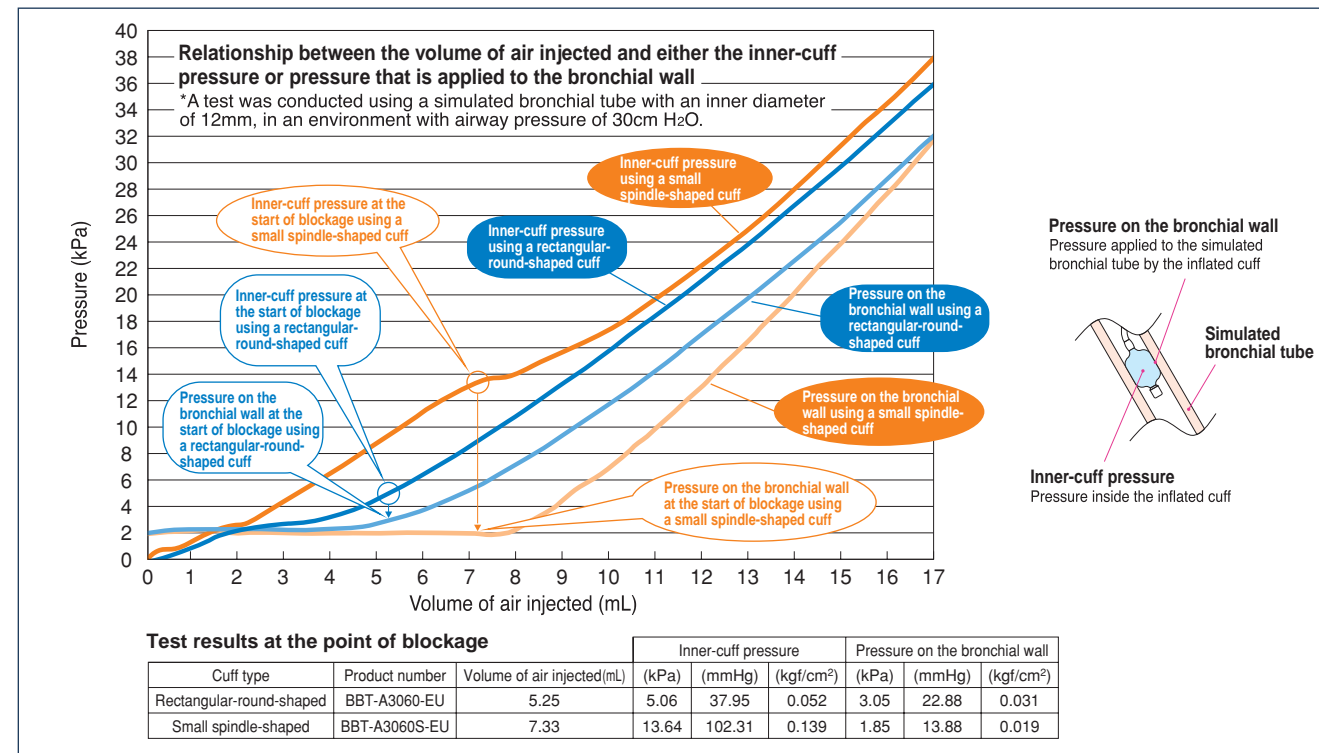


COOPDECH® Endobronchial Blocker Tube ● Product composition

Type	Product number	Bronchial blocker tube	Auto-inflator	Joint connector	Cuff	Number of items included
Type A	BBT-A3060-EU	Outer diameter 3.0mm/ Length 600mm	—	○	Rectangular round-shaped	1set
Type B	BBT-B3060-EU	Outer diameter 3.0mm/ Length 600mm	○	○	Rectangular round-shaped	1set
Type A	BBT-A3060S-EU	Outer diameter 3.0mm/ Length 600mm	—	○	Small spindle-shaped	1set
Type B	BBT-B3060S-EU	Outer diameter 3.0mm/ Length 600mm	○	○	Small spindle-shaped	1set

1set/box Sterilized

● Please note that specifications and outward appearance may change without notice for improvement purposes.



(How to use the system)

Be sure to read the product's instruction for use carefully, and gain a thorough understanding of the product before using it.

Type A products (without automatic inflator)

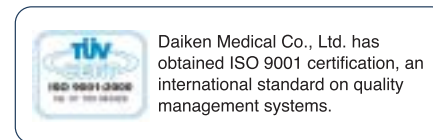
1. Make sure before use that no abnormalities are seen in either the package or the product.
2. Remove all the air from inside the cuff, and apply lubricants over the entire surface of the cuff.
3. Keep the cuff inside the joint connector, and connect the joint connector to joints such as the intubated bronchial tubes.
4. Connect the anesthesia line to the joint connector.
5. Using a bronchial fiberscope, guide the bronchial blocker tube's cuff to the target bronchium.
6. Confirm the position of the cuff, and anchor the bronchial blocker tube in the tube fixation part.
7. Use a syringe from one side of the valve to inflate the cuff and block the main bronchus.
8. Auscultate the lungs carefully and confirm that the bronchial blocker tube is working properly.

Type B products (with automatic inflator)

1. Make sure before use that no abnormalities are seen in either the package or the product.
2. Remove all the air from inside the cuff, and apply lubricants over the entire surface of the cuff.
3. Use a syringe to inject air into the inflator balloon.
4. Keep the cuff inside the joint connector, and connect the joint connector to joints such as the intubated bronchial tubes.
5. Connect the anesthesia line to the joint connector.
6. Using a bronchial fiberscope, guide the bronchial blocker tube's cuff to the target bronchium.
7. Confirm the position of the cuff, and anchor the bronchial blocker tube in the tube fixation part.
8. Activate the auto-inflator and block the main bronchium.
9. Auscultate the lungs carefully and confirm that the bronchial blocker tube is working properly.

(Cautions)

1. This product is a sterilized disposable item. It cannot be reused.
2. When storing the product, avoid exposing it to water, dust, high temperatures and humidity, and direct sunlight.
3. Do not use products whose package is broken, or those that are suspected of being contaminated.
4. Use the product immediately after opening the packaging.
5. Do not subject the product to any unusual treatment, such as pulling it forcibly or poking holes in it, etc.
6. The product should be used only by highly skilled operators.
7. Read the package insert and handling manual before using the product.



Pioneering the future of medical society
DAIKEN MEDICAL CO., LTD.

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COOPDECH's product information is available at the corporate website.
<http://www.daiken-iki.co.jp/>

[Agency]

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Contents of this catalog are as of November 2005.

COOPDECH® Endobronchial Blocker Tube

- COOPDECH Blocker Tube allows one-lung ventilation using a conventional endotracheal tube and a fiberoptic bronchoscope.
- Upon completion of one-lung ventilation, there is no need to replace trachea tubes. Deflate the balloon and remove COOPDECH Blocker Tube.
- Our Endobronchial Blocker Tube can be used in conjunction with tubes intubated orotracheally, nasotracheally or by tracheotomy.
- The unique automatic inflation system enables the operator to inflate the cuff with one hand and operate bronchi fiberscope simultaneously.
- COOPDECH Joint Connector permits simultaneous sealed introduction of a bronchoscope and blocker while maintaining ventilation.
- Since the product is used in combination with a single-lumen tube and is used for blockage of the left or right lung procedure, there is no need to stock different sizes.
- This may be connected to various types of tracheal tubes that include spiral types, as well as tracheotomy tubes and laryngeal masks.

COOPDECH



Patent pending

All products are designed and manufactured by
 DAIKEN MEDICAL CO., LTD.

Made in Japan

CE 0197

Auto Inflate Button

It is used when introducing air that had accumulated inside the inflate balloon, into the cuff. It features a one-touch structure: The valves open up by pressing the blue button and close by letting go off the hand from the button.

* These valves are equipped with Type B products (with automatic inflator)

Auto Inflator Balloon

By injecting air into the inflator balloon in advance, users can inflate the cuffs with one hand while operating a bronchoscope.

* These valves are equipped with Type B products (with automatic inflator)

Bronchoscopy Port

This is the port through which a fiberscope is inserted. The shape optimizes the angle between the fiberscope and the bronchial blocker tube for outstanding maneuverability. The port is also equipped with a packing material with a lid for use with fiber ha bronchoscopy. This ensures airtight operations regardless of whether a fiberscope has been inserted or not.

Pilot Balloon

By checking the degree of inflation of the pilot balloon, users can monitor the degree of inflation of the cuff at their fingertips.

Blocker Port

Since the bronchial blocker tube is inserted perpendicularly to the joint connector, angled tip and the cuff can be rotated to change its direction with ease. A packing material is also embedded perpendicularly, blocker tubes can be moved up and down while maintaining airtight conditions.

Blocker Tube Clamp

This anchors the bronchial blocker tube to the joint connector and minimizes the displacement of the tube during operation.

Ventilation Connector

Connected to either the anesthesia or the respiratory circuit. size(Outside Diameter 15mm/ISO5356-1 standard)

Suction Port

Administration of oxygen to collapsed lungs, deaeration, and suction of secreted materials.

Cuff

Low-pressure barrel shaped balloon creates large cuff surface contact with the inner bronchial wall, minimizing potential trauma to the bronchus.

Endotracheal Tube Connector

Connected to various types of tracheal tubes that include spiral types, as well as tracheotomy tubes and laryngeal masks. size(OutsideDiameter 15mm/ISO5356-1 standard)

COOPDECH Endobronchial Blocker Tube brings simplicity to endobronchial blockade of the right or left lung for procedures requiring low invasive one-lung ventilation. Its required usage of single-lumen endotracheal tube eliminates potential loss of the airway, commonly posed during the extubation-re-intubation of a double-lumen tube. Low-pressure, high-volume balloon creates excellent cuff surface contact with the inner bronchial wall, minimizing potential trauma to the bronchus.

COOPDECH Endobronchial Blocker Tube

COOPDECH Endobronchial Blocker Tubes are designed to achieve single-lung ventilation, and are used in combination with various other tubes inserted to secure the airways. The clinician can easily move the blocker from one lung to another. Manually torque the device on the shaft for precise placement into the desired airway. The angled Tip lets you easily choose sides for single-lung ventilation and provides a wide range of adjustment to precisely direct the blocker. Administration of oxygen to the collapsed lung, de-aeration, and aspiration of secreted materials can be done via the suction port.



Joint Connector

COOPDECH blocker does not require re-intubation at the conclusion of surgery as with a double-lumen endotracheal tube. The joint connector can be used by connecting a bronchial blocker tube to various endotracheal tubes and anesthetic circuits. The Blocker is placed coaxially through a conventional endotracheal tube using a bronchoscope.



Cuff

Low-pressure barrel shaped balloon creates large cuff surface contact with the inner bronchial wall, minimizing potential trauma to the bronchus.

A soft light blue colored silicone cuff features a small outer diameter while deflated, preserving maximum airway volume for enhanced patient ventilation during thoracic procedures.

Two types are available: rectangular round-shaped cuffs aimed at minimizing invasion, and small spindle-shaped cuffs that reduced airway resistance during cuff deaeration and realized even more enhanced visibility.

<Rectangular round-shaped cuffs>



<Small spindle-shaped cuffs>



Auto Inflator

The auto-inflator (type B) can be operated with one hand if the balloon is inflated with air beforehand. Since the cuff can be inflated with a click of a button, operators can maneuver it by themselves without any help, while working on the bronchial fibers. Since the air is not injected directly via a syringe, damage to the bronchial tissues caused by high pressure and excessive injections can be minimized.

