

Prospektüs Prospectus

FASTLAK

Emilebilir Cerrahi Ameliyat İpliği

Absorbable Surgical Sutures

Lütfen dilinizi seçiniz
Please select your language



FASTLAK

Cerrahi, Poliglaktid(90%-ko-laktid)(10%)
Hüli Emilim PGLA Sütür
Senteetik, Multifilaman, Örgülü, Undyed

Kullanma Talimatı**TANIM**

FASTLAK sütün, %90 glükolide ve %10 L-laktidten (glükolik ve laktid asit türevi) sentezlenen bir kopolimerden oluşmuş, snerek yapıda, sentetik, emilebilir, steril cerrahi iplikler. Kopolimerin ampirik formülü $(C_4H_6O_2)_m(C_3H_4O_2)_n$ şeklindedir. Multifilaman sütün, fiberinin özürlük birleştirilmesi ile meydana gelmektedir.

FASTLAK hızlı hidrofil emilim sağlamak için gama ile degrede olmuştur ya da daha düşük dozda sterilize edilmiştir.

FASTLAK sütünün kaplama malzemesi için miktarla karıştırılan kalsiyum silerat $(Ca_2H_2O_4Ca)$ ve PGL formülüdür. **FASTLAK** sütünün kaplama malzemesi için miktarla karıştırılan kalsiyum silerat $(C_2H_2O_4Ca)$ ve %30 laktid $(C_3H_4O_2)_m(C_4H_6O_2)_n$ m:n=3:7) den hazırlanmaktadır. **FASTLAK** sütün, canlı organizmada kullanıldığında emilebilir ve aşırı tahrişe neden olmaz. Kopolimer ve kaplama maddesi kalsiyum silerat, nonantijenik, nonalerjeniktir ve emilme sırasında sadece hafif doku reaksiyonuna yol açarlar.

FASTLAK cerrahi ipler USP B/0 ve 2 (metrik 0.4-5) arasında, değişik boylarda, iğnesiz veya çeşitli tip ve boylarda paslanmaz çelik iğnelere takılarak mevcuttur. Bununla birlikte renksiz olarak mevcuttur (doğal, bey).

FASTLAK sütün Amerikan Farmakopisinde (U.S.P) tanımlanmış olan "Emilebilir Cerrahi Sütürler Monogramı" gerektiklerini ve Avrupa Farmakopisinde (E.P) tanımlanan "Steril Senteetik Emilebilir Örgülü Sütürler Monogramı; 01/2008/067" gerektiklerini, düğüm gerilme gücü ve bazı kaplılarda az miktarda bobby olmaları dışında, sağlanmaktadır. **FASTLAK** düğüm gerilme gücü kalorsiz sütünün için USP standartlarına ve ayrıca Avrupa Farmakopisinin "Chorda Sutures Steris" standartlarına uygundur.

KULLANIM ALANI

FASTLAK sütün oftalmik prosedürlerin de dahil olduğu genel yumuşak doku kapamasında ve/veya bağlanmasında kullanılır. Kalp-damar ve sinirsel dokularda kullanılmaz.

ETKİLERİ

FASTLAK sütün, dokuda hafif akut yangı reaksiyonu ve fibröz bağ doku oluşumuna neden olabilir. Hidrofilize kademeli emilim gerçekleşir ve zamanla gerilime mukavemetinde azalma meydana gelir. Hidrofilizden sonra karbondioksit ve su şeklinde vücuttan atılır. Emilim, gerilime kuvvetinin azalması ile başlar ve bunu kütle kaybı takip eder.

Hayvan ve in-vitro hidrofil çalışmaları **FASTLAK** sütünün implantasyondan sonra en az bir hafta %50 doku desteği sağladığını göstermiştir. Orjinal gerilime kuvvetinin tamamı implantasyondan sonra 10-14 gün içinde kaybolur ve sütünün emilme 42 günde tamamlanır.

KULLANILMAMASI GEREKEN YERLER

Emilebilir il olmasından dolayı uzun süreli doku kapaması gereken yerlerde kullanılmamalıdır.

UYARILAR

Yaranın açılma riski, uygulama bölgesi ve kullanılan malzemeye göre değişebildiği için kullanıncılar yara kapaması için sütün kullanmadan önce emilebilir cerrahi ipliklerin kullanıldığı cerrahi yöntem ve tekniklere aşina olmalıdırlar. Doktorlar hastalarda kullanılmak üzere seçimi yaparken in-vitro performans ("ETKİLERİ" bölümünde) göz önünde bulundurulmalıdır.

Bu sütün kullanım gücü güçlü düşmüş, bünyesi zayıf ve/veya yara iyileşme cevabı yetersiz olan yangı hastalarda uygun olmayabilir.

İpliklerin saflığı ya da diğer sisteme bulunan luz özelliği ile uzun süreli teması bağ oluşumuna neden olabilir. **FASTLAK** emilebilir il sütün olduğu durumda, yayılımı, gerilimi, şimşığı ya da ilave destek istenen yarı bölgelerin kapamasında ek olarak emilemeyen sütünün da kullanımının gerekebileceği cerrah tarafından göz önünde bulundurulmalıdır.

Takar steril etmeyiniz. Açılmış poşetleri ve kullanılmayan ipleri ihmal ediniz.

Enfekte ve kontamine olmuş yaralarda kabul edilebilir cerrahi uygulamalar takip edilmelidir.

ÖNEMLER

Clitte 7günden fazla kalın dikişler lokal tahrişe neden olabilir ve bu durumda dikişler kesilmesi ya da çıkarılmalıdır. Bazı kuşullarda özellikle ortopedik prosedürlerde; cerrahi cerrahine bağlı olarak bağlarıntıları, diş destekle hareketizi hale getirmesi sağlanabilir.

Zayıf kan dolaşımının olduğu dokularda dikis atma ve geç emilim olabileceğinden, emilebilir ipliklerin kullanımında bu durum dikkate alınmalıdır.

FASTLAK veya diğer sütünlerin kullanımında iğnede ve iğneye zarar vermemek kaçınılmazdır. Forceps veya iğne tutucu gibi cerrahi aletlerin kullanımına bağlı ezme veya çarpma hatalarından kaçınıncuz.

İğne uçlarının ve bağlantı bölgesinin hasar görmemesi için, bağlantı ucu ve iğne ucu arasında dikis mesafesinin üçte bir (1/3) ile yarısı (1/2) arasında dikis tutulmalıdır. İğneleri yeniden şekillendirmek, gücünü kaybetmemeleri ve bükülme ve kırılmaları karşı önlemlerin alınması sütünün emiliminde önemlidir. İstenen diki iğne batmalarından kaçınmak için kullanıncılarının cerrahi iğne kullanırken dikkatli olmaları gerekir.

FASTLAK sütün, kullanım karakteristikiği artırmak için kabul görmüş düz ve kare düğüm teknikleri ile cerrahi dorum ve cerrahide deneyime bağlı olarak ilave düğüm teknikleri gerektirebilir.

Yüksek sıcaklıklara uzun süre maruz bırakılmaması gerekir. Kontamine ve kullanılmamış ürünlü bölgelerde ve tesis gereksinimlerine uygun olarak ihmal ediniz.

Kullanım öncesi "kesici alet" kaplarına atınız.

YAN ETKİLERİ

FASTLAK sütünün kullanımına bağlı yan etkiler; yara bölgesinde çetir tahriş, akut doku yangı reaksiyonu, kızamıkçık ve deri altı dikişlerin emilimi sırasında serleşme şeklindedir. **FASTLAK**, buğün yabancı maddeler gibi, mevcut bir enfeksiyona artırlabilir.

PİYASAYA SUNUŞU ŞEKLİ

FASTLAK sütünün U.S.P. B/0 ve 2 (metrik 0.4-5) arasında, değişik boylarda, steril, örgülü ve boyanmamış (doğal), çeşitli tip ve ebaflarda paslanmaz çelik iğneli veya iğnesiz olarak mevcuttur.

İplikler bir, iki veya üç düzlemsel kutularda bulunmaktadır.

FASTLAK sütünler tek kullanımlıdır.

DEPOLAMA

25°C'nin altında ve güneş ışığından uzaktaki depolayınız.

Nemden koruyunuz.

Son kullanma tarihinden sonra kullanılmayınız.

ETİKETLEMEDE KULLANILAN İŞRETLER	
	Tek kullanımlık
	Tekrar steril etmeyiniz
	Paket zarar görmüşse kullanılmayınız
	Üretici
	YYYY-MM Üretim tarihi, Yil
	YYYY-MM Son kullanma tarihi, Yil/Ay
	STERILE R Steril R Radyasyon
	LOT Seri No
	Boyasız Emilebilir Örgülü Kaplamalı
	Katalog numarası
	25°C'nin altında muhafaza ediniz
	Günepten uzak tutunuz
	Nemden koruyunuz
	Geril dönüşümü paket
	Dikkat, Kullanma kılavuzuna bakınız
	2292

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"EASSI (Avrupa Cerrahi Sütür Sanayi Birliği) çeşitli sütün ürün karakteristikiğini sezgisel ve remsel olarak tanımlamak için tasarlanmış bir sistem geliştirmiştir. Sembol kullanımları Tıbbi Cihaz Direktifi (Medical Device Directive) (MDD 93/42/EEC) için vermektedir ve çözümlü deri tedavisine gerek kalmadan üreticilerin kullanıcılarına bilgi sağlanmasına imkan tanınmaktadır."



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BOZ



FASSTLAK

Instruction for Use

Surgical, Poly(glycolide/90%-co-lactide)(10%)
Rapid Absorbable, PGLA Suture
Synthetic, Multifilament, Braided, Undyed

DESCRIPTION

FASSTLAK suture is synthetic absorbable sterile surgical suture which is flexible strand composed of a copolymer synthesized from 90% glycolide and 10% L-lactide (derived from glycolic and lactic acids). The empirical formula of the copolymer is $(C_4H_6O_4)_m(C_3H_4O_2)_n$. Multifilament suture is consisting of elementary fibres which are assembled by braiding.

FASSTLAK is gamma degraded or having lower molecular weight form of PGL to supply rapid hydrolysis/absorption of PGL.

FASSTLAK suture is prepared by coating suture material with a mixture composed of equal parts calcium stearate ($C_{18}H_{34}O_2$) and 30% glycolide and 70% lactide ($C_3H_4O_2$, $C_4H_6O_4$) where $m+n=7$. When FASSTLAK suture is introduced into a living organism it is absorbed by that organism cause no undue tissue irritation. Copolymer and the coating with calcium stearate have been found to be nonantigenic, nonpyrogenic and elicit only a mild tissue reaction during absorption.

FASSTLAK suture has been presented in USP B0 to 2 (metric sizes 0.4 and 5) gauge sizes in a variety of lengths, as non-needed or attached to stainless steel needles of varying types and sizes. The suture is available in the undyed (natural, beige) form.

FASSTLAK sutures meet United States Pharmacopoeia (U.S.P.) requirements as described in the U.S.P. "Monograph for Absorbable Surgical Sutures" and European Pharmacopoeia (E.P.) requirements as described in the E.P. "Monograph for Sutures, Sterile Synthetic Absorbable Braided, 01/2008:0667" with the exception of an occasional slight oversize in some gauges and the exception of knot tensile strength. The knot tensile strength of FASSTLAK meets USP requirements for collagen sutures as well as the requirements of the European Pharmacopoeia for "Chorda Resorbilis Sterilis".

INDICATIONS

FASSTLAK suture is indicated for use in general soft tissue approximation and/or ligation, including use in ophthalmic procedures but not for use in cardiovascular and neurological tissues.

ACTIONS

FASSTLAK suture elicits a minimal acute inflammatory reaction in tissue and ingrowth of fibrous connective tissue. Progressive loss of tensile strength and eventual absorption of suture occur by means of hydrolysis gradually and decrease the strength in the body. After hydrolysis it is excreted from the body as carbon dioxide and water. Absorption begins as a loss of tensile strength followed by a loss of mass.

Animal and in-vitro hydrolysis studies indicate that FASSTLAK suture provides 50% tissue supporting during at least one week post implantation. All of the original tensile strength (Break Strength Retention-BSR) is lost between 10-14 days post implantation and suture absorption is essentially complete 42 days.

Contraindications

This suture, being absorbable, should not be used where extended approximation of tissue is required.

WARNINGS

Users should be familiar with surgical procedures and techniques involving absorbable sutures before employing for wound closure, as risk of wound dehiscence may vary with the site of application and the suture material used. Physicians should consider the in vivo performance (under ACTIONS section) when selecting a suture for use in patients. The use of this suture may be inappropriate in elderly malnourished or debilitated patients, or in patients suffering from conditions which may delay wound healing.

As with any foreign body, prolonged contact of any suture with soft solutions, such as those found in the urinary or biliary tracts may result in calculus formation. As FASSTLAK is an absorbable suture material, the use of supplemental non-absorbable sutures should be considered by the surgeon in the closure of the sites which may undergo expansion, stretching, or distension, or which may require additional support. Do not re-sterilize. Discard open packages and unused sutures.

Acceptable surgical practice should be followed for the management of contaminated or infected wounds.

PRECAUTIONS

Skin sutures which must remain in place longer than 7 days may cause localized irritation and should be snipped off or removed. Under some circumstances, notably orthopedic procedures, immobilization of joints by external support may be employed at the discretion of the surgeon.

Consideration should be taken in the use of absorbable sutures in tissues with poor blood supply, as suture extrusion and delayed absorption may occur.

In handling FASSTLAK or any other suture materials, care should be taken to avoid damage to needle and suture. Avoid crushing or crimping damage due to application of surgical instruments such as forceps or needle holders.

To avoid damaging needle points and swage areas, grasp the needle in an area one-third (1/3) to one-half (1/2) of the distance from the swaged end to the point. Reshaping needles may cause them to lose strength and be less resistant to bending and breaking. Users should exercise caution when handling surgical needles to avoid inadvertent needle sticks.

FASSTLAK sutures, which are treated to enhance handling characteristics require the accepted surgical technique of flat and square ties with additional throws as warranted by surgical circumstances and experiences of the surgeon.

Avoid prolonged exposure to elevated temperatures.

Dispose of contaminated and unused products as are in accordance with local and facility requirements. Discard used needles in "sharps" containers.

ADVERSE REACTIONS

Adverse reactions associates with the use of FASSTLAK sutures include transitory local irritation at the wound site, acute inflammatory tissue reaction, erythema and induration during the absorption process of subcuticular sutures. Like all foreign bodies FASSTLAK may potentiate an existing infection.

HOW SUPPLIED

FASSTLAK suture is available sterile, as braided undyed (natural) strands in sizes 8/0 to 2 (metric sizes 0.4-5), in a variety of lengths, as non-needed or attached to stainless steel needles of varying types and sizes. Suture is available in one, two and three dozen boxes. FASSTLAK suture is for single use only.

STORAGE

Store below 25°C and keep away from sunlight. Protect from humidity. Do not use after expiry date.

SYMBOLS USED ON LABELLING



Do not touch



Do not re-sterilize



Do not use if pack age is damaged



Manufacturer



YYYY MM Date of Manufacture, Year



YYYY-MM Expiry Date, Year-Month



STERILE R Sterile R: Indicator



LOT Batch Number



Undyed/Absorbable, Braided, Coated



Catalogue Number



Store below 25°C



Keep away from sunlight



Protect from humidity



Recyclable pack



Attention, See instruction for use



2292

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"EASSI (The European Association of Surgical Suture Industry) has developed a system of symbols which is designed to describe various suture product characteristics in an intuitive, pictorial manner. The use of symbols is permitted by the Medical Device Directive (MDD 93/42/EEC) and enables companies to provide information to the customer without having to provide multilingual translations."



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Boz

**FASTLAK**

Chirurgie, Poly(glycolique)[90%]-colactide[10%]
 PGLA absorption rapide Suture
 Synthétique, Multifilament, Tressé, Non coloré

Mode d'emploi**DESCRIPTION**

La suture de FASTLAK est une suture stérile chirurgie absorbable et synthétique qui est un brin souple composé de copolymères synthétisés de 90% de glycolide et 10% de L-lactide (dérivés des acides glycoliques et lactiques). La formule empirique du copolymère est $(C_3H_4O_2)_m(C_5H_8O_2)_n$. La suture à multifilament consiste aux fibres élémentaires assemblées par torsade.

FASTLAK est une gomme dégradée ou ayant un poids moléculaire plus bas du PGL pour fournir l'hydrolyse à absorption rapide du PGL.

La suture de FASTLAK est préparé en revêtant le matériel de suture avec un mélange composé de parts égales de calcium stéarate $(C_{18}H_{34}O_2Ca)$ et 30% de glycolide et 70% de lactide $(C_5H_8O_2)_m(C_3H_4O_2)_n$ ou $m \approx n \approx 7$). Lorsque la suture de FASTLAK est introduite dans un organisme vivant elle est absorbée par cet organisme mais ne cause pas d'irritation de tissu. Le copolymère et le revêtement avec le calcium stéarate ont été trouvés non pyrogéniques, non pyrogènes et entraînent seulement une réaction faible de tissu pendant l'absorption.

La suture de FASTLAK suture est présentée en dimensions : gauge USP 8/0 to 2 (dimensions métriques 0,4 et 5) dans une variété de longueurs comme non harçolés ou attachés aux aiguilles en acier inoxydable de types et dimensions différents. La suture est disponible dans sa version sans couleur (nature, beige).

Les sutures de FASTLAK sont conformes aux exigences de la Pharmacopée des Etats-Unis (U.S.P) comme décrite dans les exigences de "la Monographie pour les Sutures Chirurgicales Absorbables" et la Pharmacopée Européenne (E.P) comme décrite dans la "Monographie pour Sutures, Stériles Synthétiques Absorbables Tressées; de E.P. : 01/2008:0867" avec l'exception d'une sur dimension faible rare dans certains jauges et l'exception de la force de traction du nœud. La force du nœud de traction de FASTLAK couvre les exigences de la Pharmacopée pour les sutures de colactide et aussi les exigences de la Pharmacopée Européenne pour "Chorda Resorbilis Sterilis".

INDICATIONS

La suture de FASTLAK est indiquée pour la fermeture/le recouvrement des tissus mous généraux y compris les procédures ophtalmiques. Ne pas utiliser pour les tissus cardiovasculaires et le nerf.

EFFICACITÉ

La suture de FASTLAK suscite une réaction locale faible dans le tissu et une croissance des tissus connectives fibreuse. Une partie progressive de force de traction et une absorption équilibrée de la suture PGA survient par hydrolyse peu à peu et diminue la force dans le corps. Après l'hydrolyse, le carbone dioxide et l'eau sont régénérés du corps. L'Absorption commence par la perte de la force de traction poursuivie par la perte de masse.

Les études sur les animaux et l'hydrolyse-in-vitro montrent que la suture FASTLAK conserve 50% de sa force de tension originale jusqu'à une semaine après implantation. Le total de la force de tension disparaît dans 10-14 jours après implantation et l'absorption de la suture est essentiellement complétée dans 42 jours.

Contre-indications

Cette suture, étant absorbable, ne doit pas être utilisée dans les zones nécessitant une fermeture de tissus de longue durée.

AVERTISSEMENTS

Les utilisateurs doivent être familiers avec les procédures et techniques chirurgicales concernant les sutures absorbables avant l'emploi pour la fermeture de plaie et le risque de déhiscence de la plaie peut varier avec la zone d'application et le matériel de suture utilisé. Les physiologistes doivent considérer la performance in vivo (sous la section EFFICACITÉ) en choisissant la suture pour l'utilisation chez les malades.

Dans certains cas, notamment dans les procédures orthopédiques, l'immobilisation du joint par le support externe peut être utilisée à la discrétion du chirurgien.

Comme avec tout corps étranger, le contact prolongé de toute suture avec les solutions de sel, telles que celles trouvées dans les voies urinaires ou biliaires peuvent résulter à la formation de calcul.

Comme FASTLAK est un matériel de suture absorbable, l'usage des sutures non absorbables supplémentaires est doit être considéré par le chirurgien dans la fermeture des sites pouvant subir une expansion, un étirage ou distension ou pouvant demander un support additionnel.

Ne pas réstériliser. Détruire les sachets ouverts et les sutures non utilisées.

Des pratiques chirurgicales acceptables doivent être suivies pour la gestion des plaies contaminées et infectées.

PRÉCAUTIONS

Les sutures épidémiques qui doivent rester en place plus de 7 jours peuvent causer une irritation localisée et doivent être découpées ou enlevées de cette zone comme indiqué. Dans certains cas, notamment dans les procédures orthopédiques, l'immobilisation du joint par le support externe peut être utilisée à la discrétion du chirurgien.

Comme une extension de suture et une absorption retardée peuvent survenir dans l'utilisation des sutures absorbables dans les tissus avec une faible fourniture de sang, il faut tenir en compte cette situation.

Lors de la manipulation du FASTLAK ou tout autre matériel de suture, veiller à ne pas endommager le fil et l'aiguille lors de l'utilisation. Éviter les erreurs comme le broyage, le serrage et la flexion résiduel de l'utilisation des outils chirurgicaux comme le forceps ou le porte-aiguille.

Pour éviter d'endommager les points de l'aiguille et les zones de d'étaupe, agripper l'aiguille dans une zone libre (1/3) à une demi (1/2) de la distance de l'extrémité forcée à la pointe. Le remodelage des aiguilles peut leur causer une perte de force et les rendre moins résistantes à la flexion et à la rupture. Les utilisateurs doivent faire attention à la manipulation des aiguilles chirurgicales pour éviter les piqûres d'aiguilles accidentelles.

Les sutures de FASTLAK qui sont traitées pour augmenter les caractéristiques de manipulation demandent la technique chirurgicale acceptée des nœuds droits et carrés avec des jets supplémentaires comme garanti par les circonstances chirurgicales et les expériences du chirurgien. Éviter l'exposition prolongée aux températures élevées.

La disposition des produits contaminés et non utilisés est en conformité avec les exigences locales et l'installation. Jeter les aiguilles utilisées dans des conteneurs "pour" objets pointus.

EFFETS SECONDAIRES

Les effets secondaires liés à l'utilisation de FASTLAK sont l'irritation provisoire dans la zone de plaie, la réaction d'inflammation aigue de tissu, la rougeur et le durcissement lors de l'absorption des sutures hypothermiques. FASTLAK peut augmenter l'infection présente comme tous les corps étrangers.

Commercialisation

La suture de FASTLAK est disponible stérile, tressée sans couleur (nature) en dimensions de 8/0 à 2 (dimension métriques 0,4-5), dans une variété de longueurs, comme les non harçolés ou attachés aux aiguilles en acier inoxydable en types et dimensions variés. La Suture est disponible dans des boîtes à une, deux ou trois douzaines. La suture de FASTLAK est utilisable uniquement.

CONSERVATION

Conserver sous la température de 25 °C et garder loin des rayons solaires. Protéger de l'humidité.

Ne pas utiliser après la date limite de consommation.

SIGNES UTILISÉS POUR L'ÉTIQUETAGE

2. Pour utilisation unique



Réf Numéro de catalogue



3. Ne pas stériliser à nouveau



4. Conserver sous 25°C



5. Ne pas utiliser si l'emballage est endommagé



6. Protéger du soleil



7. Fabricant



8. Conserver dans un lieu sec



9. YYY-YY Date de production, Année



10. Emballage recyclable



11. YYY-YY-MM Date d'expiration, Année - mois



12. Attention, Voir les instructions d'utilisation



13. STERILE R Stérile R Radiation



14. No de série



15. Sans peinture, absorbable, tressé, revêtu



16. CE 2292

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"EASI" (Association d'Industrie de la Suture Européenne de Chirurgie) a développé un système conçu pour identifier comme intuitive et imagée les caractéristiques des différents produits de suture. Le Directif sur les Dispositifs Médicaux (Medical Device Directive) (MDD 93/42/EEC) permet à l'utilisateur le symbole et à intégrer les informations aux utilisateurs des fabricants sans obliger à traduire en plusieurs langues.

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Prospektüs
Prospectus

FASTSORB

Emilebilir Cerrahi Ameliyat İpliği

Absorbable Surgical Sutures

Lütfen dilinizi seçiniz
Please select your language



TR

FASTSORB

Kullanma Talimatı

Cerrahi, Poliglaktik Asit
Hüce Emililebilir,
Sürahli, Multifazlan, Örgülü, Ünyedey

TANIM

FASTSORB glikolik asidin homopolimerinden oluşan sentetik, steril, emililebilir cerrahi deşge poliglaktik asit (PGA) iplikler. Poliglaktik asidin ampirik formülü $(-O-CH_2-CH-O-CH_2-CO-)_n$ şeklindedir. Polimer zinciri gama ışını ile bozunur. FASTSORB kalsiyum stearat $(C_{18}H_{35}O_2)_n$ ve polikaprolakton $(C_6H_{10}O)_n$, karışımından oluşan bir kaplama malzemesi ile kaplanmıştır. FASTSORB iplik ve kaplama maddesi inert, kalajen yapıda olmayan, antijenik ve pirojenik olmayan malzemedir.

FASTSORB iplik boyasız, doğağel renktedir.

KULLANILMALANI

FASTSORB iplik, oftalmik uygulamaları da dahil olduğu genel yumuşak dokular kaplanması veveya bağlanması kullanılır. Kalp-damar ve sinirsel dokularda kullanılmaz. FASTSORB iplik tek kullanımlıdır.

ETKİLERİ

Cerrahi PGA iplik dokuda hafif bir şekilde akut yangi reaksiyonu gösterebilir ve fibroz bağ dokusu oluşumu ortaya çıkar. Hidroliz sonrasında PGA iplikün mukavemeti azalır ve emilimi gerçekleşir. Hidroliz sonucunda su ve karbondioksit meydana gelir ve vücut dışına atılır. Kütle kaybını takibini kopma mukavemetinin azalması ile emilim başlar. PGA iplik 7gün içerisinde orijinal gerilme mukavemetinin yaklaşık %75 ini muhafaza eder, 42 gün içerisinde ise gerilimini kaybeder.

KULLANILMAMASI GEREKEN YERLER

Emililebilir iç olmasından dolayı uzun süreli dokular desteğ gereken kaplanmaları kullanılmamalıdır. Kalp-damar ve sinirsel dokularda kullanılmamalıdır.

UYARILAR

Yara ayırması riski, uygulanan bölgeye ve kullanılan sütür malzemesine göre değiştiğinden kullanıcının yara kaplaması için süturu kullanmadan önce emililebilir sütürünün kullandığı cerrahi prosedürler ve teknikleri aşına olması gerekir. Doktorlar hastalarda kullanılmak üzere seçmeden önce in vivo performansı (ETKİLERİ) kısmının altında dikkate almalıdır. Deride 7 günden fazla kalan cilt süturları bölgesel tahrişe sebep olabilir. Bu durumda kesilmesi ya da uzaklaştırılmalıdır.

Bazı durumlarda, özellikle ortopedik prosedürlerde, dış desteklerin immobilizasyonu cerrahin sağduyusuna göre yönlendirilmelidir. Iplik dışarı atılabileceği ve emilim gerçekleşeceği için bu durum, emililebilir ipliklerin yangin akımının olduğu dokuda kullanılmama göz önünde bulundurulmalıdır. İpliklerin kordon, safra ya da üriner sistemdeki gibi mevcut olan tüz çözümleri ile uzun süreli teması taş oluşumuna sebebiyet verebilir.

Tekrar steril etmeyiniz. Açılması yeteneği ve kullanılmayan ipleri imha ediniz. Kontamine veya ilthaplı parçaların tedavisi için kabul edilen cerrahi uygulamalar izlenmelidir.

ÖNLEMLER

FASTSORB ipliğın veya diğer tüm cerrahi ipliklerin kullanımında ipliğ ve iğneye zarar vermekten kaçınılmalıdır. Forseps veya iğne tutucu gibi cerrahi aletlerin kullanımına bağlı ezme veya çarpma hatasına dikkat edilmelidir. Iğne uçlarının ve bağları bölgesinin hasar görmemesi için, bağlanti ucu ve iğne ucu arasından mesafenin üçte bir (1/3) ile yansı (1/2) arasındakı kısmattan tutun.

İğneleri yeniden şekillendirmek, güçlerini kaybetmelerine ve bükülme ve kırılmaları yangi dirençlerinin azalmasına neden olabilir. İstem dışı iğne batmalarından kaçınmak için kullanılcıların cerrahi iğne kullanırken dikkatli olmaları gerekir.

PGA iplikler, kullanımı karakteristiğini arttırmak için cerrahi şartlara ve cerrahın tecrübesine bağlı olarak garanti altına alınmış kabul görmüş diz ve kare dögüm teknikleri ile beraber ilave dögümler gerçekleştirir.

Yüksek sıcaklıklarda uzun süre maruz bırakılmaktan kaçınız. Kontamine ve kullanılmamış ürünü bölgesel ve tesis gereksinimlerine uygun olarak imha ediniz.

Kullanılan iğneleri "kesici alet" kaplarına atınız.

YAN ETKİLER

Bu cihazın kullanımına bağlı yan etkiler; yaranın açılması, şişme, gerilme ya da genişlemenin oluştuğú bölgelerin kapatılmasında yeterli yara desteğinin sağlanamaması, yangi, yangi beslenen ya da aşırı yangi hastalarda yara iyileşmesinin gecikmesinden dolayı rahatsızlık çeken hastalarda yeterli yara desteğinin sağlanamaması, enfeksiyon, minimal akut doku yangi reaksiyonu, ipliğın cilt üzerinde 7 günden daha fazla kalması durumunda bölgesel tahriş, ipliklerin yangin akımının olduğu dokuda dışarı atılması ve emilimin gecikmesi, uzun süreli tüz çözümleri ile temasta ürün sistem ve safra tortu (taş) oluşumu ve yangideki bölgesel tahrişin içermektedir.

PİYASAYAARZ-SUNUŞ ŞEKLİ

FASTSORB iplikler steril, örgülü, boyanmış (bej) olarak U.S.P. 8/0 ve 6 (metrik 0.4-8.0) arasında, değişik boyalarda, iğneleri olarak mevcuttur.

FASTSORB iplikler bir, iki veya üç dögümlük kutularda bulunmaktadır.

FASTSORB iplikler steril olarak arz edilmektedir.

DEPOLAMA

25°C'nin altında ve güneş ışığından uzaktaki depolayınız.

Nemden koruyunuz.

Son kullanma tarihinden sonra kullanmayınız.

ETİKETLEMEDE KULLANILAN İŞRETLER

	Tek kullanımlık		Katalog numarası
	Tekrar steril etmeyiniz		25°C'nin altında muhafaza ediniz
	Paket zarar görmüşse kullanmayınız		Güneğten uzak tutunuz
	Üretici		Nemden koruyunuz
	YYYY-MM Üretim tarihi, Yıl		Geri döngümlü paket
	YYYY-MM Son kullanma tarihi, Yıl-Ay		Dikkat, Kullanma kılavuzuna bakınız
	Steri R: Radyasyon		2292
	LOT Seri No		
	Boyasız, Emililebilir, Örgülü, Kaplanalı		

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"EASIS (Avrupa Cerrahi Sütür Sanayi Birliğı) çeşitli sütür türün karakteristiklerini seçmiş ve isimsel olarak tanıtmamak için başlatılmış bir sistem geliştirmiştir. Sembol kullanımına Tibbi Cihaz Direktive (Medical Device Directive) (MDD 93/42/EEC) izin vermektedir ve çözümlü dökümlerine göre kalman dögümlerinin kullanıcılara bilgi sağlanmasına imkan tanımaktadır."

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Boz

GB

FASTSORBSurgical, Polyglycolic Acid
Rapid Absorbable PGA Suture,
Synthetic, Multifilament, Braided, Undyed

Instruction for Use

DESCRIPTION

FASTSORB Surgical Degraded Polyglycolic acid (PGA) suture; synthetic, sterile, absorbable, is homopolymer of glycolic acid. The empirical formula of polyglycolic acid is (-O-CH₂-CO-O-CH₂-CO-). The polymer chain is degraded by gamma radiation. FASTSORB is coated with the mixture of calcium stearate (C₁₈H₃₆O₂Ca) and polycaparbonate (C₄H₆O₃n). The suture and coating material are inert, noncollagenous, nonantigenic, and non-pyrogenic. FASTSORB suture is undyed in natural beige color.

INDICATIONS

FASTSORB suture is indicated for use in general soft tissue approximation and/or ligation, including use in ophthalmic procedures but not for use in cardiovascular and neurological tissues. FASTSORB suture is for single use only.

ACTIONS

PGA suture elicits a minimal acute inflammatory reaction in tissue and ingrowth of fibrous connective tissue. Progressive loss of tensile strength and eventual absorption of PGA suture occurs by means of hydrolysis gradually and decreases the strength in the body. After hydrolysis it's excreted from the body as carbon dioxide and water. Absorption occurs as a loss of tensile strength followed by a loss of mass. PGA suture retains approximately 75% of the original tensile strength (Break Strength Retention-BSR) in 7 days. It loses its strength in 42 days.

CONTRAINDICATIONS

The sutures being absorbable should not be used where extended approximation of tissue is required. The sutures should not be used for cardiovascular and neurosurgical tissue.

WARNINGS

Users should be familiar with surgical procedures and techniques involving absorbable sutures before employing for wound closure, as risk of wound dehiscence may vary with the site of application and the suture material used. Physicians should consider the in vivo performance (under AECTC section) when selecting a suture for use in patients.

Skin sutures which must remain in place longer than 7 days may cause localized irritation and should be snipped off or removed as indicated.

Under some circumstances, notably orthopedic procedures, immobilization of joint by external support may be employed at the discretion of the surgeon.

Consideration should be taken in the use of absorbable sutures in tissues with poor blood supply, as suture extrusion and delayed absorption may occur. As with any foreign body, prolonged contact of any suture with salt solutions, such as those found in the urinary or biliary tracts may result in calcification formation. Do not re-sterilize. Discard open packages and unused sutures. Acceptable surgical practice should be followed for the management of contaminated or infected wounds.

PRECAUTIONS

In handling FASTSORB or any other suture materials, care should be taken to avoid damage to needle and suture. Avoid crushing or crimping damage due to application of surgical instruments such as forceps or needle holders.

To avoid damaging needle points and swage areas, grasp the needle in an area one-third (1/3) to one-half (1/2) of the distance from the swaged end to the point.

Reshaping needles may cause them to lose strength and be less resistant to bending and breaking. Users should exercise caution when handling surgical needles to avoid inadvertent needle sticks.

PGA sutures, which are treated to enhance handling characteristics requires the accepted surgical technique of flat and square ties with additional throws as warranted by surgical circumstances and experiences of the surgeon.

Avoid prolonged exposure to elevated temperatures.

Dispose of contaminated and unused products are in accordance with local and facility requirements. Discard used needles in "sharps" containers.

ADVERSE REACTIONS

Adverse effects associated with the use of the device include wound dehiscence, failure to provide adequate wound support in closure of the sites where expansion, stretching, or distension occur, failure to provide adequate wound support in elderly, malnourished or debilitated patients, or in patients suffering from conditions which may delay wound healing, infection, minimal acute inflammatory tissue reaction localized irritation when skin sutures are left in place for greater than 7 days, suture extrusion and delayed absorption in tissue with poor blood supply, calculus formation in urinary and biliary tracts when prolonged contact with salt solution such as urine and bile occurs, and transitory local irritation at the wound site.

HOW SUPPLIED

FASTSORB sutures are available as sterile, braided, undyed (beige) strands in sizes 8/0 thru 6 (metric sizes 0.4 – 8.0) in a variety of lengths, with a variety of needles. FASTSORB sutures are available in one, two and three dozen boxes. FASTSORB suture is supplied sterile.

STORAGE

Store below 25 °C and keep away from sunlight. Protect from humidity. Do not use after expiry date.

SYMBOLS USED ON LABELLING

	Do not reuse!		Catalogue Number
	Do not re-sterilize		Store below 25°C
	Do not use if pack age is damaged		Keep away from sunlight
	Manufacturer		Protect from humidity
YYYY 	Date of Manufacture, Year		Recyclable pack
YYMM 	Expiry Date, Year- Month		Attention, See instruction for use
	Sterile R: Irradiation		
	Batch Number		
	Undyed, Absorbable, Braided, Coated		

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"EASSI(The European Association of Surgical Suture Industry) has developed a system of symbols which is designed to describe various suture product characteristics in an intuitive, pictorial manner. The use of symbols is permitted by the Medical Device Directive (MDD 93/42/EEC) and enables companies to provide information to the customer without having to provide multilingual translations."

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FR

FASTSORBChirurgie, Acide polyglycolique
PGA absorbable rapide Suture
Synthétique, Multifilament, Tressé, Non coloré

Mode d'emploi

DESCRIPTION

La suture d'acide Polyglycolique Dégradée Chirurgicale (PGA) FASTSORB ; synthétique, stérile, absorbable, est l'homopolymère de l'acide glycolique. La formule empirique de l'acide polyglycolique est $(-O-CH_2-CO-O-CH_2-CO-)_n$. La chaîne du polymère est dégradée par la radiation de gamma. FASTSORB est revêtu avec le mélange de calcium stéarate $(C_{18}H_{35}O_4Ca)$ et polycaprolactone $(C_{12}H_{22}O_5)_n$. La suture et le matériel de revêtement sont inertes, non collagènes, non antigéniques et non pyrogènes. La suture de FASTSORB n'est pas teint et a la couleur de beige naturel.

INDICATIONS

La suture de FASTSORB est indiquée pour l'utilisation dans l'approximation et/ou ligature des tissus mous en général couvrant aussi les procédures ophtalmiques mais non pour l'utilisation dans les tissus cardiovasculaires et neurologiques. La suture de FASTSORB est destinée à une utilisation unique.

EFFICACITÉ

La suture de PGA suscite une réaction aigue faible dans le tissu et une croissance des tissus connectifs fibreux. Une perte progressive de force de traction et une absorption éventuelle de la suture PGA, surviennent par hydrolyse peu à peu et diminue la force dans le corps. Après l'hydrolyse, le carbone dioxyde et l'eau sont rejetés du corps. L'Absorption commence par la perte de la force de traction poursuivie par la perte de masse. La suture de PGA retient environ les 75% de la force de traction dans 7 jours. Elle perd sa force dans 42 jours.

CONTRE-INDICATIONS

Les sutures qui sont absorbables ne doivent pas être utilisées où une approximation extensive de tissu est requise. Les sutures ne doivent pas être utilisées pour les tissus cardiovasculaires et neurochirurgicaux.

AVERTISSEMENTS

Les utilisateurs doivent être familiers avec les procédures et techniques chirurgicales couvrant les sutures absorbables avant l'emploi pour la fermeture de plaie, car le risque de déhiscence de la plaie peut varier avec la zone d'application et le matériel de suture utilisé. Les physiiciens doivent considérer la performance in vivo (sous la section EFFICACITÉ) en choisissant la suture pour l'utilisation chez les malades. Les sutures épidermiques qui doivent rester en place plus de 7 jours peuvent causer une irritation localisée et doivent être décollées ou enlevées de cette zone comme usité. Dans certains cas, notamment dans les procédures orthopédiques, l'immobilisation du site par le support externe peut être utilisée à la discrétion du chirurgien. Etant donné que le fil peut être rejeté et que l'absorption peut se retarder, cette situation doit être tenue en compte lors de l'utilisation des fils absorbables dans le tissu ou la circulation du sang est faible. L'utilisateur doit être familier aux procédures et techniques chirurgicales.

Comme avec tout corps étranger, le contact prolongé de toute suture avec les solutions de sel, telles que celles trouvées dans les voies urinaires ou biliaires peuvent résulter à la formation de calcul. Ne pas réstériliser. Détruire les sachets ouverts et les sutures non utilisées. Une pratique chirurgicale acceptable doit être poursuivie pour la gestion des plaies contaminées ou infectées.

PRÉCAUTIONS

Lors de la manipulation du FASTSORB ou d'autres matériaux de suture, on doit être attentif à éviter d'endommager la suture et l'aiguille. Éviter les endommagements comme le broyage et le serrage résultant de l'application des outils chirurgicaux comme le forceps ou le porte-aiguille. Pour éviter d'endommager les points de l'aiguille et les zones de d'épaulement, agrippez l'aiguille dans une zone tierce (1/3) à une-demi (1/2) de la distance de l'extrémité

foncée à la pointe. Le remodelage des aiguilles leur assure une perte de force et le rendre moins résistantes à la flexion et à la rupture. Les utilisateurs doivent faire attention à la manipulation des aiguilles chirurgicales pour éviter les piqûres d'aiguilles accidentelles. Les sutures PGA qui sont traitées pour augmenter les caractéristiques de manipulation demandent la technique chirurgicale acceptée des nœuds droits et carrés avec des jets supplémentaires comme garanti par les circonstances chirurgicales et les expériences du chirurgien.

Éviter l'exposition prolongée aux températures élevées. La disposition des produits contaminés et non utilisés est en conformité avec les exigences locales et d'installation. Jeter les aiguilles utilisées dans des conteneurs "pour objets pointus".

EFFETS SECONDAIRES

Les effets secondaires liés à l'utilisation de l'appareil couvrent la déhiscence de la plaie, le manque de soutien de plaie pour les zones de gonflement, d'extension ou d'élargissement, le manque de soutien de plaie pour les patients souffrants étant donné de leur âge, la malnutrition ou leur faiblesse, l'infection, la réaction inflammatoire aigue minimale, l'irritation locale dans le cas où la suture reste plus de 7 jours sur la peau, l'exclusion de suture et l'absorption retardée dans le tissu avec une fourniture faible sanguine, la formation de calculs dans les voies urinaires et biliaires lorsqu'il existe un contact prolongé avec la solution de sel comme la bile d'urine et l'irritation locale provisoire dans la zone de plaie.

COMMERCIALISATION

Les sutures de FASTSORB sont disponibles en bresse s, stériles, sans couleur (beige) dans les dimensions de 8-0 thru 6 (dimension métrique 0.4 - 8.0) dans une variété de longueurs, avec une variété d'aiguilles. Les sutures de FASTSORB sont disponibles dans des boîtes à une, deux et trois douzaines. Les sutures de FASTSORB sont stériles.

CONSERVATION

Conserver sous la température de 25°C et garder loin des rayons solaires.

Protéger de l'humidité.

Ne pas utiliser après la date limite de consommation.

SIGNES UTILISÉS POUR L'ÉTIQUETAGE

	Pour utilisation unique		Numéro de catalogue
	Ne pas stériliser à nouveau		Conserver sous 25°C
	Ne pas utiliser si l'emballage est endommagé		Protéger du soleil
	Fabricant		Conserver dans un lieu sec
YYYY 	Date de production, Année		Emballage recyclable
YYYY-MM 	Date d'expiration, Année - mois		Attention, Voir les instructions d'utilisation
	STERILE R Stérile R: Radiation		2292
	LOT No de série		Sans peinture, absorbable, tressé, revêtu.

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"EASI" (Association d'Industrie de la Suture Européenne de Chirurgie) a développé un système conçu pour identifier comme intuitive et imagée les caractéristiques des différents produits de suture. Le Directive sur les Dispositifs Médicaux (Medical Device Directive) (MDD 93/42/EEC) permet d'utiliser le symbole et il permet les informations aux utilisateurs des fabricants sans obliger à traduire en plusieurs langues.

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التاريخ: 15-09-2018
FASTSORB حاضري الالتهاب
 خطلة في 93.42% المتخصصين مع
 استحداثها، معاهد التخصصات، مستطفر، غير مسوع

التاريخ: 15-09-2018
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 استحداثها، معاهد التخصصات، مستطفر، غير مسوع

التيارات الحامضية
 التيارات الحامضية المتعلقة بالاضطرابات البنيوية، الفلاح الحوض، عدم توتر الدم والوزن الموحج في حالة حدوث توترات والاضطرابات وهدد في مفاصل الحياض الحامضية الحوض، عدم توتر الدم الكافي الحوض الذي تسبب الالتهاب الحوض في سوء التغذية أو الذين يعانون من ضعف تدفق الدم إلى التمارين والاضطرابات الحوض، حدوث التهاب في التواء الحوض الحامضية بعد 7 أيام من الضغط، أو حدوث حصول المفاصل في المفاصل في منطقة الالتهاب الحامضية الحوض في التيارات البنيوية الضخمة والتهال المضطرب، تكون حصى ورسوبات في الحياض الحوض الذي قد تامة لحدوث طرية مع احتياض الشبيهة مع حدوث تورمات في المناطق التي استخدمتها.

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الرموز المستخدمة في العبوة

رقم الكاتالوج **REF**

تحتفظ بدرجة مئوية **25** درجة مئوية

تحتفظ بعدد من التجمعات

تحتفظ في مكان بعيد عن الرطوبة

قابلة لإعادة التدوير

تحظر، انظر إرشادات الاستخدام

لا تستخدم مرادف

لا تفتح وإجراء التعديل مرة أخرى

لا تستخدم في حالات الطوارئ

الصنع

تاريخ الإنتاج / السنة **YYYY**

تاريخ انتهاء الصلاحية / سنة / الفصح **YYYY-MM**

مستطفر **STERILE R**

رقم اللوحة **LOT**

غير مطروحين، قابل للتخصصين، متشابهة، مصفح

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 استحداثها، معاهد التخصصات، مستطفر، غير مسوع

التاريخ: 15-09-2018
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BOZ TIBBI MALZEME SANAYI VE TICARET A.Ş.
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Fastorb

Surgical Suture, Polyglycolicacid (PGA)
Fast Absorbable, Synthetic, Braided, Undyed

Surgical Sutures
Absorbable



BOZ[®]

Definition

Synthetic absorbable, coated, short term wound support and short term mass absorption.

Material

Polyglycolic Acid (PGA)

Coating

Calcium Stearate and polycaprolactone

Structure

Braided

Colour

Beige (undyed)

Size

EP : 0.4 to 8

USP : 8/0 to 6

Tensile Strength Retention

7 Days 75 %

Mass Absorption

42 days

Sterilization Method

Gamma Irradiation

Main Indication

Gynaecology (episiotomies)

Urology

Ophthalmic surgery (conjunctive suturing)

Odontology (oral mucosa)

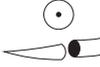
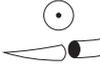
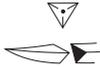
Pediatric surgery

Skin closer - intracutaneous, subcutaneous.

Ligatures

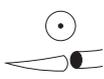
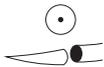
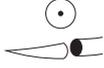
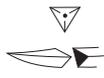
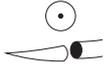
Fastorb

Surgical Suture, Polyglycolicacid (PGA) Fast Absorbable, Synthetic, Braided, Undyed

Needle Length and description	Product No	USP EP	Length (cm)	Unit Pcs	Color	
12 mm						
3/8 Reverse Cutting 330 Micron	 	FS1545	6/0 0,7	75	12	Undyed
13 mm						
1/2 Round Body, Taper Point 330 Micron	 	FS1563	6/0 0,7	75	12	Undyed
1/2 Round Body, Taper Point 380 Micron	 	FS1886	5/0 1,0	75	12	Undyed
3/8 Reverse Cutting 330 Micron	 	FS5912	6/0 0,7	75	12	Undyed
3/8 Reverse Cutting 380 Micron	 	FS1929	5/0 1,0	75	12	Undyed
3/8 Reverse Cutting Premium 380 Micron	 	FS1941	5/0 1,0	45	12	Undyed
16 mm						
1/2 Round Body, Taper Point	 	FS1989	5/0 1,0	75	12	Undyed
		FS2503	4/0 1,5	75	12	Undyed
3/8 Reverse Cutting	 	FS1673	6/0 0,7	75	12	Undyed
		FS2019	5/0 1,0	75	12	Undyed
		FS2539	4/0 1,5	75	12	Undyed
3/8 Inside Cutting	 	FS2557	4/0 1,5	75	12	Undyed
		FS3038	3/0 2,0	75	12	Undyed
19 mm						
3/8 Reverse Cutting	 	FS2639	4/0 1,5	75	12	Undyed
		FS3108	3/0 2,0	75	12	Undyed
20 mm						
1/2 Round Body, Taper Point	 	FS2228	5/0 1,0	75	12	Undyed

Fastorb

Surgical Suture, Polyglycolicacid (PGA) Fast Absorbable, Synthetic, Braided, Undyed

Needle Length and description			Product No	USP EP	Length (cm)	Unit Pcs	Color
20 mm							
1/2 Round Body, Taper Point			FS2683	4/0 1,5	75	12	Undyed
			FS3141	3/0 2,0	75	12	Undyed
3/8 Reverse Cutting			FS2250	5/0 1,0	75	12	Undyed
22 mm							
1/2 Round Body, Taper Point			FS2745	4/0 1,5	75	12	Undyed
25 mm							
1/2 Round Body, Taper Point			FS2787	4/0 1,5	75	12	Undyed
			FS3251	3/0 2,0	75	12	Undyed
3/8 Reverse Cutting			FS3273	3/0 2,0	75	12	Undyed
			FS3756	2/0 3,0	75	12	Undyed
26 mm							
1/2 Round Body, Taper Point			FS3785	2/0 3,0	75	12	Undyed
			FS4214	0 3,5	75	12	Undyed
3/8 Reverse Cutting			FS3821	2/0 3,0	75	12	Undyed
			FS4236	0 3,5	75	12	Undyed
			FS3345	3/0 2,0	75	12	Undyed
30 mm							
1/2 Round Body, Taper Point			FS3368	3/0 2,0	75	12	Undyed
			FS3857	2/0 3,0	75	12	Undyed
			FS4243	0 3,5	75	12	Undyed
			FS4607	1 4,0	75	12	Undyed

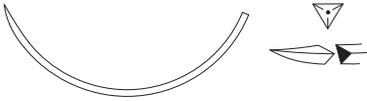
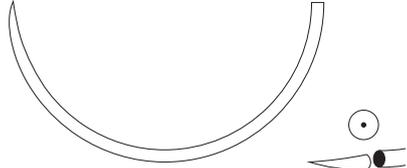
Fastorb

Surgical Suture, Polyglycolicacid (PGA) Fast Absorbable, Synthetic, Braided, Undyed

Needle Length and description	Product No	USP EP	Length (cm)	Unit Pcs	Color
30 mm					
3/8 Reverse Cutting 	FS2885	4/0 1,5	75	12	Undyed
	FS3396	3/0 2,0	75	12	Undyed
	FS4628	1 4,0	75	12	Undyed
35 mm					
1/2 Round Body, Taper Point 	FS3915	2/0 3,0	75	12	Undyed
	FS4299	0 3,5	75	12	Undyed
	FS4305	0 3,5	90	12	Undyed
	FS4643	1 4,0	75	12	Undyed
	FS4648	1 4,0	90	12	Undyed
3/8 Reverse Cutting 	FS3422	3/0 2,0	75	12	Undyed
	FS3932	2/0 3,0	75	12	Undyed
37 mm					
1/2 Round Body, Taper Point 	FS3954	2/0 3,0	90	12	Undyed
40 mm					
1/2 Round Body, Taper Point 	FS3981	2/0 3,0	75	12	Undyed
	FS3988	2/0 3,0	90	12	Undyed
	FS4367	0 3,5	75	12	Undyed
	FS4374	0 3,5	90	12	Undyed

Fastorb

Surgical Suture, Polyglycolicacid (PGA) Fast Absorbable, Synthetic, Braided, Undyed

Needle Length and description	Product No	USP EP	Length (cm)	Unit Pcs	Color
40 mm					
1/2 Round Body, Taper Point 	FS4712	1 4,0	75	12	Undyed
	FS4718	1 4,0	90	12	Undyed
	FS5001	2 5,0	75	12	Undyed
3/8 Reverse Cutting 	FS4005	2/0 3,0	75	12	Undyed
45 mm					
1/2 Round Body, Taper Point 	FS4421	0 3,5	75	12	Undyed
	FS4771	1 4,0	75	12	Undyed
	FS5034	2 5,0	75	12	Undyed
Straight Reverse Cutting 	FS2911	4/0 1,5	75	12	Undyed
50 mm					
1/2 Round Body, Taper Point 	FS4037	2/0 3,0	75	12	Undyed
	FS4453	0 3,5	75	12	Undyed
	FS4811	1 4,0	75	12	Undyed
	FS5065	2 5,0	75	12	Undyed
65 mm					
1/2 Round Body, Taper Point 	FS4864	1 4,0	100	12	Undyed

Fastorb

Surgical Suture, Polyglycolicacid (PGA) Fast Absorbable, Synthetic, Braided, Undyed

Non-Needle Suture	Product No	USP EP	Length (cm)	Unit Pcs	Color
150 cm					
<p align="center">FASTSORB Non-Needle Suture</p>	FS1373	6/0 0,7	150	12	Undyed
	FS2325	4/0 1,5	150	12	Undyed
	FS2934	3/0 2,0	150	12	Undyed
	FS3510	2/0 3,0	150	12	Undyed
	FS4113	0 3,5	150	12	Undyed
	FS4531	1 4,0	150	12	Undyed
	FS4907	2 5,0	150	12	Undyed

Prospektüs Prospectus

GLIKOSORB

Emilebilir Cerrahi Ameliyat İpliği

Absorbable Surgical Sutures

Lütfen dilinizi seçiniz
Please select your language



TR

GLIKOSORB

Kullanma Talimatı

Cerrahi, Poliglikolik Asit
Emilabilir PGA Sütu
Sentetik, Multiflaman, Örgülü, Ünyedey/Violet

TANIM

GLIKOSORB glükolik asidin homopolimerinden oluşan sentetik, steril, emilabilir cerrahi poliglikolik asit (PGA) ipliklerdir. Poliglikolik asidin ampirik formülü ($C-O-CH_2-CO-O-C-CH_2-CO$ -)n şeklindeindir. GLIKOSORB kaplama malzemesi kalsiyum stearat ($C_{18}H_{35}O_2$) ve polikaprolaktan ($C_6H_{10}O_2$)n karışımından oluşur. GLIKOSORB iplik ve kaplama maddeyi inert, kolajen yapıda olmayan, antienfem ve pıhtılaşmaya meydan vermez. Dokuda rahat gürbülentiği sağlamak için mor renge boyanmıştır (D&C Violet No.2.C.I. 860725/Solvent Violet 13)

KULLANILMALANI

GLIKOSORB iplik, oftalmik uygulamalarına da dahil olduğu genel yumuşak dokü kapaması veya/ya kaplama malzemesi kullanılır. Kalp-damar ve sinirsel dokularda kullanılmaz. GLIKOSORB iplik tek kullanımlıdır.

ETKİLERİ

Cerrahi PGA iplik dokuda hafif bir şekilde akute reaksiyonu gösterebilir ve fibröz bağ dokü oluşumu ortlaya çıkar. Hidrozis sonrasında PGA ipliğın mukavemeti azalır ve emilimi gerçeleşir. Hidrozis sonucunda su ve karbondioksit meydana gelir ve vücut dışına atılır. Kütle kaybını takiben kopma mukavemetinin azalması ile emilim başlar. PGA iplik implantasyondan sonraki 2 hafta içerisinde orijinal gerilme mukavemetinin yaklaşık %75 ini muhafaza eder. USP 6-B ve daha büyük olanlar üçüncü haftada orijinal gerilme mukavemetlerinin yaklaşık %50 sini, USP 7-A ve daha küçük olanlar ise orijinal gerilme mukavemetlerinin yaklaşık %40 ını korur. Implantasyondan sonra orijinal gerilme mukavemetlerinin tamamını döndürdü ve beşinci haftalarda kaybeder. 60-90 gün içerisinde ise tamamı emilir.

KULLANILMAMASI GEREKEN YERLER

Emilirip iz olmasından dolayı uzun süreli dokü desteği gereken kapamalarda kullanılmamalıdır. Kalp-damar ve sinirsel dokularda kullanılmamalıdır.

UYARILAR

Yara ayırması riski, uygulanın bölgeye ve kullanılan sütu malzemesine göre değiştiğinden kullanıcının yara kapaması için sütu kullanımdan önce emililen sütu larının kullanıldığı cerrahi prosedürler ve tekniklere aşına olması gerekir. Doktorlar hastalarda kullanılmak üzere seçmeden önce in vivo performans (ETKİLERİ kısmının altında) dikkate almalıdır.

Deride 7 günden fazla kalın altı ciltli alan bölge sel tahriş sebeb olabilir. Bu durumda sütu lar kesilmesi ya da uzaklaştırılmalıdır.

Bazı durumlarda, özellikle ortopedik prosedürlerde, üç desteklerin immobilizasyonu gerektirir sağduyusuna göre yönlendirilmelidir. Iplik dışarı atılabileceği ve emilim gerçekleşebileceği için bu durum, emilirip ipliklerin zaman ka anımmın olduğu doküda kullanılmadığı göz önünde bulundurulmalıdır. Ipliklerin kordon, safra ya da üriner sistemdeki gibi mevcut olan tü çözümleri ile uzun süreli temas taş oluşumuna sebebiyet verebilir. Tekrar steril etmeyiniz. Açılış poşetleri ve kullanılmayan ipleri imha ediniz.

Kontamine veya ilthaplı yaraların tedavisi için kabul edilmiş cerrahi uygulamalar izlenmelidir.

ÖNEMLER

PGA ipliğın veya diğer tüm cerrahi ipliklerin kullanımında ipliğe ve iğneye zarar vermekten kaçınılmalıdır. Forseps veya iğne tutucu gibi cerrahi aletlerin kullanımına bağlı ezme veya çarpma hatalarından kaçınılmalıdır. Ipliklerin kordon, safra ya da üriner sistemdeki gibi mevcut olan tü çözümleri ile uzun süreli temas taş oluşumuna sebebiyet verebilir. Tekrar steril etmeyiniz. Açılış poşetleri ve kullanılmayan ipleri imha ediniz.

direrlerinin azalmasını neden olabilir. İstem dışı iğne batmalarından kaçınım için kullanıcıların cerrahi iğne kullanırken dikkatli olmaları gerekir. PGA iplikler, kullanım karakteristiğini arttırmak için cerrahi şartlara ve cerrahin tercihine bağlı olarak garanti altına alınan kabul görmüş ölçü ve kare ölçüm teknikleri ile beraber ilave ölçümler gerçekleştirir.

Yüksek sıcaklıklara uzun süre maruz bırakılmaması gerekir.

Kontamine ve kullanılmamış ürünlü bölge sel ve taş oluşum risklerini emirli uygun olarak imha ediniz.

Kullanılan iğneleri "kesici alet" kaplarına atınız.

YANETKİLER

Bu cihazın kullanımına bağlı yan etkiler; yararın açılması, şişme, gerilme ya da gerilmesinin oluştuğü bölge lin kapatılmasında yeterli yara desteğinin sağlanmaması, yarı, yarı beslenen ya da aşırı zayıf hastalarda ya da yara iyileşmesinin gerçekleşmesinden dolayı rahatsızlık çeken hastalarda yeterli yara desteğinin sağlanmaması, enfeksiyon, minimal akut dokü yangı reaksiyonu, ipliğın çit üzerinde 7 günden daha fazla kalması durumunda bölge sel tahriş, ipliklerin zayıf ka anımmın olduğu doküda diparı atılması ve emiliminin başlaması, uzun süreli tü çözümleri ile temas taş üriner sistemde ve safra toru (taş) oluşumu ve yaradığı geçici bölge sel tahrişine sebep olabilir.

PIYASAYARZ-SUNUŞ ŞEKLİ

GLIKOSORB iplikler Örgülü, boyanmış (mor) ve boyanmamış olarak U.S.P. 8/0 ve 6 (metrik 0.4 - 8) arasında, değişik boyalarda, iğneli olarak mevcuttur.

GLIKOSORB iplikler bir, iki veya üç düznelik kutularda bulunmaktadır.

GLIKOSORB iplikler steril olarak arz edilir.

DEPOLAMA

25°C'nin altında ve güneş ışığından uzaktaki depolayınız.

Nemden koruyunuz.

Son kullanma tarihinden sonra kullanılmayınız.

ETKİLEMEDE KULLANILAN İŞRETLER

2 tek kullanımlık



Boyasız Emilirip/Örgülü Kaplama



Tekrar steril etmeyiniz



Katalog numarası



Paket zarar görmüşse kullanmayınız



25°C'nin altında muhafaza ediniz



Üretici



Güneğten uzak tutunuz



YYYY-MM Üretim tarihi, Yy



Nemden koruyunuz



YYYY-MM Son kullanma tarihi, Yy/Ay



Geni dönüşümlü paket



STERILE EO Steril Edo: Etenoksit



Dikkat, Kullanma kılavuzuna bakınız



Lot Seri No



2292

Boye li, Emilirip, Örgülü, Kaplama

IFU-GS-rev-06-15-01-2018

Issue date: 11.09.2012

"EASİ (Avrupa Cerrahi Sütu Sanayi Birliğı) çeşitli sütu ürün karakteristilerini seçmiş ve resmî olarak tanımlamış iğne tasarlama bir sistem geliştirmiştir. Sembol kullanımına İbibi Çihaz Direktifi (Medical Device Directive) (MDD 93/42/EEC) izin vermektedir ve çöklü di türmesine gerek kalmadan ürünlere klinisyenler arasında bilgi sağlanmasına imkan tanımaktadır. "

BOZ TIBBİ MALZEME SANAYİ VE TİCARET A.Ş.
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Tel: +90 (312) 254 03 40 (5 hat) Faks:+90 (312) 254 03 50
web: www.boztibbi.com e-mail: boz@boztibbi.com

BOZ

GB

GLIKOSORBSurgical, Polyglycolic Acid
Absorbable PGA Suture
Synthetic, Multifilament, Braided, Undyed/Violet

Instruction for Use

DESCRIPTION

GLIKOSORB Surgical Polyglycolic acid (PGA) suture; synthetic, sterile, absorbable, is homopolymer of glycolic acid. The empirical formula of polyglycolic acid is $(-O-CH_2-CO-O-CH_2-CO-)_n$. GLIKOSORB is coated with the mixture of calcium stearate $(C_{18}H_{35}O_2Ca)$ and polyacrylonitrile $(C_3H_3.5O_n)$. The suture and coating material are inert, noncollagenogenic, nonantigenic, and non-pyrogenic. Coloured violet (D&C Violet No. 2 C.I. # 60725 / Solvent Violet 13) to enhance visibility in tissue.

INDICATIONS

GLIKOSORB suture is indicated for use in general soft tissue approximation and/or ligation, including use in ophthalmic procedures but not for use in cardiovascular and neurological tissues. GLIKOSORB suture is for single use only.

ACTIONS

PGA suture elicits a minimal acute inflammatory reaction in tissue and ingrowth of fibrous connective tissue. Progressive loss of tensile strength and eventual absorption of PGA suture occurs by means of hydrolysis gradually and decreases the strength in the body. After hydrolysis it's executed from the body as carbon dioxide and water. Absorption begins as a loss of tensile strength followed by a loss of mass. PGA suture retains approximately 75% of the original tensile strength (Break Strength Retention-BSR) at two weeks post implantation. At three weeks, approximately 50% of the original tensile strength (Break Strength Retention-BSR) is retained for sizes 6-0 and larger and approximately 40% of its original tensile strength (Break Strength Retention-BSR) is retained for sizes 7-0 and smaller. All of the original tensile strength (Break Strength Retention-BSR) is lost between four and five weeks post implantation. In 60-90 days it is totally absorbed.

CONTRAINDICATIONS

The sutures being absorbable should not be used where extended approximation of tissue is required. The sutures should not be used for cardiovascular and neurosurgical tissue.

WARNINGS

Users should be familiar with surgical procedures and techniques involving absorbable sutures before employing for wound closure, as risk of wound dehiscence may vary with the site of application and the suture material used. Physicians should consider the in vivo performance (under ACTIONS section) when selecting a suture for use in patients.

Skin sutures which must remain in place longer than 7 days may cause localized irritation and should be snipped off or removed as indicated.

Under some circumstances, notably orthopedic procedures, immobilization of joint by external support may be employed at the discretion of the surgeon. Consideration should be taken in the use of absorbable sutures in tissues with poor blood supply, as suture extrusion and delayed absorption may occur.

As with any foreign body, prolonged contact of any suture with soft solutions, such as those found in the urinary or biliary tracts may result in calculus formation. Do not resterilize. Discard open packages and unused sutures. Acceptable surgical practice should be followed for the management of contaminated or infected wounds.

PRECAUTIONS

In handling PGA or any other suture materials, care should be taken to avoid damage to needle and suture. Avoid crushing or crimping damage due to application of surgical instruments such as forceps or needle holders.

To avoid damaging needle points and swage areas, grasp the needle in an area one-third (1/3) to one-half (1/2) of the distance from the swaged end to the point. Reshaping needles may cause them to lose strength and be less resistant to bending and breaking. Users should exercise caution when handling surgical needles to avoid inadvertent needle sticks.

PGA sutures, which are treated to enhance handling characteristics requires the accepted surgical technique of flat and square ties with additional throws as warranted by surgical circumstances and experiences of the surgeon.

Avoid prolonged exposure to elevated temperatures.

Dispose of contaminated and unused products are in accordance with local and facility requirements. Discard used needles in "sharps" containers.

ADVERSE REACTIONS

Adverse effects associated with the use of the device include wound dehiscence, failure to provide adequate wound support in closure of the sites where expansion, stretching, or distension occur, failure to provide adequate wound support in elderly, malnourished or debilitated patients, or in patients suffering from conditions which may delay wound healing, infection, minimal acute inflammatory tissue reaction localized irritation when skin sutures are left in place for greater than 7 days, suture extrusion and delayed absorption in tissue with poor blood supply, calculus formation in urinary and biliary tracts when prolonged contact with salt solution such as urine and bile occurs, and transitory local irritation at wound site.

HOW SUPPLIED

GLIKOSORB sutures are available braided, dyed (violet) and undyed strands in sizes 8/0 thru 6 (metric sizes 0.4 – 8) in a variety of lengths, with a variety of needles. GLIKOSORB sutures are available in one, two and three dozen boxes. GLIKOSORB suture is supplied sterile.

STORAGE

Store below 25 °C and keep away from sunlight. Protect from humidity. Do not use after expiry date.

SYMBOLS USED ON LABELLING

 Do not heat	 Undyed, Absorbable, Braided, Coated
 Do not resterilize	 Catalogue Number
 Do not use if pack age is damaged	 Store below 25°C
 Manufacturer	 Keep away from sunlight
YYYY  Date of Manufacture, Year	 Protect from humidity
 YYYY-MM Epiry Date, Year-Month	 Recyclable pack
 STERILE EO Sterile EO: Ethylene oxide	 Attention, See instruction for use
 LOT Batch Number	 Dyed, Absorbable, Braided, Coated
 Dyed, Absorbable, Braided, Coated	 CE 2292

IFU-GS-rev-06-15-01-2018

Issue date: 11.09.2012

"EASSI (The European Association of Surgical Suture Industry) has developed a system of symbols which is designed to describe various suture product characteristics in an intuitive, pictorial manner. The use of symbols is permitted by the Medical Device Directive (MDD 93/42/EEC) and enables companies to provide information to the customer without having to provide multilingual translations."

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FR

GLIKOSORB

Mode d'emploi

Chirurgie, Acide polyglycolique
 PGA absorbable, Suture
 Synthétique, Multifilament, Tressé, Non coloré/Violet

DESCRIPTION

GLIKOSORB Suture d'Acide Polyglycolique ; synthétique, stérile, absorbable, est un homopolymère de l'acide glycolique. La formule empirique de l'acide glycolique est $(-O-CH_2-CO-O-CH_2-CO-)$. **GLIKOSORB** est revêtu avec le mélange de calcium stéarate $(C_{18}H_{35}O_2)_2$ et polyacrylate $(C_4H_6O_2)$. La suture et le matériel de revêtement sont inertes, non collagènes, non arithrogéniques, et non-pyrogènes. Il est coloré en violet (D&C White No. 2 C.I. # 60729 Solvent Violet 13) pour permettre la visibilité dans le tissu.

INDICATIONS

La suture de **GLIKOSORB** est indiquée pour l'usage général dans l'approximation et/ou la suture du tissu mou, couvrant aussi l'usage dans les procédures ophtalmiques mais non pour l'usage dans les tissus cardiovasculaires et neurologiques. La suture de **GLIKOSORB** est pour utilisation unique.

EFFICACITÉ

La suture PGA suscite une réaction inflammatoire aigue minimale dans le tissu et une croissance de tissu connectif fibreux. Une perte progressive de force et une absorption éventuelle de la suture PGA survient par hydrolyse peu à peu et diminue la force dans le corps. Après hydrolyse, elle est rejetée du corps comme carbone dioxide et eau. L'Absorption commence comme une perte de force extensible suivie d'une perte de masse. La suture de PGA réticent approximativement les 75% de la force extensible originale après une implantation de deux semaines. A trois semaines, environ les 50% de la force extensible originale sont retenus pour les USP 6-0 et supérieurs et environ les 40% de sa force extensible originale sont retenus pour les USP 7-0 et inférieurs. Elle perd la totalité de sa force de tension originale dans la quatrième et cinquième semaine après l'implantation. Elle est entièrement absorbée dans 60-90 jours.

CONTRE-INDICATIONS

Les sutures étant absorbables ne doivent pas être utilisées dans les zones nécessitant un soutien de tissu de longue durée. Les sutures ne doivent pas être utilisées pour les tissus cardiovasculaires et neurochirurgiques.

AVERTISSEMENTS

Les utilisateurs doivent être familiers avec les procédures et techniques chirurgicales couvrant les sutures absorbables avant l'emploi pour la fermeture de plaie, car le risque de déhiscence de la plaie peut varier avec la zone d'application et le matériel de suture utilisé. Les physiciens doivent considérer la performance in vivo (sous la section EFFICACITÉ) en choisissant la suture pour l'utilisation chez les malades.

Les sutures épidémiques qui doivent rester en place plus de 7 jours peuvent causer une irritation localisée et doivent être découpées ou enlevées de cette zone comme indiqué. Dans certains cas, notamment dans les procédures orthopédiques, l'immobilisation du joint par le support externe peut être utilisée à la discrétion du chirurgien. Les sutures épidémiques qui doivent rester en place plus de 7 jours peuvent causer une irritation localisée et doivent être découpées ou enlevées de cette zone comme indiqué. Comme une extrusion de suture et une absorption retardée peuvent survenir dans l'utilisation des sutures absorbables dans les tissus avec une faible fourniture de sang, il faut tenir en compte cette situation.

Comme avec tout corps étranger, le contact prolongé de toute suture avec les solutions de sel, telles que celles trouvées dans les voies urinaires ou biliaires peuvent résulter à la formation de calcul. Ne pas ré-stériliser. Détruire les sachets ouverts et les sutures non utilisées.

Une pratique chirurgicale acceptable doit être poursuivie pour la gestion des plaies contaminées ou infectées.

PRÉCAUTIONS

Lors de la manipulation de PGA ou d'autres matériaux de suture, on doit être attentif à éviter d'endommager la suture et l'aiguille. Éviter les endommagements comme le broyage et le serrage résultant de l'application des outils chirurgicaux comme le forceps ou le porte-aiguille.

Pour éviter d'endommager les points de l'aiguille et les zones de détente, agrippez l'aiguille dans une zone tierce (1/3) à une-demi (1/2) de la distance de l'extrémité forcée à la pointe. Le remodelage des aiguilles peut leur causer une perte de force et les rendre moins résistantes à la flexion et à la rupture. Les utilisateurs doivent faire attention à la manipulation des aiguilles chirurgicales pour éviter les piqûres d'aiguilles accidentelles. Les sutures PGA qui sont traitées pour augmenter les caractéristiques de manipulation demandent la technique chirurgicale acceptée des nœuds droits et carrés avec des jets supplémentaires comme garanti par les circonstances chirurgicales et les expériences du chirurgien.

Éviter l'exposition prolongée aux températures élevées.

La disposition des produits contaminés et non utilisés est en conformité avec les exigences locales et d'installation. Jeter les aiguilles utilisées dans des conteneurs "pour objets pointus".

EFFETS SECONDAIRES

Les effets secondaires liés à l'utilisation de l'appareil couvrent la déhiscence de la plaie, le manque de soutien de plaie pour les zones de gonflement, d'extension ou d'élargissement, le manque de soutien de plaie pour les patients souffrants étant donné de leur âge, la malnutrition ou leur faiblesse, l'infection, la réaction inflammatoire aigue minimale, l'irritation locale dans les cas où la suture reste plus de 7 jours sur la peau, l'extrusion de suture et l'absorption retardée dans le tissu avec une fourniture faible sanguine, la formation de calcul dans les voies urinaires et biliaires lorsqu'il existe un contact prolongé avec la solution de sel comme la bile et l'urine et l'irritation locale provisoire dans la zone de plaie.

COMMERCIALISATION

Les sutures **GLIKOSORB** sont disponibles en tresse, teintes (violet) et sans couleur dans les dimensions de 8-0 thru 5 (dimension métrique 0,4 – 8) dans une variété de longueurs avec une variété d'aiguilles. Les sutures **GLIKOSORB** sont disponibles dans des boîtes à une, deux et trois douzaines. Les sutures de **GLIKOSORB** sont stériles.

CONSERVATION

Conservez sous la température de 25°C et garder loin des rayons solaires.

Protéger de l'humidité.

Ne pas utiliser après la date limite de consommation.

SIGNES UTILISÉS POUR L'ÉTIQUETAGE

	Pour utilisation unique		Sans peinture, absorbable, tressé, revêtu
	Ne pas stériliser à nouveau		Numéro de catalogue
	Ne pas utiliser si l'emballage est endommagé		Conserver sous 25°C
	Fabricant		Protéger du soleil
	YYYY M Date de production, Année		Conserver dans un lieu sec
	YYYY-MM Date d'expiration, Année - mois		Emballage recyclable
	STERILE EO Stérile EO: l'oxyde d'éthylène		Attention, Voir les instructions d'utilisation
	LOT No de série		2292
	Av. de peinture, absorbable, tressé, revêtu		

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"EASSI (Association d'Industrie de la Suture Européenne de Chirurgie) a développé un système conçu pour identifier comme intuitif le matériel les caractéristiques des différents produits de suture. Le Directif sur les Dispositifs Médicaux (Medical Device Directive) (MDD 93/42/EEC) permet d'utiliser le symbole et il permet les informations aux utilisateurs des fabricants sans obliger à traduire en plusieurs langues.

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Surgical Sutures Absorbable

Glikosorb

Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

BOZ[®]



Definition

Synthetic absorbable, coated, mid term wound support and mid term mass absorption.

Material

Polyglycolic Acid (PGA)

Coating

Calcium Stearate and polycaprolactone

Structure

Braided - Multifilament

Colour

Violet (dyed) or Beige (undyed)

Size

EP : 0.4 to 8

USP : 8/0 to 6

Tensile Strength Retention

2. Week 75 % - 3. Week 50 %

Mass Absorption

60-90 days

Sterilization Method

Ethylene Oxide Gas

Main Indication

Gastrointestinal Surgery

Gynaecology

Ophthalmic Surgery

Orthopedics

Urology

Skin closer - intracutaneous, subcutaneous.

Ligatures

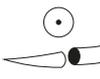
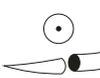
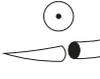
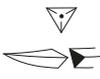
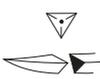
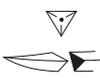
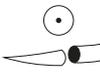
Glikosorb

Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

Needle Length and description	Product No	USP EP	Length (cm)	Unit Pcs	Color	
6 mm						
3/8 Spatula 220 Micron	 	GS5401	8/0 0,4	45	12	Violet
3/8 Spatula 230 Micron	 	GS1156	8/0 0,4	45	12	Violet
		GS1252	7/0 0,5	30	12	Violet
6,6 mm						
1/2 Cobra 230 Micron	 	GS5519	8/0 0,4	60	12	Violet
1/2 Cobra 280 Micron	 	GS5518	7/0 0,5	60	12	Violet
8 mm						
1/2 Spatula 230 Micron	 	GS1193	8/0 0,4	30	12	Violet
		GS1195	8/0 0,4	45	12	Violet
1/2 Spatula 330 Micron	 	GS1272	7/0 0,5	45	12	Violet
		GS1395	6/0 0,7	45	12	Violet
1/2 Spatula 340 Micron	 	GS5526	5/0 1,0	45	12	Violet
1/4 Spatula 230 Micron	 	GS1190	8/0 0,4	45	12	Violet
1/4 Spatula 250 Micron	 	GS5876	7/0 0,5	45	12	Violet
1/4 Spatula 340 Micron	 	GS1268	7/0 0,5	45	12	Violet
		GS1404	6/0 0,7	30	12	Violet
		GS1405	6/0 0,7	45	12	Violet
		GS1406	6/0 0,7	45	12	Undyed
		GS1764	5/0 1,0	45	12	Violet

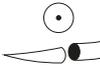
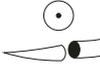
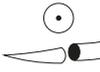
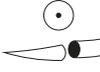
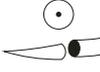
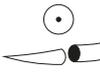
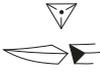
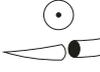
Glikosorb

Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

Needle Length and description	Product No	USP EP	Length (cm)	Unit Pcs	Color	
8 mm						
1/4 Spatula 430 Micron	 	GS2362	4/0 1,5	45	12	Violet
1/4 Spatula 430 Micron	 	GS2363	4/0 1,5	45	12	Violet
3/8 Round Body, Taper Point 230 Micron	 	GS1207	8/0 0,4	30	12	Violet
3/8 Round Body, Taper Point 280 Micron	 	GS1413	6/0 0,7	45	12	Violet
		GS1426	6/0 0,7	45	12	Violet
		GS1768	5/0 1,0	45	12	Violet
10 mm						
3/8 Round Body, Taper Point 280 Micron	 	GS1480	6/0 0,7	75	12	Violet
3/8 Reverse Cutting 330 Micron	 	GS1496	6/0 0,7	45	12	Violet
3/8 Reverse Cutting 330 Micron	 	GS1492	6/0 0,7	45	12	Violet
3/8 Inside Cutting 280 Micron	 	GS1508	6/0 0,7	45	12	Violet
12 mm						
3/8 Reverse Cutting 330 Micron	 	GS1541	6/0 0,7	45	12	Violet
3/8 Spatula 280 Micron	 	GS1523	6/0 0,7	45	12	Violet
13 mm						
1/2 Round Body, Taper Point 330 Micron	 	GS1560	6/0 0,7	45	12	Violet
		GS1564	6/0 0,7	75	12	Violet

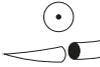
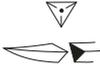
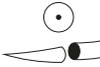
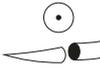
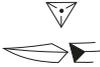
Glikosorb

Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

Needle Length and description			Product No	USP EP	Length (cm)	Unit Pcs	Color
13 mm							
1/2 Round Body, Taper Point 330 Micron			GS1561	6/0 0,7	45	12	Violet
1/2 Round Body, Taper Point 380 Micron			GS1885	5/0 1,0	75	12	Violet
1/2 Round Body, Taper Point 430 Micron			GS1894	5/0 1,0	75	12	Violet
3/8 Round Body, Taper Point 330 Micron			GS1580	6/0 0,7	45	12	Violet
			GS1590	6/0 0,7	75	12	Violet
3/8 Round Body, Taper Point 380 Micron			GS1914	5/0 1,0	75	12	Violet
3/8 Round Body, Taper Point 430 Micron			GS2432	4/0 1,5	45	12	Violet
			GS2434	4/0 1,5	60	12	Violet
3/8 Reverse Cutting 380 Micron			GS1928	5/0 1,0	75	12	Violet
3/8 Reverse Cutting 560 Micron			GS2456	4/0 1,5	75	12	Violet
3/8 Spatula 280 Micron			GS1605	6/0 0,7	45	12	Violet
3/8 Spatula 330 Micron			GS1873	5/0 1,0	60	12	Violet
3/8 Trocar 330 Micron			GS2416	4/0 1,5	45	12	Violet
16 mm							
1/2 Round Body, Taper Point			GS1990	5/0 1,0	75	12	Violet
			GS1992	5/0 1,0	75	12	Undyed
			GS2503	4/0 1,5	75	12	Undyed
			GS2504	4/0 1,5	75	12	Violet

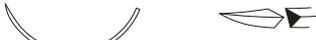
Glikosorb

Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

Needle Length and description			Product No	USP EP	Length (cm)	Unit Pcs	Color
16 mm							
1/2 Round Body, Taper Point			GS3005	3/0 2,0	75	12	Violet
			GS1674	6/0 0,7	75	12	Violet
3/8 Reverse Cutting			GS2014	5/0 1,0	45	12	Undyed
			GS2540	4/0 1,5	75	12	Violet
			GS3025	3/0 2,0	75	12	Violet
			GS2140	5/0 1,0	45	12	Violet
3/8 Inside Cutting			GS2144	5/0 1,0	75	12	Violet
			GS2557	4/0 1,5	75	12	Undyed
			GS3039	3/0 2,0	75	12	Violet
			GS2140	5/0 1,0	45	12	Violet
17 mm							
1/2 Round Body, Taper Point			GS2584	4/0 1,5	75	12	Violet
18 mm							
1/2 Round Body, Taper Point			GS5525	5/0 1,0	75	12	Violet
			GS2613	4/0 1,5	75	12	Violet
			GS3624	2/0 3,0	75	12	Violet
3/8 Round Body, Taper Point			GS3085	3/0 2,0	75	12	Violet
19 mm							
3/8 Reverse Cutting			GS1706	6/0 0,7	75	12	Violet
			GS2640	4/0 1,5	75	12	Violet
3/8 Reverse Cutting Premium			GS2211	5/0 1,0	45	12	Violet

Glikosorb

Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

Needle Length and description	Product No	USP EP	Length (cm)	Unit Pcs	Color
20 mm					
1/2 Round Body, Taper Point 	GS2229	5/0 1,0	75	12	Violet
	GS2685	4/0 1,5	75	12	Violet
	GS3142	3/0 2,0	75	12	Violet
1/2 Tapercutting 	GS2673	4/0 1,5	75	12	Violet
3/8 Reverse Cutting 	GS2250	5/0 1,0	75	12	Undyed
	GS2716	4/0 1,5	45	12	Undyed
	GS2719	4/0 1,5	75	12	Violet
	GS3164	3/0 2,0	45	12	Violet
	GS3168	3/0 2,0	75	12	Violet
	GS3663	2/0 3,0	75	12	Violet
22 mm					
1/2 Round Body, Taper Point 	GS2747	4/0 1,5	75	12	Violet
	GS3196	3/0 2,0	75	12	Violet
	GS3671	2/0 3,0	75	12	Violet
	GS4575	1 4,0	75	12	Violet
3/8 Reverse Cutting 	GS2763	4/0 1,5	75	12	Violet
	GS3214	3/0 2,0	90	12	Violet

Glikosorb

Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

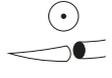
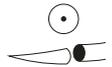
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24 mm					
1/2 Reverse Cutting 	GS5524	4/0 1,5	75	12	Violet
	GS5523	3/0 2,0	75	12	Violet
	GS3692	2/0 3,0	75	12	Violet

25 mm					
1/2 Round Body, Taper Point 	GS2788	4/0 1,5	75	12	Violet
	GS3252	3/0 2,0	75	12	Violet
	GS3746	2/0 3,0	100	12	Violet
	GS3724	2/0 3,0	75	12	Violet
1/2 Tapercutting 	GS3718	2/0 3,0	75	12	Violet
3/8 Reverse Cutting 	GS2804	4/0 1,5	75	12	Violet
	GS3757	2/0 3,0	75	12	Violet
3/8 Inside Cutting 	GS2812	4/0 1,5	45	12	Violet
	GS3284	3/0 2,0	45	12	Violet
	GS3763	2/0 3,0	75	12	Violet

26 mm					
1/2 Round Body, Taper Point 	GS2292	5/0 1,0	75	12	Violet
	GS2828	4/0 1,5	75	12	Violet
	GS3313	3/0 2,0	75	12	Violet
	GS3318	3/0 2,0	90	12	Violet
	GS3786	2/0 3,0	75	12	Violet

Glikosorb

Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

Needle Length and description	Product No	USP EP	Length (cm)	Unit Pcs	Color
26 mm					
1/2 Round Body, Taper Point  	GS4215	0 3,5	75	12	Violet
	GS4592	1 4,0	90	12	Violet
1/2 Reverse Cutting  	GS4230	0 3,5	75	12	Violet
3/8 Round Body, Taper Point  	GS2841	4/0 1,5	75	12	Violet
3/8 Reverse Cutting  	GS3345	3/0 2,0	75	12	Undyed
	GS3346	3/0 2,0	75	12	Violet
	GS3821	2/0 3,0	75	12	Undyed
	GS3822	2/0 3,0	75	12	Violet
30 mm					
1/2 Round Body, Taper Point  	GS3369	3/0 2,0	75	12	Violet
	GS3374	3/0 2,0	90	12	Violet
	GS3858	2/0 3,0	75	12	Violet
	GS4244	0 3,5	75	12	Violet
	GS4608	1 4,0	75	12	Violet
1/2 Reverse Cutting  	GS3882	2/0 3,0	75	12	Violet
	GS4266	0 3,5	75	12	Violet
1/2 Tapercutting  	GS3843	2/0 3,0	75	12	Violet

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Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

Needle Length and description	Product No	USP EP	Length (cm)	Unit Pcs	Color
30 mm					
3/8 Reverse Cutting 	GS2887	4/0 1,5	75	12	Violet
	GS3397	3/0 2,0	75	12	Violet
	GS3891	2/0 3,0	75	12	Violet
	GS4273	0 3,5	75	12	Violet
32 mm					
1/2 Round Body, Taper Point 	GS5508	3/0 2,0	75	12	Violet
35 mm					
1/2 Round Body, Taper Point 	GS3411	3/0 2,0	75	12	Violet
	GS3916	2/0 3,0	75	12	Violet
	GS3922	2/0 3,0	90	12	Violet
	GS4300	0 3,5	75	12	Violet
	GS4644	1 4,0	75	12	Violet
3/8 Reverse Cutting 	GS3423	3/0 2,0	75	12	Violet
	GS3933	2/0 3,0	75	12	Violet
36 mm					
1/2 Round Body, Taper Point 	GS5509	3/0 2,0	75	12	Violet
1/2 Reverse Cutting 	GS4675	1 4,0	75	12	Violet

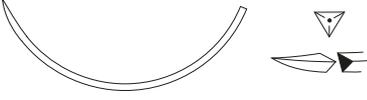
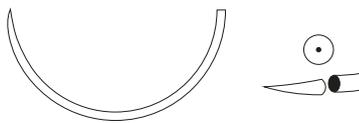
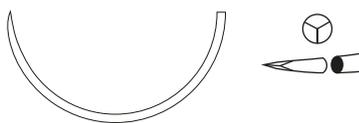
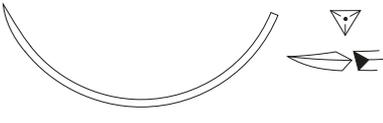
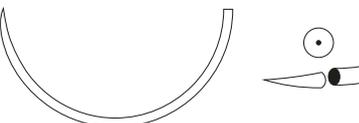
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Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

Needle Length and description	Product No	USP EP	Length (cm)	Unit Pcs	Color
37 mm					
1/2 Round Body, Taper Point 	GS3950	2/0 3,0	75	12	Violet
	GS4337	0 3,5	75	12	Violet
	GS4681	1 4,0	75	12	Violet
1/2 Reverse Cutting 	GS5507	2/0 3,0	75	12	Violet
	GS4354	0 3,5	90	12	Violet
	GS4994	2 5,0	75	12	Violet
40 mm					
1/2 Round Body, Taper Point 	GS3982	2/0 3,0	75	12	Violet
	GS4368	0 3,5	75	12	Violet
	GS4375	0 3,5	90	12	Violet
	GS4713	1 4,0	75	12	Violet
	GS4719	1 4,0	90	12	Violet
	GS5003	2 5,0	75	12	Violet
	GS5006	2 5,0	90	12	Violet
1/2 Reverse Cutting 	GS4397	0 3,5	75	12	Violet
	GS4745	1 4,0	75	12	Violet
	GS4749	1 4,0	90	12	Violet
	GS5019	2 5,0	75	12	Violet

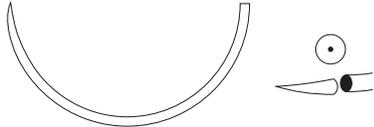
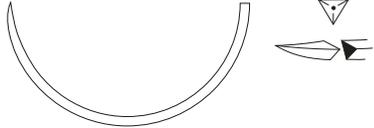
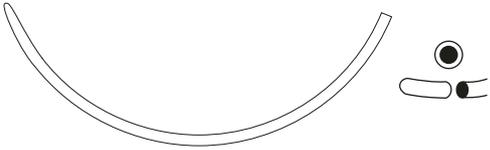
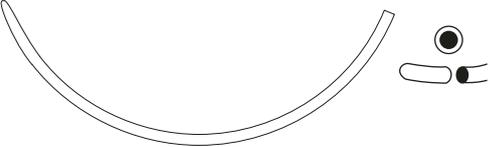
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Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

Needle Length and description	Product No	USP EP	Length (cm)	Unit Pcs	Color
40 mm					
1/2 Reverse Cutting 	GS5023	2 5,0	90	12	Violet
1/2 Tapercutting 	GS4363	0 3,5	75	12	Violet
3/8 Reverse Cutting 	GS4756	1 4,0	75	12	Violet
	GS4408	0 3,5	75	12	Violet
45 mm					
1/2 Round Body, Taper Point 	GS4422	0 3,5	75	12	Violet
	GS4772	1 4,0	75	12	Violet
	GS5035	2 5,0	75	12	Violet
	GS5040	2 5,0	90	12	Violet
1/2 Tapercutting 	GS4766	1 4,0	75	12	Violet
	GS5738	2 5,0	75	12	Violet
3/8 Reverse Cutting 	GS4432	0 3,5	75	12	Violet
	GS4787	1 4,0	75	12	Violet
Straight Reverse Cutting 	GS2909	4/0 1,5	45	12	Violet
48 mm					
1/2 Round Body, Taper Point 	GS4796	1 4,0	75	12	Violet

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Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

Needle Length and description	Product No	USP EP	Length (cm)	Unit Pcs	Color
50 mm					
1/2 Round Body, Taper Point 	GS4454	0 3,5	75	12	Violet
	GS4459	0 3,5	90	12	Violet
	GS4812	1 4,0	75	12	Violet
	GS4818	1 4,0	90	12	Violet
	GS5066	2 5,0	75	12	Violet
	GS5070	2 5,0	90	12	Violet
1/2 Reverse Cutting 	GS4471	0 3,5	75	12	Violet
60 mm					
Straight Reverse Cutting 	GS3492	3/0 2,0	75	12	Violet
	GS4074	2/0 3,0	75	12	Violet
63 mm					
3/8 Blunt 	GS4858	1 4,0	75	12	Violet
64 mm					
3/8 Blunt 	GS4500	0 3,5	90	12	Violet
	GS4861	1 4,0	90	12	Violet

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Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

Non-Needle Suture	Product No	USP EP	Length (cm)	Unit Pcs	Color
6x45 cm					
GLIKOSORB Non-Needle Suture	GS2950	3/0 2,0	6x45	12	Violet
	GS3543	2/0 3,0	6x45	12	Violet
	GS4137	0 3,5	6x45	12	Violet
	GS4563	1 4,0	6x45	12	Violet
10x50 cm					
GLIKOSORB Non-Needle Suture	GS2954	3/0 2,0	10x50	12	Violet
	GS3548	2/0 3,0	10x75	12	Violet
12x45 cm					
GLIKOSORB Non-Needle Suture	GS2344	4/0 1,5	12x45	12	Violet
	GS2958	3/0 2,0	12x45	12	Violet
	GS3552	2/0 3,0	12x45	12	Violet
	GS4145	0 3,5	12x45	12	Violet
	GS4554	1 4,0	12x45	12	Violet
17x45 cm					
GLIKOSORB Non-Needle Suture	GS2966	3/0 2,0	17x45	12	Violet
	GS3558	2/0 3,0	17x45	12	Violet
150 cm					
GLIKOSORB Non-Needle Suture	GS1737	5/0 1,0	150	12	Violet
	GS2326	4/0 1,5	150	12	Violet
	GS2935	3/0 2,0	150	12	Violet

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Surgical Suture, Polyglycolicacid (PGA) Absorbable, Synthetic, Braided

Non-Needle Suture	Product No	USP EP	Length (cm)	Unit Pcs	Color
150 cm					
GLIKOSORB Non-Needle Suture	GS3511	2/0 3,0	150	12	Violet
	GS4114	0 3,5	150	12	Violet
	GS4532	1 4,0	150	12	Violet

250 cm					
GLIKOSORB Non-Needle Suture	GS2332	4/0 1,5	250	12	Violet
	GS2942	3/0 2,0	250	12	Violet
	GS3518	2/0 3,0	250	12	Violet
	GS4121	0 3,5	250	12	Violet
	GS4541	1 4,0	250	12	Violet