Qisheng medical：Customer first, sincere service

Luminos 7 Puncture Navigation System



Qisheng medical

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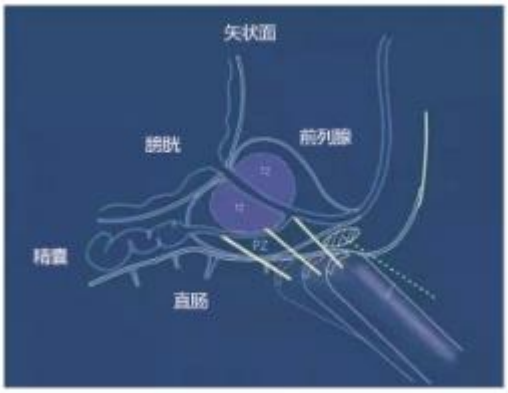
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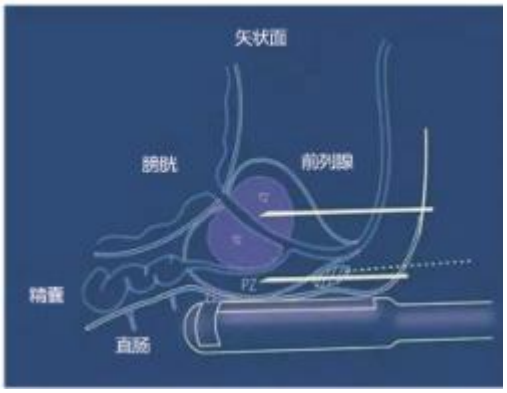
Ultrasound-guided prostate biopsy

Prostate cancer is one of the most common malignant tumors in the male population. With the prolongation of life expectancy, the change of dietary structure and the improvement of detection level, the incidence rate of prostate cancer is increasing year by year. At present, transrectal prostate biopsy is the "gold standard" for the diagnosis of prostate cancer.

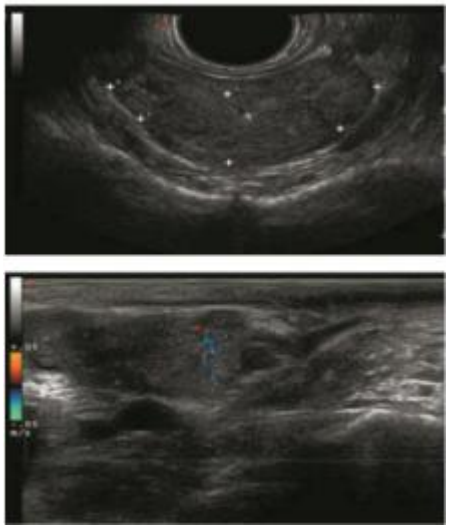
Transrectal puncture



Perineal puncture



Prostate ultrasound image

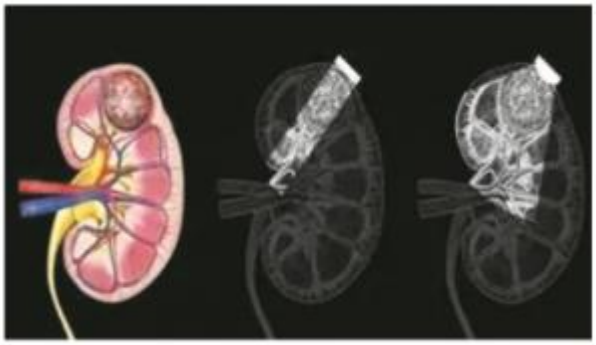


Clinical application of firefly puncture navigtion system in urology

-Location of transrectal and perineal prostate biopsy;
- Preoperative assessment of prostate volume;
- Puncture and drainage of prostate abscess;
- Tumor minimally invasive ablation treatment;
- Evaluation after radical prostatectomy;
- Kidney biopsy kidney localization

-Percutaneous renal puncture and fistula surgery
- Determination of tumor range during partial nephrectomy
- Surgical positioning of bladder puncture and fistula

Ultrasound-guided percutaneous renal puncture kidney



Normal kidney



Hydronephrosis



Ultrasound application for bladder examination

- Measurement of bladder volume and remaining urine
- Bladder tumor
- Bladder stones, foreign bodies, blood clots
- Bladder diverticulum and its complications、
- Neurogenic bladder, glandular cystitis and so on

Bladder tumor



Bladder stones

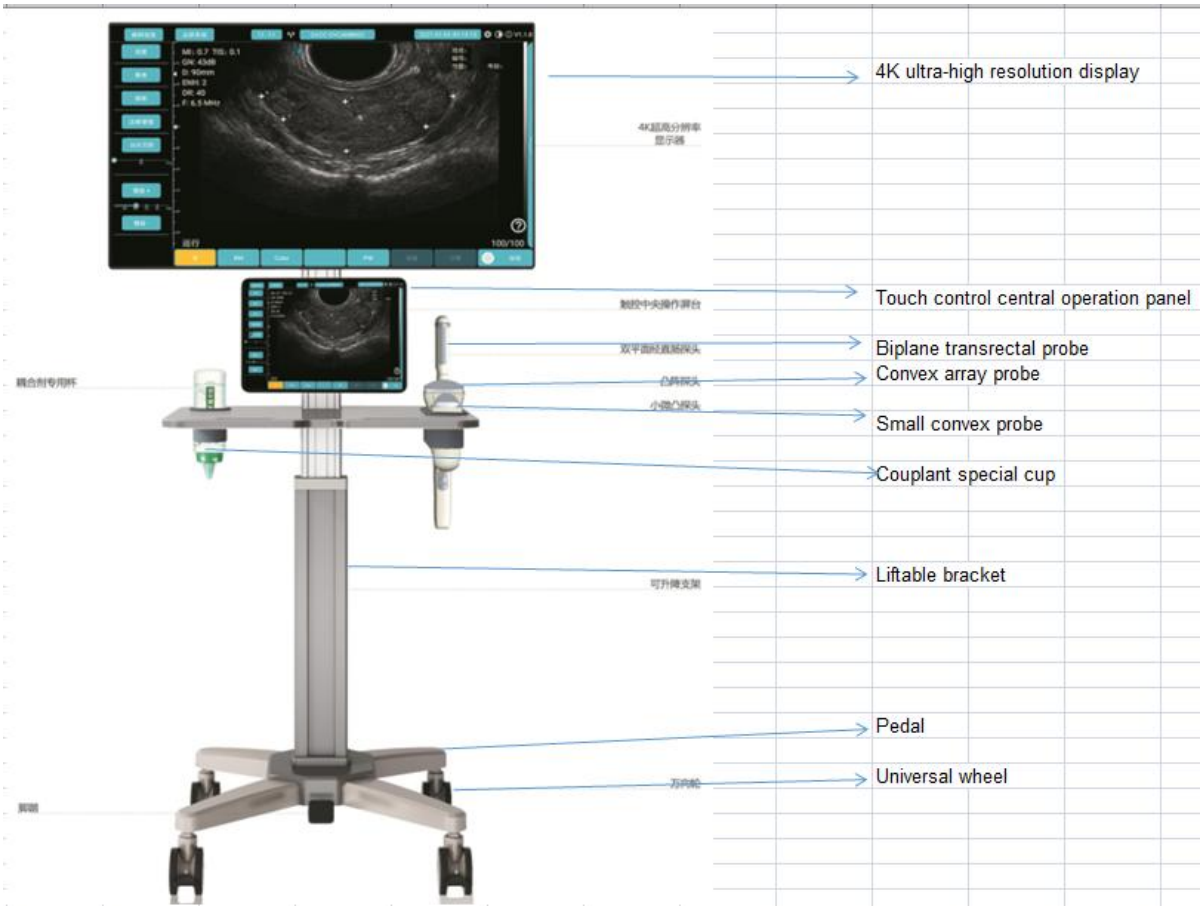


Disposable biopsy needle

Prostate biopsy kit: automatic biopsy needle + ultrasound puncture stand

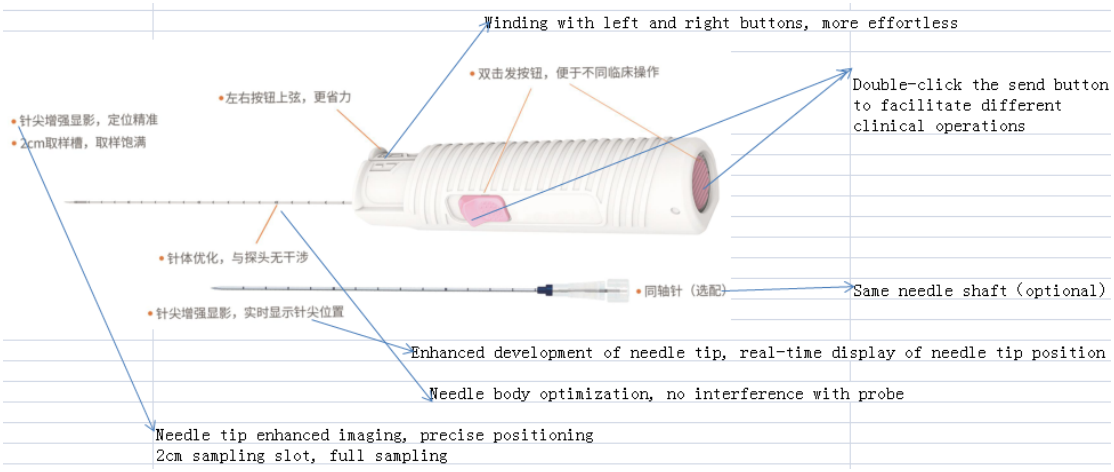


Equipment components



Complications and treatment of prostate puncture			
complication	Incidence	reasons	solution
hematuria	Common complications	The puncture needle punctures the urethra or bladder	1, Stop anticoagulant drugs before puncture
			2, Implement precise puncture, avoid the urethra and bladder, reduce puncture damage, reduce the occurrence of hematuria effectively
			3, In severe hematuria, a three-chamber urinary catheter can be indwelled for traction and compression to stop bleeding
Bloody stool	The incidence is low and usually disappears soon after surgery	The puncture needle damages the rectal mucosa of patients	If rectal bleeding occurs during the operation, you can use finger to compress the bleeding point to stop the bleeding
Postoperative infection	Serious complications	Infection control is not strict or related to quinolones resistance	1, Strictly implement infection control to prevent such infections from occurring
			2, If the infection cannot be controlled, bacterial culture should be carried out in time and the strategy of applying antibacterial drugs should be changed

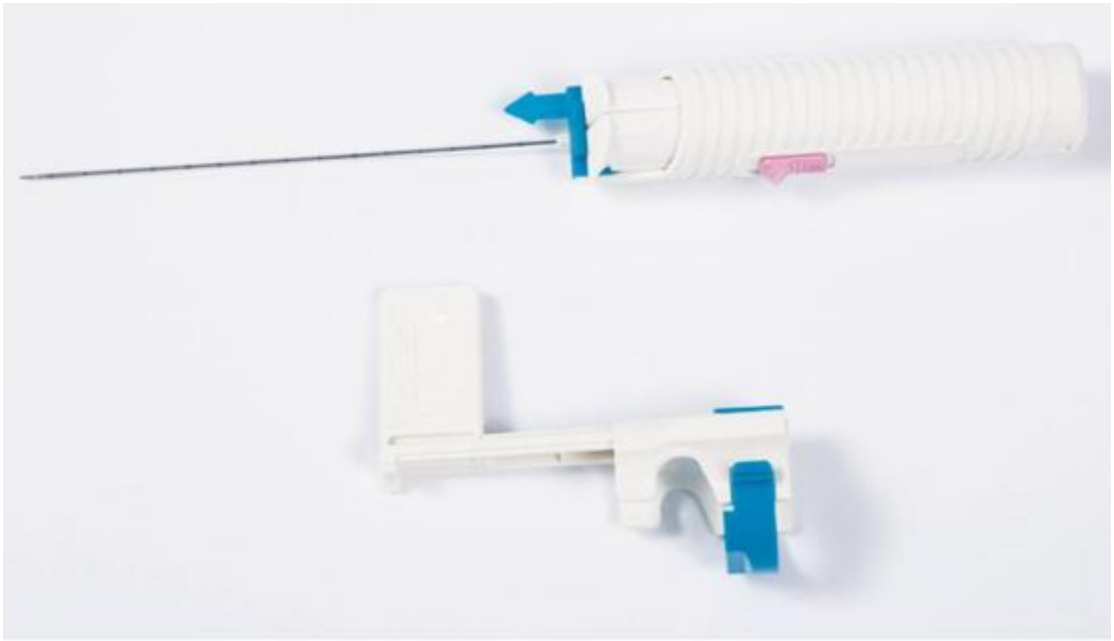
Disposable biopsy needle fully automatic



Transperineal biopsy kit

1,Automatic biopsy needle：Needle tip enhanced development, left and right winding, easy to operate

2, Disposable perineal puncture frame, Telescopic positioning block, multi-plane precise puncture



Transrectal biopsy kit

1,Automatic biopsy needle: Needle tip enhanced development, left and right winding, easy to operate

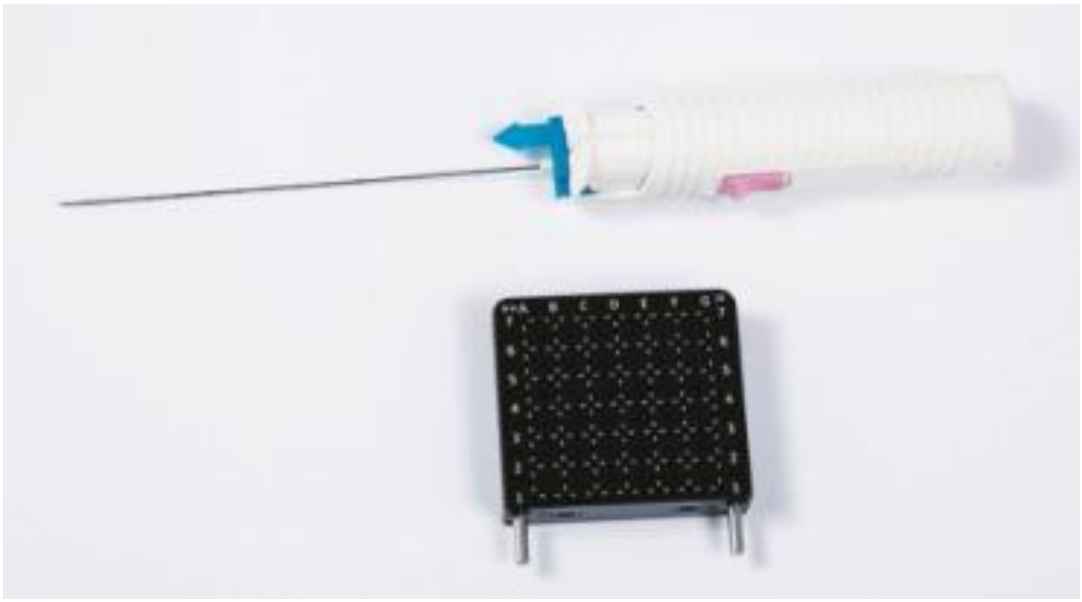
2, Disposable transrectal puncture frame: Accurate puncture to prevent cross-infection



Template system biopsy kit

1,Automatic biopsy needle: Needle tip enhanced development, left and right winding, easy to operate

2, Disposable needle biopsy: Precisely adapted to 17G/18G biopsy needle, sterile and safe



Disposable biopsy needle puncture needle and accessories

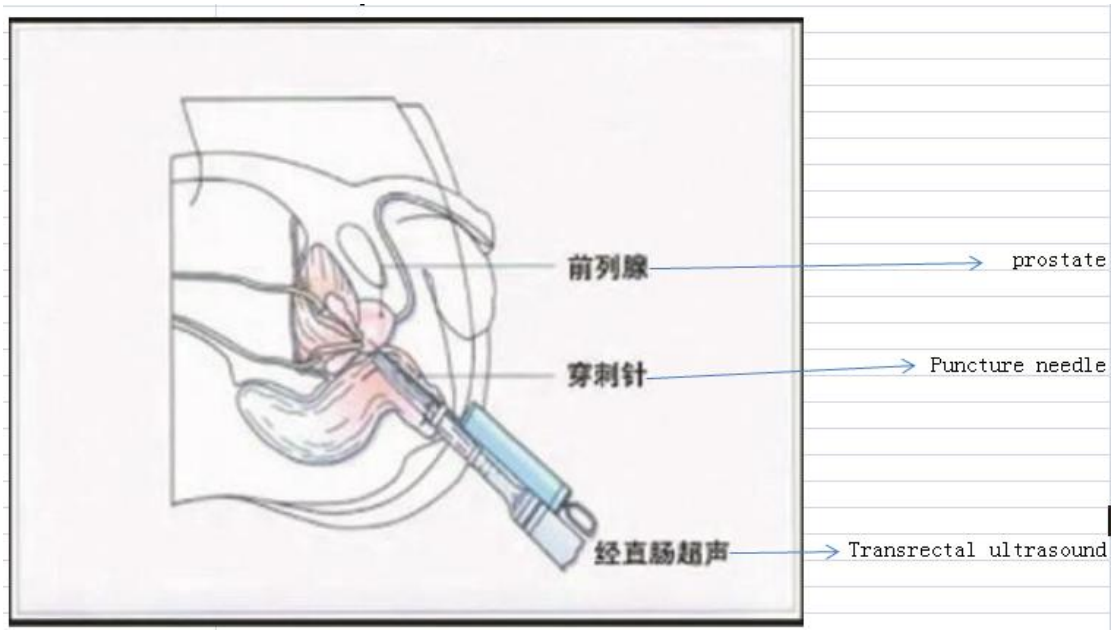
Enhanced imaging puncture needle + ultrasonic puncture holder + ultrasonic probe cover + sterile coupling agent

Renal puncture kit (percutaneous nephrostolitho tomy (PCNL) or renal atrophy precise guidance

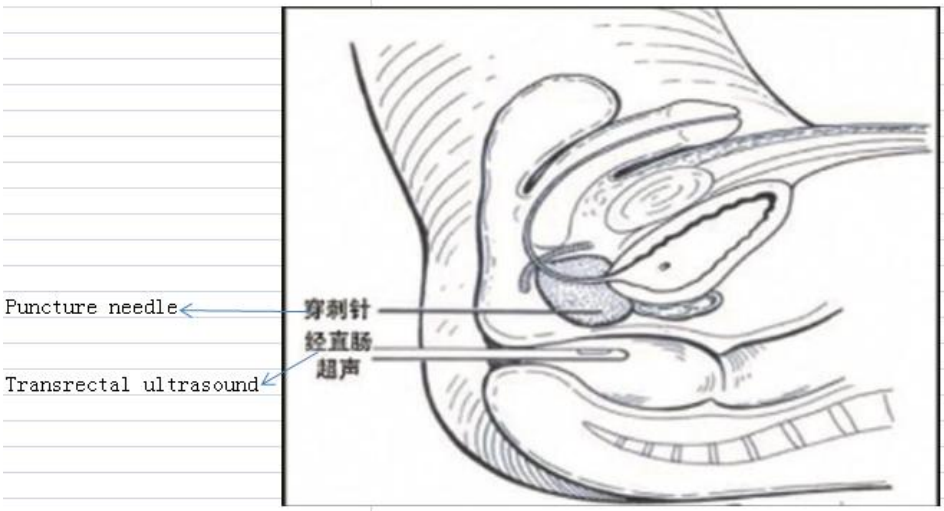


Puncture approach

Transrectal puncture



Perineal puncture



Comparative advantages of transperineal prostate biopsy routes		
Comparative advantage	Transrectal	Perineum
Patient preparation time	Need an enema two days in advance	Short, no enema required
Anti-infective	3-4 days before surgery; 7-14 days after surgery	No need, the only puncture method for hemolytic patients
Intestinal injury	There is damage, need to fill gauze for at least 3 days	no damage
Bleeding volume	much	less
Positive rate	Low, the tip of the prostate is difficult to penetrate through the rectum	high
Target piercing angle	The angle is limited by the puncture frame, and the probe needs to be constantly oscillated	Puncture is more free, easier to learn, reducing learning curve
anaesthetization	optional	Partial anesthesia
Postoperative recovery time	40-80days	same day

Application scenario-Use puncture navigation in the department

