Stringent quality standards are the most important aspect in the development of JARIT instruments. Endoscopic instruments are designed, manufactured and tested to provide surgeons with superior performance and dependability.

To assure durability, the instrument's hinge mechanism is pressure-tested at a minimum of 25 kilograms to withstand high flexion pressures. High-grade surgical stainless steel, used in the manufacture of all JARIT endoscopic instruments, offers high tensile strength and durability.

For effective and efficient processing, instruments are made with internal seals which occlude the full length of the inside of the instrument shaft. This lab-tested and validated design provides an internal barrier to body fluid and debris. To confirm electrosurgical safety, electrosurgical instruments are tested per AAMI American National Standard recommendation at 3,000 volts for monopolar instruments and 1,500 volts for bipolar instruments.

JARIT offers endoscopic instruments with a choice of features to meet both the preference of the surgeon and the economic demands of the hospital.

**ROTATION**

The ROTATOR design provides comfortable, single-handed, bi-directional rotation of the distal tip. The ROTATOR Instruments offer exclusive features to meet the technical requirements of blunt dissection, sharp dissection, and grasping. Precise German engineering, combined with handcrafted workmanship, has resulted in the exclusive features of the ROTO-LOK design for grasping forceps and the ROTO-CAM design for dissectors and scissors.

**ROTO-LOK:** When the traction/countertraction technique is applied during dissection, it is important that an effective grasp on tissue is maintained. If the instrument rotates freely, the distal tip could slip, making dissection difficult. With JARIT's unique ROTO-LOK feature, rotation locks into place once the tissue is grasped. The result is a secure grasp that will not slip or spin.

**ROTO-CAM:** The ROTO-CAM design for dissectors and scissors allows the surgeon to easily turn the rotating wheel, yet provides enough tension to prevent unnecessary movement. The design enables rotation in both open and closed positions to facilitate precise dissection.

**LOCKING MECHANISMS**

Computer-generated production techniques employed in the precisely calibrated ratchet, hinge and locking mechanisms result in smooth, secure jaw closure.

**RATCHET:** The advanced design of the half-moon ratchet offers fine-teeth and a sturdy leaf-spring that is specially manufactured to maintain a firm hold.

**LOCKING LEVER:** As an alternative to the ratchet, the sophisticated JARIT locking lever engages and releases easily, yet maintains a firm hold. The locking lever offers the surgeon the ability to open and close the jaws freely, locking only when the surgeon chooses to engage the lever. The unique internal design adds built-in strength for a long, useful life.
JARIT grasping forceps feature a pressure-tested hinge mechanism to assure strength and durability. Tissue is held firmly and securely. Precisely calibrated ratchets provide smooth, gradual closure of jaws. The easy-release locking lever offers the surgeon the ability to open and close the jaws freely, locking only when the lever is engaged.

**Grasping Forceps**
- Straight, serrated jaws with proximal recess, double action.

**TC Grasping Forceps**
- Uniquely designed grasping forceps feature double action CARB-BITE tips, 22mm long jaws maintain firm grasp on delicate tissue, double action.

**Strong TC Grasping Forceps**
- Heavy CARB-BITE inserts allow jaws to maintain firm hold on tissue, double action.

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.
Grasper Forceps
Long, fenestrated jaws with interlocking wave-like serrations for strong hold, double action.

Fundus Grasping Forceps
Long, beveled-edge jaws permit a large purchase on tissue and maintain a strong hold.

Dual-Cup Grasping Forceps
Double cup design increases surface area contact which improves hold on tissue, double action.
GRASPING FORCEPS

Retraction Grasping Forceps
Long-ridged jaws with 2x3 blunt interdigitating teeth for strong grasp of heavy tissue.

Atrau-Allis Grasping Forceps
Unique jaw design offers strong atraumatic grasp, double action.

Atrau-Allis LJ Grasping Forceps
Unique jaw design in 20mm length offers strong atraumatic grasp, double action.

Retrograde Grasping Forceps
Retrograde, deep-serrated teeth allow for non-slip hold, double action.

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.
GRASPING FORCEPS

Retrograde Grasping Forceps
Retrograde, deep-serrated teeth allow for non-slip hold, double action.

600-119
Ratchet, insulated shaft, 5mm, 32cm

---

Grasping and Dissecting Forceps
Cup-shaped, toothed jaws, double action.

600-120
Monopolar, 5mm, 32cm

---

Allis Grasping Forceps
Interlocking distal teeth with fine-serrated inner jaws, double action.

600-122
Ratchet, insulated shaft, 5mm, 32cm

625-122
ROTO-LOK, ratchet, insulated shaft, 5mm, 32cm

---

Winer¹ Grasping Forceps
Cross-serrated, disc-shaped jaws with wide opening between the jaws allow for an atraumatic yet extremely firm hold; in-line ratcheted handle.

600-123
In-line, ratchet, insulated shaft, 5mm, 33cm

---

Grasping and Extracting Forceps
Retrograde, deep-serrated teeth.

600-130
Spring-loaded, 10mm, 32cm

¹ Developed in cooperation with Wendy K. Winer, R.N., B.S.N., CNOR, Endoscopic Surgery Specialist, Atlanta, Georgia.
GRASPING FORCEPS

Claw Forceps
2x3 interlocking teeth for penetrating hold and extraction of tissue.

600-135
Spring-loaded, 10mm, 32cm

Claw Forceps
2x3 interlocking teeth for penetrating hold and extracting tissue.

600-137
Spring-loaded, insulated shaft, 5mm, 32cm

DJB Grasping Forceps
Wide fenestration and straight fine serrations of single action jaws results in a strong, atraumatic hold on tissue.

625-139
ROTO-LOK, ratchet, insulated shaft, 5mm, 37cm
625-139LL
ROTO-LOK, locking lever, insulated shaft, 5mm, 37cm

DeBakey Forceps
Fenestrated 40mm long jaws with DeBakey-type teeth, double action.

600-140
Ratchet, insulated shaft, 5mm, 37cm
625-140LL
ROTO-LOK, locking lever, insulated shaft, 5mm, 45cm

DeBakey Forceps, Curved
55mm long jaws with DeBakey-type teeth, double action.

625-141
ROTO-LOK, ratchet, 10mm, 37cm

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.
**GRASPING FORCEPS**

**Duckbill Grasping Forceps**
Wide fenestration and straight serrations of jaws offer strong, atraumatic hold of tissue.

625-118
ROTO-CAM, monopolar, 5mm, 35cm

**Paddle Babcock Forceps**
Flat paddles with fine, straight serrations for atraumatic hold of delicate tissue, double action.

625-142
ROTO-LOK, ratchet, 10mm, 37cm

**Paddle Babcock Forceps**
Flat paddles with fine, straight serrations for atraumatic hold of delicate tissue, double action.

625-143
ROTO-LOK, ratchet, insulated shaft, 5mm, 37cm

625-143LL
ROTO-LOK, locking lever, insulated shaft, 5mm, 37cm

625-146LL
ROTO-LOK, locking lever, insulated shaft, 5mm, 45cm

600-143IL
In-line, insulated shaft, ratchet, 5mm, 37cm

**Babcock Forceps**
Traditional style Babcock jaws designed with six rows of fine serrations for atraumatic, yet secure grasp of bowel and other delicate tissue, double action.

625-144
ROTO-LOK, ratchet, 10mm, 37cm

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.
Babcock Forceps
Rounded jaws with 2x3 rows of DeBakey-type teeth for atraumatic, yet secure grasp of bowel and other delicate tissue, double action.

600-145
Ratchet, 10mm, 32cm

625-145
ROTO-LOK, ratchet, 10mm, 32cm

Babcock Forceps
Traditional design for grasping delicate tissue, double action.

600-147
Ratchet, 5mm, 32cm

625-147
ROTO-LOK, ratchet, 5mm, 37cm

625-147LL
ROTO-LOK, locking lever, 5mm, 37cm

Swanström2 Grasping Forceps
Unique design of 1x2 DeBakey-type teeth with triangular fenestration provides an effective hold with atraumatic grasp, double action.

625-148
ROTO-LOK, ratchet, 5mm, 37cm

625-148LL
ROTO-LOK, locking lever, 5mm, 37cm

600-148IL
In-line, ratchet, 5mm, 37cm

2 Developed in cooperation with Lee L. Swanström, M.D., F.A.C.S., Legacy Portland Hospital, Portland, Oregon.
GRASPING FORCEPS

Duval Grasping Forceps
Triangular jaws with deep-serrated surfaces for non-slip, firm grasp of tissue, double action.

600-150 Ratchet, 10mm, 32cm

625-150 ROTO-LOK, ratchet, 10mm, 32cm

Russian Grasping Forceps
40mm long jaws with heavy serrations for effective tissue grasp, double action.

600-154 Ratchet, 10mm, 32cm

Anvil Grasping Forceps
Jaws specially shaped to grasp and hold the anvil of a circular stapler.

625-154 ROTO-LOK, ratchet, 10mm, 37cm

Foerster Sponge Forceps
45mm jaws firmly hold tissue, double action.

600-158 Ratchet, 10mm, 32cm

Hunter Clamp
Right-angle shaft with Alrau-Allis teeth for secure grasp and manipulation of tissue around structures, e.g. stomach/ esophagus in fundoplication, double action.

600-160 Ratchet, 5mm, 32cm

Developed in cooperation with John Hunter, M.D., FACS, Professor and Chairman, Department of Surgery, Oregon Health & Science University, Portland, Oregon.

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.
**Hunter³ Bowel Grasper**
Fenestrated, 20mm jaws with DeBakey-type teeth for atraumatic manipulation of delicate tissue, e.g., bowel, stomach, double action.

**Strong Forceps**
Fenestrated, serrated, oval-shaped jaws that converge at distal end to prevent slippage, double action.

**Stone Extractor**
To facilitate stone removal once neck of gallbladder has been externalized.

**Lobe¹¹ Spleen Extractor**
Open cupped jaws for extraction of the spleen during laparoscopic splenectomy.

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.
**Grasping Forceps**

**Strong Atraumatic Grasping Forceps**
Fenestrated, serrated, curved jaws with split-steel construction, for fixation of ovary or manipulation of pelvic tissues.

**Grasping Forceps, Fallopian Tube**
Curved jaws with split-steel construction for gentle grasping of fallopian tube.

**Bowel Forceps**
Cross-serrated, disc-shaped jaws with split-steel construction.

**Tenaculum Forceps**
Single-toothed long jaws designed for grasp of thick tissue, double action.

**Dimensions**

- **615-113**: Spring handle, 5mm, 32cm
- **615-114**: Spring handle, 5mm, 45cm
- **615-116**: Spring handle, 5mm, 32cm
- **615-118**: Spring handle, 5mm, 45cm
- **615-143**: Spring handle, 5mm, 32cm
- **615-144**: Spring handle, 5mm, 45cm
- **615-150**: Ratchet, 10mm, 36cm
- **615-152**: Ratchet, insulated shaft, 5mm, 32cm
JARIT dissecting forceps are specially designed with the varied needs and preferences of the surgeon in mind — from fine, precise dissection around delicate tissue to gross dissection of large structures.

**Micro Dissecting Forceps**

Delicate, fenestrated, serrated jaws for gentle blunt dissection, double action.

600-110
Monopolar, 5mm, 32cm

625-110
ROTO-CAM, monopolar, 5mm, 32cm

**Needle Nose Forceps**

Slender, tapered and fine-serrated jaws.

600-112
Monopolar, 5mm, 32cm

**Tapered Dissecting Forceps**

Tips of serrated, tapered jaws meet at fine point to allow delicate, yet firm, grasp and dissection of thin adventitial tissue, double action.

600-115
Monopolar, 5mm, 32cm

625-115
ROTO-CAM, monopolar, 5mm, 32cm

**Micro Grasping Forceps**

3mm small, tapered jaws for dissection of small structures.

600-117
Monopolar, 5mm, 32cm
Bullet-Nose Dissecting Forceps
Bullet-shaped, tapered, serrated jaws for dissection, double action.

Tapered Maryland Dissector
Curved, finely-tapered, serrated jaws with wide spread, double action.

Maryland Dissector
Slender, full-curved, long, serrated jaws with wide spread, double action.

Maryland Dissectors
Curved, tapered, serrated jaws with wide spread, double action.

625-117
ROTO-CAM, monopolar, 5mm, 32cm

625-124
ROTO-CAM, monopolar, 5mm, 32cm

625-125
ROTO-CAM, monopolar, 10mm, 32cm

600-126
Monopolar, 5mm, 32cm

625-126
ROTO-CAM, monopolar, 5mm, 32cm

625-127
ROTO-CAM, monopolar, 5mm, 45cm

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.
DISSECTING FORCEPS AND HOOK

Mixter Dissecting Forceps
Slender, full-curved, long, serrated jaws with wide spread, double action.

Mixter Spreader-Dissectors
Jaw design offers a true right-angle for dissection around delicate structures; double action. The distinctive ergonomic handle minimizes hand fatigue while allowing the surgeon fine control for precise dissection.

Appel Dissecting Hook
Right-angle tip allows rapid blunt dissection and isolation of structures.

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.

4 Developed in cooperation with Sidney D. Appel, M.D., DeKalb Medical Center, Atlanta, Georgia.
The JARIT scissors line was developed by utilizing advanced metallurgy, as well as innovative methods of grinding and sharpening. The result — scissors that cut cleanly and stay sharp.

The exclusive JARIT SUPERCUT blade is razor sharp and glides effortlessly through tissue with a clean, precise cut. The finely-serrated lower blade helps prevent tissue slippage.

**JARIT SUPERCUT Scissors**
Razor-sharp upper blade with finely-serrated lower blade allows clean, precise cut without tissue slippage.

**JARIT SUPERCUT Endo Scissors**
Electrosurgical instrument with straight, JARIT SUPERCUT blades and precise cutting action offers mechanical cutting, electrosurgical cutting, blunt dissection, electrosurgical coagulation—all in one reusable, cost-effective instrument; double action.

**Hook Scissors**
Blades designed to lift, isolate and transect tissue.

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.
**Micro Scissors**
Fine, delicate, 3mm blades for small incision.

<table>
<thead>
<tr>
<th>Model</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>600-210</td>
<td>Curved Left, 5mm, 32cm</td>
</tr>
<tr>
<td>600-212</td>
<td>Straight, 5mm, 32cm</td>
</tr>
</tbody>
</table>

**Mayo Operating Scissors**
Large, sturdy blades for incising heavy tissue.

<table>
<thead>
<tr>
<th>Model</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>600-220</td>
<td>10mm, 32cm</td>
</tr>
</tbody>
</table>

**Metzenbaum Scissors**
Long, curved, tapered blades with wide spread, double action.

<table>
<thead>
<tr>
<th>Model</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>625-230</td>
<td>ROTO-CAM, monopolar, 5mm, 32cm</td>
</tr>
</tbody>
</table>

**Mini Scissors**
Curved, tapered, delicate blades, double action.

<table>
<thead>
<tr>
<th>Model</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>625-240</td>
<td>ROTO-CAM, monopolar, 5mm, 32cm</td>
</tr>
</tbody>
</table>
Meeting the Challenge of Cost Containment with Quality

The JARIT DETACH Scissors System provides the surgeon with reusable endoscopic scissors having the same superior, long-lasting blades that have become JARIT’s hallmark. The two-part JARIT DETACH System easily separates into a handle/shaft component and a scissors insert. Using backup inserts, which represent only 25% of the cost of a complete JARIT DETACH instrument, substantial cost savings are achieved.

The JARIT DETACH System offers many different scissors patterns to meet the endoscopic requirements of sharp dissection. Each reusable endoscopic scissors offers mechanical cutting, electrosurgical coagulation and ergonomic rotation — all in one high-quality, cost-effective instrument. For easy cleaning, a cleaning brush is included with each instrument.

**DETACH Handle/Shaft**

- **625-090H**
  ROTO-CAM, monopolar, 5mm, 32cm

**DETACH Scissors Insert**

- **625-0903**
  Cleaning brushes, pkg/6

**JARIT SUPERCUT DETACH Scissors**

Unique JARIT SUPERCUT blade has a finely-serrated lower blade that helps prevent tissue slippage; curved blades meet the contour of structures while the blunt-shaped distal tip allows tissue manipulation and cauterization with blades closed; double action.

- **625-202E**
  ROTO-CAM, monopolar, 5mm, 32cm
- **625-202N**
  Insert, 5mm, 32cm
- **625-2023**
  Insert, 5mm, 32cm, pkg/3

**Hook DETACH Scissors**

Classic hook blades designed to lift, isolate and transect tissue.

- **625-205E**
  ROTO-CAM, monopolar, 5mm, 32cm
- **625-205N**
  Insert, 5mm, 32cm
- **625-2053**
  Insert, 5mm, 32cm, pkg/3

**Micro DETACH Scissors Curved**

Delicate, sharp-sharp, curved blades

- **625-210E**
  ROTO-CAM, monopolar, 5mm, 32cm
- **625-210N**
  Insert, 5mm, 32cm
- **625-2103**
  Insert, 5mm, 32cm, pkg/3
DETACH SCISSORS SYSTEM

Micro DETACH Scissors
Straight
Delicate, sharp-sharp, straight blades

[Image of Micro DETACH Scissors]

625-212E  625-212N  625-2123
ROTO-CAM, monopolar, 5mm, 32cm

625-212E  625-212N  625-2123
ROTO-CAM, monopolar, 5mm, 32cm

Metzenbaum DETACH Scissors
Long, curved, tapered blades with wide spread, double action.

[Image of Metzenbaum DETACH Scissors]

625-230E  625-230N  625-2303
ROTO-CAM, monopolar, 5mm, 32cm

625-230E  625-230N  625-2303
ROTO-CAM, monopolar, 5mm, 32cm

“Baby” Metzenbaum DETACH Scissors
Shorter, curved, very tapered blades reach more narrow and delicate dissection areas, double action.

[Image of “Baby” Metzenbaum DETACH Scissors]

625-235E  625-235N  625-2353
ROTO-CAM, monopolar, 5mm, 32cm

625-235E  625-235N  625-2353
ROTO-CAM, monopolar, 5mm, 32cm

Mini DETACH Scissors
Curved, tapered, delicate blades, double action.

[Image of Mini DETACH Scissors]

625-240E  625-240N  625-2403
ROTO-CAM, monopolar, 5mm, 32cm

625-240E  625-240N  625-2403
ROTO-CAM, monopolar, 5mm, 32cm
The difficult task of endoscopic suturing is made easier with JARIT's Ligation Line of unique instruments for both intracorporeal and extracorporeal suturing. The line features the Appel® Needle Holders, which give the surgeon improved control of curved needles. These high quality endoscopic instruments offer an ergonomically designed handle that places the surgeon's hand in line with the needle, resulting in a natural suturing motion, along with a leaf-spring mechanism that is engaged with speed and ease. The curved, tapered jaws permit fine control of the needle together with improved visibility at the suture site. JARIT's CARB-BITE jaws allow for a firm, secure grip on the needle and long, useful life of the instrument. Alternative needle holder options include the In-line ring-handle Needle Holder and the Self-righting Romeo® Needle Holder.

Also featured are the Lyons® Needle Forceps and Juliet Receiving Forceps. These unique instruments are specially designed to work in conjunction with the needle holder to achieve an efficient endoscopic suturing technique. Functioning as a tissue forceps, the tapered jaws grasp and retract tissue for needle placement without obstructing visualization. Functioning as a receiver, the driven needle is grasped at the tip. The design then allows the needle to be easily repositioned within the jaw for re-grasping by the needle holder at the appropriate angle.

**Appel® Needle Holders**

Tapered jaws stabilize the needle while allowing better visibility at the suture site; CARB-BITE jaws are designed for a firm, secure grip on the needle and long life of the instrument.

**In-line CARB-BITE Needle Holders**

In-line ring handle offers a handle design similar to that used in open surgery with the same superior hold of needles.

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4 Developed in cooperation with Sidney D. Appel, M.D., DeKalb Medical Center, Atlanta, Georgia.
5 Developed in cooperation with Thomas L. Lyons, M.D., F.A.C.O.G., Atlanta, Georgia.
6 Developed in cooperation with Professor M.D. Minelli, Hospital Sacro Cuore, Negrar (VR), Italy.

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.
**LIGATION LINE**

**Romeo® Self-Righting Needle Holder**
Up-curved, STARDUST jaws self-right curved needles; needles held very securely at any angle within the jaws.

- **600-266**
  - Up-curve, 5mm, 32cm
- **600-267**
  - Up-curve, 5mm, 45cm

**Lyons® Needle Forceps**
Tapered, cross-serrated jaws grasp and retract tissue for needle placement without obstructing visualization; allows the needle to be easily repositioned within the jaw for re-grasping by the needle holder at the appropriate angle; in-line handle places hand in same line as that with needle holder for more efficient suturing process, double action.

- **600-268**
  - 5mm, 32cm

**Juliet Receiving Forceps**
Right curved jaws with contained hinges facilitate intracorporeal knot tying; cross-serrated jaws for tissue control during suturing.

- **600-269**
  - Curved right, 5mm, 32cm
- **600-271**
  - Curved right, 5mm, 45cm

**Needle Holders**
Straight serrations on jaws designed to grasp straight needle securely.

- **600-273**
  - Spring-loaded, 3mm, 32cm
- **600-275**
  - Spring-loaded, 5mm, 32cm

**JARIT Suturing Set**
The JARIT Suturing Set offers instruments required for endoscopic suturing. The standard set, provided in a wooden case includes:
- Appel® Needle Holder (600-250)
- Lyons® Needle Forceps (600-268)
- Knot Pusher (600-289).
The set can be customized with any 5mm or 3.5mm Needle Holder, Suture/Needle Forceps or Knot Pusher.

- **600-270**

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.

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4 Developed in cooperation with Sidney D. Appel, M.D., Dekalb Medical Center, Atlanta, Georgia.
5 Developed in cooperation with Thomas L. Lyons, M.D., F.A.C.O.G., Atlanta, Georgia.
6 Developed in cooperation with Professor M.D. Minelli, Hospital Sacro Cuore, Negrar (VR), Italy.
**Endoloop Applicator**

Allows placement of endoloop suture intraperitoneally.

600-240

5mm to 3mm, 18cm

---

**Appel Knot Pushers**

Unique design facilitates the guiding of extracorporeal knots to suture site; knots can be tied and passed without repositioning the knot pusher; the twisting of suture that is experienced with standard knot pushers is minimized.

600-285

10mm, 40cm

600-287

5mm, 40cm

---

**Knot Pusher**

Classic design for guiding of extracorporeal knots to suture site.

600-289

4mm, 30cm

---

**Elkus Suture Passer**

Allows easy placement of a ligature around an intact structure, e.g. large cystic duct. The procedure: suture is preloaded through distal tip and a knot placed; the distal tip is placed behind and around structure; a curved dissector reaches through the instrument and grasps suture and removes suture through the instrument; the Elkus Suture Passer is then removed and extracorporeal knot tying completed with the 10mm Appel Knot Pusher.

U.S. Patent No. 5,462,562

600-283

10mm, 28cm

---

**Grasping Forceps for Suturing**

Curved jaws and spring handle facilitate suturing process by receiving the needle.

615-125

Spring handle, 5mm, 32cm

615-126

Spring handle, 5mm, 45cm

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4 Developed in cooperation with Sidney D. Appel, M.D., DeKalb Medical Center, Atlanta, Georgia.

7 Developed in cooperation with Robert M. Elkus, M.D., Henry Ford Health System, Detroit, Michigan.
The JARIT P.E.E.R.® is a multipurpose endoscopic retractor, designed to provide superior exposure and retraction during endoscopic surgery. The P.E.E.R. retractor is extremely useful for visualization of the liver bed during and after gallbladder dissection. In surgical procedures requiring optimal exposure of the esophageal hiatus, the esophagogastric junction, or the gastrohepatic omentum, as in vagotomy or fundoplication, the P.E.E.R. retractor permits elevation of the left lobe of the liver and excellent exposure of the lesser curvature of the stomach. In laparoscopic surgery of the intestine, the P.E.E.R. retractor enables exposure and mobilization of the bowel to facilitate repair or resection.

P.E.E.R.® Retractors
Atraumatic, telescoping blades allow for elevation, retraction, and mobilization of organs and tissues, while permitting optimum visualization of surgical field; fully rotatable shaft and locking mechanism combine for versatile instrument placement with stationary positioning; bar ratchet with lock secures jaws in open position; black ring at distal shaft provides identifiable mark to assure jaws have cleared cannula.


JARIT ARTICULATORS offer unique articulating instruments for retraction and dissection of veins, nerves, esophagus, and other structures. With the open/close action of the handle, the distal arm smoothly angles from 0° to 90°, improving the speed and ease of articulation.

Articulators
Articulate rapidly from 0° to 90°; bi-directional ROTO-LOK wheel.

Herron® Articulator Bar Retractor
45mm straight arm for dissection and retraction; keyhole for holding suture (e.g. anvil placement).

600-580 ROTO-LOK, locking lever, 5mm, 41cm

Vein/Nerve Retractor
32mm U-shaped distal tip for atraumatic retraction of veins, nerves, etc.

600-582 ROTO-LOK, locking lever, 10mm, 36cm

Articulator Retractor
30mm S-shaped distal tip for atraumatic retraction of the esophagus; keyhole for maneuvering Penrose drain or LAP-BAND® System.

600-584 ROTO-LOK, locking lever, 10mm, 41cm

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.

8 The Padron Endoscopic Exposing Retractor (P.E.E.R.) was developed in cooperation with José A. Padron Amaro, M.D., F.A.C.S., Centro Médico De Caracas, Venezuela.
9 A registered trademark of BioEnterics Division, Inamed Corporation, 800-432-8803
12 Developed in cooperation with Daniel M. Herron, M.D., F.A.C.S., Mount Sinai Hospital, NY, NY
For the surgeon who prefers electrosurgical dissection, JARIT has designed electrosurgical instruments that are easy to use and safe. On the monopolar electrodes, the distal tip is partially insulated to assure that electricity is delivered to the tissue the surgeon has targeted. The JARIT coagulator handle offers a large, comfortable surface for the surgeon’s hand. The channel and trumpet valve allow quick and easy aspiration of smoke. For the surgeon who does not require smoke aspiration, cost-effective, fully insulated electrodes are available.

Bipolar instruments are designed with micro tips for effective coagulation of fine, superficial vessels, and with grasping action for coaptive and electrosurgical coagulation of blood vessels.

(Note: The bipolar grasping forceps are not for use with tubal ligation.)

**Bipolar Forceps**

<table>
<thead>
<tr>
<th>Type</th>
<th>Description</th>
<th>Part No.</th>
<th>Length</th>
<th>Diameter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Micro Bipolar Forceps</td>
<td>Fine, pointed distal tip for coagulation of surface blood vessels.</td>
<td>615-330</td>
<td>32cm</td>
<td>5mm</td>
</tr>
<tr>
<td></td>
<td></td>
<td>615-331</td>
<td>45cm</td>
<td>5mm</td>
</tr>
<tr>
<td>Large Bipolar Forceps</td>
<td>Flat 3mm wide jaws for bipolar coagulation of blood vessels.</td>
<td>615-334</td>
<td>32cm</td>
<td>5mm</td>
</tr>
<tr>
<td></td>
<td></td>
<td>615-335</td>
<td>45cm</td>
<td>5mm</td>
</tr>
<tr>
<td>Grasping Bipolar Forceps</td>
<td>Wave-like jaw for bipolar coagulation of blood vessels.</td>
<td>615-338</td>
<td>32cm</td>
<td>5mm</td>
</tr>
<tr>
<td></td>
<td></td>
<td>615-339</td>
<td>45cm</td>
<td>5mm</td>
</tr>
</tbody>
</table>

**Suction Coagulators**

<table>
<thead>
<tr>
<th>Type</th>
<th>Description</th>
<th>Part No.</th>
<th>Length</th>
<th>Diameter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spatula Tip Suction Coagulator</td>
<td>Smooth, arched, partially insulated spatula tip.</td>
<td>600-300</td>
<td>32cm</td>
<td>5mm</td>
</tr>
<tr>
<td>L-shaped Hook Suction Coagulator</td>
<td>Partially insulated right angle tip.</td>
<td>600-305</td>
<td>32cm</td>
<td>5mm</td>
</tr>
<tr>
<td>Hook End Suction Coagulator</td>
<td>Partially insulated hook tip.</td>
<td>600-310</td>
<td>32cm</td>
<td>5mm</td>
</tr>
<tr>
<td>Blunt Suction Coagulator</td>
<td>Blunt, open-ended distal tip.</td>
<td>600-315</td>
<td>32cm</td>
<td>5mm</td>
</tr>
</tbody>
</table>
ELECTROSURGICAL COAGULATION

Electrodes

- **Spatula Electrode**
  - Smooth, arched, partially insulated spatula tip.
  - 600-317
  - 5mm, 32cm

- **L-shaped Hook Electrode**
  - Partially insulated right angle tip.
  - 600-318
  - 5mm, 32cm

- **Hook Electrode**
  - Partially insulated hook tip.
  - 600-319
  - 5mm, 32cm

- **Ball Electrode**
  - Ball tip.
  - 600-316
  - 5mm, 37cm

Electrosurgical Accessories

**IMPORTANT:** When disconnecting electrosurgical cables from the generator or instrument, always grasp the cables by the connector only. Never pull the cable by the cord. Do not use instruments or cables if the insulation is not fully intact.

- **600-290**
  - Monopolar Cable

- **600-291**
  - Monopolar Adapter, male to female

- **615-295**
  - Bipolar Cable

- **615-2968**
  - Bipolar Cable, Wolf Generator

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.
A variety of designs and sizes allows for biopsy of multiple tissue types.

**Biopsy Forceps**
- Two sharp teeth, one on each jaw, for biopsy or secure hold of thick-walled tissue.
  - 615-160
    - 1x1 teeth, Spring-loaded, 5mm, 32cm
  - 615-162
    - 1x1 teeth, Spring-loaded, 5mm, 45cm

**Micro Biopsy Forceps**
- 3mm jaws for biopsy of small, delicate tissues.
  - 615-178
    - Spring-loaded, 5mm, 32cm

**Biopsy Punches**
- Serrated lower jaw.
  - 615-164
    - Monopolar, 5mm, 32cm
  - 615-166
    - Monopolar, 5mm, 45cm

**Hook Biopsy Punches**
- Frangenheim-type electrosurgical biopsy punch with hook blade.
  - 615-168
    - Monopolar, 5mm, 32cm
  - 615-169
    - Monopolar, 5mm, 45cm

**Biopsy Punches**
- Single tooth in upper jaw.
  - 615-170
    - Monopolar, 5mm, 32cm
  - 615-172
    - Monopolar, 5mm, 45cm

**Biopsy Forceps**
- Oval-shaped fenestrated jaws.
  - 615-174
    - Monopolar, 5mm, 32cm
  - 615-176
    - Monopolar, 5mm, 45cm
MEETING THE CHALLENGE OF COST CONTAINMENT WITH QUALITY

THE JARIT DETACH Biopsy System provides the surgeon with reusable endoscopic biopsy forceps having the same superior, long-lasting blades that have become JARIT’s hallmark. The two-part JARIT DETACH System easily separates into a handle/shaft component and a biopsy insert. Using backup inserts, which represent only 25% of the cost of the complete JARIT DETACH instrument, substantial cost savings are achieved and a sharp bite is always within reach.

DETACH Biopsy Insert
625-0903
Cleaning brushes, pkg/6

DETACH Handle/Shaft
625-090H
ROTO-CAM, monopolar, 5mm, 32cm

Biopsy DETACH Forceps
Two sharp teeth, one on each jaw, for biopsy or secure hold of thick-walled tissue

615-160E
1 x 1 Teeth, ROTO-CAM, monopolar, 5mm, 32cm
615-160N
Insert, 1 x 1 teeth, 5mm, 32cm pkg/1
615-1603
Insert, 1 x 1 teeth, 5mm, 32cm pkg/3

Biopsy DETACH Punch
Punch with serrated lower jaw.

615-164E
ROTO-CAM, monopolar, 5mm, 32cm
615-164N
Insert, 5mm, 32cm pkg/1
615-1643
Insert, 5mm, 32cm pkg/3

Biopsy DETACH Forceps
Oval-shaped fenestrated jaws.

615-174E
ROTO-CAM, monopolar, 5mm, 32cm
615-174N
Insert, 5mm, 32cm pkg/1
615-1743
Insert, 5mm, 32cm pkg/3
JARIT offers a diversified selection of specialized instrumentation for cholangiography, morcellation, and tissue manipulation.

**Spoon Forceps**
Wide cup-shaped jaws for tissue or stone removal.

**Cholangiogram Clamp**
Channel for placement of 5Fr or smaller cholangiogram catheter.

**Cholangiogram Guide**
Curved tip for simple placement of cholangiogram catheter.

**Bessler/Treat¹⁰ Suture Forceps**
Uniquely designed jaws allow easier grasp and positioning of tubular structure for placement of purse string with straight or curved needle.

¹⁰ Developed in cooperation with Mark Bessler, M.D. and Michael R. Treat, M.D., F.A.C.S., Columbia Presbyterian Hospital, New York, New York.
Dilation Set
For atraumatic dilation of 5mm port to 10mm diameter.

Veress Needles
Internal safety shield allows initial puncture and introduction of CO₂ for pneumoperitoneum, 14 gauge needle.

Palpation Probes
For atraumatic manipulation of tissue.

Multiple Tissue Punch
For mechanical morcellation of tissue; tissue stored in shaft.

Myoma Screws
For manipulation and securing of thick-walled myoma.

For a complete listing of all Bariatric Surgery Instruments see pages 624-639.
3.5MM ENDOSCOPIC INSTRUMENTATION

ROTO-LOK
Bi-directional rotating wheel uniquely designed to maintain secure hold without inadvertent turning.

Grasping Forceps
Straight, serrated jaws with proximal recess.
630-100
3.5mm, 24cm
632-100
3.5mm, 32cm

Grabber Forceps
Long, fenestrated jaws with wave-like serrations.
630-104
3.5mm, 24cm
632-104
3.5mm, 32cm

Dual-cup Grasping Forceps
Double cup design for strong hold on tissue.
630-108
3.5mm, 24cm
632-108
3.5mm, 32cm

Atrau-Allis Grasping Forceps
Unique jaw design offers strong atraumatic grasp.
630-113
3.5mm, 24cm
632-113
3.5mm, 32cm

Babcock Forceps
For atraumatic, yet secure grasp of delicate tissue.
630-147
3.5mm, 24cm
632-147
3.5mm, 32cm

Hunter Bowel Grasper
Fenestrated, 14mm jaws for atraumatic grasping.
630-164
Non-ratcheted, 3.5mm, 24cm
632-164
Non-ratcheted, 3.5mm, 32cm

Fundus Grasping Forceps
Beveled-edge jaws.
630-107
3.5mm, 24cm
632-107
3.5mm, 32cm

In-Line, insulated shaft

3 Developed in cooperation with John Hunter, M.D., FACS, Professor and Chairman, Department of Surgery, Oregon Health & Science University, Portland, Oregon.
3.5mm ENDOSCOPIC INSTRUMENTATION

ROTO-CAM
ROTO-CAM mechanism for one-handed, bi-directional, 16-stop, ergonomic rotation.

Grasping Forceps
Straight, serrated jaws with proximal recess, double action.

- 630-105 Monopolar, 3.5mm, 24cm
- 632-105 Monopolar, 3.5mm, 32cm

Micro Dissecting Forceps
Delicate, fenestrated jaws for gentle blunt dissection, double action.

- 630-110 Monopolar, 3.5mm, 24cm
- 632-110 Monopolar, 3.5mm, 32cm

Strong Forceps
Fenestrated, serrated, oval-shaped jaws converge at distal end to prevent slippage, double action.

- 630-111 Monopolar, 3.5mm, 24cm
- 632-111 Monopolar, 3.5mm, 32cm

Pyloromyotomy Dissector
Wide-spreading jaws with straight serrations on inner and cross-serrations on outer jaw surface, including the very distal tip of the jaws to better initiate the spread of the muscle, double action.

- 630-116 Monopolar, 3.5mm, 14cm
- 632-116 Monopolar, 3.5mm, 32cm

Maryland Dissector
Curved, serrated jaws with wide spread, double action.

- 630-126 Monopolar, 3.5mm, 24cm
- 632-126 Monopolar, 3.5mm, 32cm

JARIT Endo Supercut Scissors
Curved blades offer precise mechanical cutting, double action.

- 630-202 Monopolar, 3.5mm, 24cm
- 632-202 Monopolar, 3.5mm, 32cm

HOOK Endo Scissors
3.0mm size allows scissors to fit in 3.5mm cannula alongside suture.

- 630-205 Monopolar, 3.0mm, 24cm
- 632-205 Monopolar, 3.0mm, 32cm

Biopsy Forceps
Cup jaw design for tissue biopsies.

- 630-178 Monopolar, 3.5mm, 24cm
- 630-129 Monopolar, 3.5mm, 24cm
- 632-129 Monopolar, 3.5mm, 32cm

ROTO-CAM, monopolar

Mixer Spreader-Dissectors
Right-angle jaws for delicate dissection.

- 630-129R Monopolar, 3.5mm, 24cm
- 632-129R Monopolar, 3.5mm, 32cm

Mixter Spreader-Dissectors
Right-angle jaws; ergonomic handle minimizes hand fatigue; reverse jaw action.

- 630-129 ROTO-CAM, monopolar, 3.5mm, 24cm
- 632-129 ROTO-CAM, monopolar, 3.5mm, 32cm
Appel\(^4\) Needle Holders

JARIT design offers improved control of curved needles with a unique handle that enables surgeons to suture with the same hand motion they use in open surgery. JARIT’s CARB-BITE jaws are designed for a firm, secure grip on the needle; for use with 5-0 suture and smaller.

In-line CARB-BITE Needle Holder

In-line ring handle offers a handle design similar to that used in open surgery, with the same superior hold of needles.

Romeo\(^6\) Self-Righting Needle Holder

Up-curved, STARDUST jaws self-right curved needles; needles held very securely at any angle within the jaws.

Lyons\(^5\) Needle Forceps

Tapered, cross-serrated jaws grasp and retract tissue for needle placement; allows needle to be easily repositioned within the jaws for re-grasping with the needle holder at the appropriate angle; in-line handle places hand in same line with that of the needle holder.

Juliet Receiving Forceps

Right-curved jaws with contained hinges facilitate intracorporeal knot tying; cross-serrated jaws for tissue control during suturing.

Appel\(^4\) Knot Pusher

Unique design facilitates the guiding of extracorporeal knots to suture site; knots can be tied and passed without repositioning the knot pusher; the twisting of suture that is experienced with standard knot pushers is minimized.

---

\(^4\) Developed in cooperation with Sidney D. Appel, M.D., DeKalb Medical Center, Atlanta, Georgia.
\(^5\) Developed in cooperation with Thomas L. Lyons, M.D., F.A.C.O.G., Atlanta, Georgia.
\(^6\) Developed in cooperation with Professor M.D. Minelli, Hospital Sacro Cuore, Negrar (VR), Italy.
**3.5MM ENDOSCOPIC INSTRUMENTATION**

**L-shaped Hook Electrodes**
Partially insulated, right angle tip.

- **630-318**
  - 3.5mm, 24cm

**Suction/Irrigation Cannula**
Handpiece and 3.5mm cannula for standard suction/irrigation; suction connection straight off end minimizes clogging of cannula and sticking of valves and allows for stronger vacuum pressure; 5mm and 10mm cannulas available to fit threaded handpiece.

- **630-330**
  - 3.5mm, 24cm

**Auto-Valve Hasson Cannula**
For open technique of cannula placement; flapper-valve allows hands-free insertion and removal of instruments; suture wings on cone for easy adjustment of cannula within peritoneum; blunt obturator.

- **630-452**
  - 5mm, 10.5cm

**Autoclavable Laparoscopes**
Panoramic view with high-quality optics; overall length 24cm and working length of 18cm.

- **630-700**
  - 2.7mm, 0°
- **630-730**
  - 2.7mm, 30°
As ORs continue to look for ways to control spending, many have looked to reduce the dollars spent on disposable cannula systems. The demand for easy-to-use and simple-to-clean cannulas is met by JARIT’s Auto-valve cannulas that allow for hands-free operation. The built-in fascial threads prevent the cannula from slipping, and the light weight construction makes it easier to insert instruments. In addition, a reusable thoracic cannula with fascial threads and blunt obturator is cost-effective and easy to clean.

**Auto-Valve Cannulas and Trocars, Non-threaded**

Hands-free flapper valve; color-coded seals with size and color reference stamped on cannula; arrow on cannula indicates location of valve opening; stopcock for insufflation tubing; pyramidal trocar.

<table>
<thead>
<tr>
<th>Part Number</th>
<th>Description</th>
<th>Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>600-423</td>
<td>Auto-Valve</td>
<td>10/11mm, 10.5cm</td>
</tr>
<tr>
<td>600-428</td>
<td>Auto-Valve</td>
<td>5mm, 10.5cm</td>
</tr>
<tr>
<td>600-444</td>
<td>Auto-Valve</td>
<td>12mm, 10.5cm</td>
</tr>
</tbody>
</table>

**Auto-Valve Cannulas and Trocars, Threaded**

Fascial threads minimize in/out movement of cannula; hands-free flapper valve; color-coded seals with size and color reference stamped on cannula; arrow on cannula indicates location of valve opening; stopcock for insufflation tubing; pyramidal trocar.

<table>
<thead>
<tr>
<th>Part Number</th>
<th>Description</th>
<th>Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>600-424</td>
<td>Auto-Valve</td>
<td>10/11mm, 10.5cm</td>
</tr>
<tr>
<td>600-426</td>
<td>Auto-Valve</td>
<td>5mm, 10.5cm</td>
</tr>
</tbody>
</table>

**Trocars**

Pyramidal trocar available separately for backup.

<table>
<thead>
<tr>
<th>Part Number</th>
<th>Description</th>
<th>Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>600-425</td>
<td>Auto-Valve</td>
<td>11mm</td>
</tr>
<tr>
<td>600-427</td>
<td>Auto-Valve</td>
<td>5mm</td>
</tr>
<tr>
<td>600-431</td>
<td>Piston-Valve</td>
<td>5mm</td>
</tr>
<tr>
<td>600-441</td>
<td>Piston-Valve</td>
<td>11mm</td>
</tr>
<tr>
<td>600-446</td>
<td>Piston-Valve</td>
<td>12mm</td>
</tr>
<tr>
<td>600-447</td>
<td>Auto-Valve</td>
<td>12mm</td>
</tr>
</tbody>
</table>

**Cannulas and Trocars**

Piston-valve cannula; stopcock for insufflation tubing; pyramidal trocar.

<table>
<thead>
<tr>
<th>Part Number</th>
<th>Description</th>
<th>Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>600-430</td>
<td>Piston-Valve</td>
<td>5mm</td>
</tr>
<tr>
<td>600-440</td>
<td>Piston-Valve</td>
<td>10/11mm</td>
</tr>
<tr>
<td>600-445</td>
<td>Piston-Valve</td>
<td>12mm</td>
</tr>
</tbody>
</table>
Hasson Cannula
Piston valve cannula for open technique of cannula placement; blunt obturator.

Auto-Valve Hasson Cannula
For open technique of cannula placement; Auto-valve allows hands-free insertion and removal of instruments; with suture ties on cone, cannula can be repositioned without retying suture; blunt obturator.

S-Retractors (set of 2)
For retraction of tissue during open technique placement of Hasson cannula.

Thoracic Cannula, Threaded
Fascial threads minimize in/out movement of cannula; blunt obturator.

Reducer Sleeves
Reduces piston valve cannulas and facilitates extraction of tissue.
The reusable suction/irrigation cannulas offer quality and affordability.

**Suction/Irrigation Cannulas**
Dual trumpet valves for suction and irrigation; laser guide (fiber insert) and three additional seals included.

- **Suction/Irrigation Set**
Set includes handpiece, 10mm cannula for aspiration of hematomas, gallstones, and viscous drainage, and 5mm cannula for standard suction/irrigation; suction connection straight off end minimizes clogging of cannula and sticking of valves and allows for stronger vacuum pressures; 3.5mm cannulas available.

- **Puncture Needles with Irrigation**
Large bore needle (19 gauge) with Luer-Lok fitting for irrigation or aspiration.
Precision engineering with a rod lens optical system allows these high-quality scopes to deliver exceptional brilliance and clarity. Each scope transmits crisp, clear images with more natural color and enhanced contrast.

**Autoclavable Laparoscopes**
Gravity and prevacuum steam autoclavable; panoramic view with high-quality optics. The autoclavable feature is covered by a special one-year limited warranty.

**Operating Laparoscopes**
Offset laparoscope with instrument channel which accommodates 5mm, 45cm instruments or laser; high-quality optics with panoramic view.