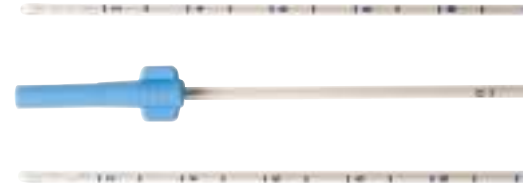


# 3MM CANNULAE

For endometrial biopsy

EFFECTIVE · DISPOSABLE · AFFORDABLE



## 3MM CANNULAE

- Disposable and sterile packed
- Permanently integrated winged base
- Two opposing apertures
- Approximately 23 cm (9 in) in length
- Depth markings printed in cm on cannulae
- Compatible with Ipas MVA Plus® Aspirator with a 6mm adaptor
- Compatible with Ipas MVA Single Valve Aspirator with no adaptor required
- Medical grade, latex-free copolyester plastic

## CLINICAL APPLICATIONS

- Evaluation of infertility
- Evaluation of amenorrhea
- Evaluation of suspected endometrial cancer
- Evaluation of abnormal uterine bleeding
- Diagnosis of endometrial infections

\* In less than 2% of cases one or more of the following can occur during or after the procedure: uterine or cervical injury, pelvic infection vaginal reaction, incomplete evacuation, or acute hematometra

## ALSO AVAILABLE FROM WOMANCARE GLOBAL



### CANNULAE ADAPTOR SETS

For use in conjunction with applicable cannulae and MVA Aspirators  
Product Codes: ADPSET (sizes 6-10 MM)  
ADP6MM offered as a set of 5



### IPAS MVA PLUS® ASPIRATOR

For uterine evacuation  
Product Code: PLUS



### DENNISTON DILATORS

For cervical dilation associated with uterine evacuation  
Product Code: DD5-S

# THE IPAS ASPIRATOR PRODUCT LINE

A COST EFFECTIVE SOLUTION FOR UTERINE EVACUATION

## DEMONSTRATED CLINICAL BENEFITS IN UTERINE EVACUATION

	IPAS ASPIRATORS	EVA	SHARP CURETTAGE
SAFE	X	X	
LOWER INCIDENCE OF SIDE EFFECTS/COMPLICATIONS <sup>5</sup>	X	X	
COST EFFECTIVE	X		X*
PORTABLE	X		X
QUIET	X		X
SINGLE USE	X		
REUSABLE	X	X	X
OUTPATIENT/NO ANESTHESIA <sup>6</sup>	X	X	
QUICK RECOVERY TIME	X	X	
NO ELECTRICITY REQUIRED	X		X
REQUIRES LIMITED SPACE	X		X
REQUIRES LIMITED INVESTMENT	X		X

\*When used without anesthesia

References: 1. Veruy DAA, Crowther CA. (1993). Suction v. conventional curettage in complete abortion: a randomized clinical trial. S Afr Med J, 83:13-15. 2. Blumenthal, Paul D and R.E. Remsburg. 1994. A time and cost analysis of the management of incomplete abortion with manual vacuum aspiration. Int J Gynecol Obstet, 1994, 45: 261-267. 3. De Jonge ETM, Pattinson, RC, Makin JD et al. (1994). Is ward evacuation for uncomplicated incomplete abortion under systematic analgesia safe and effective: a randomized clinical trial. S Afr Med J, 84:481-483. 4. Fawcus S, McIntye J, Jewkes RK et al. (1997). Management of incomplete abortions at South African public hospitals. S Afr Med J, 87:438-442. 5. World Health Organization, Department of Reproductive Health and Research. Safe Abortion: Technical and policy guidance for health systems. Second edition. 2012. Annex 5, Recommendation 1, page 113. 6. Hale RW, Kobara TY, Sharma SD, Tsuei JJ, Gramlich EP, Nakayama RT. Office termination

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- BACKED BY 40 YEARS OF GLOBAL MARKET USE AND IPAS' LONGSTANDING QUALITY REPUTATION
- FDA-LISTED, CE-MARKED, AND ISO 13485 COMPLIANT
- SMALL, INEXPENSIVE, PORTABLE, QUIET, AND SAFE<sup>2,3,4</sup>
- IDEAL FOR PERFORMING PROCEDURES IN THE OUTPATIENT SETTING
- IDEAL FOR SETTINGS WITH NO ELECTRICITY OR WITH SPACE CONSTRAINTS
- LIMITED INVESTMENT REQUIRED

## PRODUCT PORTFOLIO

### ASPIRATORS

- Ipas Plus® Aspirator
- Single Valve Aspirator
- Double Valve Aspirator

### CANNULAE

- Ipas EasyGrip® Cannulae
- Flexible Karman Cannulae

### DILATORS AND ACCESSORIES

- Adapter sets, dilators and aspirator accessories also available

### KITS

- Miscarriage Management Kit

### TRAINING TOOLS

- Pelvic Model

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