

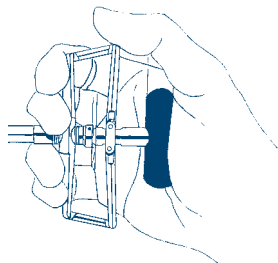
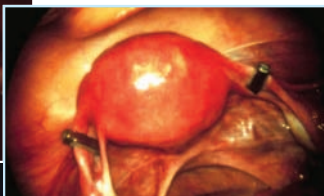
## Technique for Correct Placement

FILSHIE  
TUBAL LIGATION SYSTEM™



**Left:** View of correctly compressed, flat and securely latched clip

**Below:** Bilateral view of correct placement on tube



### When applying the FILSHIE® Clip in a laparoscopic or L&D setting:

- Identify the fallopian tube
- Place clip on isthmic portion of the tube, 1-2 cm from the cornua
- The clip should contain the whole tube
- The clip should be perpendicular (90°) to the tube
- Close the clip with firm but gentle pressure; excessive force is not needed (See illustration above)
- The upper jaw of the clip should be compressed, flat and securely latched
- Always verify clip placement on the correct structure and in the correct position
- Repeat process on opposite side

# Technique for Correct Placement

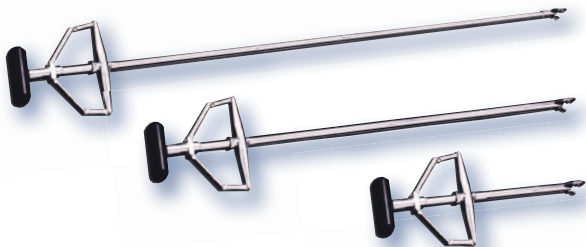
FILSHIE  
TUBAL LIGATION SYSTEM™

## Guidelines for the correct application of the FILSHIE® Clip in either laparoscopic or L&D settings

- Be sure the applicator has been properly maintained, is calibrated with the gauge and both parts have matching serial numbers every time.
- It is possible to manipulate the fallopian tube for identification purposes by gently using the loaded applicator as a pair of soft forceps to “milk” the tube.
- The use of a uterine manipulator may be helpful in exposing the tube, particularly in the case of retroverted uteri.
- To identify the tube, pick the tube up with the applicator and track along towards the fimbria at the distal end. Once you have visualized the fimbria, track back along the isthmus towards the cornua to locate the application site.
- Verify you have the fallopian tube, and not the round or ovarian ligament or a fold in the mesosalpinx.
- If you are unsure of transluminal placement, an additional Filshie Clip can be placed in an adjacent section of the tube.
- In the unlikely event of the tube being too large for the Clip, use an alternative method of tubal occlusion.



## Applicators



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