

FIAPCR

Plug and operate in interventional endoscopy

Argon plasma coagulation is an endoscopic procedure to coagulate bleeding sites and ablate tissue anomalies. For the use of APC in GIT and TBS, we recommend the FiAPC® probe — the probe with the integrated membrane

filter. FiAPC® probes are available in various versions (varying lengths and diameters) with axial, lateral and circumferencial openings for the plasma beam.

ADVANTAGES OF APC IN GASTROENTEROLOGY OR PULMONOLOGY

- Effective and rapid coagulation, even of larger areas
- Limited penetration depth, may therefore also be used in areas where there is a risk of perforation
- ☑ Minimal carbonization
- Minimal risk of perforation
- Minimal smoke generation provides improved visibility of the work area and minimizes exposure to unpleasant odors
- Non-contact procedure, therefore no adhesion of the probe to the tissue
- Minimal risk of damage to metal stents



Flexible and versatile in their application

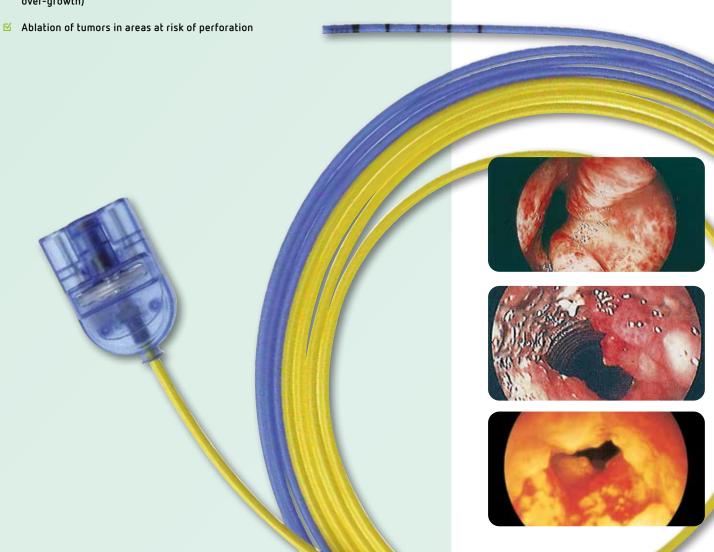
APC probes have varying outlet nozzles — lateral, axial or circumferencial — for precise selective or surface APC coagulation depending on the target tissue.

Examples include surface coagulation for watermelon stomach or ablation of tumor tissue after stent ingrowth in the esophagus.



POTENTIAL INDICATIONS IN GASTROENTEROLOGY AND PULMONOLOGY

- Hemostasis of bleeding due to various causes, e.g. tumor bleeding, bleeding after bougienage or dilatation
- ▼ Tissue ablation in partially stenosing tumors
- Tissue ablation in ingrowing tumors or of granulation tissue after stent placement (ingrowth and over-growth)



Advantages of FiAPC® probes

The connection cable and filter of the FiAPC® probe are completely integrated in the probe ("all in one"). FiAPC® single-use probes can be immediately used in the OR. There is no need to prepare the connecting cable — which means no preparation costs for the cable. This represents a significantly lower price per APC application compared to conventional single-use APC probes. "Plug and operate" doesn't get much easier and cheaper than that.

Protection against contamination



A membrane filter prevents possible contamination of the APC device through the reflux of blood or secretions. The filter and the connecting cable are firmly integrated in the APC probe. This all-in-one solution makes handling the probe in the OR much easier. Plug and operate is supported by instrument detection.

THE ADVANTAGES AT A GLANCE:

- ☑ No preparation of the probe or cable required
- ☑ Therefore lower costs per APC application
- No replacement of the membrane filter required
- ☑ Plug and operate
- ☑ No contamination of the unit

Technical data of FiAPC® probes*

Beam forms

Axial beam



Side Fire Conical Beam



Circumferential Beam



Probes with Ø 1.5 mm

FiAPC® probe 1500 A, single-use Ø 1.5 mm/length 1.5 m **No. 20132-220**

FiAPC® probe 3000 A, single-use for double balloon enteroscopy Ø 1.5 mm/length 3 m No. 20132-226

Probes with Ø 2.3 mm

FiAPC® probe 2200 A, single-use Ø 2.3 mm/length 2.2 m **No. 20132-221**

FiAPC® probe 2200 SC, single-use Ø 2.3 mm/length 2.2 m **No. 20132-224**

FiAPC $^{\circ}$ probe 3000 A, single-use Ø 2.3 mm/length 3 m No. 20132-223

FiAPC® probe 2200 C (circular), single-use Ø 2.3 mm/length 2.2 m No. 20132-225

Probes with Ø 3.2 mm

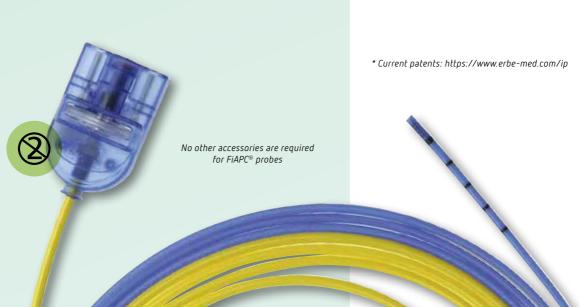
FiAPC® probe 2200 A, single-use Ø 3.2 mm/length 2.2 m **No. 20132-222**





FiAPC® probe 2200, circumferencial*

The circumferencial APC probe was designed to allow a radial application angle of 360° for optimal intraluminal application.



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