



All FEHLING rongeurs

Accessories

For CERAMO rongeurs - ring handle with screw:

TXW-1X.....Screwdriver for X rongeur, hexagon socket 2 mm

TXW-2X.....Screwdriver for X rongeur, hexagon socket 2 mm, 75 mm, sterilizable

For CERAMO rongeurs - pliers handle with screw:

TXX-0X.....Screwdriver for X rongeur, hexagon socket 3 mm

TXW-9X.....Screwdriver for X rongeur, hexagon socket 3 mm, 75 mm, sterilizable



Detachable rongeurs with ring handle/pliers handle with screw can be recognized by the arrow mark next to the hexagon socket screw at the end of the instrument.

No tools are required to detach the rongeurs fitted with a ring handle with peacock eye with and without a safety catch.

Rongeurs of the same model group without the suffix "X" cannot be detached!

Please follow the corresponding installation instructions for installation and removal.



This instrument or medical device is supplied non-sterile. It must be reprocessed before use. Before reprocessing, the instrument must be risk-assessed in accordance with the RKI guidelines (non-critical/semi-critical/critical A/B/C).

The rongeurs may only be used, prepared, and disposed of by qualified medical personnel!

The rongeurs are intended for reuse.

1) Intended purpose

Rongeurs and forceps are medical devices and are used

- for grasping soft (partial) tissue such as parts of an intervertebral disc (rongeurs) already separated
- for separating fabric (FERRIS-SMITH, wide-mouth and BRODNER rongeurs)
- for gripping, holding and mobilizing organs and other tissue (rongeur-style grasping forceps)
- for cutting hard tissue such as bone (cutting forceps)

Supplementary information on the intended purpose

Duration of application: Rongeurs and forceps are intended for temporary use.

Field of application: Rongeurs and forceps are used on all patients where soft (partial) tissue needs to be grasped, tissue needs to be separated, organs and other tissue need to be grasped, held and mobilized and hard tissue needs to be separated.

User profile: Rongeurs and forceps may only be used by medically trained specialists (e.g. medical specialists).

Application environment: Rongeurs and forceps are used only under controlled environmental conditions (e.g. surgery).

Anticipated patient population: No restrictions



2) Indications

Surgical procedures in which tissue must be grasped, held, mobilized and/or separated or hard tissue such as bone must be separated.

3) Contraindication

All applications that run counter to the physical and/or mechanical properties of the individual rongeurs or forceps model are considered contraindicated. There are no generally valid contraindications for the use of rongeurs and forceps.

Nevertheless, attention must be paid to increased risks that could arise from the anatomical and physiological conditions as well as the clinical picture of the patient.

4) Possible side effects

The following side effects are described in the medical literature, which may occur despite the intended use of the rongeurs during or after the performance of special techniques (method-specific complications):

Violation of the neighboring

- abdominal vessels
- Ureter
- Kidneys
- Intestine

Lesions of

- nerves/roots
- Dura

- AV fistulas
- (Pseudo) aneurysms epidural hematomas
- Wound healing disorders
- Infections
- Possible tumor cell spread



Medical devices may contain chromium and/or nickel, for example. The materials used are biocompatible, but they can trigger allergic reactions or intolerances.

5) Before use

The rongeurs and forceps are supplied non-sterile and must be cleaned and sterilized by the user before first use and before each subsequent use (see chap. 6) *Reprocessing*).



A safety inspection must be carried out before each use. Check for sharp edges, cracks, fractures, mechanical malfunctions and missing components (see chap. 6) *Reprocessing* under "*Maintenance, inspection and testing*").



Handle the rongeurs with care during storage, transport, and cleaning!
Avoid blows and localized stress on the rongeurs to prevent possible consequential damage! Do not overload functional parts!



Only use flawless and sterilized products!



6) Reprocessing	
	The medical device must be prepared before use. Before reprocessing, it must be risk-assessed according to the RKI guidelines (non-critical/semicritical/critical A/B/C).
	The national legal regulations, national and international standards and guidelines as well as the company's own hygiene regulations for preparation must be complied with.
	The respective national regulations for the treatment of instruments used on patients with Creutzfeldt-Jakob disease (CJD), suspected CJD or possible variants must be observed.
	The instruments may only be used, prepared and disposed of by qualified medical personnel.
	Handle the instruments with care during storage, transportation and cleaning! Avoid impacts and localized pressure on the instruments in order not to cause any possible consequential damage! Do not overload functional parts!
	Do not clean CERAMO instruments (recognizable by their black-brown surface) using oxidative processes (processes using hydrogen peroxide H ₂ O ₂ , e.g. Orthovario or Oxivario from Miele). The use of these procedures leads to the destruction of the titanium-containing CERAMO coating after some time due to the dissolution of titanium.
Limitations during reprocessing	<p>Frequent reprocessing has little effect on the label of the instruments and does not impair the function of the instruments. The end of the product's life is normally determined by wear and damage caused by use (e.g. damage, illegible labeling, functional failure - see also "<i>Maintenance, inspection and testing</i>").</p> <p>When used and reprocessed properly, the instruments can undergo up to 500 reprocessing cycles.</p>
General information on reprocessing	<p>Reprocessing is based on a validated procedure. All cleaning steps mentioned (manual pre-cleaning, automated/manual cleaning, manual disinfection and sterilization) were validated with the parameters specified in each case and listed under "Validated procedure". For validation, the recommended reprocessing agents (cleaning agents: Neodisher® MediClean forte (Dr. Weigert); disinfectant: Korsolex® med AF (Bode Chemie GmbH)) is used. Both water of drinking water quality and demineralized water (demineralized, microbiologically at least drinking water quality) are used for cleaning.</p> <p>Automated preparation is preferable to manual cleaning because it provides a better and safer cleaning result.</p> <p>It is also possible to clean our instruments with other tested and approved chemicals that have been recommended by the chemical manufacturer with regard to their material compatibility. Please always observe the manufacturer's instructions regarding concentration, exposure time, temperature and renewal of cleaning agents and disinfectants. All application instructions of the chemical manufacturer must be strictly adhered to. Otherwise, this can lead to optical material changes or material damage, such as corrosion, fractures or premature aging.</p>



Pre-treatment at the point of use	<p>Pre-cleaning: Care must be taken to ensure that blood, tissue and medication residues are removed from the instruments with a disposable cloth/paper towel immediately after completion of the procedure and that they are immediately sent for machine cleaning. Once the instruments have been pre-treated, visual inspections must be carried out to ensure that they are complete.</p> <p>The instruments must be transported from the place of use to the place of preparation in such a way that neither users, third parties, the environment nor the medical devices are endangered or damaged (placement in closed, puncture-proof containers and - if necessary - use of protective caps).</p>
Preparation before cleaning	<p>It is recommended that the instruments be cleaned immediately after use, as dried residues are difficult to remove from hard-to-reach places. Do not place in NaCl solutions (otherwise risk of pitting or stress corrosion cracking).</p> <p>Instruments that have been joined together during use must be disassembled back to their original state before cleaning.</p>
Disassembly	See chap. 10) <i>Disassembly</i>
Manual pre-cleaning	<p><u>Validated procedure:</u></p> <p>Equipment: Basin Soft brush Water pressure gun (or similar)</p> <p>Cleaning agents: Neodisher® MediClean forte (Dr. Weigert)</p> <p><u>Procedure/parameters:</u></p> <ul style="list-style-type: none"> • If possible, rinse the instrument in disassembled condition under cold running water (drinking water quality, < 40 °C) until all visible soiling has been removed. Use a soft brush (not a wire brush!) to remove stubborn dirt. • Cavities, gaps, slits and lumen must be rinsed intensively (> 10 seconds) with cold water (drinking water quality, < 40 °C) using a water pressure gun (or similar). • Soak the products for 10 – 30 minutes in a solution containing 0.5 – 2 % Neodisher® MediClean forte with water (drinking water quality, < 40 °C). • Only use an approved solution of a cleaning agent that does not have a protein-fixing effect. The instructions of the cleaning agent and disinfectant manufacturer must be observed. • Make sure that all areas of the instrument come into contact with the solution. • If necessary, moving parts on the instrument are moved back and forth in the cleaning bath. • During the exposure time, remove coarse soiling with a suitable brush (not a wire brush!). • Rinse the instrument for 1 minute under cold demineralized water (see "<i>General information on reprocessing</i>") and move any moving parts on the instrument back and forth.
Cleaning/ disinfection	If possible, a washer-disinfector that uses thermal disinfection and complies with DIN EN ISO 15883 is preferable.



<p>Cleaning: Machine</p>	<p>Avoid overfilling instrument trays and wash trays - only use suitable instrument holders.</p> <p>Take particular care to ensure that the tips do not get stuck in the grid when inserting and removing the instruments in/from the sieve baskets.</p> <p><u>Validated procedure:</u></p> <p>Equipment: Cleaning and disinfection machine G 7835 CD (Miele) / PG 8535 (Miele)</p> <p>Cleaning program: Des-Var-TD (G 7835 CD)</p> <p>Cleaning agents: Neodisher® MediClean forte (Dr. Weigert)</p> <p><u>Preparation:</u></p> <ul style="list-style-type: none"> • Articulated instruments must be inserted into the appliance in such a way that the joints are open or disassembled, if possible, and the water can drain out of cavities and blind holes. • If applicable, relax springs • Make sure that all cavities are completely flushed out, including the inside. • Make sure that no areas are left unwashed. • Connect the Luer connections of the instruments, if available, to the Luer lock irrigation attachment of the washer-disinfector. <p><u>Procedure/parameters:</u></p> <ul style="list-style-type: none"> • 3 minutes pre-rinse with cold water (drinking water quality, < 40 °C) • Emptying • 10 minutes cleaning with a solution of 0.5 – 2 % Neodisher® MediClean forte in water (drinking water quality) at 55 °C • Emptying • 2 minutes rinsing with water (drinking water quality, < 40 °C) • Emptying • 1 minute rinse with cold demineralized water (< 30 °C) • Emptying • 5 minutes thermal disinfection with demineralized water (> 90 °C) • 30 minutes drying (90 °C) <p>After machine cleaning, cavities, blind holes, etc. in particular have to be inspected for visible dirt. If necessary, repeat the cycle or clean manually.</p>
<p>Cleaning: Manual</p>	<p><u>Validated procedure:</u></p> <p>Equipment: Basin Soft brush Water pressure gun (or similar) Bandelin Sonorex Digitec</p> <p>Cleaning agents: Neodisher® MediClean forte (Dr. Weigert)</p> <p><u>Procedure/parameters:</u></p> <ul style="list-style-type: none"> • If possible, place the disassembled instruments in cold water (drinking water quality, < 40 °C) for 10 minutes.



	<ul style="list-style-type: none"> • Operate moving parts, if any, through their full range of movement. • Clean the instruments with a soft brush (not a wire brush!) until no visible contamination remains. • Rinse the instruments for at least 20 seconds using a water pressure gun (or similar). <p><u>Ultrasonic cleaning:</u></p> <ul style="list-style-type: none"> • 10 minutes sonication at < 40 °C with 0.5 – 2 % detergent solution at 35 kHz • After sonication, rinse the instruments for at least 20 seconds using a water pressure gun (or similar). • Rinse the instruments with water (drinking water quality, < 40 °C) for at least 10 seconds. • Deionized water (< 40 °C) must be used for the final rinse. The instruments are rinsed with deionized water for at least 30 seconds. It must be ensured that no residues remain on the products.
Disinfection: Manual	<p>Disinfectant solutions can be used in accordance with the instructions on the label (see chemical manufacturer's instructions).</p> <p><u>Validated procedure:</u></p> <p>Equipment: Basin Bandelin Sonorex Digitec</p> <p>Disinfectant: Korsolex® med AF (Bode Chemie GmbH)</p> <p><u>Procedure/parameters:</u></p> <ul style="list-style-type: none"> • After cleaning, immerse the products for 5 minutes in an ultrasonic bath (35 kHz, < 40 °C) with a suitable disinfectant (e.g. 0.5 % Korsolex® med AF). Ensure that all surfaces are wetted with the disinfectant. If necessary, move mobile parts in the disinfection bath before switching on the ultrasonic cleaner. • After disinfection, rinse all products thoroughly with deionized water (< 40 °C) for at least 1 minute to remove the disinfectant and, if necessary, move mobile parts back and forth on the instrument. • It must be ensured that no residues remain on the products. • Drying with sterile, oil-free compressed air.
Drying	<p>If drying is achieved as part of the cleaning/disinfection cycle, 120 °C should not be exceeded. Then dry with suitable compressed air in accordance with RKI recommendations. Pay particular attention to drying areas that are difficult to access.</p>
Assembly	<p>See chap. 9) <i>Assembly</i></p>
Maintenance, inspection and testing	<p>For instruments with moving components that are exposed to friction (e.g. joints), an instrument oil based on paraffin/white oil (in accordance with the applicable European or United States Pharmacopoeia) that is biocompatible, steam-sterilizable and steam-permeable must be applied before sterilization. Such points may also be indicated by an oil can symbol. Instruments must not be treated with care products containing silicone. These can lead to sluggishness and jeopardize the effectiveness of steam sterilization.</p>



	<p>A safety check of the instruments must be carried out before each use. Check for sharp edges, cracks, fractures, mechanical malfunctions and missing components.</p> <p>Check instruments with moving parts for ease of movement (avoid excessive play). If applicable, check the locking mechanisms.</p> <p>All instruments: Visually inspect for damage and wear using a magnifying lamp.</p> <p>Pay particular attention to critical points on moving parts and in the work area.</p> <p>Defective, damaged instruments whose labeling is no longer legible must be sorted out and cleaned and disinfected before being returned to the manufacturer. Repairs may only be carried out by the manufacturer or workshops authorized by the manufacturer. A confirmation form for this process is available from the manufacturer.</p> <p>Instruments that can no longer be repaired must be disposed of in the standard hospital scrap metal disposal system. In this case, especially for surgical instruments with pointed or sharp edges, it is important to ensure safe storage in a closed, puncture- and break-proof disposable container. Do not use damaged instruments!</p>
Packaging	<p>Individually: in accordance with standards of the DIN EN 868, DIN EN ISO 11607 and DIN 58953 series.</p> <p>Sets: Sort instruments into trays provided for this purpose or place them on all-purpose sterilization trays. A suitable method must be used to pack the trays.</p>
Sterilization	<p>Steam sterilization in a fractionated vacuum process in an appliance according to DIN EN 285 and DIN EN ISO 17665 (part 1 and 2). To avoid staining and corrosion, the steam must be free of ingredients. The recommended limit values for the ingredients of feed water and steam condensate are defined in DIN EN 285.</p> <p><u>Validated procedure:</u></p> <p>Equipment: Tuttnauer autoclave type B 3870 EHS / Lautenschläger ZentraCert</p> <p><u>Procedure/parameters:</u></p> <p>Cycle type: 3 pre-vacuum phases</p> <p>Sterilization temperature: 132 – 134 °C</p> <p>Holding time: 4 – 5 minutes</p> <p>Drying time: 2 minutes</p> <p>When sterilizing several instruments in one sterilization cycle, the maximum load of the sterilizer must not be exceeded (see appliance manufacturer's instructions).</p>
Storage	<p>In accordance with Section 4 MPBetreibV and standards of the DIN EN 868, DIN EN ISO 11607 and DIN 58953 series.</p> <p>Instruments should be stored in a dry place at room temperature, clean and protected from damage and mechanical influences (avoidance of condensation, damage). If applicable, always store instruments in a tension-free state. This helps to prevent premature fatigue of the spring tension.</p>



	Instruments must be transported to the place of use in a closed, puncture-proof sterile container.
Waste disposal	These products are mainly made of steel. These must be cleaned before disposal. Disposal can take place at a scrap metal recycling center. To protect employees, care should be taken to ensure that any pointed or sharp edges are protected.
The instructions listed above have been validated by the medical device manufacturer as suitable for the preparation of a medical device for reuse. The person carrying out the preparation is responsible for ensuring that the preparation actually carried out with the equipment, materials and personnel used in the preparation facility achieves the desired result. This requires verification and/or validation and routine monitoring of the process. Likewise, any deviation from the instructions provided by the preparer should be carefully evaluated for effectiveness and possible adverse consequences.	
	Any modification to the product or deviation from these instructions for use will result in exclusion of liability! Subject to change without notice.

7) Configuration and application

Due to the variety of possible anatomical and physiological conditions, rongeurs differ in their specific characteristics, such as jaw length or handle design.

Performance features:

Rongeurs	Rongeurs can grasp soft tissue in the anterior quarter up to a thickness of 20 % opening width.
Separating Rongeurs	Rongeurs can separate soft tissue in the anterior quarter up to a thickness of 20% opening width.

	Only use flawless and sterilized products!
	Before inserting the rongeur, ensure that the surgical field has been adequately prepared.
	Medical devices made of ferromagnetic materials must not be exposed to a magnetic field or external electromagnetic influences.
	Medical devices containing metals are electrically conductive and must not be exposed to a power source or external electrical influences.



	The choice of rongeur depends on the anatomical and physiological conditions as well as the area of application. It is important to ensure that the rongeurs and forceps used are the right size and geometry as well as sufficiently stable.
During the application	
	<p>Richter X rongeurs without a safety latch, recognizable by the additional letter "X", can come loose during use if too much pressure is applied to the slider. This can cause the peacock eye of the movable handle section to detach from its mount in the slider and the rongeur to fall apart.</p> <p>To avoid this, the Richter X rongeur with safety latch, recognizable by the additional letter "Y", can be used. The safety latch prevents the peacock eye from being accidentally released from its mount in the slider.</p>
	<p>Rongeurs are intended for gripping soft (partial) fabrics, not for separating them (with the exception of FERRIS-SMITH, wide-mouth and BRODNER rongeurs)! Risk of breakage due to overload; risk of injury!</p> <p>If the anatomy permits, the considerably more robust FERRIS-SMITH, wide-mouth or BRODNER rongeurs can be used, which can also cut soft tissue without prior separation.</p>
	<p>Only grasp completely severed tissue sections.</p> <p>Avoid twisting, tilting and overloading the instrument, especially when using titanium rongeurs. Risk of injury!</p>
	<p>Important rule of thumb: Overloading can be recognized visually by the bulging of the slider above the shaft level.</p> <p>If this occurs, interrupt the grasping process and</p> <ul style="list-style-type: none"> - either fully dissect the mounted piece of tissue with a suitable sharp instrument or - use a FERRIS-SMITH or wide-mouth rongeur of a suitable size or the BRODNER rongeur. <p>Continuation of the grasping and removal process despite recognizable overload can lead to breakage of the joint that connects the movable jaw part with the slide and shaft. Risk of breakage! Risk of injury!</p>
	The application must be carried out under visual control in order to avoid injury to neighboring structures (see chap. 4) <i>Possible side effects</i>). Risk of injury!

8) Required accessories

A screwdriver is required for assembling/disassembling rongeurs with ring handle/ handle with screw. For CERAMO rongeurs with ring handle with screw, the TXW-1X or TXW-2X screwdriver (sterilizable) can be used, for example. The TXX-0X or TXW-9X screwdriver (sterilizable), for example, is suitable for assembling/disassembling CERAMO rongeurs with pliers handle with screw. No tools are required to dismantle the CERAMO rongeurs with ring handle with peacock eye, but please observe the relevant assembly instructions (see chap. 9) Assembly).

Rongeurs are stand-alone instruments. Therefore, no combination with other products is intended.



9) Assembly

Please refer to the corresponding assembly instructions to assemble the detachable rongeur.
Listing of the assembly instructions:

FEHLING CERAMO Rongeurs - ring handle with screw	M 118
FEHLING CERAMO Rongeurs - pliers handle with screw	M 123
FEHLING CERAMO Rongeurs - ring handle with peacock eye	M 124

10) Disassembly

To disassemble the detachable rongeur, please follow the corresponding assembly instructions (see chap. 9) *Assembly*).



Place small parts in suitable containers (e.g. needle box) for storage and reprocessing!

11) Obligation to report serious incidents

The user is obliged to report serious incidents that have occurred in connection with the medical device to the manufacturer, either by email to vigilance@fehling-instruments.de or via the complaints form at <https://www.fehling-instruments.de/en/complaint/> and to the competent authority of the member state in which the user is established.

Symbols

If displayed on the medical device, the label of the medical device or the instructions for use, the symbols according to DIN EN ISO 15223-1 have the following meaning:

 Manufacturer	 Consult instructions for use or consult electronic instructions for use	 Caution
 Catalog number	 Batch code	 Serial number
 Medical device	 Unique device identifier	 CE marking
 Oil can for points to be lubricated	 CE marking	



Contact the manufacturer		
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