

Instructions for safe use

This instruction includes special care points for safe usage excerpted from the Instruction Manual of Olympus URF-V2/V2R and URF-P6/P6R uretero-reno endoscopes. They are particularly important and should be noted when using Olympus URF-V2/V2R and URF-P6/P6R uretero-reno endoscopes. Before using the scopes, read the "Instruction Manual" carefully and follow the instructions. If an abnormality is detected before or during usage, or the equipment is malfunctioning, do not use the equipment and contact Olympus to request repair.

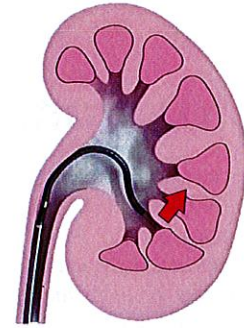
Warnings and notes

WARNING

- If significant resistance is felt during insertion due to an anatomical reason, do not insert, withdraw, or turn the insertion tube of the endoscope with excessive force. Ureter injury, bleeding, and/or perforation may occur.
- Never insert or withdraw the endoscope under any of the following conditions. Patient injury, bleeding, and/or perforation can result.
 - While the EndoTherapy accessory extends from the distal end of the endoscope (except for using an ureteral access sheath).
 - While the bending section is locked in position.
 - Insertion or withdrawal with excessive force.
- If any of the following conditions occur during an examination, immediately stop the examination and withdraw the endoscope from the patient as described in Section 5.3, "Withdrawal of the endoscope with an irregularity".
 - If any irregularity is observed with the functionality of the endoscope.
 - If the endoscopic image on the monitor disappears or freezes unexpectedly.
 - If noise, blur, or fog appear on the endoscopic image. (for URF-V2/V2R)
 - If the UP/DOWN angulation control lever does not move.
 - If the angulation control mechanism is not functioning properly.Continued use of the endoscope under these conditions could result in patient injury, bleeding, and/or perforation.
- If the angulation control mechanism or any other part of the system is not functioning properly, stop the procedure immediately and place the UP/DOWN angulation lock in the free "F ▼" position. Then carefully withdraw the endoscope while observing the endoscopic image. If the endoscope cannot be withdrawn from the patient smoothly, do not attempt to forcibly withdraw it. Rather, withdraw the endoscope carefully. If the endoscope cannot be withdrawn from the patient, consider removing it through open surgery and take proper measures. Forcibly withdrawing the endoscope may cause patient injury, bleeding, and/or perforation. If any irregularity with the endoscope is observed, contact Olympus.
- If the endoscope or EndoTherapy accessory cannot be withdrawn from the patient smoothly, do not attempt to forcibly withdraw it. Rather, withdraw the endoscope or EndoTherapy accessory carefully. If the endoscope or EndoTherapy accessory cannot be withdrawn from the patient, consider removing it through open surgery and take proper measures. Forcibly withdrawing the endoscope or EndoTherapy accessory may cause patient injury, bleeding, and/or perforation. If any irregularity with the endoscope or EndoTherapy accessory is observed, contact Olympus.
- If the endoscope cannot be withdrawn from the ureteral access sheath smoothly, do not attempt to forcibly withdraw it. Rather, withdraw the endoscope with the ureteral access sheath. Otherwise, patient injury, bleeding, and/or perforation may result.

NOTE

- Do not operate the angulation control lever with excessive force in a narrow space to the opposite direction from the bending direction while the distal end of the endoscope is not moved. The bending section may be damaged. Check the tip position of the endoscope and the shape of the bending section using fluoroscopy, etc. Do not insert the insertion tube with excessive force and twist.
- Do not insert the insertion tube with excessive force into the ureter or calix. The bending section may be damaged.



Inspection of the bending mechanism

The physician who meets the user qualifications described in the Instruction Manual should inspect the bending section of the endoscope according to the following procedures.

1. Visually inspect the bending section for no metallic parts protruding from the bending section.

OK



Not OK

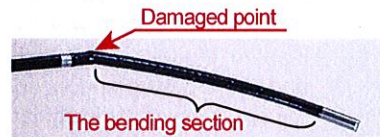


2. Visually inspect the bending section for bends, twist, or other irregularities while the bending section remains straight.

OK

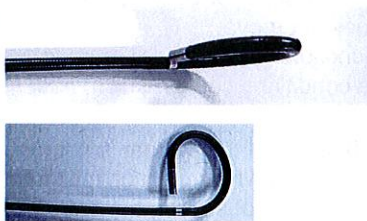


Not OK



3. Visually inspect the bending section for abnormal bending shape, or other irregularities.

OK



Not OK



If any irregularity is observed during the inspection described in Chapter 3 of the Instruction Manual, "Preparation and Inspection", do not use the endoscope and solve the problem as described in Section 5.2, "Troubleshooting guide". If the problem still cannot be resolved, send the endoscope to Olympus for repair as described in Section 5.4, "Returning the endoscope for repair". Also, should any irregularity be observed while using the endoscope, stop using it immediately and withdraw the endoscope from the patient as described Section 5.3, "Withdrawal of the endoscope with an irregularity".

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