This device is not made with natural rubber latex.

Intended Use:
The disposable Semi-Rigid Bladder Net device is designed to provide atraumatic extraction of foreign bodies or tumors. The Semi-Rigid Bladder Net device is intended to be used through a rigid endoscope with a 3.6mm or larger working channel.

<table>
<thead>
<tr>
<th>Description</th>
<th>Product Number</th>
<th>Sheath Diameter</th>
<th>French Size</th>
<th>Sheath Length</th>
</tr>
</thead>
<tbody>
<tr>
<td>Semi-Rigid Bladder Net</td>
<td>00913602</td>
<td>3.2mm</td>
<td>9.6 Fr</td>
<td>50 cm</td>
</tr>
</tbody>
</table>

Warnings and Precautions:
- The endoscopic retrieval of foreign bodies, foreign body or tumors should only be performed by persons having adequate training and familiarity with endoscopic retrieval techniques. Consult the medical literature relative to techniques, contraindications, complications and hazards prior to any endoscopic procedure. If reference information for endoscopic technique or contraindications is needed call US Urology.
- Do not use this device if there is any apparent shipping or handling damage.
- Avoid blindly passing the Retrieval Net device past any foreign body, particularly if the entire lumen is blocked.
- Care should be exercised when grasping the targeted foreign body or tumor to be retrieved to avoid inadvertently grasping tissue or organs not intended for retrieval.
- Keep gentle traction on the device during retrieval so that the retrieved foreign body or tumor does not become loosened or dislodged.
- After extraction, if retrieved material does not exit the net upon net deployment, the material should be removed from the net by rinsing the net in a basin of water; do not “pick” retrieved material from the net with a finger as this may damage the net.
- The Retrieval Net device is not recommended for the retrieval of sharp foreign bodies.
- The following condition may not allow the Retrieval Net device to function properly: Advancing the handle to the open position with too much speed or force. Short strokes, 1” – 1.5” (2.5cm – 3.8cm) in length, are recommended throughout device passage to avoid sheath kinking.
- US Urology did not design this device to be reprocessed or reused, and therefore cannot verify that reprocessing can clean and/or sterilize or maintain the structural integrity of the device to ensure patient and/or user safety.
- These disposable medical devices are not intended for reuse. Any institution, practitioner or third party, who reprocesses, refurbishes, remanufactures, resterilizes and/or reuses these disposable medical devices must bear full responsibility for product safety and effectiveness.

Contraindications:
Contraindications include those specific to any endoscopic procedure, as well as those specific to foreign body retrieval.

Directions for Use:
1. Select the Retrieval Net device compatible with the working channel of the endoscope.
2. Open the sterile pouch. Remove and inspect the Retrieval Net device for obvious damage. Should there be evidence of damage, or if the unit is not functioning properly, DO NOT USE THIS PRODUCT.
3. To repack the Retrieval Net device into the sheath for introduction into the endoscope:
   - Carefully retract the handle until the Retrieval Net device is completely withdrawn into its sheath.
4. Once the foreign body or tumor has been endoscopically identified, advance the retracted device into the accessory channel of the endoscope using short strokes until the distal end of the sheath is endoscopically visualized.
5. Advance the distal end of the sheath slightly past the foreign body or tumor to be retrieved, however, avoid blindly passing the device past any foreign body or tumor if the entire lumen is blocked. Open the Retrieval Net device by advancing the handle forward until it stops. Confirm the net is fully open via endoscopic observation. The following condition may cause the device to function improperly: Advancing the handle to the open position with too much speed or force.
6. Endoscopically manipulate the Retrieval Net device over the foreign body or tumor. For best results, the object should be centered and proximal in the net prior to closure. Once entrapment is accomplished, retract the handle until it stops. Continuous gentle traction should be applied on the handle to keep the Retrieval Net device closed. Excess pressure may cause the net to rupture or tear and/or cause the wire loop to deform.
7. Retract the sheath toward the endoscope so the Retrieval Net device is endoscopically observed yet not obscuring the endoscopic view. Endoscopic observation is necessary during extubation as not to lose sight of the foreign body or tumor during removal.
8. Once the endoscope and the Retrieval Net device have been extubated, the retrieved foreign body or tumor can be removed from the net by advancing the handle forward to open the Retrieval Net device.
9. After extraction, if retrieved material does not exit the net upon net deployment, the material should be removed from the net by rinsing the net in a basin of water; **do not “pick” retrieved material from the net** with a finger as this may damage the net.

10. Remove and prepare the tissue specimen according to standard technique for histologic evaluation and/or foreign body retrieval.

11. **To repack the Retrieval Net device into the sheath for introduction to, or removal from the endoscope, or for additional retrievals:**
   - Retract the handle until the net of the Retrieval Net device is completely retracted into the sheath.

12. Once the endoscopic retrieval has been completed, remove the device from the endoscope.

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**Product Disposal:**

After use, these products may be a potential biohazard. Handle and dispose of in accordance with accepted medical practice and applicable local, state and federal laws and regulations.

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**Issued Date:**  
June 2012

**Warning:**

An issued or revision date for these instructions is included for the user's information. In the event two years has elapsed between this date and product use, the user should contact US Urology to determine if additional information is available.

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**Made in the U.S.A.**
### Explanation of symbols used on Labels and Instructions for Use

<table>
<thead>
<tr>
<th>Symbol/Phrase</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Use By</strong></td>
<td>Sterilized by Ethylene Oxide (STERILE EO)</td>
</tr>
<tr>
<td><strong>Contents</strong></td>
<td>Non-Sterile (NON-STERILE)</td>
</tr>
<tr>
<td><strong>Reference</strong></td>
<td>Single Use Only (2)</td>
</tr>
<tr>
<td><strong>Lot</strong></td>
<td>Do Not Re-Sterilize (2)</td>
</tr>
<tr>
<td><strong>Date of Manufacture</strong></td>
<td>Latex Free (LATEX)</td>
</tr>
<tr>
<td><strong>Length</strong></td>
<td>Read instructions prior to using this product (i)</td>
</tr>
<tr>
<td><strong>Authorized Representative in the European Community</strong></td>
<td>For use with Olympus active cord (OLYMPUS)</td>
</tr>
<tr>
<td><strong>Store at controlled room temperature</strong></td>
<td>For use with Microvasive active cord (MICROVASCULAR)</td>
</tr>
<tr>
<td><strong>I.D.</strong></td>
<td>O.D. (ø)</td>
</tr>
<tr>
<td><strong>Discard within 24 hours after opening package</strong></td>
<td>Product contains Phthalates (PHT)</td>
</tr>
</tbody>
</table>

Do not use if packaging or product damage is evident. For sterile products only, contents are sterile if package is unopened and undamaged.

Federal law (U.S.A.) restricts this device to sale, distribution and use by or on the order of a physician.

Rx Only (U.S.A.)