

# **GelPOINT®**

**Advanced Access Platforms** 



### **GelPOINT**

### **Advanced Access Platforms**

#### GelSeal® Cap

Offers a pseudo-abdomen platform for unmatched triangulation of standard laparoscopic instrumentation

Facilitates extracorporeal resection and specimen retrieval

Provides a flexible fulcrum for improved instrument articulation

Maintains pneumoperitoneum for continuous access and visualization



#### **Self-Retaining Sleeves**

Float above incision to maximize internal working diameter

Accommodate a variety of instrument widths

Offer greater freedom of movement due to low profile design



#### Alexis® Wound Protector/Retractor

Accommodates varying abdominal walls and incision sizes 1.5cm to 7cm (GelPOINT) or 1.5cm to 4cm (GelPOINT Mini) for a wide spectrum of procedures

Offers 360° of atraumatic retraction and protection <sup>1-2</sup> for enhanced exposure, access and cosmetic results

Allows clear visualization of wound margins

<sup>1.</sup> Reid K, Pockney P, Draganic B, Smith SR. Barrier wound protection decreases surgical site infection in open elective colorectal surgery: A randomized clinical trial. Dis Colon Rectum. 2010 Oct;53(10):1374-1380.



#### **Procedural Applications**



## **GelPOINT & GelPOINT Mini Advanced Access Platforms**

Cholecystectomy Hernia Repair
Hysterectomy Appendectomy
Colectomy Oophorectomy
Nephrectomy Gastric Sleeve



#### **GelPOINT Advanced Access Platform**

Reorder No.	Qty/Box
CNGL2	1/Box
Components	
(1) GelSeal Cap	
(1) Alexis Wound Protector/Retractor	Accommodates 1.5-7cm incision sizes
(3) 10mm Sleeves	Accommodate 5-10mm instrumentation
(1) 12mm Sleeve	Accommodate 5-12mm instrumentation
(1) Introducer for Sleeves	
(1) Instrument Shield	Optional for added protection





#### **GelPOINT Mini Advanced Access Platform**

Reorder No.	Qty/Box
CNGL3	1/Box
Components	
(1) GelSeal Cap	
(1) Alexis Wound Protector/Retractor	Accommodates 1.5-4cm incision sizes
(1) Alexis Wound Protector/Retractor  (3) 10mm Sleeves	Accommodates 1.5-4cm incision sizes  Accommodate 5-10mm instrumentation
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### Visit www.appliedmedical.com/gelpoint for more information

Devices listed may not be approved in all markets. Please contact your field implementation team member for more information on availability.

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### **Clinical Bibliography**

The following clinical papers and posters reference use of the GelPOINT Advanced Access Platforms for single site and reduced port surgery

#### **COLECTOMY**

"We have since gained experience with the GelPOINT device and found it more advantageous for colorectal procedures. Its high outer profile allows use of four or even five trocars with varying degrees of separation to limit clashing and allowing for ample counter traction when needed. In addition, a built in wound protector not only prevents direct contact between the specimen and the abdominal wall, but also secures the port in patients with a high BMI or thick abdominal wall."

Ramos-Valadez DI, Patel CB, Ragupathi M, et al. Single incision laparoscopic colectomy: Outcomes of an emerging minimally invasive technique. *Int J Colorectal Dis.* 2011 Jun;26(6):761-767.

"In all cases, a GelPOINT Advanced Access Platform (Applied Medical, Rancho Santa Margarita, CA) was employed as sole access to the abdominal cavity. Its GelSeal® cap provides additional outer working space and the ability to achieve tissue triangulation even with the standard laparoscopic instrumentation that we routinely use."

Fichera A, Zoccali M, Gullo R. Single Incision ("scarless") laparoscopic total abdomical colectomy with end ileostomy for ulcerative colitis. *J Gastrointest Surg.* 2011 Jul;15(7):1247-1251.

#### HYSTERECTOMY

"Conclusion: LESS is feasible, safe, and reproducible in gynecology patients with benign and cancerous conditions. Operative times are reasonable and can be decreased with experience."

Fader AN, Rojas-Espaillat L, Ibeanu O, Grumbine FC, Escobar PF. Laparoendoscopic single site surgery (LESS) in gynecology: A multi-institutional evaluation. *Am J Obstet Gynecol.* 2010 Nov;203(5):501-506.

#### SLEEVE GASTRECTOMY

"We initially used SILS® (Covidien) but converted to GelPOINT (Applied Medical), which is currently our standard single-port device for all transumbilical procedures."

"The presented technique uses the transumbilical approach as the primary means of intra-abdominal access with a 5-mm assistance trocar. Although this technique does not correspond to pure SILS, this technique achieves all of the cosmetic advantages of the single-incision approach and adds better instrument triangulation as well as very good visualization and exposure."

Farias C, Fernandez JI, Ovalle C, et al. Transumbilical Sleeve Gastrectomy with an Accessory Lateral Port: Surgical Results in 237 Patients and 1-Year Follow-up. Obes Surg. 2013 Mar;23(3):325-331.

#### **CHOLECYSTECTOMY**

"We report a new approach to SILC with placement of 4 trocars through a GelPOINT device which results in a single surgical scar in the umbilical orifice. This procedure has a short learning curve, similar operating times, and decreased blood loss, compared to traditional laparoscopic cholecystectomy."

Filicori F, Nissan DA, Keutgen XM, et al. A novel approach for single site incision laparoscopic cholecystectomy. In: Society of American Gastrointestinal and Endoscopic Surgeons 2011 Meeting; March 30-April 2, 2011; San Antonio, TX. Poster P469.

"We have moved from a three-port trocar technique to a more stable and flexible port platform (GelPOINT; Applied Medical, Rancho Santa Margarita, CA, USA), which allows the insertion of multiple ports. We continue to use straight instruments preferentially, with occasional need for a right-angled instrument and even less need for articulating instruments... We have since found that the GelPOINT system allows for much more freedom of movement through the same small skin incision."

Petrotos AC, Molinelli BM. Single incision multiport laparoendoscopic (SIMPLE) cholecystectomy. Surg Endosc. 2009 Nov;23(11):2631-2634.

#### **NEPHRECTOMY**

"We have found that the advanced access platform (GelPOINT Mini) facilitates triangulation and that flexible instrumentation was not necessary."

"LESS nephrectomy is feasible from infants to adolescents and can be taught to senior trainees with existing conventional laparoscopic experience."

Featherstone NC, De Win G, Undre S, Cherian A. Single incision prone retroperitoneoscopic paediatric nephrectomy. *J Pediatr Urol*. 2015 May 29. pii:51477-5131(15)00145-X. doi: 10.1016/j.jpurol.2015.04.010. [Epub ahead of print].

"Conclusions: Our initial experience with laparoendoscopic single site donor nephrectomy is encouraging. This approach to kidney donation without an extra-umbilical incision could become particularly relevant to minimize morbidity in young, healthy organ donors."

"The use of a specialized umbilical multichannel port may confer specific advantages to the surgeon. In this series the GelPOINT provided greater space for triangulation and, thus, decreased instrument clashing. It also allows easy, rapid modification of port configuration during the procedure, which aids in improving dissection and retraction ergonomics. In this series no extra-umbilical incisions were needed."

Gimenez E, Leeser DB, Wysock JS, et al. Laparoscopic single site live donor nephrectomy: Initial experience. *J Urol.* 2010 Nov;184(5):2049-2053.

#### SURGICAL SIMULATION

"Overall, the TriPort may be more challenging for novices to use in learning the LESS procedure than either the SILS port or the GelPOINT system. The GelPOINT system may offer the most consistent platform for LESS performance and novice skill acquisition."

Brown-Clerk B, de Laveaga AE, LaGrange CA, et al. Laparoendoscopic single-site (LESS) surgery versus conventional laparoscopic surgery: Comparison of surgical port performance in a surgical simulator with novices. *Surg Endosc.* 2011 Jul;25(7):2210-2218.