

MyoSure[®] tissue removal module

Module description

Train on 16 virtual patients to correctly learn the MyoSure[®] tissue removal procedure. Each case requires the user to remove different types of growths in the uterus and handle complications such as bleeding. Through increasingly more difficult cases, users gain experience in correctly manipulating the MyoSure[®] device and scope, as well as the pressure pump.

Learning objectives

- Perform a safe diagnostic hysteroscopy
- Recognize and safely remove intrauterine fibroids using a shaver
- Understand fluid management as it relates to a shaver
- Master angled optics, ergonomics and safety measures

Instruments



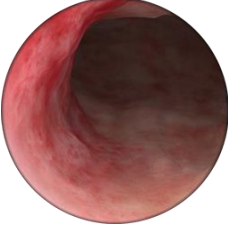
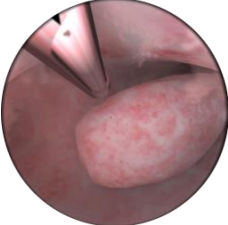
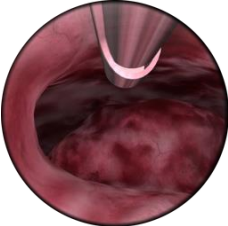
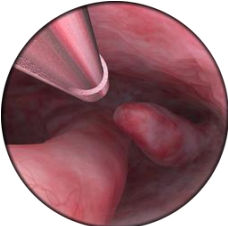
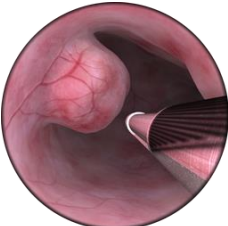
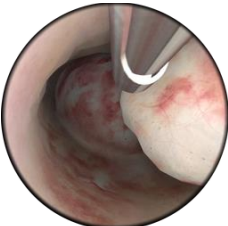
MyoSure device[®]

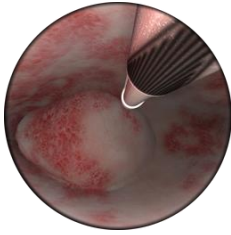


MyoSure scope[®]

MyoSure[®] tissue removal cases

All training cases can be performed in guided or unguided mode, accompanying the user throughout their entire learning journey.

	<p>Case 1</p> <ul style="list-style-type: none"> ▪ Normal shaped cavity ▪ Fluffy endometrium along right-side lateral wall 	<p>Objectives</p> <ul style="list-style-type: none"> ▪ Orientation of MyoSure[®] device ▪ Importance of markings on both sides ▪ Smooth out fluffy tissue
	<p>Case 2</p> <ul style="list-style-type: none"> ▪ Bicornue uterus with asymmetric tubal angles ▪ 3cm polyp in front of left tubal ostia, some fluffy endometrium 	<p>Objectives</p> <ul style="list-style-type: none"> ▪ Handle bleedings ▪ Raise pressure to 80mmHg to clear field
	<p>Case 3</p> <ul style="list-style-type: none"> ▪ Large size uterus ▪ 3-4cm polyp located on the posterior wall of the uterus ▪ No bleeding 	<p>Objectives</p> <ul style="list-style-type: none"> ▪ Increasing pump pressure improves view of entire cavity ▪ Rotate the scope to improve the viewing angle of the polyp which is located on the posterior wall
	<p>Case 4</p> <ul style="list-style-type: none"> ▪ Normal shaped cavity ▪ 4cm polyp extends into the cervical canal ▪ 3cm polyp at left tubal ostia 	<p>Objectives</p> <ul style="list-style-type: none"> ▪ Use in-/outflow before inserting the device to clear bleeding ▪ Raise pressure to 100mmHg to tamponade bleeding ▪ Place device at distal lateral edge
	<p>Case 5</p> <ul style="list-style-type: none"> ▪ 3cm myoma type II at the right lateral wall ▪ Dolphin pump is being used 	<p>Objectives</p> <ul style="list-style-type: none"> ▪ Handling of pressure pump, e.g. Dolphin ▪ Understand correlation between vacuum and cutting performance ▪ Achieve distention
	<p>Case 6</p> <ul style="list-style-type: none"> ▪ 3cm myoma type I in front of left tubal ostia ▪ 1.5cm myoma type 0 at internal cervical os 	<p>Objectives</p> <ul style="list-style-type: none"> ▪ Clear cavity with passive outflow when blade is closed ▪ Handle stronger bleedings

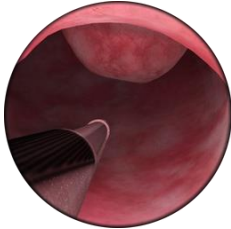


Case 7

- 4cm fundal myoma type I
- Retroverted uterine cavity

Objectives

- Appropriate way to approach and remove a fundal fibroid
- Tap on the foot pedal to clear an obscured view



Case 8

- 3cm fibroid type II located on the right lateral wall
- Anteverted uterine cavity

Objectives

- Manage bleeding by increasing pressure and tapping foot pedal
- Expulsion technique to facilitate removal of type II myoma