



Caliburn™ Trocar Cannula System Work with the Sharpest Instruments



«The lancet-pointed needle from Oertli had remarkable low piercing and cutting forces.» Independent study*

Features and Benefits

- Superb post-operative wound tightness
- New surface finish for even smoother incisions
- Less resistance on trocar edge-entry
- Patented snap-on lock infusion line for more flexibility
- Incision template for exact trocar placement
- Patented integrated, double-slotted sealing membrane
- Easy finding and entry with instruments
- Reliably constant IOP during surgery
- Reliable retention of the trocar
- Color coded for each gauge size (23G, 25G)

Article		Description
		All articles are delivered sterile, single use, box of 10
23G	VV123311	Caliburn™ 23G cannula system one step, autoseal
23G	VV123110	Cannula system 23G two step, autoseal
25G	VV125311	Caliburn™ 25G cannula system one step, autoseal
25G	VV125310	Cannula system 25G two step, autoseal
Options		
23G	VV123211	Infusion line 6 mm for cannula system, autoseal, 23G
23G	VV123212	Infusion trocar with infusion line and mandrel for cannula system, 23G

The independent study proves that the lancet-pointed needle from the Caliburn™ cannula system has remarkable low piercing and cutting force:

- 11 types of commercially available ophthalmic 23G trocar systems investigated
- Analysis of different designs and geometries
- Penetration force measurement

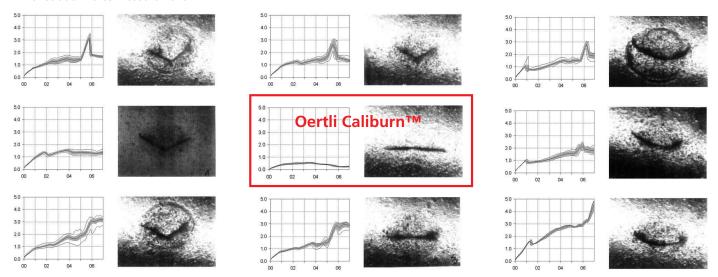
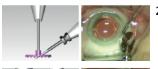


Fig 3 Twenty-three-gauge trocar systems with penetration force diagrams and cut images. The left row shows three back bevel trocar systems from Geuder, Alcon, and Fritz Ruck. The middle row shows the back bevel from Oertli, the lancet bevel from Oertli, and spear bevel from Alcon. The right row shows three spatula bevels from Eyetech, DORC, and Bausch and Lomb.

Application



1. Pull the conjunctiva slightly sideways over the sclera with the Oertli® incision template.



2. Insert the trocar in the sclera through the incision opening by holding cannula blade at an angle of maximum 30°.



3. After inserting the blade, lift the blade vertically and gently penetrate the sclera with the instrument.



4. Insert the trocar completely until its head touches the sclera. The shaft is now fully inserted.



5. Connect the infusion line with the patent-registered snap mechanism to the trocar.

Insert the remaining trocars in the sclera using the above mentioned procedure (steps 1 to 4).

^{*}Source: Geometry, penetration force, and cutting profile of different 23-gauge trocars systems for pars plana vitrectomy, C.H. Meyer MD, H. Kaymak MD, published in the November 2014 issue of the Retina Journal (Volume: 34:2290–2299, 2014).