TROUBLESHOOTING GUIDE

TruClear[™] System

Issue	Suggestion/Solution
Mode does not change via oscillate lock button	Check handpiece cable is fully inserted into TruClear™ control unit
	Check footswitch cable is connected properly
	Make sure oscillate lock button on footswitch is being depressed adequately
Window lock – internal sheath jumps or rotates too fast	Reseat the shaver into the handpiece
	■ Remove handpiece cable from console. Turn off TruClear™ control unit.
	Unplug from the wall and plug it back in. Turn unit on. Insert handpiece into control unit.
Window lock – unable to see lines on the shaver	If window lock is performed outside of patient, consider:
	 Moving instrument away from the OR spot lights Inserting shaver into scope and watching tip of shaver on video monitor to observe internal sheath rotation
	Consider performing window lock inside the uterine cavity
No specimen in tissue trap at end of case	Confirm handpiece suction is in the ON position
	Make sure white handpiece tubing is connected to tissue trap
	Check if tissue chunks visible in the suction tubing during tissue removal
	Flush handpiece suction channel to ensure tissue flow
	 Ensure reprocessing is adequately brushing and cleaning channels

TruClear™ Elite Hysteroscopes		
Issue	Suggestion/Solution	
Fluid leaking from scope	 Ensure white disposable seal (Reference #72205051) is on working channel Check that the appropriate sheath o-ring is present Ensure that all stopcock valves are tight 	
TruClear [™] Operative 5C Hysteroscope		
Fluid leaking from scope	 Ensure blue rubber seal (Reference #7205561) is on working channel Check that the appropriate sheath o-ring is present inside the hysteroscope Ensure that all stopcock valves are tight Confirm that sheath is secure on scope 	



	agement System
Issue	Suggestion/Solution
Poor uterine distention	Check inflow tubing for obstructions and/or kinks
	• Reposition hysteroscope to ensure that it is past the internal cervical os and is not touching the fundus
	 If SET PRESSURE is equal to INTRAUTERINE PRESSURE (IUP), consider increasing SET PRESSURE on pump Consider closing or reducing outflow valve
Tandem setup not flowing to next canister	Inspect canister setup:
	Ensure suction source on system is securely connected and turned on
	• Confirm center vacuum port is attached to suction barb of lever suction or regulator suction
	• Ensure that tandem tubings are connected ONLY to tandem ports
	• Check that unused ports are closed
	Ensure canister lids are secured and tight
	Inspect canisters for cracks or holes
Poor visualization	■ Ensure outflow and inflow valves on scope are fully open
	 Check that inflow and outflow tubings are not kinked
	 Outflow to gravity – ensure outflow tubing is placed under patient's leg. If no return from outflow, reposition scope tip past internal os.
	- Adjust focus on camera head
	■ Disengage camera from scope, clean optics on scope and camera
	■ Increase SET PRESSURE on pump to increase flow rate
	■ Ensure pump instrument recognition is complete and then "pump active" displays on screen
No fluid flow after	• Reposition hysteroscope to ensure that it is past the internal cervical os and is not touching the fundus
instrument recognition	■ Ensure fluid clamps are open on inflow tubing
	• Check that outflow valve is OPEN
Fluid deficit higher than anticipated by OR nursing team	Verify scale was RESET after calibration
	• Ensure that ALL fluids are returning to scale
	Avoid touching fluid bags to determine amount left in bag
	• Leave empty bags on hooks (one 3-liter bag weight = 80cc fluid)
	• Ensure canisters are NOT touching the legs of the roller base
	Verify that tubings and/or power cords are not resting on top of the canisters
	Inspect canister setup:
Tandem setup not flowing to next canister	Ensure suction source on system is securely connected and turned on
	• Confirm center vacuum port is attached to suction barb of lever suction or regulator suction
	Ensure that tandem tubings are connected ONLY to tandem ports
	• Check that unused ports are closed
	• Ensure canister's lids are secured and tight
	 Inspect canisters for cracks or holes

Issue	Suggestion/Solution
Rapid outflow	Alter scope outflow by toggling outflow valve to 45 degrees to slow down outflow but still allow for continuous flow
No flow – uterine distention poor	 Ensure clamp on inflow tubing is open Check for adequate pressure being applied from pressure bag/device Ensure saline bag is not empty Check inflow valve is in the OPEN position Check for kinks in tubings Ensure inflow tubing is connected and secure Reposition hysteroscope to ensure that it is past the internal cervical OS and is not touching the fundus
Inadequate suction	 Check to make sure suction source is turned ON and produces adequate suction Check canister lid and caps are secure and tight Check filter is secure on center vacuum port Inspect canisters for cracks or holes Review all tubing connections to ensure properly attached and no kinks in tubings
Uterine distention collapses with cissue removal	 Confirm suction level matches that of the suction requirement for the tissue shaver you are using as per the IFU Consider increasing pressure on pressure bag or increase height of pressure bag Ensure shaver makes contact with tissue prior to and during tissue resection (footswitch engaged)
Poor visualization	 Ensure inflow and outflow valves are open Check tubings are not kinked Check for adequate pressure being applied from pressure bag/device Check clamp on inflow tubing is open Outflow to gravity – ensure outflow tubing is placed in downward position between patient's legs Reposition hysteroscope to ensure that it is past the internal os and is not touching the fundus Ensure handpiece suction is ON Consider increasing pressure on bag to increase flow rate Check if scope is sticking to sheath during removal of sheath Check if scope is bent

For full product information, please consult the products' Instructions For Use.

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