

INGUINAL HERNIA REPAIR

Procedural set up guide for use with AXIUS 8mm Needle Driver

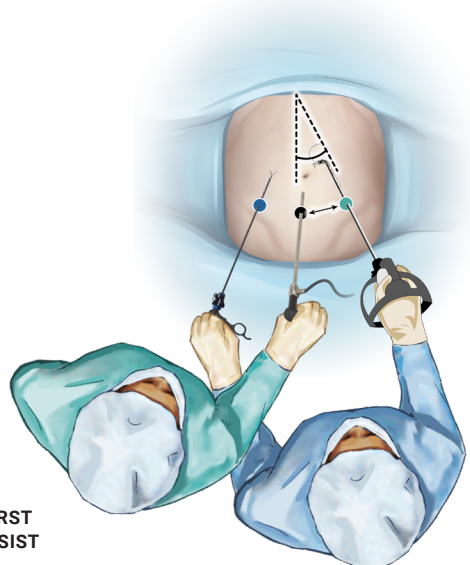
Recommended AXIUS shaft length: **MEDIUM**

CLINICAL & USER ADVANTAGES

- ▶ **Simplifies laparoscopic defect closure and mesh fixation** in the confined working space of the pelvis
- ▶ **Provides precision and dexterity** required for **delicate peritoneal closure**
- ▶ **Allows suturing over tacking**, to reduce potential patient pain/discomfort caused by tacks
- ▶ **Improved quality of suturing and surgeon ergonomics** compared to **traditional laparoscopic needle drivers**¹

GENERAL PRINCIPLES FOR ALL AXIUS PROCEDURES

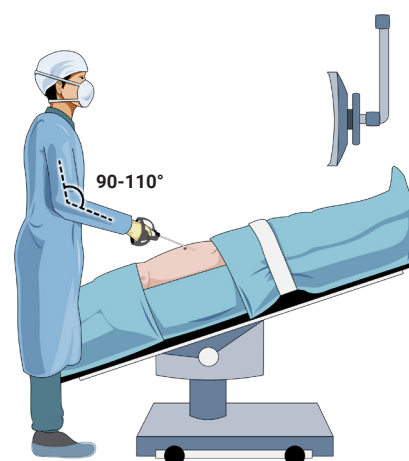
- ▶ **Surgeon to always use AXIUS in their dominant hand**
- ▶ **To avoid external collisions:**
 - Reduce cross-over of AXIUS shaft with camera:
 - If AXIUS used in surgeon's right hand, first assist stands on left of surgeon
 - If AXIUS used in surgeon's left hand, first assist stands on right of surgeon
 - Space trocars appropriately (approximately 8cm distance) to reduce collisions
- ▶ **Triangulation is required to maintain good vision of needle:**
 - Avoid placement of AXIUS trocar in same line of camera view
 - Always approach tissue from an angle



FIRST
ASSIST

SURGEON

ERGONOMIC CONSIDERATIONS FOR PATIENT & TABLE SET-UP



- ▶ **Secure patient** in supine position with their arms tucked to optimize space for AXIUS
- ▶ **Tilt the table** into steep Trendelenburg position (the further the better) for a more horizontal AXIUS shaft approach
- ▶ **Adjust the operating table height** during AXIUS use to maintain an elbow bend of 90-110°. Use a step to raise the surgeon up if needed
- ▶ **Lower anesthesia drapes** to allow space for surgeon to stand at patient's head or shoulder (see next page)
- ▶ **"Dance with the device"** - Continue to adjust feet and body position throughout procedure to keep forearm in line with AXIUS shaft and upper arm next to body

SCAN QR CODE TO VIEW
INGUINAL HERNIA PROCEDURE VIDEO



TROCAR PLACEMENT RULES

Standing at the patient's head or on the patient's right is the optimal position when using AXIUS for a TAPP inguinal hernia, regardless of hernia location. This provides the most ergonomic approach and enables efficient use of articulation when suturing in the pelvis.

Do not stand on the patient's left when using AXIUS in right hand – articulation is challenging and uncomfortable from this angle.

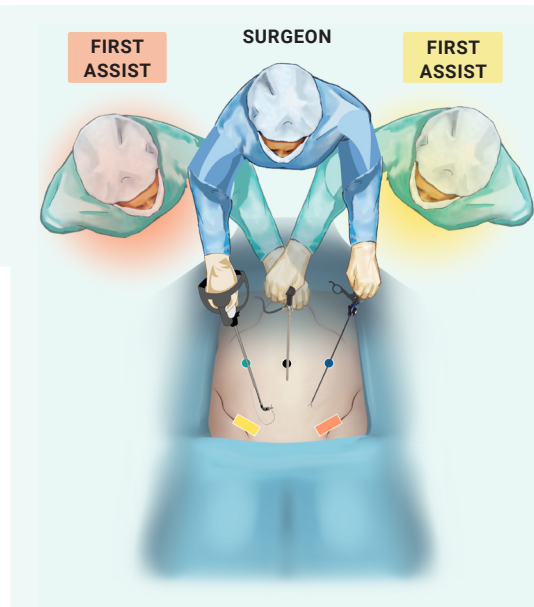
Below trocar placements show surgeon using AXIUS in right hand. Mirror placements and surgeon position for left handed use of AXIUS.

FOR ALL APPROACHES

- ▶ **AXIUS trocar (GREEN - 8mm+)** placed more lateral than standard placement for optimal use of articulation. Do not use a midline or left lateral trocar.
- ▶ **Camera trocar (BLACK)** placed at or superior of umbilicus.
- ▶ **Secondary trocar (BLUE)** placed approximately 8cm lateral of camera trocar, and 2cm superior depending on surgeon's preference.

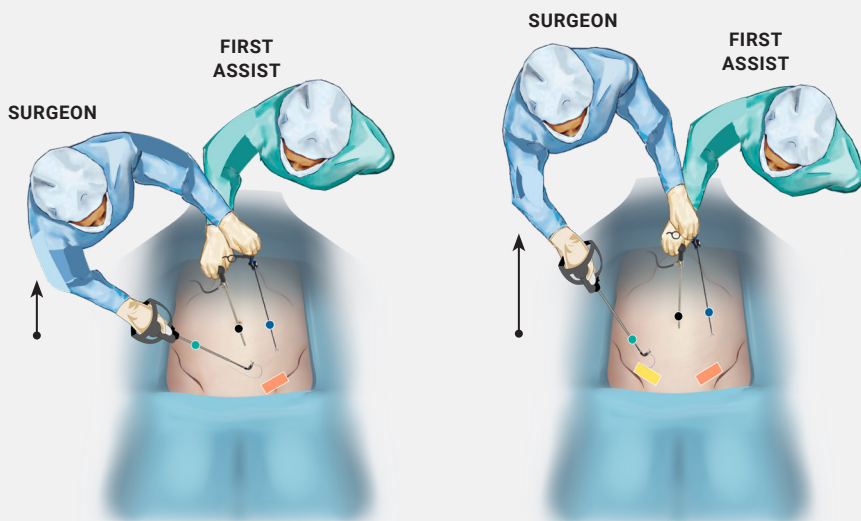
STANDING AT PATIENT'S HEAD (optimal)

- **AXIUS trocar** placed approximately 8cm lateral of camera trocar.
- First assist stands at patient's left shoulder for **right side hernia** and at patient's right shoulder for **left side hernia**.
- **Pre-plan with anesthesia to allow space for the surgeon and first assist.**



STANDING ON PATIENT'S RIGHT (alternative)

- **AXIUS trocar** placed lower and more lateral than camera trocar.
- First assist stands high at the patient's left shoulder, for optimal camera angle.
- **Ensure anesthesia drapes are lowered or moved to allow the surgeon and first assist to stand far enough back.**



Left Inguinal Hernia

Right or Bilateral Inguinal Hernia

- For **left side hernia (unilateral)**, surgeon should take a step back towards the patient's shoulder for optimal approach.
- For **right side hernia (unilateral) or bilateral**, place **AXIUS trocar** closer to the iliac crest. Surgeon should stand high at patient's shoulder for optimal approach.

- **Camera trocar** and **secondary trocar** can be used interchangeably depending on surgeon preference. Using adjacent trocars reduces crossover with first assist and improves ergonomics, although reduced triangulation may reduce ease of access to surgical site.

CONSULT OPERATING INSTRUCTIONS

The information provided is to improve customer comfort while using the AXIUS 8mm Needle Driver. This is not intended to replace the Instructions for Use (IFU). The document is in no way intended to instruct on surgical techniques, nor does it relate to the safety and/or performance of the device. The instructions, indicated use, contraindications, warnings and precautions are provided in the IFU.

