

Instructions for use

CerviJect

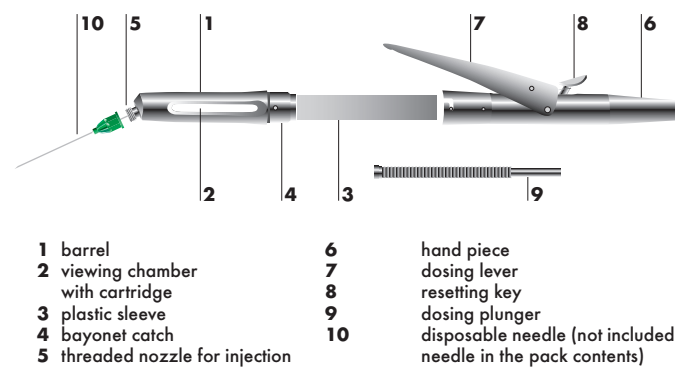
Injection system for intraligamental anaesthesia, for use with a 1.8 ml cartridge and metric threaded needle that can be used in intraseptal anaesthesia. Intended for use only by dental professionals.

Intraligamental anaesthesia (ILA) is a special form of infiltration and terminal anaesthesia. ILA differs from terminal anaesthesia in that the injection is placed directly into the gingival sulcus of the affected tooth and not parallel to the tooth axis in the mucobuccal fold of the mucosa adjacent to the tooth to be anaesthetised. This allows selective anaesthesia of only the tooth to be treated, while with terminal anaesthesia at least 2-3 teeth are affected by the anaesthetic.

Instructions for use

1. Construction of the CerviJect syringe

The functional components and assembly of the CerviJect syringe are shown in the following diagram:



2. Preparation

To return the plunger (9) to the starting point, depress the resetting key (8) and hold the syringe in an upright position (bayonet catch up).

Place the plastic sleeve (3) in the barrel (1).

Insert a standard cartridge in the barrel. Connect the barrel (1) and hand piece (6) using the bayonet catch (4). Depress the dosing lever (7) until a slight resistance is felt. The dosing plunger is now in contact with the anaesthetic cartridge bung and presses the tip of the cartridge into the inner part of the nozzle.

Insert a disposable needle into the nozzle and screw the hub onto the thread. We recommend the use of the cartridge of disposable needles in sizes 0.3 x 12 mm or 0.3 x 16 mm with the corresponding short needle point.

Depress the dosing lever until the anaesthetic solution emerges from the needle point. The syringe is ready for use.

WARNING: Always insert ampoule into ampoule holder first and then screw on the cannula attachment (needle). In reverse order, there is the risk the needle does not puncture the ampoule and bends out of shape.

After loading and assembling the syringe according to directions, guide the needle along the neck of the tooth into the gingival sulcus with direct access to the periodontal space. The needle is generally inserted from the buccal/labial or palatal/lingual aspect. Make the first press for injecting the anaesthetic as soon as there is perceptible contact with the alveolar bone. There should be a marked resistance, which guarantees that the anaesthetic does not flow into the surrounding soft tissue but that there has been adequate intraosseous infiltration. After delivery of approx. 0.2 ml of the anaesthetic (3-4 presses of the syringe each 0.06 ml) it can be assumed that there is a sufficient degree of anaesthesia. An external sign is that the mucosa appears pale due to vasoconstriction.

3. Description of applications for ILA

- Indications for ILA
 - Extraction of single teeth
 - Efficient, additive use in the case of inadequate elimination of pain or failure of anaesthesia
 - Patients with unstable circulation
 - Differential diagnosis of definite pulpal problems
 - Endodontics (especially intracanalicular anaesthesia)
 - Where there is haemorrhagic diathesis
 - Reduced amount of anaesthetic
 - Less systemic flooding
 - Decreased feeling of numbness
 - Low levels of blood locally on the gingiva
 - Intracanal effect - e.g. during endodontic treatments
 - Acts in the case of overacidified tissue (inflammation)
- Contraindications for ILA
 - Where there are acute infections
 - Where there is intolerance to the vasoconstrictor
 - All types of marginal periodontal diseases
 - Deep periodontal pockets if the tooth does not have to be extracted!
- Advantages of ILA for the user
 - Anaesthesia takes effect after only a short time
 - Only a very small amount needs to be injected (0.2 to 0.4 ml per root)
 - 0.06 ml of anaesthetic is injected with each press of the syringe
 - Targeted, selective anaesthesia of individual teeth
 - Elimination of the risk of soft tissue haematomas
- Advantages for the patient
 - Quick, gentle elimination of pain
 - No feeling of numbness in adjacent anatomical structures (lips, tongue)
 - Only minimal intake of anaesthetic (patients at risk)
 - Anaesthesia only lasts for a short period (only 30-40 minutes)
 - As the ILA syringe does not have the typical appearance of a cartridge syringe, its slimline, delicate design has a calming effect on the patient. This also makes it generally successful to use with children.

4. Care instructions

The CerviJect syringe is sold nonsterile. Complete a pre-disinfection cycle followed by sterilisation cycle before initial use.

The CerviJect syringe is made from stainless steel and can be easily cleaned, disinfected (tank and/or thermal disinfection) and sterilised (max. 134°C / 2 bar - 275°F/29 psi) together with other stainless steel instruments in the practice. Adhere strictly to the preparation recommendations of the respective manufacturer.

After each use, loosen the barrel and hand piece of the syringe and remove the cartridge, plastic sleeve and dosing plunger. Thoroughly dry the individual components after cleaning and disinfection. Then place the individual components in a suitable sterilisation medium (sterile packaging, container) and only reopen them shortly before the next use. The individual components should only be assembled when dry.

The CerviJect syringe must not be lubricated.
Only use cartridges with a plunger seal that does not have a hollow.

5. Warranty

Stringent quality control procedures ensure this surgical instrument is supplied in perfect working order. Your CerviJect is guaranteed against defects in materials or workmanship for

2 Year

from the date of purchase. This guarantee is void if your CerviJect has been improperly sterilized, poorly stored or incorrectly handled.

In the case of a claim under warranty, send a copy of proof of purchase together with the CerviJect syringe to the dealer from whom you bought the product.

All information provided is to the best of our knowledge and is only intended as non-binding information.

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FINEST DENTAL INSTRUMENTS
- SINCE 1916 -
GERMANY

CerviJect

Painless injection 零感注射

Intraligamentary anaesthesia
with a gentle touch

全新无痛韧带内麻醉



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FINEST DENTAL INSTRUMENTS

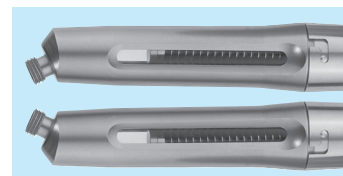
NEUENKAMPER STR. 80 - 86 · D-42657 SOLINGEN
TEL. +49(0)212/81 00 44 · FAX +49(0)212/8 73 45
E-MAIL: INFO@CARLMARTIN.DE · INTERNET: WWW.CARLMARTIN.DE

100
years
1916 - 2016



Syringe for intraligamental anaesthesia

- new design
- advanced technology
- with an angled working tip to provide very easy access specially to the distal area
- double sided easy-to-use bayonet catch – therefore the cylinder can be moved either in position for the upper or the lower jaw
- to be used for a 1.8ml anaesthesia cartridge
- with anti-bursting sleeve
- 0,06ml of anaesthetic is injected with each press of the syringe
- can be used for tank and/or thermal disinfection as well as sterilisation (autoclave) up to 134°C



by turning of the bayonet catch, the cylinder can be moved for use in the **upper or lower jaw**

韧带内麻醉注射器

- 全新设计
- 采用先进技术
- 带角度的工作头，特别容易进入远端区域
- 双面卡口易于使用 – 可以在上下颌位置移动
- 1.8毫升麻醉管壳适用
- 具防破裂套筒
- 每按一下注射器，将有0,06ml麻醉剂被注入
- 可用于罐和/或热消毒和灭菌（高压釜）高达134°C

CerviJect

REF 1956
(metric thread/ 公制螺纹)
1956-IT
(US(Imperial) thread/ 美制螺纹)



134°C
Autoclaving
高压灭菌



Thermal disinfection
热消毒



The products can be purchased through an authorized dealer (no direct sales)
该产品可通过授权经销商购买（无直接销售）

使用說明

CerviJect

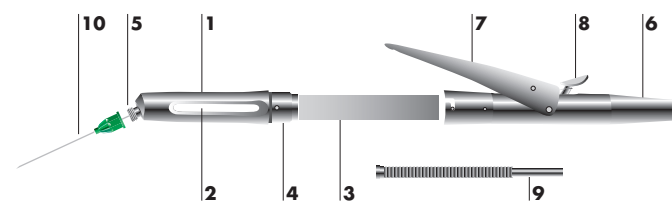
专为韧带内麻醉而设计的注射器，适用于与1,8ml的管芯，公制针头可用作隔核内麻醉。
只供牙科专业使用。

韧带内麻醉(ILA)是一种特殊的浸润和终端麻醉。ILA不同之处在于麻醉剂被直接注射放入受影响牙齿的龈沟中，而不是麻醉在平行于齿轴的上颌前庭区沿黏膜颊侧皱折(mucobuccal fold)。这允许仅在牙齿选择性麻醉被处理，而与终端麻醉至少2 - 3齿受麻醉剂。

功能及操作說明

1. CerviJect 注射器结构

CerviJect注射器的组件如下图所示：



- | | |
|----------|-------------------|
| 1 管身 | 6 把手 |
| 2 观察窗连药管 | 7 注射杆 |
| 3 塑料管 | 8 重设按键 |
| 4 卡口 | 9 活塞杆 |
| 5 针套 | 10 一次性针头(不连于此套装中) |

2. 用前准备

先将活塞杆(9)重新设定，在注射器处于直立位置的情况下按下重设按键(8)和（留意卡口应向上）。

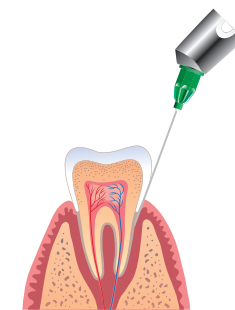
将塑料管 (3) 插入管身 (1) 。

将一个标准药管置入管身，并将管身 (1) 及把手 (6) 透过卡口 (4) 连接。按下注射杆 (7)，直至轻微感到阻力。如今活塞杆已于管身内接上药管末端。

在注射器头安上一次性针头。建议使用其药管以及相应短针点尺寸为0.3×12毫米或0.3×16毫米的一次性针头。

按下注射杆，直到麻醉剂从针尖冒出。注射器是以完成准备，可以使用。

注意: 请先将安瓿置于安瓿支架，然后才拧上针头。否则存在针头刺不中安瓿或弯曲变形的风险。



装载和组装根据方向注射器后，引导针沿牙颈部的针进入龈沟，便可直接通往牙周空间。针一般是从颊/下唇或腭/舌方面插入。只要针尖接触到牙槽骨便可按下第一次注射。应该有一个显著的阻力，这保证了麻醉剂不会流入周围的软组织，但同时又足够骨内浸润。当注入约0.2毫升麻醉剂（按3至4次，每次注射0.06ml）后，便应有足够的麻醉程度。从外观而言，黏膜会因血管收缩而变得苍白。

3. 韧带内麻醉的应用

- 韧带内麻醉适用于：
 - 单只拔牙
 - 在麻醉失效或消除疼痛不足的情况下，作添加剂使用
 - 循环系统不稳定的患者
 - 确切的牙髓问题
 - 根管治疗（特别是管内段麻醉）
 - 有出血性素质的部位
 - 减少麻醉剂量
 - 减少全身泛滥
 - 减少麻痹感觉
 - 牙龈局部贫血
 - 根管内功效 - 如在进行根管治疗时
 - 组织过氧化（发炎）
- 韧带内麻醉**不适用**于：
 - 急性感染
 - 血管收缩剂不耐受
 - 各种牙周病
 - 牙齿和牙龈之间的囊袋大深
- 韧带内麻醉的好处
 - 麻醉能极快发挥药效
 - 所须的麻醉剂量极少（每次0.2 - 0.4毫升，而注射器每次给量只有0,06 毫升）
 - 可针对性地麻醉个别牙齿
 - 消除软组织水肿的风险
- 對患者的好處
 - 快速，温和除痛
 - 周边组织（嘴唇，舌头）不会有麻痹感觉
 - 麻醉长度短(每只维持三至四十分钟)
 - 外观有别于传统注射器，其纤细，精巧设计能减轻患者对注射的不安，对儿童效果尤其显著

4. 保养说明

CerviJect注射器出售时是未经消毒的。请于初次使用前预先消毒杀菌。
CerviJect注射器是由不锈钢制成，清洗，消毒（罐和/或热消毒）和灭菌（最大134°C/2巴-275°F/29磅）均极之容易，并可连同其他不锈钢器械一同清洗。消毒时请严格遵守制造商的准备相应的指引。
每次使用后，请先松开枪管和手柄，然后取出药管，塑料管和活塞杆。彻底清洁消毒和干燥各个组件。然后将注射器各个组件收纳在合适的无菌包装或容器，并仅在下次使用时重新打开。谨记各个组件收纳前必须绝对干燥。

CerviJect注射器不能润滑。
请只使用活塞盖不具中空安瓿

您亦可于本网站查看相关的使用教学影片：
www.carlmartin.de

5. 售后保证

严格的品质管制程序，确保注射器的工作状态完美。
阁下可就该产品因材料和工艺而引起的缺陷享有从购买日起计
2年
的保养期。

下列情况则不在维修保养范围内：

- 产品曾被错误操作，疏忽使用，消毒或存放不当
- 不按照原厂提供之指示保养

阁下要求保养服务时，必须向您光顾的供应商出示有效的购买单据正本并附上损坏的注射器。

阁下提供的所有信息仅供参考用，并不带约束性。