

STAMMBERGER Bipolar Suction Forceps



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Problem to date

Until now, when performing endonasal hemostasis in the paranasal sinus region and base of the skull, finding a suitable instrument to reach the source of bleeding has been a problem. Such an instrument should be able to perform bipolar coagulation and suction simultaneously; the distance of the cautery pole should be variable thus allowing both spot and surface coagulation. In order to ensure complete insulation up to the tip, one of the poles must be able to be moved.

A vascular stump, for example, must also be able to be grasped with the tips, thus providing excellent vision of the planned point of coagulation at all times. By rotating around the longitudinal axis of the instrument, the largest possible radius of action should be ensured in the confined anatomical conditions of the paranasal sinuses and base of the skull.

The risks associated with monopolar coagulation in the base of the skull and in the vicinity of delicate structures (optic nerve) should be avoided, and the area of coagulation optimally displayed thanks to a function which

allows the surgeon to continuously control the suction strength. Last but not least, such an instrument should be similar to the instruments commonly used for surgery of the paranasal sinuses and base of the skull, i.e. it should be streamlined and easy to handle, so that the user feels familiar with the design right from the word go.

Until now, such an instrument has not been available, the nearest to such a design has been bipolar instruments without a suction function, or (bayonet) dressing forceps which could not be precisely manipulated when inserted into the depths of the nose.

Solution:

When designing the STAMMBERGER suction forceps, the emphasis was placed on creating an instrument which would take the above-mentioned points into account and which would also meet the needs of endonasal surgery. The result of this extensive development work is presented here. In addition to its main purpose of hemostasis, this instrument has also proven invaluable for a whole host of other indications.

Special features:

- Design similar to standard paranasal sinus grasping forceps
 - Integrated suction channel
 - Suction strength can be individually set
 - Bipolar coagulation
 - Completely insulated with the exception of small coagulation surfaces at the tip of the instrument
 - Single action jaws
 - Consequently, the distance of the cautery pole can be varied. Spot or surface coagulation
 - Special design of the single action jaws provides endoscopic/microscopic vision of the point of coagulation
 - Two head shapes: 15 degrees and 45 degrees to the instrument shaft
 - The streamline design makes it easy for the cautery to access previously hard-to-reach regions
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An innovative addition to the paranasal sinus instrument set



The STAMMBERGER Bipolar Suction Forceps have been designed **exclusively for suction and coagulation!** They are not suitable for grasping and removing tissue and bone!

Applications/Fields of Use:

- Hemostasis in the endonasal region (ethmoidal artery, sphenopalatine artery, maxillary nerve, muscle and septum vessels etc.)
- Operation on the base of the skull
- Oozing hemorrhage from the edges of the mucosa
- Pituitary gland surgery
- Vascular processes, e.g. Nasopharynx fibroma
- Epistaxis
- Rendu-Osler-Weber syndrome
- Post interventional bleeding, e.g. following adenotomies, from the nasopharynx
- Edema prevention
- Shrinkage of mucosa (e.g. posterior turbinate tip)
- Turbinate cautery
- Etc.



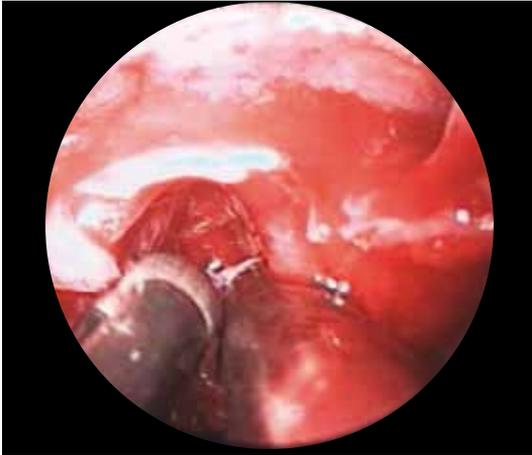


Fig. 1: Opened in front of vascular stump

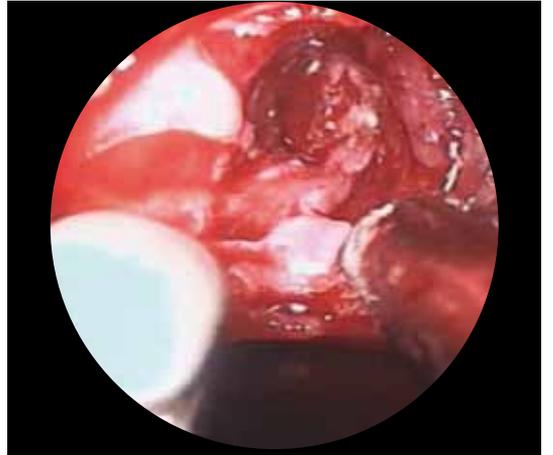


Fig. 4: Opened vessel is already closed



Fig. 2: Closed on vascular stump, distended

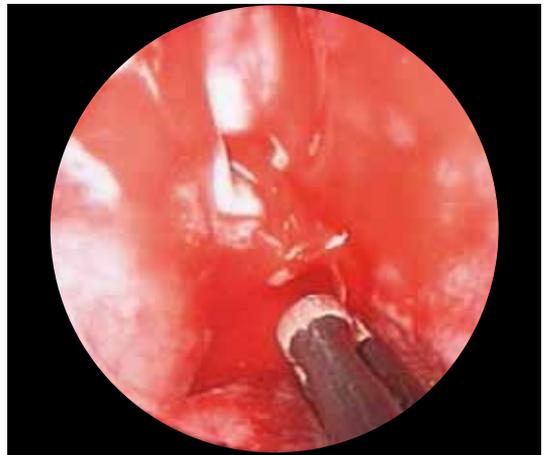


Fig. 5: Hemorrhage > vessel is not visible

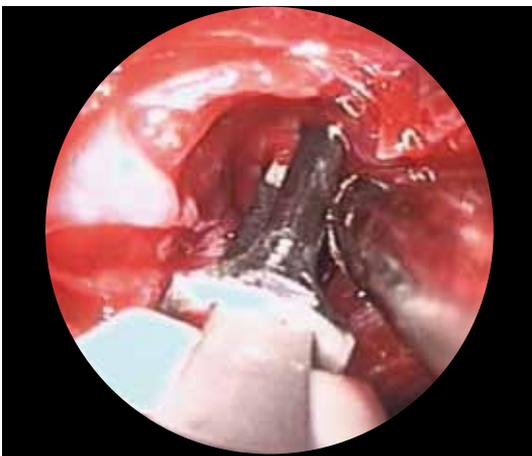


Fig. 3: Cautery in action

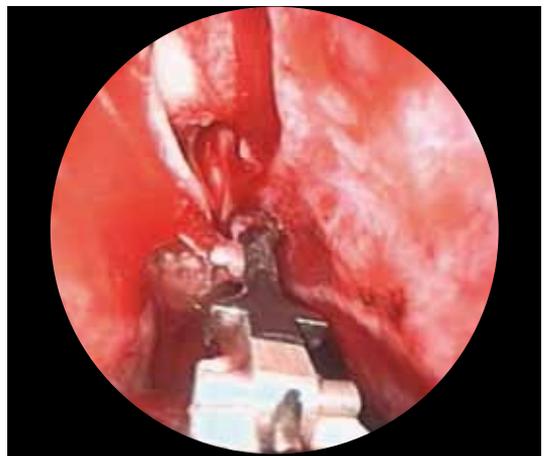


Fig. 6: Overview following intervention

STAMMBERGER Bipolar Suction Forceps



461010 STAMMBERGER **Bipolar Suction Forceps**, 15° upturned, with suction channel, for bipolar coagulation in paranasal areas, working length 12.5 cm, for use with bipolar high frequency cable 847002 E or 847002 A/M/V



461015 STAMMBERGER **Bipolar Suction Forceps**, 45° upturned, with suction channel, for bipolar coagulation in paranasal areas, working length 12.5 cm, for use with bipolar high frequency cable 847002 E or 847002 A/M/V

Accessories

High frequency cable for use with STAMMBERGER Bipolar Suction Forceps

Bipolar High Frequency Cable

KARL STORZ
Instrument

High Frequency
Surgery Units



847002 E

Bipolar High Frequency Cable, for **KARL STORZ** coagulator 26021 B/C/D, 860021 B/C/D, 27810 B/C/D, 28810 B/C/D, **KARL STORZ** AUTOCON®II range types B 50/200/400 and Erbe coagulator T and ICC series, with two 2 mm cable sockets for **KARL STORZ** bipolar coagulating forceps 461010, 461015 and 845825, length 450 cm



847002 M

Bipolar High Frequency Cable, for **KARL STORZ** AUTOCON®II range type A 50/200/400, Martin, Berchtold, Aesculap coagulator (latest model), with two 2 mm cable sockets for **KARL STORZ** bipolar coagulating forceps 461010, 461015 and 845825, length 450 cm



847002 A

Bipolar High Frequency Cable, for **KARL STORZ** AUTOCON®II range type C 50/200/400, **KARL STORZ** coagulator 26020 XA/XB, Bircher, Bovie, Keymed, Mallis, Valleylab, Neomed and Bard coagulator, with two 2 mm cable sockets for **KARL STORZ** bipolar coagulating forceps 461010, 461015 and 845825, length 450 cm



847002 V

Bipolar High Frequency Cable, for **KARL STORZ** AUTOCON®II range type C 50/200/400, Valleylab and Bovie coagulator, with two 2 mm cable sockets for **KARL STORZ** bipolar coagulating forceps 461010, 461015 and 845825, length 450 cm



847002U

Bipolar High Frequency Cable, with two 2 mm cable sockets for **KARL STORZ** bipolar coagulating forceps 461010, 461015 and 845825 and standard pin for connection to all current bipolar cables, length 40 cm

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