The Solution for Outpatient Settings – TELE PACK+

Outsourcing smaller procedures frees up OR capacity for larger operations. This trend towards ambulatory care requires a compact and flexible system with high image quality. The new TELE PACK+ ALL-IN-ONE system meets these demands. It combines a monitor, LED light source, FULL HD camera control unit and documentation unit with integrated network functionality in a single portable unit. The new COR mobile stand offers a suitable solution for the office in the form of a compact equipment cart. This set-up can be used for many ambulatory interventions such as, for example, office hysteroscopy, colposcopy or cystoscopy.

- Image display in FULL HD quality
- 18.5” touch screen monitor with on-screen keyboard
- Documentation with storage possibilities on USB memory devices or 50 GB internal memory
- Network functionality in combination with the software tool SCENARA®.CONNECT for the export and import of patient data in/out of HIS/PACS
- Compatibility with rigid, flexible and single-use endoscopes from KARL STORZ
- Modular configuration of the COR mobile stand
TP101 TELE PACK+, endoscopic video unit with 2 camera inputs (X-Line and C-Line) for use with flexible videoendoscopes and one-chip camera heads (up to FULL HD), incl. LED light source, digital Image Processing Module with USB and network storage options as well as 18.5” FULL HD touch screen monitor, power supply 100-240 VAC, 50/60 Hz including:
Mains Cord, length 300 cm

TH110 IMAGE1 S™ HX One-Chip FULL HD Camera Head, 50/60 Hz, fixed focus, progressive scan, soakable, gas- and plasma-sterilizable, focal length f = 16 mm, 2 freely programmable camera head buttons, for use with IMAGE1 S™

COR Mobile Stand:
UG803 Subrack, for COR mobile stand, low
UG811 Top Cover Monitor Holder, for COR mobile stand
UG854 Stainless Steel Tube, for COR mobile stand, diameter 25 mm, length 400 cm
UG857 Monitor Module, for COR mobile stand
UG862 Drawer, wide, for COR mobile stand

Optional:
UG860 Drawer, narrow, for COR mobile stand
Creating Certainty:
Diagnostics and Treatment Outside the OR

Solutions for office hysteroscopy

Hysteroscopy shows high sensitivity and specificity in the diagnostics of any abnormalities in the uterine cavity. With the help of 5 Fr. instruments, immediate treatment is often possible. Narrow-lumen hysteroscopes enable procedures to be performed outside the OR without anesthesia or dilation of the cervix. Furthermore, hysteroscopy can be used to rule out any obstacles to implantation prior to IVF treatment.

- The CAMPO TROPHYSCOPE® with a diameter of only 2.9 mm allows an atraumatic primary approach to the uterine cavity under visualization
- The pressure-regulated irrigation function of the ENDOMAT® SELECT provides constant maintenance of the cavity
- Outsourcing diagnostic services and minor hysteroscopic procedures to the clinical outpatient setting extends the capacity of the OR
Especially suitable for use in gynecological office settings and outpatient departments or IVF centers

26008BAC  CAMPO TROPHYSCOPE®, HOPKINS® telescope 30°, size 2.9 mm, length 24 cm, with irrigation connector, for use with Continuous-Flow Sheaths 26152DA and 26152DB

26152DA  Continuous-Flow Examination Sheath, size 3.7 mm, length 18 cm, with suction adaptor, for use with CAMPO TROPHYSCOPE® 26008BAC

26152DB  Continuous-Flow Operating Sheath, size 4.4 mm, length 16 cm, with channel for semirigid instruments 5 Fr., with 1 stopcock and 1 Luer-Lock adaptor, for use with CAMPO TROPHYSCOPE® 26008BAC

26152DS  TROPHY Curette, for use with Continuous-Flow Sheaths 26152DA and 26152DB

495NTA  Fiber Optic Light Cable, with straight connector, diameter 2.5 mm, length 230 cm

Selection of 5 Fr. operating instruments for use with CAMPO TROPHYSCOPE®

| 26159UHW  | Biopsy and Grasping Forceps, semirigid, double action jaws, 5 Fr., length 34 cm |
| 26159SHW  | Scissors, semirigid, pointed, single action jaws, 5 Fr., length 34 cm |
| 26159DS   | DI SPIEZIO SARDO Grasping Forceps, semirigid, double action jaws, 5 Fr., length 34 cm |
| 26159HS   | HESSELING and DI SPIEZIO SARDO Tenaculum Grasping Forceps with Spike, semirigid, double action jaws, 5 Fr., length 34 cm |
| 26159G    | BETTOCCHI® and DI SPIEZIO SARDO Palpation Probe, semirigid, scaled, 5 Fr., length 34 cm |
| 26159BE   | Bipolar Dissection Electrode, semirigid, 5 Fr., length 42 cm |
| 26159GC   | GORDTS/CAMPO Bipolar Ball Electrode, semirigid, 5 Fr., length 42 cm |

26176LE  Bipolar High Frequency Cord, length 300 cm

UP210  ENDOMAT® SELECT, suction and irrigation pump, incl. mains cord, power supply 100-240 VAC, 50/60 Hz

UP602  HYSTEROSCOPY Software

031523-10*  Tubing Set, irrigation, pressure-controlled, sterile, for single use, package of 10

Information on further 5 Fr. operating instruments is available in the Gynecology catalog.
Operative Hysteroscope

Hysteroscopy shows high sensitivity and specificity in the diagnostics of any abnormalities in the uterine cavity. With the help of 5 Fr. instruments, immediate treatment is often possible. Rigid 4 mm instruments offer several advantages over semirigid 5 Fr. instruments such as, for example, greater stability with regard to mechanical stress and the possibility to remove larger biopsy samples.

- Insertion of a telescope with diameter 6 mm only requires minimal dilation of the cervix
- Mechanical treatment of intrauterine pathologies through the use of 4 mm instruments such as scissors, dissecting and grasping forceps as well as electrodes
- Expanded application thanks to the use of 4 mm shaver blades (e.g., Intrauterine BIGATTI Shaver (IBS®))
HOPKINS® Wide Angle Straight Forward Telescope 6°, Set, with parallel eyepiece, length 20 cm, 19 Fr., autoclavable, fiber optic light transmission incorporated with working channel, with LUER-Lock connector for inflow, color code: green-blue

including:
Obturator, for use with HOPKINS® Telescope 26208AMA
LUER-Lock Tube Connector

4 mm instruments for use with HOPKINS® Wide Angle Straight Forward Telescope 6°

| 26410MDM | 26410MDN | 26410MDO | CLICKLINE Dissecting and Grasping Forceps |
| 26410MVM | 26410MVN | 26410MVO | CLICKLINE Dissecting and Grasping Forceps |
| 26410MWM | CLICKLINE Scissors |

Coagulation Electrode, bipolar

Bipolar High Frequency Cord, length 300 cm
Rapid Tissue Ablation with a Small Diameter

NEW 6 mm Intrauterine BIGATTI Shaver (IBS®) with ENDOMAT® SELECT

With an optical system that features an outer diameter of only 6 mm, the Intrauterine BIGATTI Shaver (IBS®) is inserted into the minimally dilated cervix with the help of a tapered obturator. The 4 mm shaver blade allows the immediate removal of intrauterine pathologies outside the OR. The IBS® is an effective, precise and safe alternative to a conventional resectoscope.*

- No thermal damage to tissue thanks to the purely mechanical removal of polyps, myomas or placental remnants
- Resected tissue is immediately suctioned via the ENDOMAT® SELECT and collected in a tissue trap
- Minimal outer diameter
  - Optimized procedure time**
  - Enhanced safety, accessibility and patient satisfaction**
- The only fully reusable hysteroscopic shaver system

Sources:
* https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6658200/
6 mm Intrauterine BIGATTI Shaver (IBS®)
for use in office settings, clinical outpatient departments, operating rooms or IVF centers

26208AMK  HOPKINS® Telescope 6°, Set
26702050  DRILLCUT-X® II Shaver Handpiece GYN, for use with UNIDRIVE® S III SCB

26208SA  Shaver Blade GYN, straight, sterilizable, concave cutting edge, double serrated, oval cutting window, diameter 4 mm, length 32 cm, for use with DRILLCUT-X® II Handpiece 26702050, color code: blue-green

26208SB  Shaver Blade GYN, straight, sterilizable, double serrated cutting edge, rectangular cutting window, diameter 4 mm, length 32 cm, for use with DRILLCUT-X® II Handpiece 26702050, color code: blue-yellow

26208SZ  Coagulation Electrode, bipolar, for use with Intrauterine BIGATTI Shaver (IBS®)

26176LE  Bipolar High Frequency Cord, length 300 cm

26701001-1  UNIDRIVE® S III, GYN Set, motor system, power supply 100-120/230-240 VAC, 50/60 Hz

20701070  Control Cable

Continuous-Flow Pump System, comprising two ENDOMAT® SELECT pumps

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<tr>
<th>Irrigation</th>
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<th>ENDOMAT® SELECT as suction pump**</th>
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<td>IBS® Shaver Software</td>
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<td>Suction</td>
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Further intraoperative options with various 4 mm instruments

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<tr>
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<th>CLICKLINE Dissecting and Grasping Forceps</th>
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<td>CLICKLINE Scissors</td>
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<tr>
<td>26410SAM</td>
<td>CLICKLINE Scissors</td>
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* **The pump system features two ENDOMAT® SELECT pumps for irrigation and suction
The Bipolar 5 mm Office Resectoscope

Versatile use

In addition to bipolar resectoscopes with diameters of 7 mm and 9 mm, KARL STORZ now offers a 5 mm resectoscope. Due to its small diameter, this resectoscope offers the possibility to perform resection outside the OR. Infertility patients or those suffering from abnormal bleeding can thus be treated in the doctor’s office or clinical outpatient setting, even without anesthesia. Together with the AUTOCON® III 400 HF generator, effective resection, coagulation or vaporization is achieved.

- Minimal outer diameter
  - Optimized procedure time*
  - Enhanced safety, accessibility and patient satisfaction*
  - Possible to perform resection in the doctor’s office or clinical outpatient setting, even without anesthesia
  - Little or even no dilation required
- Optional use as a diagnostic hysteroscope in conjunction with semirigid 5 Fr. instruments
- Real bipolar system with current not returned via the sheath

Source:
Further information on our bipolar and unipolar resectoscopes in 5 mm, 7 mm and 9 mm is available in the Gynecology catalog.
VITOM® – Visualization System for Gynecology

With its depth of field, magnification, contrast and color reproduction, the VITOM® system offers good prerequisites for the visualization of colposcopic findings, conization as well as vaginal and open surgical interventions. Furthermore, the VITOM® system magnifies the surgical site and clearly displays the epithelial border, e.g., during loop excision.

- 7.5x to 15x magnification of images during colposcopy or conization
- Integrated green filter
- Suitable for training, documentation or streaming of interventions
- Good illumination of the image field thanks to the integrated illuminator
- Compatible with various endoscopic camera systems (e.g., IMAGE1 S™ RUBINA)

Image source and further information on loop conization: “Primary, secondary and tertiary prevention of cervical cancer” - 2nd Edition, Prof. Dr. med. A. SCHNEIDER, M.P.H.

https://go.karlstorz.com/HL-Vitom-en
VITOM® Telescope 90° with Integrated Illuminator, VITOM® HOPKINS® telescope 90°, working distance 25-75 cm, length 11 cm, autoclavable, with green filter for colposcopy and incorporated fiber optic light transmission and condensor lenses, color code: blue

Fiber Optic Light Cable, with straight connector, extremely heat-resistant, enhanced light transmission, diameter 4.8 mm, length 300 cm

TELE PACK+, endoscopic video unit with 2 camera inputs (X-Line and C-Line) for use with flexible videendoscopes and one-chip camera heads (up to FULL HD), incl. LED light source, digital Image Processing Module with USB and network storage options as well as 18.5" FULL HD touch screen monitor, power supply 100-240 VAC, 50/60 Hz including:

Mains Cord, length 300 cm

IMAGE1 S™ HX One-Chip FULL HD Camera Head, 50/60 Hz, fixed focus, progressive scan, soakable, gas- and plasma-sterilizable, focal length f = 16 mm, 2 freely programmable camera head buttons, for use with IMAGE1 S™

VERSACRANE™ Holding Arm, low, for use in the lithotomy position, spring-supported, with quick release coupling KSLOCK, for use with Mobile Stand 28272GM and KARL STORZ clamping jaws. The VERSACRANE™ holding arm is intended for use with VITOM® scopes/exoscopes. WARNING: The VERSACRANE™ holding arm cannot be used with rigid endoscopes!

Mobile Stand, for use with VERSACRANE™ Holding Arm 28272GS

Clamping Jaw, clamping range 16.5-23 mm, with quick release coupling KSLOCK (male), for use with all square-headed KARL STORZ HOPKINS® telescopes

Clamping Cylinder, folding, for flexible mounting of 10 mm telescopes to telescope sheath, autoclavable. The clamping cylinder allows vertical movement and rotation of the telescope. For use with Clamping Jaw 28272UGN/UGK and POINT SETTER universal adaptor 10-15 mm.

Cover, with elasticated tip, sterile, for single use, package of 20

Loop Electrodes for conization:

Electrode Handle, with 2 buttons for activating the unipolar generator, yellow button: unipolar cutting, blue button: unipolar coagulation, High Frequency Cable 26520045 required

High Frequency Cable, for Electrode Handle 26520043, length 400 cm, for use with AUTOCON® II 400 SCB 20535220-111 and AUTOCON® III 400 High-End UH400

Loop Electrode, with insulated sheath, autoclavable, size 22 x 17 mm, working length 11 cm

Loop Electrode, with insulated sheath, autoclavable, size 15 x 13 mm, working length 10 cm

Loop Electrode, with insulated sheath, autoclavable, size 10 x 8 mm, working length 9 cm

Ring Curette, bayonet-shaped, 45° curved upwards, very sharp, diameter 5 mm, with round handle, working length 16 cm
Visualization of the Lymphatic System in Gynecology with OPAL1® NIR/ICG Technology

In gynecology, the degree of tumor involvement in the sentinel lymph node (SLN) is of great importance as it provides medical information about the tumor stage. IMAGE1 S™ 4U RUBINA combines 4K imaging technology with fluorescence imaging in the near infrared range for the display of indocyanine green (ICG) and for autofluorescence. OPAL1® NIR/ICG technology and the marker indocyanine green (ICG) enables non-radioactive visualization of the entire lymph system surrounding a tumor in real time.

- Non-radioactive lymph node detection method in the case of vulvar, endometrial, cervical or mammary carcinoma
- Multidisciplinary, can be used for laparoscopic and open surgical procedures
- OPAL1® technology for NIR/ICG based on the IMAGE1 S™ RUBINA camera platform
- Laser-free LED source for white light and NIR/ICG excitation
- S-Technologies in white light and the overlay modes Overlay and Intensity Map
OPAL1® Technology for NIR/ICG, based on the IMAGE1 S™ RUBINA camera platform

Camera System and Camera Head:
TC201  IMAGE1 S CONNECT® II, connect module, for use with up to 3 link modules, 4K technology, resolution 3840 x 2160 and 1920 x 1080 pixels
TC304  IMAGE1 S™ 4U-LINK, link module, for use with IMAGE1 S™ 4U camera heads, for use with IMAGE1 S CONNECT® TC200 or IMAGE1 S CONNECT® II TC201
TH121  IMAGE1 S™ 4U RUBINA, OPAL1® NIR/ICG, two-chip 4K UHD camera head, S-Technologies available, progressive scan, low-temperature sterilization, for use with IMAGE1 S™ 4U-LINK

Light Source, Light Cable and Footswitch:
TL400  Cold Light Fountain POWER LED RUBINA, high-performance light unit for perfusion assessment and standard endoscopic diagnosis, including a LED and a KARL STORZ light cable connection
4800118  Cable, length 200 cm
UF101  One-Pedal Footswitch, one-stage
495NCSC  Fiber Optic Light Cable, with straight connector, extremely heat-resistant, enhanced light transmission, with safety lock, diameter 4.8 mm, length 250 cm

Monitor:
TM350  32” 4K/3D Monitor, screen resolution 3840 x 2160, image format 16:9, wall mount with VESA 100 adaptor

ICG Telescopes:
26003ARA  HOPKINS® RUBINA 0°, NIR/ICG, straight-forward telescope 0°, enlarged view, diameter 10 mm, length 31 cm
26003BRA  HOPKINS® RUBINA 30°, NIR/ICG, forward-oblique telescope 30°, enlarged view, diameter 10 mm, length 31 cm
26046ARA  HOPKINS® RUBINA 0°, NIR/ICG, straight-forward telescope 0°, enlarged view, diameter 5 mm, length 29 cm
26046BRA  HOPKINS® RUBINA 30°, NIR/ICG, forward-oblique telescope 30°, enlarged view, diameter 5 mm, length 29 cm
20916025AGA  VITOM® II NIR/ICG Telescope 0°, with integrated illuminator and observation filter for fluorescence diagnostics with ICG, length 11 cm

Source: Michael Mueller, MD, Inselspital Bern, Berne, Switzerland (endoscopic image)
KECKSTEIN Uterine Manipulator

Extremely versatile

The KECKSTEIN uterine manipulator is useful for gynecological-laparoscopic surgery. Anteflexion and retroflexion of both the distal tip and the cap enables presentation of the operative field during hysterectomy as well as organ-preserving surgery, e.g. in the case of endometriosis. Various configurable inserts, also for interventions in reproductive medicine, offer the operating surgeon diverse applications.

- Anteflexion and retroflexion of the distal tip and the cap for visualization of the operative field
- Reusable seal for colpotomy during Total Laparoscopic Hysterectomy
- Atraumatic inserts for organ-preserving interventions
KECKSTEIN Uterine Manipulator, complete including:
- Handle
- Manipulator Sheath
- Cap, diameter 37 mm, length 30 mm
- Cap, diameter 42 mm, length 30 mm
- Spiral Insert, diameter 15 mm
- Spiral Insert, diameter 20 mm
- Working Insert, diameter 6 mm, length 60 mm
- Working Insert, diameter 6 mm, length 40 mm
- Seal
- Working Insert, for chromopertubation, diameter 3 mm, length 30 mm
- Working Insert, atraumatic, diameter 5 mm, length 60 mm

Tenaculum Forceps
- Holder for Tenaculum Forceps
- Pertubation Tube
- 2x Luer-Lock Tube Connectors
- Y-Tube Connector

Optional accessories:
- 26168ZU  Cap, diameter 28 mm, length 30 mm
- 26168ZV  Cap, diameter 32 mm, length 30 mm
- 26168ZE  Cap, diameter 47 mm, length 30 mm
- 26168ZF  Spiral Insert, diameter 12 mm
- 26168ZK  Working Insert, diameter 6 mm, length 80 mm
- 26168ZS  Working Insert, diameter 6 mm, length 30 mm
- 26168ZN  Working Insert, for chromopertubation, diameter 3 mm, length 50 mm
- 26168ZO  Working Insert, atraumatic, diameter 5 mm, length 40 mm
- 26168ZR  Working Insert, atraumatic, diameter 5 mm, length 90 mm
- 26168ZT  Seal
SCHÄR Manipulator

The instrument for laparoscopic descensus surgery

For laparoscopic sacrocolpopexy, a standard surgical procedure used to treat various forms of prolapses characterized by a descensus of the vaginal vault or uterus, KARL STORZ now offers a multifunctional instrument – the SCHÄR manipulator.

Thanks to the variable adjustable working insert, it provides support for performing the following procedures:

- Supracervical hysterectomy (LASH)
- Sacrocervicopexy surgery following supracervical hysterectomy
- Sacrocolpopexy of the vaginal stump following hysterectomy
- Sacrohysteropexy (sacrocolpopexy with uterine preservation)

The flat shape of the manipulator allows visualization and dissection of the front and back walls of the vagina in order to fixate the mesh with a suture.
SCHÄR Manipulator
including:
Handle, incl. cleaning adaptor
Working Element
Working Insert

Handle

Working Element

Working Insert

Cleaning Adaptor
SupraLoop

For laparoscopic supracervical hysterectomy (LASH)

The SUPRALOOP was specially designed to support the operating surgeon when removing the body of the uterus during LASH.

- Shorter operating time thanks to quick removal of the body of the uterus with unipolar probes
- Loop available in two sizes
- Reusable handle and outer sheath
Unipolar

26183M BRUCKER/MESSROGHLI SUPRALOOP Set, unipolar, size 5 mm, length 30 cm, including:
- SUPRALOOP Handle
- SUPRALOOP Outer Sheath
- SUPRALOOP Spare Loop

Accessories:
- 26183MC SUPRALOOP Spare Loop, small, size 120 x 85 mm, unsterile, for single use
- 26183MD SUPRALOOP Spare Loop, large, size 200 x 150 mm, unsterile, for single use

Bipolar

26183N SUPRALOOP Set, bipolar, size 5 mm, length 30 cm including:
- SUPRALOOP Handle
- SUPRALOOP Outer Sheath
- SUPRALOOP Spare Loop

Accessories:
- 26183NC SUPRALOOP Spare Loop, bipolar, size 120 x 85 mm, unsterile, for single use
- 26183ND SUPRALOOP Spare Loop, bipolar, size 200 x 150 mm, unsterile, for single use

The SUPRALOOP is inserted into the abdominal cavity via a 6 mm trocar. The loop is then placed around the uterus and, after carefully checking the correct positioning, the loop is retracted... 

...and the uterus is removed using unipolar or bipolar HF current.
In-house Training Workstations from KARL STORZ with the GESEA Concept

Endoscopic training possibilities directly in the clinic

The steady progress in minimally invasive surgical techniques requires ongoing training and professional development of surgeons and adequate opportunities for practice. Supported by KARL STORZ, the European Academy of Gynaecologic Surgery (EAGS) developed the so-called Gynaecological Endoscopic Surgical Education and Assessment Program (GESEA). Theoretical knowledge is offered free of charge and practical skills in laparoscopy and hysteroscopy are trained to ensure patient safety and the best possible surgical outcome.* The required training equipment is provided by KARL STORZ as a complete package.

- Scientifically validated training program from the European Academy of Gynaecologic Surgery (EAGS)
- Documentation of self-assessment possible
- All from one source

* Study: Campo et al., Gynaecological endoscopic surgical education and assessment. A diploma programme in gynaecological endoscopic surgery
It is recommended to check the suitability of the product for the intended procedure prior to use.

Please note that the described products in this medium may not be available yet in all countries due to different regulatory requirements.
Shaping the Future of Endoscopy with you