Step-A

Preparation for Percutaneous Epidural Neuroplasty

Step-B

The C-arm is rotated to the lateral position to visualize the patient's hiatus.

Step-C

Dressing and place a drape around the hiatus.



Step-D

Inject lidocaine to anesthetize the patient for local anesthesia inside



Step-E

Puncture the hiatus using the needle/stylet



Step-F

Pull the stylet out.

Step-G

Leave the needle in the hiatus.



Step-H

Balloon Expander line(right side) connect port. and then connect



Step-I

Aspirate the air in balloon by syringe. (3 times)



Sten-

Inject the 1.5cc saline in balloon by syringe, and then check the leakage and inflation of balloon.



Step-K

Remove the saline by syringe to make it in a vaccum.

Step-L

Loosen the connect port on the right side.



Step-M

Insert the Epidural Catheter until reaching between the dura and ligamentum flavum space through the hole.



Step-O

Inject the contrast material in the balloon by syringe to inflate Balloon from the port on the right side.



Step-P

Inject medicine into the damaged tissue with syringe from the port on the left side.



Step-C

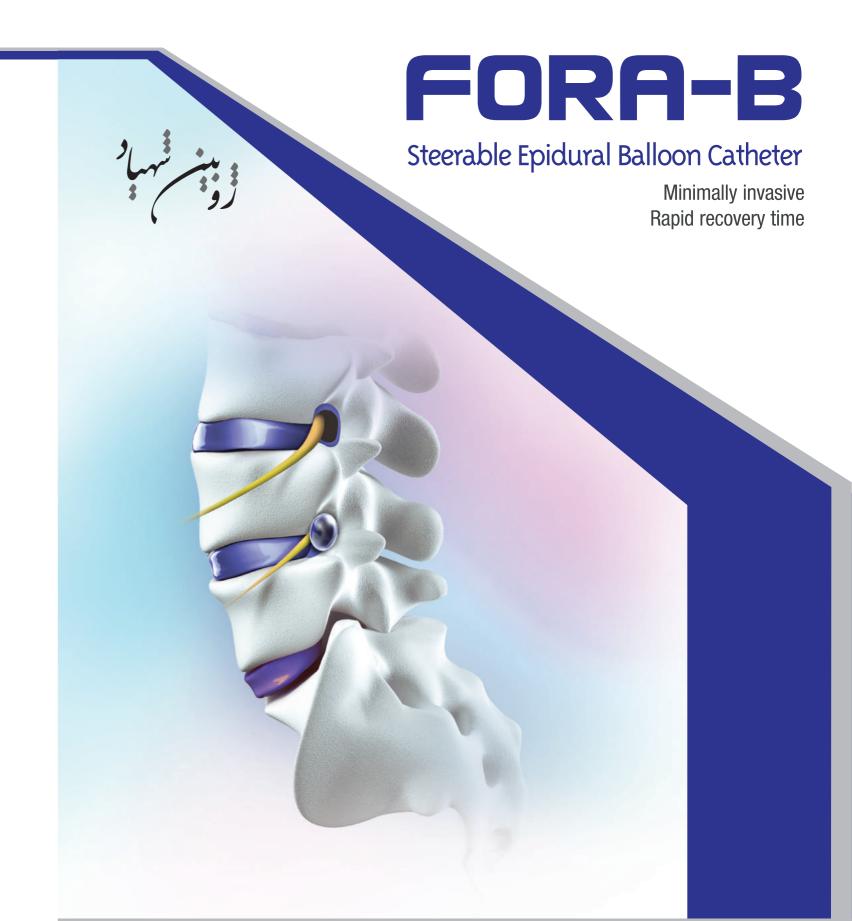
Once the procedure is completed, remove the catheter and accessories.



Check where the catheter is with C-arm.





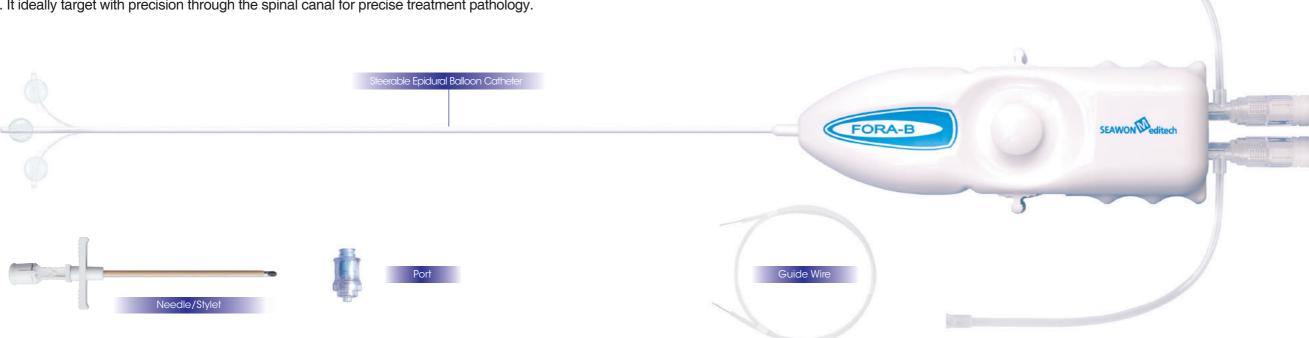






FORA-B(Steerable Epidural Balloon Catheter)

FORA-B is steerable and inflatable epidural catheter. It is used to provide immediate and long term relief of chronic pain and discomfort in lumbar spine. Connect syringe to the catheter for expanding and aspirating the balloon. It ideally target with precision through the spinal canal for precise treatment pathology.



Model information & Spec

	Model Name	Catheter Article Name	Needle Article Name	Catheter tip Port Article Name	Syringe Article Name	Guide Wire Article Name	Catheter Length (mm)	Catheter Out Diameter (Ø)	Needle Length (mm)	Needle Out Diameter (Ø)
1	SWB20N	SWB20N	-	-	-	-		2.1	-	-
2	COB21NU-1	SWB21NU	SWVP-10P	SWCV-12	HJL3	-	295		96.5	3.5
3	COB21U-1	SWB21U				-				
4	COB21U-1-G	SWB21U				SWGW- 700-085				

Indications

- A. Chronic Back Pain
- B. Spinal Stenosis
- C. Post-Laminectomy Syndrome
- D. Herniated Nucleus Pulposus

Pregnancy

Contraindications

- Infection
- Metal illness

Advantages

- Low risk therapy
- Minimally invasive
- No general anesthetic
- · High success rates
- No scar formation
- No open surgery
- No long hospitalization
- · Quick recovery
- Repeatable at any time
- Also ideal for patients who have undergone previous surgery
- Targeted treatment of causes

Feature

- Perform bidirectionally
- Radiopaque & soft aromatic Shaft
- Steerable Aromatic distal tip
- Easy to handle
- Easy to steer precisly
- No need to withdrawn the guidewire to inject the medication