INSTRUCTIONS FOR USING RELIEF VALVE WITH HONAN INTRAOCULAR PRESSURE REDUCER

This highly sensitive precision finished relief valve will limit to approximately 60 mm Hg. The pressure that can be applied to the Honan Intraocular Pressure Reducer.

Preparation For Use, Reusable

Clean and disinfect the Headband, Bellows and Tubing, (parts that touch the patient’s face) using a recognized germicidal solution. Wipe clean. Do not immerse. Do not autoclave or gas sterilize.

CAUTION: Do not sterilize the Pressure Gauge or Bulb Air Pump. They could be damaged in the process. It is clean, ready for use. Remove from pouch face) using a recognized germicidal solution. Wipe clean. Do not immerse. Do not autoclave or gas sterilize.

Caution: Do not sterilize the Pressure Gauge or Bulb Air Pump. They could be damaged in the process.

Preoperative ocular compression may be a safety measure in preventing choroidal expulsive hemorrhage. The pressure that can be applied to the Honan Intraocular Pressure Reducer. It is permanently adjusted and is designed to prevent pressure in the bellows from exceeding approximately 60 mm Hg, even if the gauge should become damaged by rough handling, dropping, etc. It is easily added to any Pressure Reducer now in service.

GUIDE LINES FOR USING

Pressure on the eye traditionally has been a method of slowing some tachycardias. Some persons may be more sensitive to the ocular-vagal reflex. Therefore, all patients should be monitored for signs of bradycardia while pressure is being applied to the eye. The optimum pressure to be used should be well below pressure in the central retinal artery. It should be elevated only high enough to create a soft surgical eye. Using the 20 to 30 mm Hg of monitored pressure for 30 to 60 minutes before surgery, clinically results in very soft, safe, surgical eyes. With the Schiotz Tonometer with 5.5 gram weight, the scale reading may be above 10. An eye may be so soft that the cornea may be observed to dimple when the lid speculum is inserted. Releasing the pressure every 30 seconds and then reapplying it has NOT been found necessary or desirable. With a soft eye, the iris may be concave or drop posteriorly after lens removal. Excess vitreous pressure is typically absent. Intraocular lens implantation is much easier and safer. From the surgeon’s viewpoint, there is much less stress and strain.

MATERIAL VERIFICATION OF COMPONENTS FOR THE HONAN INTRAOCULAR PRESSURE REDUCER

The black reusable Bellows (part #150), the reusable Headband (part #210 or #200), the Tubing (part #300), & Gauge black bulb air pump (part #500, & 550) are made of latex. The Disposable Bellows & Headbands (part series #700’s), contain: The Bellows (the blue inflatable cushion) is 100% Polyvinyl Chloride (PVC), Which contains no trace of latex. The white Tyvek® Headband (from DuPont) is polyethylene.

Caution: This Product Contains Natural Rubber Latex Which May Cause Allergic Reactions.

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A. Connect valve inlet to gauge with short rubber tubing which is on valve.

B. Connect valve outlet to bellows with long rubber tubing. If valve is received with a new Pressure Reducer it will come connected to bellows with long tubing and directions, “A,” & “B.” Before applying the bellows to the eye, pump vigorously a few times to assure secure seating of the valve to prevent air leaking. Then release all air. Apply bellows to eye and gently inflate to pressure desired by surgeon.

The Honan Intraocular Pressure Reducer
The Lebanon Corporation
1700 N. Lebanon St.
Lebanon, Indiana USA 46052-0588
+1(765) 482-7273 • FAX +1(765) 482-5660
www.honanballoon.com

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