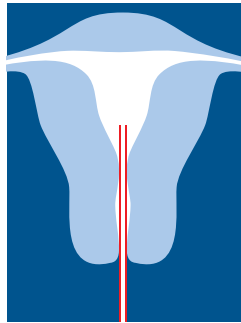


# Saline-enhanced Trans-Vaginal Ultrasound Examination

## “Saline Infusion Sonography” (SIS) or “Sonohysterography”

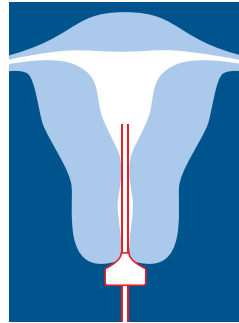
For evaluation of abnormal uterine bleeding and detection of suspected fibroids/polyps



### Single lumen cannula

Advantage: Low Price

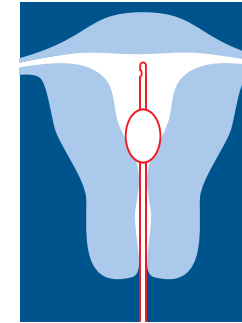
*Compromise: Lack of an occlusive mechanism limits or prevents adequate uterine distention*



### Single lumen cannula with external stopper

Advantage: Provides some occlusion vs cannula

*Compromise: External stopper may not provide reliable distention*



### Traditional balloon catheter

Advantage: Positive distention of uterus

*Compromise: Balloon obscures visualization of lower uterine segment*

#### Issue

No uterine distention – saline rapidly escapes from uterus

#### Issue

Very brief uterine distention due to moderate saline leakage

#### Issue

Very brief uterine distention due to moderate saline leakage

#### Issue

Stopper may dislodge and interfere with physician probe placement

#### Issue

Balloon causes visual obstruction in lower uterine segment

#### Clinical Impact

No differentiation of anterior and post-posterior endometrium – cannot differentiate between hyperplasia and intraluminal irregularities

#### Clinical Impact

Visualization may occur in suboptimal plane – physician cannot identify areas containing abnormalities

#### Clinical Impact

Visualization may occur in suboptimal plane – physician cannot identify areas containing abnormalities

#### Clinical Impact

Sudden loss of uterine distention

#### Clinical Impact

Unable to conclusively differentiate between balloon and lower segment pathology

Potentially missed diagnosis of lower segment focal uterine pathology such as fibroids, polyps, or tumors

#### Solution

- Occlusive mechanism within uterus or cervix to provide positive seal against saline leakage
- Physician is not rushed, and can focus on obtaining sufficient image in optimal planes for accurate diagnosis

#### Solution

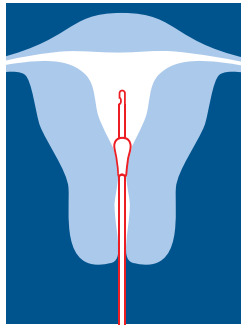
- Occlusive mechanism within uterus or cervix to provide positive seal against saline leakage
- Physician is not rushed, and can focus on obtaining sufficient image in optimal planes for accurate diagnosis

#### Solution

- Smaller balloon to minimize visual artifact
- Ability to place in cervix to eliminate 'pull-down' imaging while minimize patient discomfort

# TVUS/HSG-Cath™

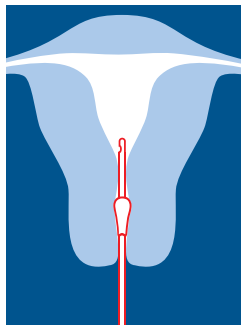
## An Optimized Catheter System for Ultrasonic Uterine Visualization



### TVUS/HSG-Cath Uterine Placement

- *Reduces visual artifact compared to large spherical or elliptical balloon*

- Small conical balloon lies lower in the uterus, reducing the possibility of masking lower segment pathology



### TVUS/HSG-Cath Cervical Placement

- *Allows imaging of the entire uterus without visual artifact*
- *Better tolerated during balloon inflation<sup>1</sup>*

- Conical balloon size is optimized for cervical placement, preventing discomfort from over-inflation of the balloon
- Cervical positioning uses less distention saline<sup>1</sup>

TVUS/HSG-Cath has been designed to offer clinical advantages for performing effective sonohysterography:

- depth markings ensure **accurate placement of the catheter**, and helps avoid fundal injury
- enhanced infusion cross section to provide **rapid contrast media infusion with less physical effort**
- a choice of catheter introducer methods – a pre-loaded stylet is ready for **immediate use when stenosis is present**, and a peel-away introducer **maintains catheter tactility during insertion** and can be removed prior to imaging



### MIS-50ST

TVUS/HSG-Cath with  
Integrated Stylet (5 Fr)

### MIS-50P

TVUS/HSG-Cath with  
Peel-Away Introducer (5 Fr)



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