

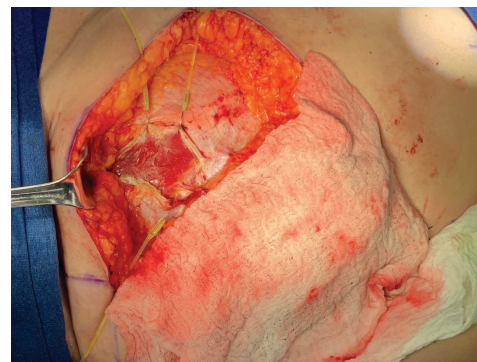
Lone Star® Retractor System and Elastic Stays

Providing exceptional visibility and access¹ for microvascular breast surgery procedures.

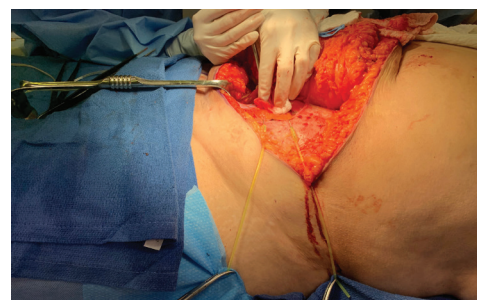
The Lone Star® Retractor System offers simple, intuitive retraction at the surgical site designed to optimize access to patient anatomy and improve visibility.² Highly flexible, the system can be used with or without a wide variety of accompanying stays that can be repositioned to reveal additional layers as the surgery progresses.^{1,2}

Lone Star Retractor System elastic stays are used in an array of microvascular breast procedures.¹

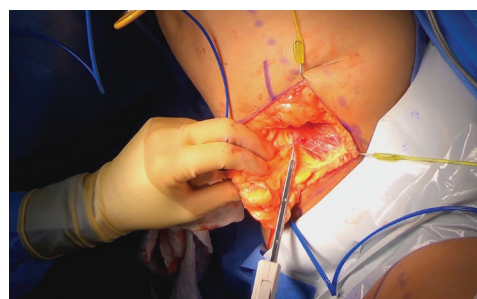
- DIEP (deep inferior epigastric perforator) flap
- TUG (transverse upper gracilis) flap
- PAP (profunda artery perforator) flap
- ALT (Anterolateral thigh) flap
- LTP (Lateral thigh perforator) flap



Diep (deep inferior epigastric perforator) flap
Oscar Ochoa, MD
PRMA Plastic Surgery, San Antonio, TX



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Pap (profunda artery perforator) flap
Ramon Garza, MD & Oscar Ochoa, MD
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Customizable System Adapts and Flexes to Your Needs

Lone Star® Retractor rings are flexible by design, while the elastic stays quickly and safely² adapt the retractor ring to site anatomy. The result is greater exposure and autonomy for your procedure.

Disposable Retractor Ring Specifications

Number	Description
3301G	Sterile plastic, 25.3 cm x 11.3 cm
3302G	Sterile plastic, 22.0 cm x 11.3 cm
3304G*	Sterile plastic, 32.5 cm x 18.3 cm
3307G	Sterile plastic, 14.1 cm x 14.1 cm
3308G*	Sterile plastic, 28.3 cm x 18.3 cm
3309G	Sterile plastic, 18.6 cm x 8.9 cm
3310G	Sterile plastic, 25.0 cm x 25.0 cm
3715*	Sterile plastic, 16.6 cm x 16.6 cm

Made of Noryl® resin, the disposable retractor rings are pre-sterilized and packaged singly in double-peel pouches for easy delivery to the sterile surgical field.

*Packaged singly with 2 catheter clips

Stay Hook Specifications

Number	Description
3205-8G	5 mm semi-blunt PRO-Stay (8/pack)
3311-1G	5 mm sharp hook (50/case)
3311-8G	5 mm sharp hook (8/pack)
3314-1G	3 mm sharp hook (50/case)
3314-8G	3 mm sharp hook (8/pack)
3316-1G	5 mm blunt hook (50/case)
3316-8G	5 mm blunt hook (8/pack)
3325-4G	5 mm two-finger (4/pack)
3327-4G	7 mm two-finger (4/pack)
3329-4G	9 mm two-finger (4/pack)
3330-4G	13 mm x 16 mm solid blade (4/pack)
3331-4G	13 mm x 20 mm Spira blunt hook (4/pack)
3332-4G	14 mm x 16 mm two-finger (4/pack)
3333-4G	16 mm x 20 mm Spira two-finger (4/pack)
3334-4G	20 mm x 16 mm four-finger (4/pack)
3335-4G	20 mm x 20 mm Spira three-finger (4/pack)
3338-4G	6.5 mm x 16 mm solid blade (4/pack)
3350-1G	12 mm blunt hook (50/case)
3350-8G	12 mm blunt hook (8/pack)
3350L-4G	12 mm blunt hook, elongated lead (4/pack)
3384-4	12 mm two-finger blunt hook (4/pack)
3550-1G	12 mm blunt hook, dual lead (50/case)

50/case stays are individually wrapped.
All stay hooks are single-use.

Lone Star Retractor Kits

Number	Description
3704	Gynecology Kit - One large snowman disposable retractor ring, 32.5 cm x 18.3 cm – Model #3304G - One eight-pack of 5 mm sharp stay hooks – Model #3311-8G (5 kits/box)
3707	Colorectal Kit - One square disposable retractor ring, 14.1 cm x 14.1 cm – Model #3307G - One eight-pack of 5 mm sharp stay hooks – Model #3311-8G (5 kits/box)

IMPORTANT SAFETY INFORMATION

The Lone Star® Retractor System is indicated for use to provide incision retraction and to aid in visualization during surgical procedures. **WARNINGS: For Single Use Products Only.** Reuse, reprocessing or resterilization may compromise the structural integrity of the device and /or create a risk of contamination. **For Reusable Retractors**, both aluminum and stainless steel, they should be thoroughly cleaned and sterilized to prepare them for use. For detailed instructions and risk information, please refer to Instructions for Use: www.coopersurgical.com/lone-star-ifu

REFERENCES

1. Lone Star Retractor System Instructions for Use. Trumbull, CT: CooperSurgical, Inc.; 2021
2. Toyota, S., Kumagai, T., Goto, T., Mori, K., & Taki, T. (2017). Utility of the Lone Star Retractor System in Microsurgical Carotid Endarterectomy. World neurosurgery, 101, 509–513. <https://doi.org/10.1016/j.wneu.2017.02.06>

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