Single Use 3-Lumen Extraction Balloon V
The guidewire and injection lumens are separated to ensure smoother passage of the guidewire. Additionally, contrast media can be injected without removing the guidewire. Two models are available — one with the injection port located above the balloon and the other with the injection port located below the balloon.

Triple-lumen design allows for easy passage of the guidewire.

The balloon catheter sheath is manufactured from a special material that allows it for improved insertion into the papilla, ensuring smoother guidewire passage, and facilitating contrast injection. The tapered design — 7 Fr. catheter at the proximal end tapers to 5 Fr. at the distal end — enables an easy approach to the bile duct and accommodates a 0.035” guidewire.

Easier cannulation and tapered sheath design

Multiple balloon sizing

The balloon can be inflated to one of three diameters — 8.5mm, 11.5mm, and 15mm. The balloon size can be easily adjusted to suit the requirements and conditions of each case so there is no need to change catheters during the procedure.

Reliable, Efficient Stone Extraction with the Multi-Size Balloon Design

The Innovative V-System Design Lets You Proceed with Confidence and Efficiency

The V-System is a complete system that integrates Olympus endoscopes and EndoTherapy devices. The revolutionary V-System design offers the option of guidewire manipulation by the physician or the assistant, allows easier exchange of catheters, and enhances cannulation capability.

C-Hook

Now endoscopists have the option to manipulate guidewires and devices.

The convenient C-Hook allows the device handle to be attached to the endoscope’s control section, putting it within easy reach of the endoscopist. With the device handle right at hand, the endoscopist can maneuver the guidewire, inject contrast media, and manipulate the handle — all while keeping a grip on the scope control section.

V-Marking

Indicates when to raise and lower the V-Groove forceps elevator.

The exclusive V-Marking is located on the proximal side of the sheath. When this marking reaches the channel port on the scope’s control section, it indicates that the device tip has reached the distal end of the scope and the V-Groove forceps elevator may be lowered. When withdrawing the device from the scope, the same marking indicates when to raise the elevator to lock the guidewire.

V-Sheath

Device control by the endoscopist or the assistant.

The V-Sheath allows the endoscopist complete device control or, if preferred, device control may be given to the assistant. The unique device design allows the guidewire sheath and injection sheath/handle to be separated. This forked sheath design allows either the endoscopist or the assistant to control the device.

V-System device replacement procedure

1. Confirm the position of the V-Marking on the V-System EndoTherapy accessory.
2. When the V-Marking is completely visible above the instrument channel port, lift the forceps elevator to lock the guidewire.
3. The guidewire is now locked into the V-Groove.
4. Completely remove the device.
The guidewire and injection lumens are separated to ensure smoother passage of the guidewire. Additionally, contrast media can be injected without removing the guidewire. Two models are available — one with the injection port located above the balloon and the other with the injection port located below the balloon.

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The balloons can be inflated to one of three diameters — 8.5mm, 11.5mm, and 15mm. The balloon size can be easily adjusted to suit the requirements and conditions of each case so there is no need to change catheters during the procedure.

Easier cannulation and tapered sheath design

The balloon catheter sheath is manufactured from a special material that allows it for improved insertion into the papilla, ensuring smoother guidewire passage, and facilitating contrast injection. The tapered design — 7Fr. catheter at the proximal end tapering to 5Fr. at the distal end — enables an easy approach to the bile duct and accommodates a 0.035” guidewire.

Three pre-measured syringes for reliable inflation

Three pre-measured, clearly marked syringes enable positive inflation of each balloon to the desired size. Much easier and much more reliable than using a single syringe with different markings, the pre-measured syringes allow inflation of the balloon to be easily checked by visually checking the markings on the syringe.

The 15mm syringe also has markings at 8.5mm and 11.5mm. This makes it possible to inflate to three balloon sizes using only one syringe (the 15mm one pre-measured).

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Reliable, Efficient Stone Extraction with the Multi-Size Balloon Design, Three Pre-Measured Syringes, and The Sheath is Manufactured from a Special Material That Allows for Easier Cannulation, Exchange and Injection of Contrast Media.

Multi-lumen, Multi Size Balloon with Revolutionary V-System Exchange Capability for More Precise Balloon Inflation and Efficient Stone Extraction

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<table>
<thead>
<tr>
<th>Specifications</th>
<th>B-V231P-A</th>
<th>B-V231P-B</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Model</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Injection port</strong></td>
<td>Above</td>
<td>Below</td>
</tr>
<tr>
<td><strong>Balloon diameter</strong></td>
<td>8.5mm/11.5mm/15.0mm</td>
<td>8.5mm/11.5mm/15.0mm</td>
</tr>
<tr>
<td><strong>Sheath</strong></td>
<td>Distal end 5.5Fr/Proximal end 7Fr</td>
<td>Distal end 5.5Fr/Proximal end 7Fr</td>
</tr>
<tr>
<td><strong>Working length</strong></td>
<td>1900mm</td>
<td>1900mm</td>
</tr>
<tr>
<td><strong>Minimum channel size</strong></td>
<td>2.8mm min</td>
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</tr>
<tr>
<td><strong>Compatible guidewire</strong></td>
<td>0.89mm(0.035inch)</td>
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</tr>
<tr>
<td><strong>Radiopaque band</strong></td>
<td>One band at the distal end and one \ band at the proximal end of balloon</td>
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</tr>
<tr>
<td><strong>Syringes</strong></td>
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Specifications, design and accessories are subject to change without any notice or obligation on the part of the manufacturer.