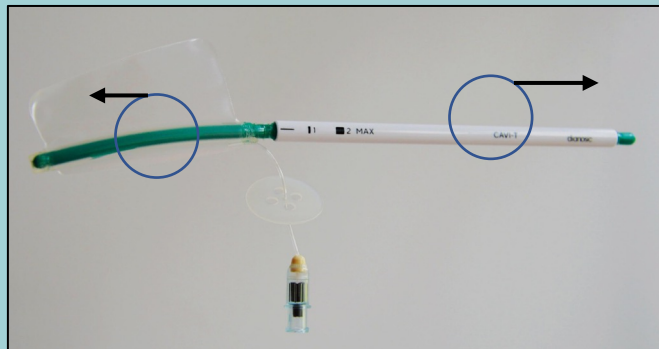
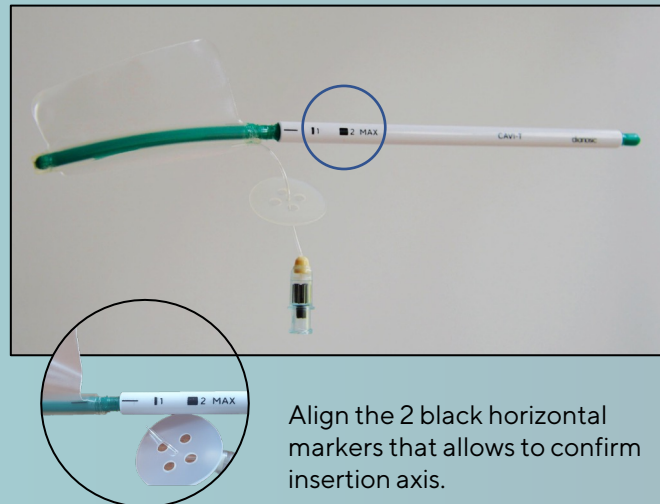


STEP 1 : DETACH BALLOON FROM GUIDE



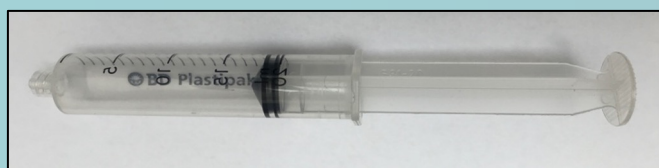
Detach the balloon from the guide. Soak each part in saline. Reassemble the 2 components.

STEP 2 : ALIGN MARKERS



Align the 2 black horizontal markers that allows to confirm insertion axis.

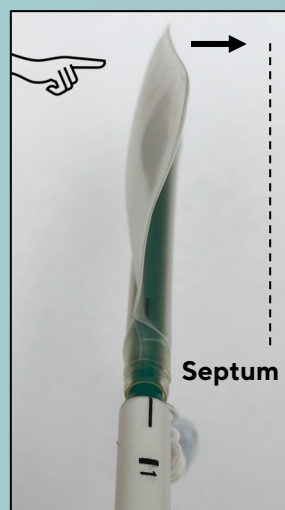
STEP 3 : PREP SYRINGE



Pull the piston and fill the syringe with 20 to 25 cc of air depending on syringe volume.

Note : only Luer Lock syringe are compatible with CAVI-T.

STEP 4 : PREP CAVI-T

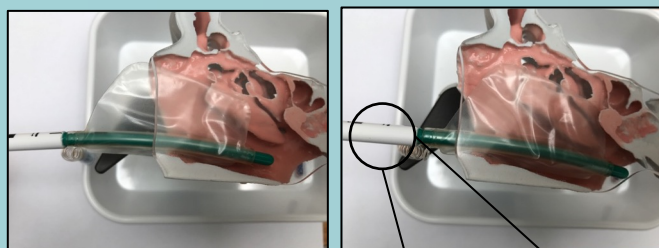


Pre-shape the balloon film with your finger so that it forms a wave oriented towards the septum.

Note : in order to facilitate unfolding of CAVI-T, you may pre-inflate it with 2-3 cc max prior to insertion.

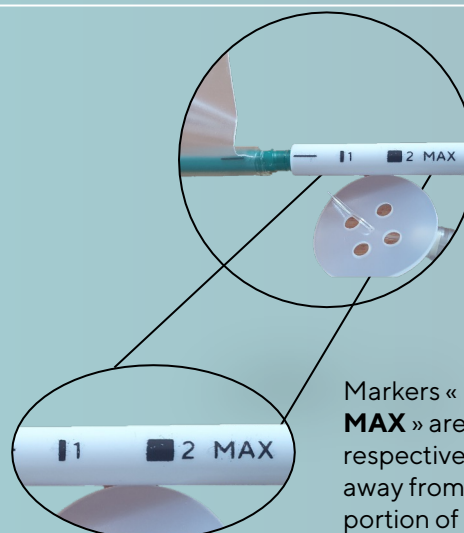
STEP 5 : INSERT BALLOON

Controlled insertion



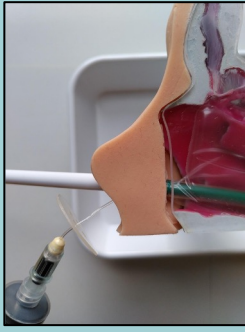
Insert CAVI-T in the nasal cavity while controlling the depth of introduction thanks to distance markers located on the white stiff portion of the deployment guide (control of the risk of displacement)

STEP 6 : CHECK MARKERS



Markers « | 1 » and « ■ 2 MAX » are located respectively 1 and 2 cm away from the proximal portion of the balloon.

STEP 7 : PRE-INFLATE



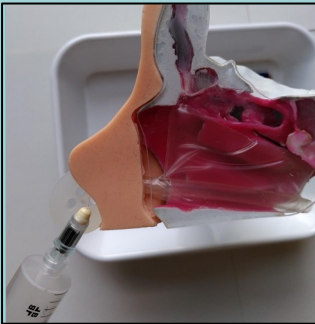
Connect the Luer Lock syringe and pre-inflate (approximately 10 cc) to deploy the balloon while maintaining the guide in place as well as exerting a slight traction on the distal portion of the external tubing to avoid posterior displacement. Once the balloon is in proper position, remove the guide.

STEP 8 : ADJUST POSITIONING



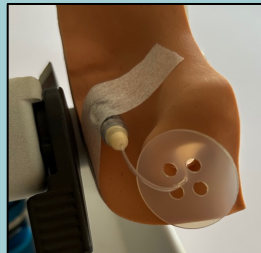
If positioning needs to be adjusted for CAVI-T, insert the green, soft, rounded distal portion of the deployment guide into the breathing channel while grasping the tubing to avoid any posterior displacement of CAVI-T.

STEP 9 : FINALIZE INFLATION AND REMOVE GUIDE



Remove the guide and resume inflation while controlling pain and bleeding, without going above 25 cc. A moderate inflation should be preferred in order to reduce the risk of displacement.

Disconnect the syringe and verify the balloon stability by exerting a serie of tractions and pressures. Tape the external tubing on the patient's cheek.



STEP 10 : CAVI-T REMOVAL

After complete deflation of the balloon with a syringe, gently pull on the breathing tube or the external tubing to remove it from the nasal cavity. (using surgical clamp)



IMPORTANT: the control of CAVI-T displacement upon inflation is a critical step of the procedure, and a strict respect of the procedural steps hereby described should be followed. You may also watch this [video](#) in order to get more information. In patients with a large nasal cavity (e.g. previously operated patients i.e. ethmoidectomy or turbinectomy), an important septal deviation, an anatomical variation or in restless patients, it is recommended to proceed with caution.

Product information:

For any information regarding dianosic products and reporting of adverse events, please contact:

DIANOSIC SAS
8 place de l'hôpital
67000 STRASBOURG

Tel : +33 1 44 01 45 80
Mail : contact@dianosic.com
Web : www.dianosic.com

