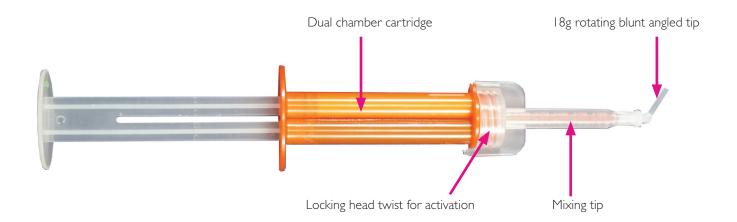


Gen II Anal Sac Excision Kit - Instructions for Use

Anal sac conditions such as impaction or abscess formation are a common, often reoccuring problem in small animal medicine. The surgical excision of both anal sacs can be elected as a permanent solution to these reocurring issues.

This excision can be a surgical challenge because of the collapsed nature of empty anal sacs, the risk of anal sphincter compromise, and the lack of discernable anatomical landmarks in a vascular surgical field.

The Gen II product uses a safe and nontoxic polymer gel that is infused as soft gel into the empty anal sac. The gel solidifies after 2-4 minutes in the anal sac. This provides an easily discernible mass that can be dissected out fairly readily. This reduces surgery time and the risk of leaving anal sac remnants.



Kit is a single complete unit:

- 18g plastic blunt angled needle for easy insertion in to anal sac opening /duct
- Dual chambered cartridge of polymer with mixing tip. Gel solidifies 2-4 minutes upon application
- Capacity of 2.4cc is sufficient for larger patients
- Superb ergonomic design for small hands
- Simple turn and click of syringe hub opens gel pathway
- No heating required

Product Code





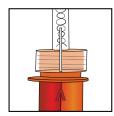


Directions

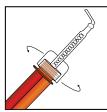
- Position anesthetised patient in sternal recumbency, hang limbs over back of surgery table and tie in
 place. Place rolled towel under legs and caudal abdomen for patient comfort and to extend legs out. Tilt
 back of surgery table upwards. Surgeon can sit on stool.
- Clip hair around anus and anal sac openings.
- Empty anal sacs completely.
- Prep surgery site.



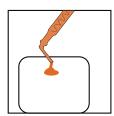
1. Before surgery, activate the polymer pathway using the control located below the mixing tip.



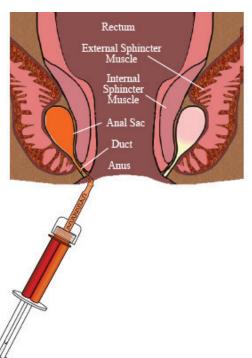
2. Hold the syringe firmly in one hand so that the longer tab faces you.



3. Twist the winged tabs clockwise until you feel a 'click'. The syringe is now able to extrude material.



4. Bleed the tip before going into the anal sac.



Turn the mixing tip to convenient angle. Place blunt needle tip gently into opening of anal sac. The needle should be inserted about half of its length. Gently and slowly infuse the polymer until anal sac is full and readilly discernable. The gel will solidify in 3-4 minutes. Grab the outside of the anal sac duct with thumb forceps such as a Brown Adson. Use a #15 scalpel blade and start slow disection of anal sac, using care to stay below the external sphincter. The distended anal sac is felt below, gentle traction of thumb forceps will lift the sac slowly in to view. Continue dissection of the surrounding tissue and the intact anal sac should readily and completely be able to be removed.

Closure with 2-3 sutures of fine absorbable suture.

Do not use on currently abscesed anal sac.