B. Repeat until you are able to keep the dilator in for 10 minutes without discomfort. It may take several tries over several days to reach a goal of 10 minutes. Proceed to Step 3.
Note: You may have to hold the dilator in place with one hand so that it doesn’t slip out.

Step 3
A. Insert smallest size (lubricated) dilator. Hold it still a moment - then try moving it around. Wiggle it gently side to side. Slide it in and out.
B. When Step 3 has been accomplished, start over with Step 1 using the next size dilator.

Medications: Post-Reconstructive Surgery
If there are no contraindications, estrogen vaginal cream may be recommended for women without ovaries. The estrogen cream is inserted vaginally once a week.

Medications: Post-Radiation Therapy
Your doctor will determine if you should use an estrogen cream, depending on the type of condition you have. Apply lubricant as directed.

Important Notes Regarding Intercourse
• Post-reconstructive surgery: Intercourse may begin 10 to 14 days following surgery - if no bleeding or infection is present.
• Post-radiation: Intercourse is recommended during radiation treatments only when no bleeding or infection is present. Intercourse on a regular basis may decrease the frequency of mechanical dilation needed.
Check with your doctor if you have any questions about these recommendations.

Important Notes Regarding Bleeding
• Spotting after surgery or radiation treatment is normal. If heavy bleeding occurs, contact your physician.

Special Instructions Before Return Visit
• Do not use vaginal dilators for 3 days before your next scheduled appointment.

Recommended Sterilization for Physicians
Autoclave: 15 lbs. pressure (250°F/121°C) for 20 minutes. (If using method other than steam sterilization, please refer to your equipment manual.)

Instructions for Use
Vaginal Dilators

Set of 4 Dilators (Sm/Med/Lg/X-Lg):
MX20-CA: Vaginal-Hymenal Dilator Set
MX25-CA: Vaginal-Rectal Dilator Set
MX23-CA: Pediatric Size Vaginal Dilator Set

Individual Dilators:

<table>
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<tr>
<th>P/N</th>
<th>Size</th>
<th>Inches</th>
<th>mm</th>
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<tbody>
<tr>
<td>MX20I</td>
<td>Small</td>
<td>5/8 x 3/16</td>
<td>130 x 4</td>
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<tr>
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<td>Medium</td>
<td>5 x 1/8</td>
<td>140 x 28</td>
</tr>
<tr>
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<td>Large</td>
<td>5 x 1/4</td>
<td>146 x 32</td>
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<tr>
<td>MX20IXL</td>
<td>X-Large</td>
<td>6 x 1/4</td>
<td>157 x 38</td>
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<td>MX23I</td>
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<tr>
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<td>63 x 14 x 11</td>
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<tr>
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<td>68 x 16 x 13</td>
</tr>
<tr>
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<td>X-Large</td>
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<td>76 x 18 x 14</td>
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<td>3 x 1/16 x 1/2</td>
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Device Description
• Dilators can help overcome the pain of intercourse by teaching patients how to relax the vaginal muscles.
• Dilators are recommended following radiation therapy and reconstructive vaginal surgery to help restore elasticity of vaginal tissue.

Warnings
• Never force dilator into your vagina. When you are relaxed it should slide forward only with slight pressure.
• DO NOT USE oil-based lubricants. Oil-based lubricants are not water-soluble and can be irritating to the vaginal walls.

Instructions courtesy of: David D. Youngs, M.D. & Leslie Schover, Ph.D., Cleveland Clinic Foundation, Department of Gynecology/Center for Sexual Function and Alfred I. Sherman, M.D., Sinai/Grace Hospital, Wayne State University

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Indications for Use
Vaginal dilators are devices developed for progressive vaginal dilation therapy in the treatment of vaginismus (muscular spasm of the vagina) and the conditions that result in constriction of the vaginal and/or rectal orifice. Such conditions may be the result of vaginal and/or rectal reconstruction surgery or radiation therapy.

Contraindications
- Pregnant patients should not use Dilators.
- Patients suspected of vaginal infection

Use of Dilators for Pain Associated with Sexual Intercourse
You have been prescribed a set of vaginal dilators, which when used as instructed, can help overcome pain associated with intercourse. Such pain is often caused, at least in part, by a spasm of the muscles around the vaginal entrance. This muscle tension is called vaginismus.

Use of Dilators Following Reconstructive Vaginal Surgery
You have just had reconstructive surgery of your vagina. The vaginal dilators you have been prescribed, when used as instructed, can help keep the vagina open and the tissue more supple, making intercourse and follow-up examinations more comfortable. Begin using the dilators as soon as possible after your surgery. Use dilators, as prescribed, for 5 to 10 minutes daily for 10 days. Leave dilator in place overnight if you are not having intercourse.

Use of Dilators Following Radiation Treatments
Radiation of vaginal tissue results in a decrease in the blood supply in that area, this decrease helps shrink or slow the growth of a tumor. A potential side effect for this decreased blood supply is the loss of elasticity normally found in vaginal tissue. There may also be increased tenderness in the area. The use of vaginal dilators will help keep the vagina open and the tissue more supple, making intercourse and follow-up examinations more comfortable. Begin using the dilators 2 weeks after your radiation therapy. Use dilators, as directed, for 5 to 10 minutes daily for 10 days. On the 11th day, you can begin using the dilator every other day. You may need to do this for the rest of your life, to keep the vagina healthy. The vagina may be sore after the onset of radiation treatments. If it is too painful to use the dilators or to have intercourse, consult your doctor.

Instructions Prior to Inserting Dilator
The first step in using a vaginal dilator is to learn how to relax the muscles that surround the vagina. Follow the steps below to practice relaxing those muscles, known as pubococcygeal (PC) muscles.
1. Squeeze by tensing the PC muscles (as if you were trying to stop urinating in midstream). Hold and count to 3.
2. Stop squeezing and relax. Let the PC muscles go loose.
3. Repeat steps 1 and 2 several times. These actions are called Kegel exercises.
Continue to do these exercises twice a day, doing 10 in a row each time.

Preparation and Cleaning
You and your physician will determine which size vaginal dilator to use first. For pain associated with sexual intercourse, start with the smallest dilator.
Wash your hands prior to using dilators.
Wash dilator with mild soap and water and rinse thoroughly. If dilator feels cold, hold it under warm tap water and dry it well.

Apply water-base lubricant to the tip end of the dilator.

Instructions to Insert Dilator
If you have problems during any of the following steps, call your physician.

Step 1: Initial Insertion
A. Lie down and bring your knees up and apart. You may find it easier to use a hand mirror to look at your genital area. (Refer to Figure 1.)
B. If not already done, lubricate the entering end of the dilator to the rounded tip.
C. Separate the labia (the lips, Figure 1). Now tense the PC muscles as practiced and relax.
D. Slide lubricated dilator into vagina. You may have to slip it in a little at a time.
Note: Each time you squeeze the PC muscles, hold dilator in place so it isn’t pushed out.
As soon as you relax, push dilator a little further into your vagina. (Refer to Figures 2 through 5.)
E. Never force dilator into your vagina. When you are relaxed, it should slide forward only with slight pressure. You will know the dilator is in fully when it will not move further in upon relaxation.