

BEST PRACTICES

INSERTING THE RIG (RETRACTABLE INSERTION GUIDE) INTO THE MINI SLING ARM.



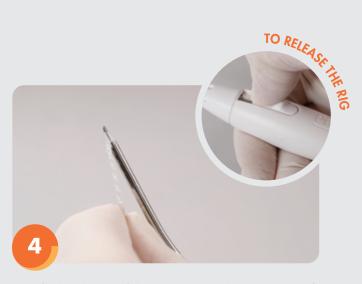
Push the button on the retractable insertion guide forward to check that the tip of the guide comes out completely.



Gently insert the tip of the RIG into the hole at the end of the Mini Sling arm. Mind the anti-rotational guides.



Hold the Mini Sling at the proximal end where the sling connects to the multipoint attachment arm.



Verify that the tip of the RIG crosses the connector of the Mini Sling and, make sure that the anti-rotational guides of the connectors are in the correct position.



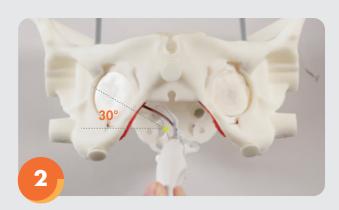
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GUIDING THE RIG AND THE PENETRATING FORCE WHEN ANCHORING THE MINI SLING.

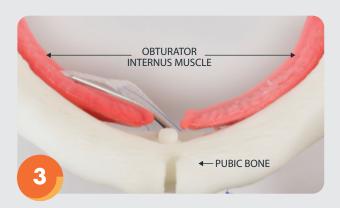


The anatomical reference points for inserting the Ophira are as follows:

- A Define a horizontal line at a point located halfway between the urinary meatus and the clitoris.
- **B** Identify the genitofemoral fold.
- C The intersection of the two previously identified references will serve as the reference point for guiding the insertion on both sides of the patient.



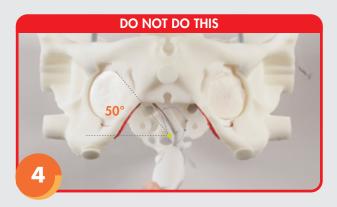
The Mini Sling is inserted with the RIG through the vaginal incision, guided by the surgeon's finger and following the anatomical references, will be placed on the obturator internus muscle.



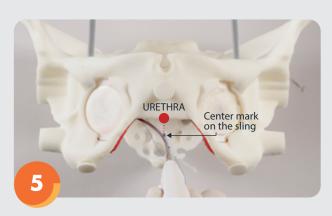
Once the retractable insertion guide touches the superior ramus of the pubic bone, it is inserted behind the bone, perforating the endopelvic fascia until it reaches a point 1 cm above the vaginal fornix (arcus tendineus).

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Keep in mind that, if the retractable insertion guide is inserted along a higher trajectory, it will encounter resistance from the pubic bone, thus preventing it from reaching the recommended anchorage depth and this could even damage the Mini Sling arm and/or the RIG.



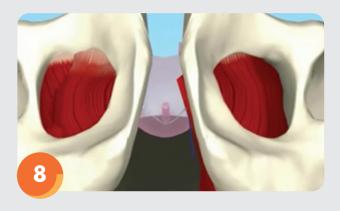
The arm of the Mini Sling will be attached to the internal obturator muscle at the level of the arcus tendineus. The correct insertion depth for the first fixation arm is defined when one can see the center mark on the sling located at the suburethral level of the vaginal incision. Once the correct depth has been achieved, retract the button on the retractable insertion guide to release it.



If the center mark of the Sling is inside the incision, the tension of the Mini Sling should be released by slowly pulling on the blue thread that is attached to one of the Mini Sling arms.



The same maneuvers are repeated on the other side. The insertion depth for the second fixation arm is defined using a stress test or tension-free test, by inserting a pair of Metzenbaum scissors that verifies the absence of tension on the urethra.



After the adjustment, remove the retractable insertion guide by retracting the button to release it. Next, cut and remove the reversal thread (release loop). Finally, suture the vaginal incision in the usual way to completely cover the polypropylene mesh with sufficient epithelial thickness to minimize the risk of the mesh being exposed.

