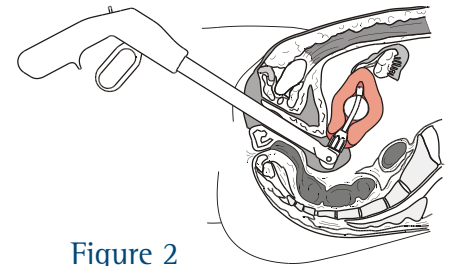


Figure 2

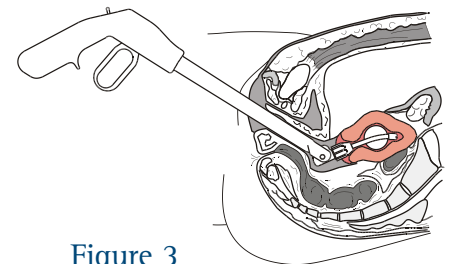


Figure 3

5. To inject fluid into the uterus, pull the manipulator back so that the intrauterine balloon is seated against the internal cervical os. Attach a syringe to the female luer connector and infuse the selected media. A stopcock and extension tube can be interposed, allowing the injection syringe to be brought under the operator's control. The media will pass through the injection lumen and will enter the uterine cavity through the distal tip. **DO NOT** exert any forward pressure on LUMIN at this point of the procedure because this may displace the internal cervical os and allow reflux to occur.

Review Instructions for Use prior to use of LUMIN.