

Masterka®

A Monocanalicular “Pushed” Self-Retaining Stent for Nasolacrimal Duct Intubation

INDICATIONS

- Congenital Lacrimal
Duct Obstruction



www.FCI-Ophthalmics.com



MASTERKA® is a pushed lacrimal intubation stent with self-retaining punctal fixation. The metallic guide introducer is located inside the lumen, not as an extension of the stent as in conventional stents.

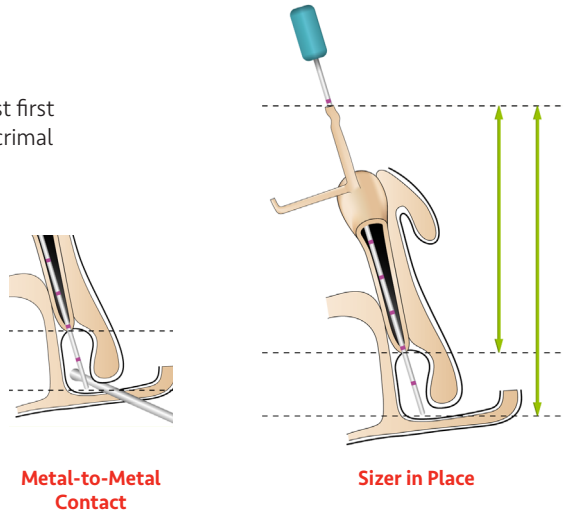
INITIAL PROBING

DIAGNOSIS

Complex stenosis (contraindication) must first be distinguished from a mucosal nasolacrimal stenosis by tactile probing.

DETECTING FALSE PASSAGES WITH THE SIZER IN PLACE

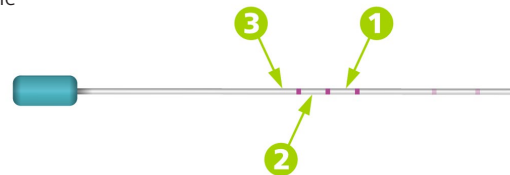
With the sizer in place, a second, wider lacrimal stent with a blunt tip is inserted through the naris to confirm metal-to-metal contact.



SELECTION OF STENT LENGTH

When the sizer S1-1289 contacts the nasal fossa floor, note the location of the measuring device at the punctal opening:

- POSITION 1:** Use Masterka® 30 mm
- POSITION 2:** Use Masterka® 35 mm
- POSITION 3:** Use Masterka® 40 mm



Masterka®

S1.1608	30 mm	Box of 1, sterile
S1.1609	35 mm	Box of 1, sterile
S1.1610	40 mm	Box of 1, sterile

Disposable Sizer

S1.1289	Box of 5, sterile
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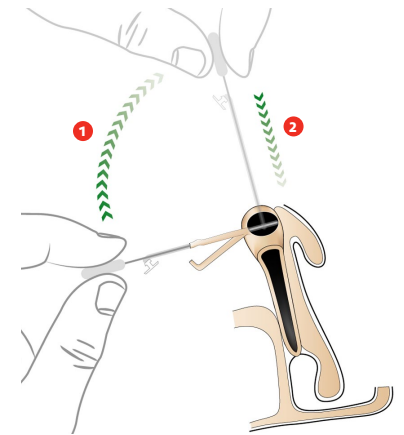
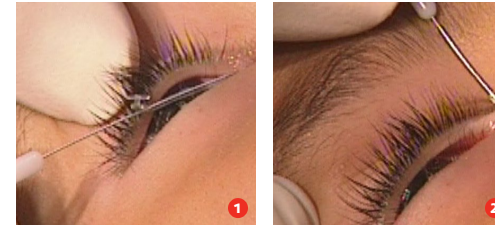
Disposable Punctum Dilator & Plug Inserter

S1.3090	Box of 3, sterile
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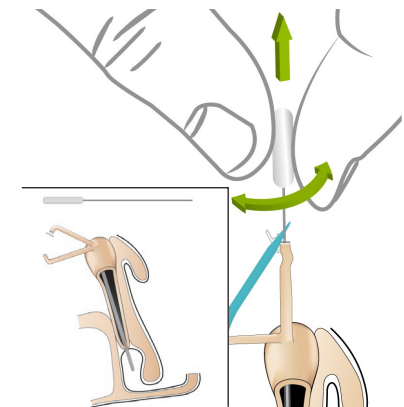
INTUBATION

- 1 Insert stent into canaliculus through dilated punctum.
- 2 Rotate stent 90.° Push into nasolacrimal duct until the plug comes in contact with the punctum.



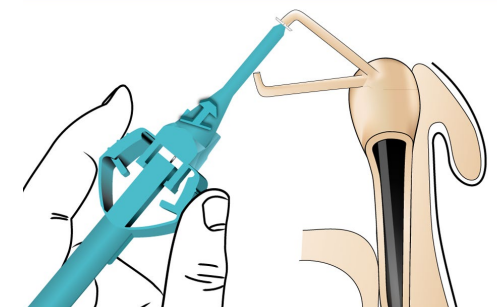
REMOVAL OF THE METALLIC GUIDE/INTRODUCER

- The plug must be firmly held in contact with the punctum during the removal of the metallic guide.
- Make sure to pull the metallic guide out along the main axis of the lacrimal duct.
- Remove the metallic guide by rotating it back and forth during withdrawal.



SEATING OF PLUG

The plug must be seated in the punctum with the help of a punctum plug inserter (S1-3090). Once the plug is in place, the collar should rest flush against the eyelid margin.





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