

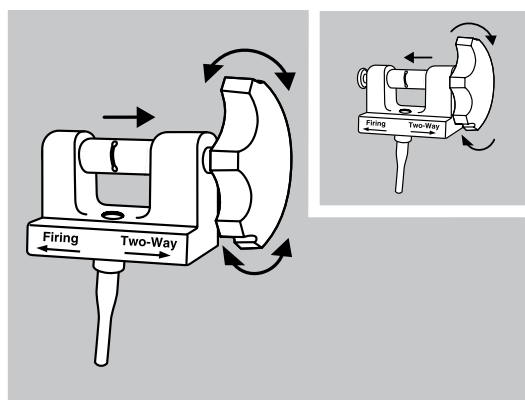
6 Shooter®

SAEED® MULTI-BAND LIGATOR

Scope Compatibility

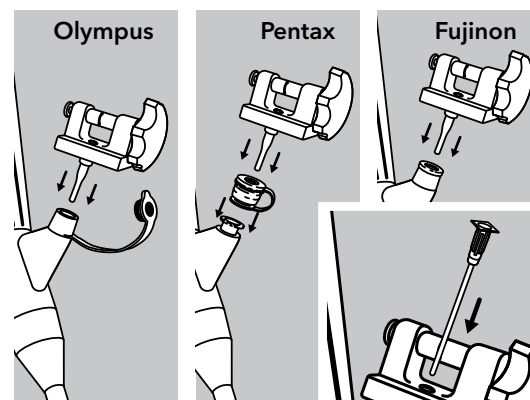
Reference Part Number	Endoscope Outer Diameter
MBL-U-4	8.6-11.3 mm
MBL-U-6	
MBL-U-6-F	
MBL-U-10	
MBL-6-OV	9.5-11.5 mm
MBL-10	
MBL-4	9.5-13 mm
MBL-6	
MBL-6-F	
MBL-6-XL	11-14 mm
MBL-6-XL-C	
MBL-6-XS	8.6-9.2 mm

System Prep, step 1



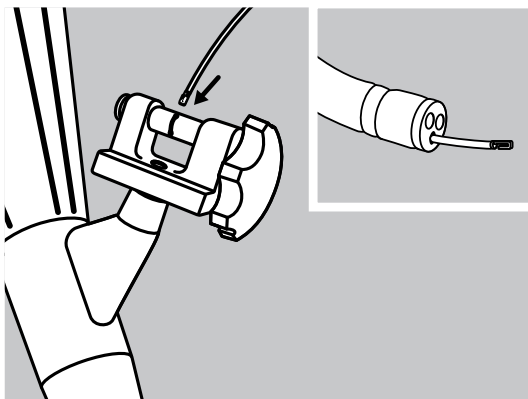
The **firing position** allows the handle to be rotated in the forward direction only. The **two-way position** allows the handle to rotate in both directions.

System Prep, step 2



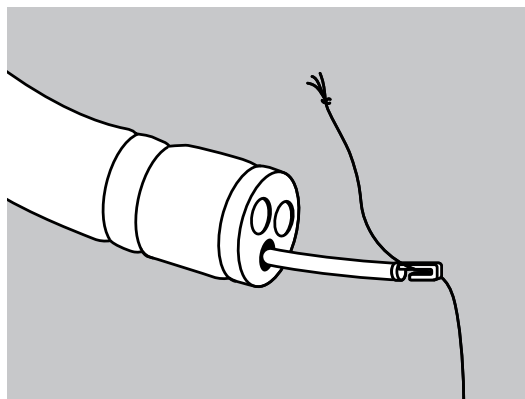
Insert the ligator handle into the endoscope accessory channel.
Note: The irrigation adapter may be used to puncture the white self-sealing valve prior to introducing the loading catheter.

System Prep, step 3



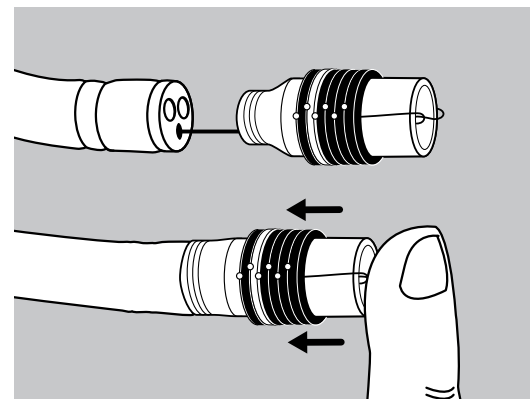
Introduce either end of the loading catheter through the white seal in the ligator handle and advance in short increment until it exits the tip of the endoscope.

System Prep, step 4



Attach the trigger cord, leaving approximately 2 cm of cord between the knot and the hook. Withdraw the loading catheter and trigger cord up through the endoscope and out through the ligator handle.

System Prep, step 5



Secure the friction fit adapter of the barrel to the tip of the endoscope and advance the barrel as far as possible.
Note: Failure to do so may result in barrel dislodgement. Avoid bands while pushing. When placing the barrel onto the distal end of the endoscope, ensure that the trigger cord does not become pinched between the barrel and endoscope.

Scope Compatibility Scale

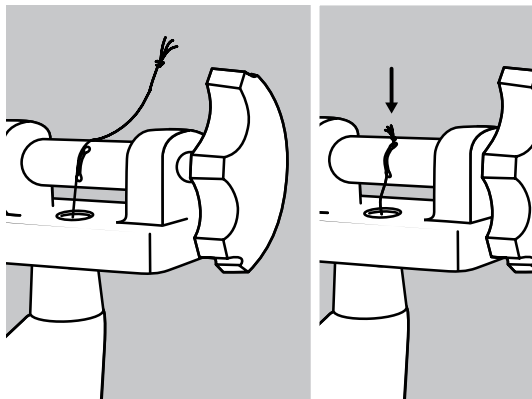
Note: Sizes may not be accurate when viewing on some digital devices.

Use the scope compatibility table above and scale below to determine which 4, 6, 10 Shooter offering fits your scope.

Note: If your endoscope does not fit into one of the specific diameters below, do not use it with the 4, 6, 10 Shooter.

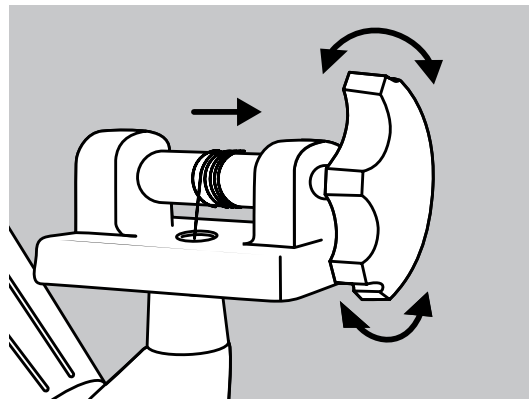


System Prep, step 6



With the endoscope straight, place the trigger cord into the slot on the spool of the ligator handle and pull down until the knot is seated in the hole of the slot. The knot **must** be seated into the hole for the handle to function properly.

System Prep, step 7



With the handle in the **two-way position**, slowly rotate the handle clockwise to wind the trigger cord onto the handle spool until it is taut.

Note: Care must be exercised to avoid deploying a band while winding the trigger cord.

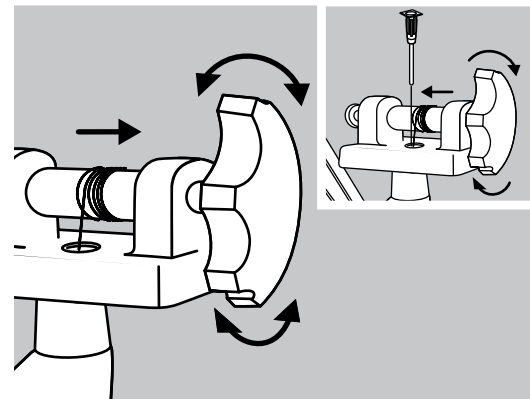
Check endoscopic view. To maximize visualization, position of trigger cord may be altered by rotating barrel.

Note: Endoscopic view broadens after each band deployment. Lubricate endoscope and exterior portion of barrel.

Caution: Do not place lubricant inside barrel.

Caution: Do not apply alcohol to device.

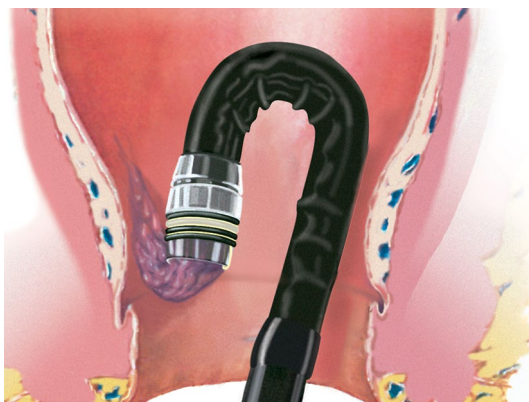
Ligation of esophageal varices



With the handle in the **two-way position**, introduce the endoscope. **After intubation**, place the handle in the **firing position**. Visualize the selected varix and aspirate into the Opti-Vu® barrel. **Caution:** Prior to band deployment, ensure endoscopist's hand is positioned on handle of device rather than endoscope controls. Maintain suction, deploy the band by rotating the ligator handle clockwise until band release is **felt**.

Note: If band will not deploy, place handle in two-way position and loosen trigger cord slightly. Place handle in firing position and continue with procedure. If irrigation is necessary, insert the irrigation adapter into the white seal of the handle.

Ligation of internal hemorrhoids



With the Multi-Band Ligator handle in the **two-way position**, introduce the endoscope into the rectum. Retroflex the endoscope to visualize the selected internal hemorrhoid. **After** retroflexion, place the handle in the firing position. Aspirate the internal hemorrhoid into the Opti-Vu barrel. Prior to band deployment, ensure endoscopist's hand is positioned

on handle of device rather than endoscope controls. **Caution:** Ligation should only be performed on internal hemorrhoids located above the dentate line. Maintain suction on the internal hemorrhoid and deploy the band by rotating the ligator handle clockwise until band release is **felt**, indicating deployment.

Note: If band will not deploy, place handle in two-way position and loosen trigger cord slightly. Place handle in firing position and continue with procedure. Release the suction button of the endoscope, insufflate air, then advance the endoscope slightly to release the ligated hemorrhoid.

Note: An irrigation adapter is provided with each device. If irrigation of accessory channel is desired to clear viewing field, attach adapter to a syringe filled with sterile water and insert into white seal of handle. Irrigate as necessary. Repeat the ligation process as needed.

Refer to the current Instructions for Use for detailed information regarding use, contraindications, associated risks, etc.

Please see product risk information in the IFU at cookmedical.eu

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14 mm



13 mm



11.5 mm



11.3 mm



11 mm



9.5 mm



9.2 mm



8.6 mm