

# QUESTIONS AND ANSWERS

## Why is the “rbi2 system” different than other suction biopsy systems?

The rbi2 system is a hybrid design and consists of:

1. A reusable handpiece (all parts replaceable without having to be sent back to supplier).
2. Sterile single use capsules pre-assembled with blade and seal.
  - ◆ Ensures each time you perform a biopsy you have ultra sharp blade and an airtight seal.
  - ◆ No need to lubricate blade.
  - ◆ Capsule clean and sterile.
3. Single procedure tubing and syringe adaptor avoiding difficult tube cleaning.

## Why will I be able to obtain a good specimen with so much less suction than other systems?

The unique design of the rbi2 capsule has an internal seal that fits tightly around the handpiece inner tube thus giving an airtight pathway from the front of the capsule all the way to the syringe.

## What’s the likelihood of the capsule becoming stuck or jamming and tearing mucosa inside the patient?

In other systems jamming within a patient occurs when mucosa becomes wedged between the blade and inside of the capsule, normally due to dull or worn blades and capsules. This is very unlikely with the rbi2 system. The internal design of the capsule ensures that the ultra sharp blade hits the back edge of the capsule hole to ensure the tissue is cut cleanly from the patient thus stopping mucosa from becoming jammed.

## How do I know when I have adequate suction?

Unlike other systems, the assistant will be able to feel the suction by the resistance on the syringe plunger. This means the handpiece operator does not have to quickly fire the trigger as soon as the assistant reaches the predetermined suction level. Because of the seal design there will be no loss of suction until you have taken the biopsy. If you are using the procedure pack that includes a negative pressure manometer, the highly visible identification markers enable the assistant to see when there is adequate suction before the handpiece operator fires the trigger.

## How do I retrieve the specimen out of the capsule?

The rbi2 capsule has a controlled fracture point at the first 10ml insertion marker. After the biopsy has been taken break the capsule in two. Simply place a saline filled syringe on the side capsule hole and give the syringe a good quick squirt to remove the specimen from the broken end. On some occasions it may be necessary to remove the specimen with a needle from the broken end of the capsule. If there is no specimen within the capsule flush saline down the inner tube of the handpiece.

## Do I have to change my technique because the rbi2 system has a rigid shaft on the handpiece and my current system has a flexible shaft?

With most flexible shaft systems it is recommended that enough force be placed on the shaft to bend it, pushing the capsule hard up against the mucosa. With the rbi2 system we recommend that you not deliberately force the instrument but gently approximate the instrument to the mucosa. Forcing any instrument against the mucosa will tighten the mucosa and make it more difficult to withdraw the tissue into the capsule hole.

## Can I try the system to be sure I like it before I purchase one?

SSP is so sure you will find this biopsy systems to be superior to your current system that we've established a 100% satisfaction guarantee. If you purchase a system and are not completely satisfied, you may return the entire system for credit. Just call our customer service department for authorization prior to return.

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