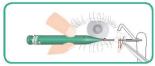
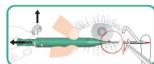
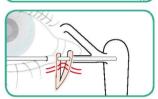
LACRIJET® FOR CANALICULAR LACERATION REPAIR









LacriJet® 15 mm and 20 mm have been specifically designed for canalicular laceration repair to prevent future canalicular obstruction due to scar tissue formation.

The LacriJet® is used like a metal probe to facilitate the catheterization between the distal and proximal portions of the canaliculus. The wound closure and sutures are therefore facilitated. The silicone tube is then released and left in place to avoid future blockage due to scar tissue.

At the end of the procedure, it is important to make sure the fixation head is in contact with the punctum to avoid any risk of migration or extrusion of the silicone tube.

The fixation plug must be inserted into the punctum with the help of the plug inserter (\$1.3090).

Once the plug is in place, the collarette should remain flush against the eyelid margin.

LACRIJET® ACCESSORIES

		PACKAGING
51.1288	Sizer	Box of 5
51.3090	Punctum dilator and plug inserter	Box of 3

Marks for length selection



REFERENCES

		DIAMETER	LENGTH	PACKAGING	INDICATION
S1.1515	LacriJet®	0.64 mm	15 mm	Box of 1	Canalicular laceration
S1.1522	LacriJet®	0.64 mm	20 mm	Box of 1	Canalicular laceration
S1.1530	LacriJet [®]	0.64 mm	30 mm	Box of 1	
S1.1535	LacriJet®	0.64 mm	35 mm	Box of 1	
\$1.1540	LacriJet®	0.64 mm	40 mm	Box of 1	Nasolacrimal stenosis
S1.1545	LacriJet®	0.64 mm	45 mm	Box of 1	
S1.1550	LacriJet®	0.64 mm	50 mm	Box of 1	

For more information please contact your local distributor:





FCI S.A.S. 20/22 rue Louis Armand 75015 Paris (France) - Tel.: +33 1 53 98 98 97 - Fax: +33 1 53 98 98 99 Email: fciworldwide@fci.fr - www.fciworldwide.com



Your Patients, Our Expertise

LACRIJET®

EXCLUSIVE

Preloaded & Self-Retaining
Monocanalicular Nasolacrimal
Intubation



INDICATIONS

- Treatment of epiphora in patients of 12 months and older
- Congenital nasolacrimal duct obstruction
- Canalicular laceration

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LACRIJET®

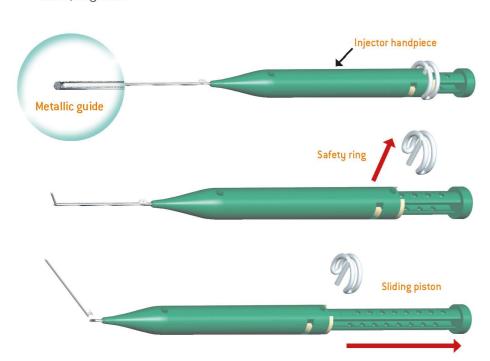
LacriJet® is FCI latest and exclusive preloaded & self-retaining monocanalicular nasolacrimal intubation indicated for epiphora, congenital nasolacrimal duct obstruction and canalicular laceration.

It consists of a single use injector handpiece into which a silicone tube is preloaded inside a metallic guide. LacriJet® has been specifically designed to reduce operating time, either in the intubation phase as well as for the removal of the device.

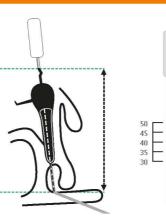
LacriJet® is first introduced into the nasolacrimal duct. Once in position, the sliding piston is retracted and the silicone intubation is released. It is maintained in place at the punctum by a plug-like fixation head: no nasal retrieval, no knot and no sutures are needed.

MAIN CHARACTERISTICS:

- Exclusive new injection system
- Available in 7 lengths
- 3 mm plug collarette
- Requires sizer (S1.1288) to select the length
 8.0.3 mm disposable punctum dilator and plug inserter (S1.3090)
- Sterile, Single use

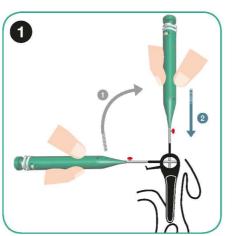


LACRIJET® FOR NASOLACRIMAL DUCT OBSTRUCTION



Initial probing & selection of the intubation length

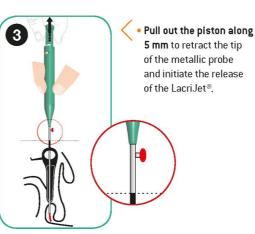
- Dilation of the punctum and insertion of a sizer ref. S1.1288.
- · Search for bony contact.
- 90° rotation and vertical catheterization.
- Insert a second wider lacrimal probe with a blunt tip. Steer it very gently through the inferior nasal meatus until metal-to-metal contact is achieved.
- Select the appropriate LacriJet® length with the help of the black marks on the sizer.

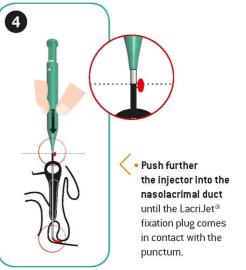


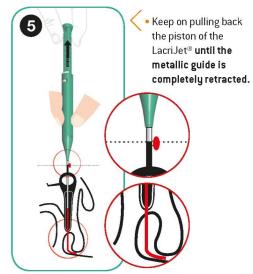
LacriJet® insertion

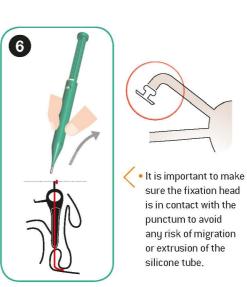
- Insert the LacriJet® into the punctum and through the canaliculus.
- Search for bony contact.
- 90° rotation and vertical catheterization until the nasal fossa is reached.

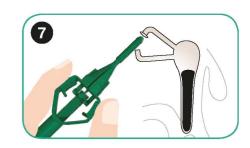












Plug insertion

- The fixation-plug must be inserted in the punctum with the help of the plug inserter (\$1.3090).
- Once the plug is in place, the collarette should remain flush against the eyelid margin.

LacriJet® removal

• Hold the collarette of the fixation plug with the help of fine forceps and gently pull out the LacriJet® from the meatus and the lacrimal system.

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