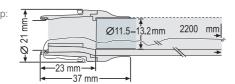
FTRD® System Set consisting of:

(Reference number 200.70)

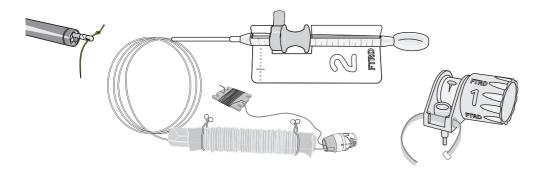
Details and components

Key dimensions of the FTRD applicator cap:





The FTRD System consists of the FTRD applicator cap coming with a ready-to-use mounted FTRD clip and a fitted HF snare at its tip. Included are the hand wheel, thread retriever for easy retrieval of the release thread, and the endoscope sleeve. The applicator cap is being mounted on the endoscope with the snare running on the outside of the scope, the sleeve preventing entrapment of any tissue between scope and snare. By turning the wheel the clip will be released through the thread and a new release ring. The target tissue will be firmly immobilized and subsequently cut by the closed snare. The FTRD System is only available in one size, for endoscopes with a diameter of 11.5 - 13.2 mm.



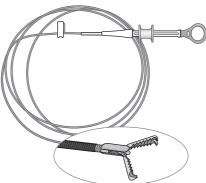


HF coagulation probe for marking of the target lesion in preparation of FTRD use. Marking the lesion will facilitate both detection and complete resection of the right tissue. Flexible shaft





Grasping forceps for proper grip on the target tissue and precise retrieval of the sample into the applicator cap. Flexible shaft



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FTRD® System.....

Full-Thickness Resection Device for flexible endoscopy



Ovesco Endoscopy AG is a medical device company specializing in the fields of flexible endoscopy treatment of gastrointestinal disease. Ovesco products stand for therapeutic efficacy and efficient

FTRD® System English version 3 | 2015-08-28



- Fast transluminal minimally invasive technique
- Proven OTSC® technology for safe tissue closure
- Minimal thermal injury
- Valid histologic evaluation of one en-bloc specimen according to residual tumor (R) classification
- Complete instrument set for endoscopic full-thickness resection procedures

.... FTRD® System Set

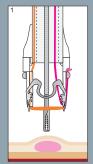
Full-Thickness Resection Device for flexible endoscopy

The FTRD System Set is a novel tool for diagnostic and therapeutic full-thickness resection via the flexible endoscope in the colon and rectum. The technology is based on the well-established OTSC System, enabling the endoscopist to resect all layers of suitable lesions including the serosa. The design of the FTRD System ensures that the transection of the tissue happens only after the defect has been closed completely. At no time will abdominal cavity and bowel lumen be in contact.



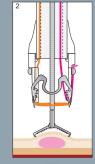
..... Procedure

Stepwise eFTR of a recurrent sessile adenoma (non-lifting sign) in the descending colon.*





. Marking of the lesion before mounting the FTRD System



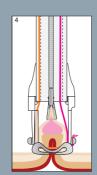


2. Grasping of the targe tissue with the FTRD



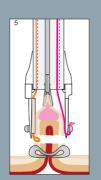


3. Retrieval of the targe tissue within cap and





4. Double check whether target tissue is complete within the FTRD Cap – Release of clip with





5. Closure of snare and electricated to farget tissue. Retrieval of the resected sample.

Check of the resection site

Example 2: De novo resection after incomplete polypectomy in the descending colon (early carcinoma)*



Status after incomplete polypectomy in the descending colon (early carcinoma)



Tissue marked w electrical probe

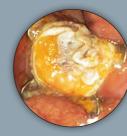


procedure (tissue previously marked with Indian ink)

Example 3: Resection of a relapsed adenoma (HGIEN) in the descending colon (non-lifting sign)*



Relapsed adenoma in the descending colon, non-lifting sign



FTRD resection site: all layers of the bowel wall to be identified in cross section.



Full-thickness samp



Histology: completely esected recurrent adenoma, HGIEN