

INTRODUCTION



LAPAROSCOPIC SURGERY

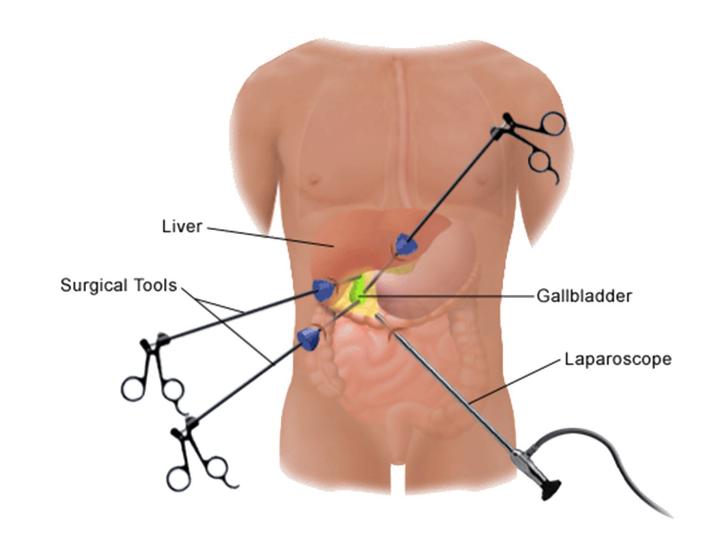
Minimally invasive or keyhole surgery



LAPAROSCOPIC SURGERY

It is a minimally invasive surgery performed through small incisions made in the abdominal wall.

The inner organs are viewed by inserting a **fibre-optic** instrument.





GALLBLADDER

Storing and pumping the bile into the intestine



GALLBLADDER

Gallbladder is a **pear sized**organ situated beneath the liver.
It is responsible for **storing the**bile secreated by the liver.

Removal of gallbladder is necessary in case of **bile stone or cancer** of the gallbladder.

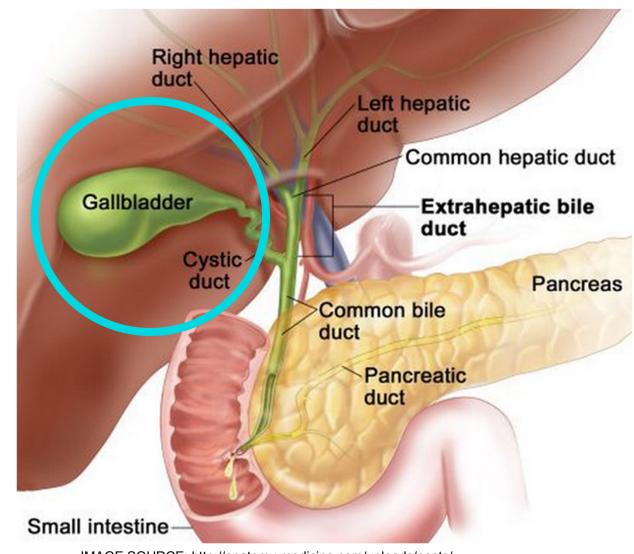


IMAGE SOURCE: http://anatomy-medicine.com/uploads/posts/2015-07/1436269423_gall-bladder.jpg



CHOLECYSTECTOMY

Surgical removal of Gallbladder



CHOLECYSTECTOMY

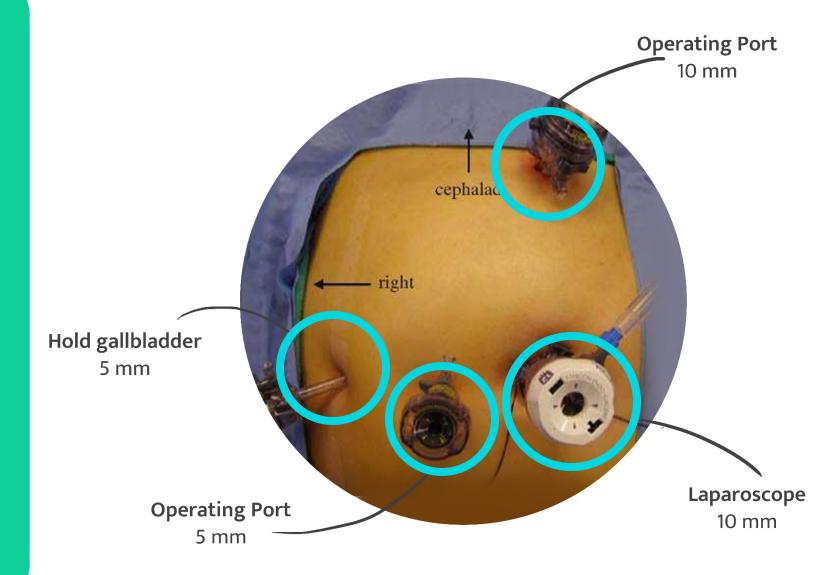
Surgical removal of gallbladder.

Procedure can be performed by the laparoscopic method.
4 incisions are required

1 port: Laparoscope

2 ports: Operating ports

1 port: Holding the gallbladder



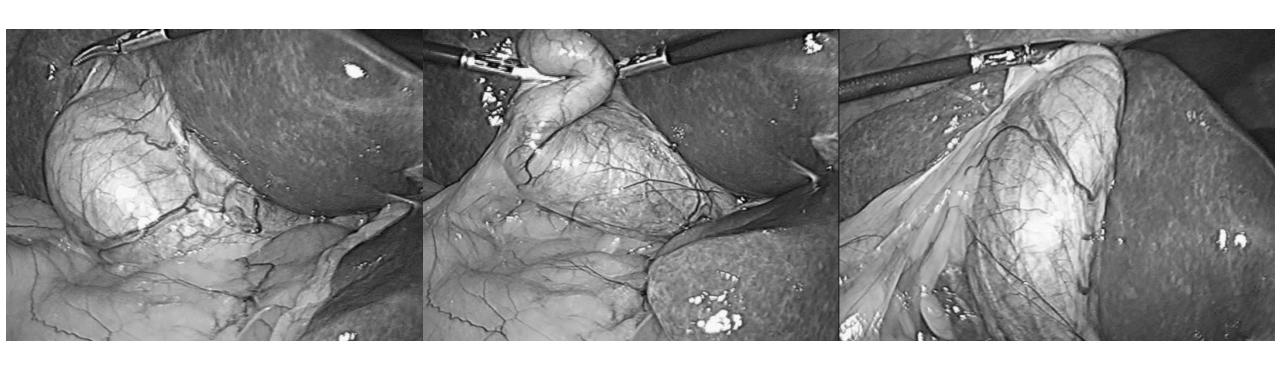


2 assistants involved in the surgery

1 assistant is engaged throughout the surgery to hold the gallbladder

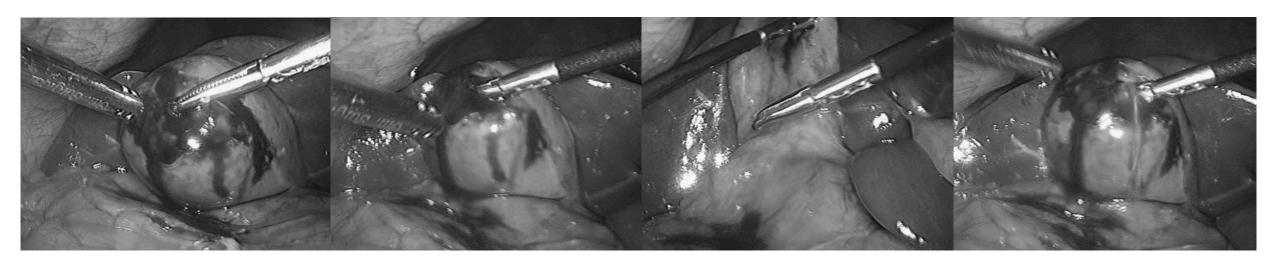
Hand position and port use

Pre preparation, equipment placement and operation theater layout



Grasping the gallbladder

Grasper can cause damage to the gallbladder if the wall thickness is less.



Grasping the gallbladder

The gallbladder is difficult to grasp if it is swollen.

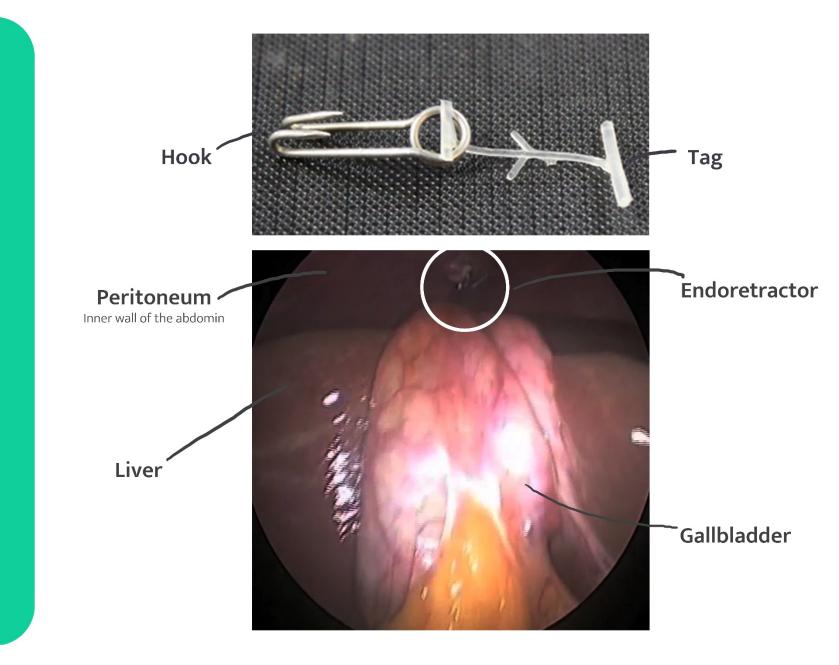


Designed by Lata Chawla



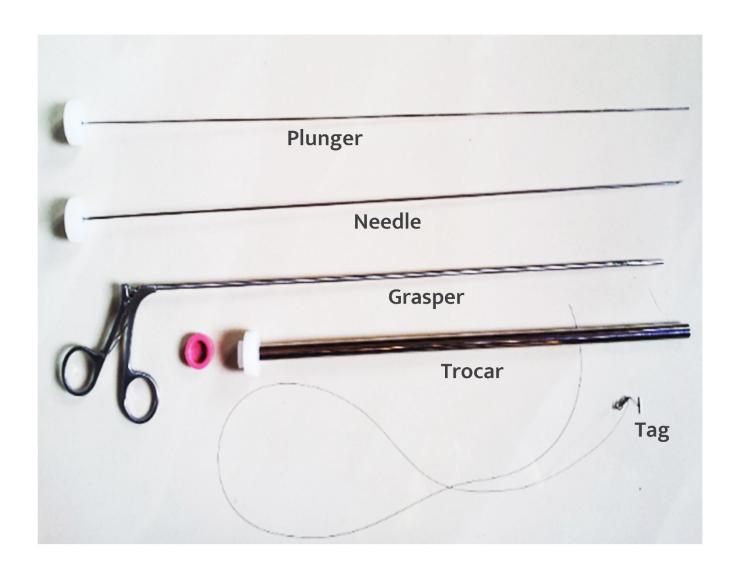
A device to hold the gallbladder to expose the Calot's triangle

Eliminates one port
Reduces human assistance
Reduces chance of
contamination

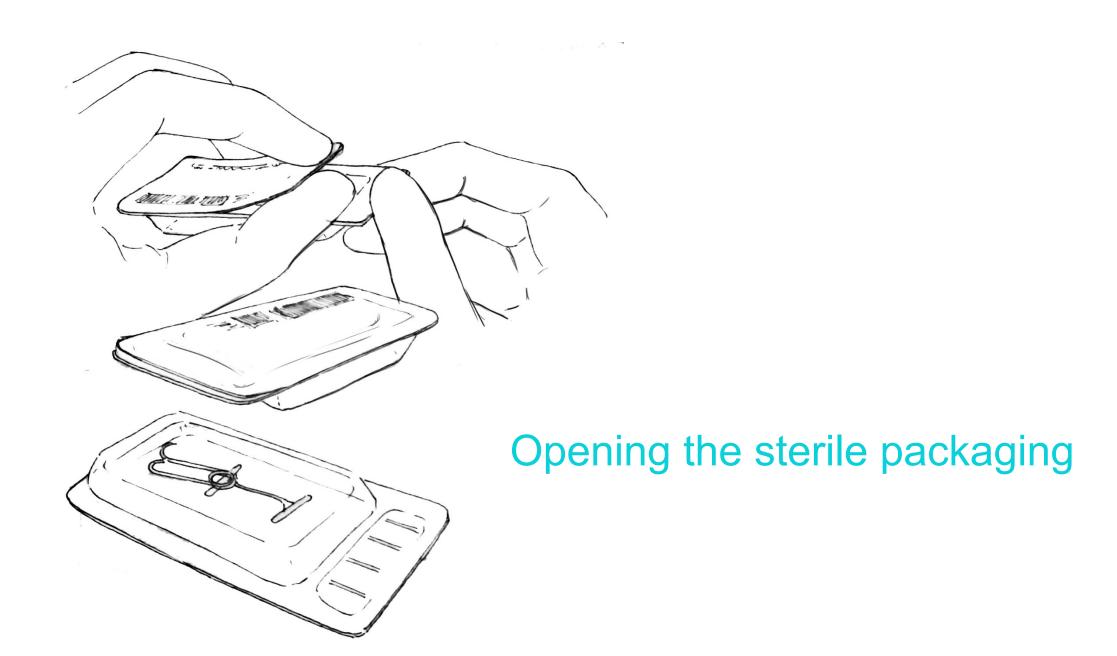


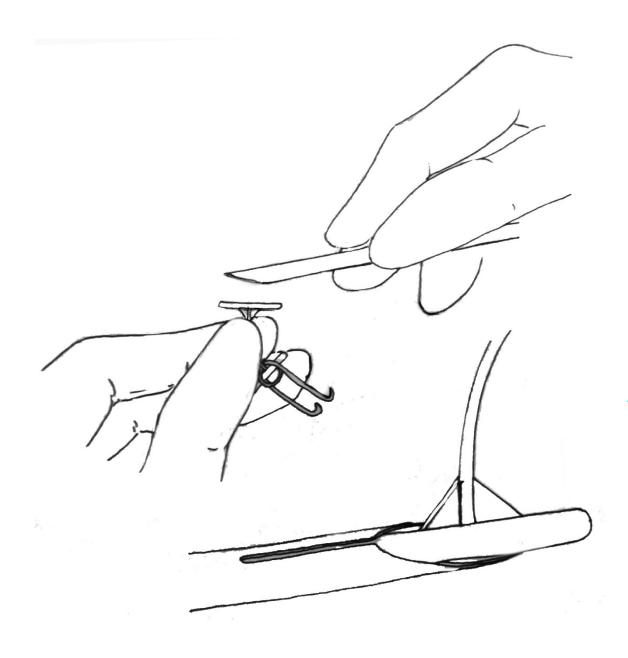


Current instruments used for deployment

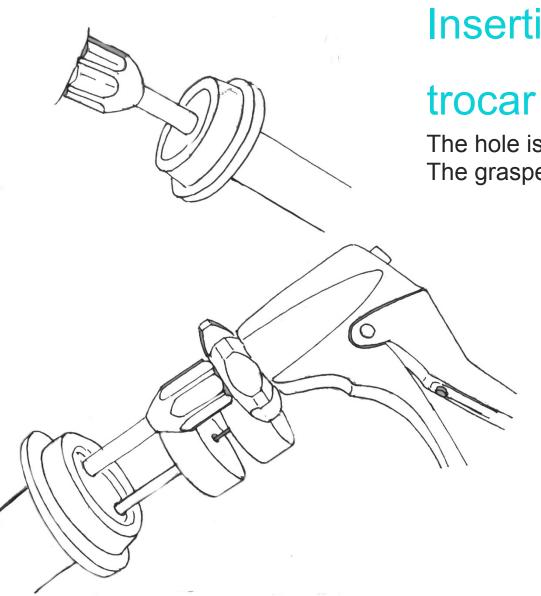


TASK ANALYSIS



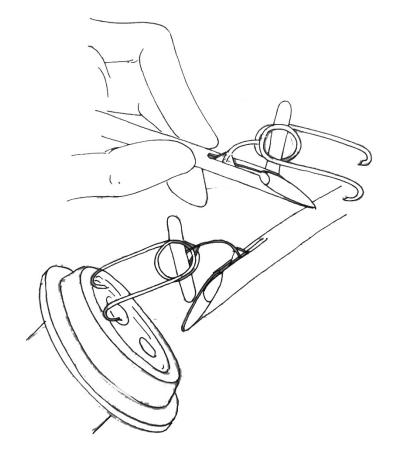


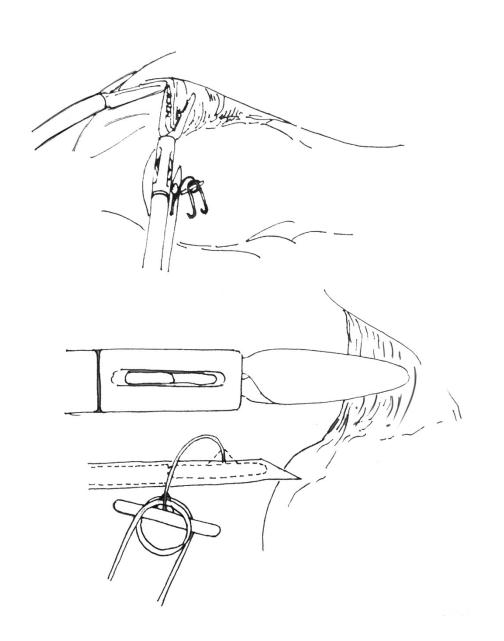
Attaching the tag to the needle



Inserting the needle through the

The hole is on 1 mm diameter
The grasper and the trocar controls clash with each other

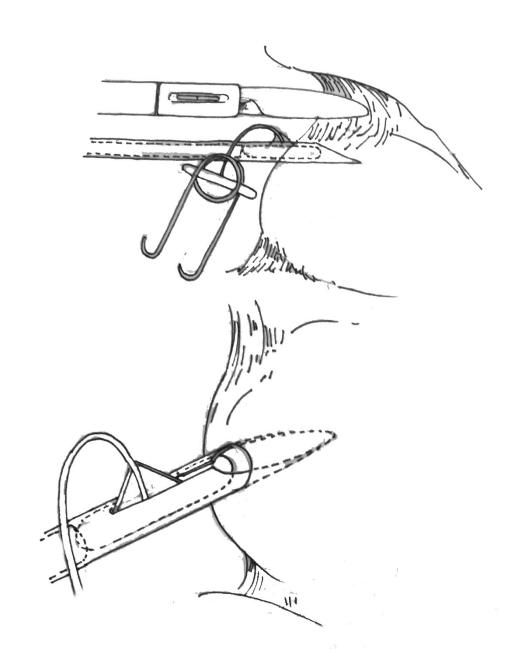




Holding the gallbladder using a

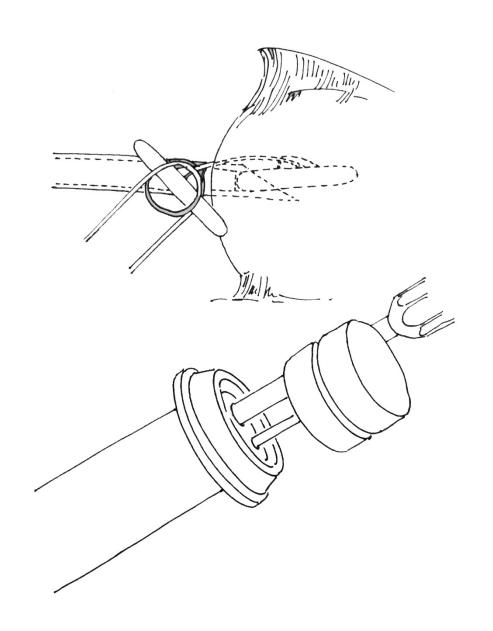
grasper

The hook dangles from the needle tip
Two graspers are needed to hold the gallbladder



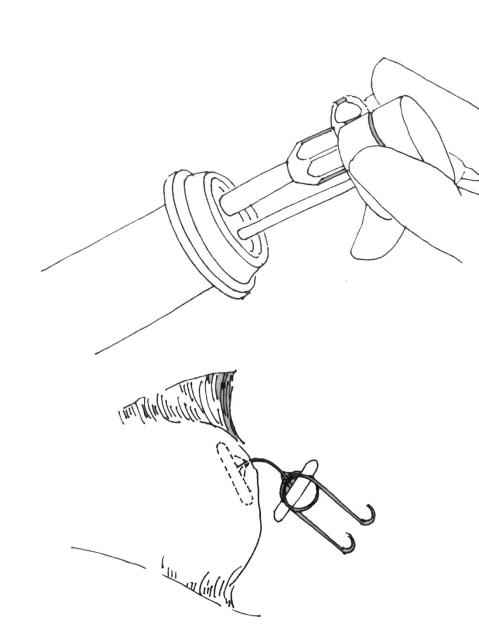
Piercing the gallbladder

The gallbladder shifts

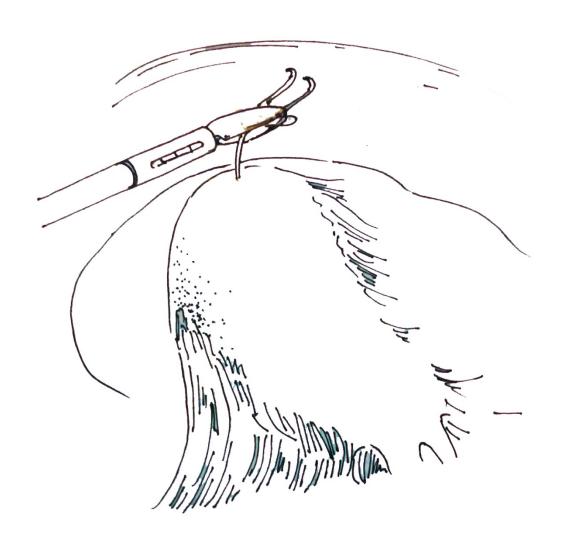


Deploying the tag

Difficult to operate the needle and the plunger

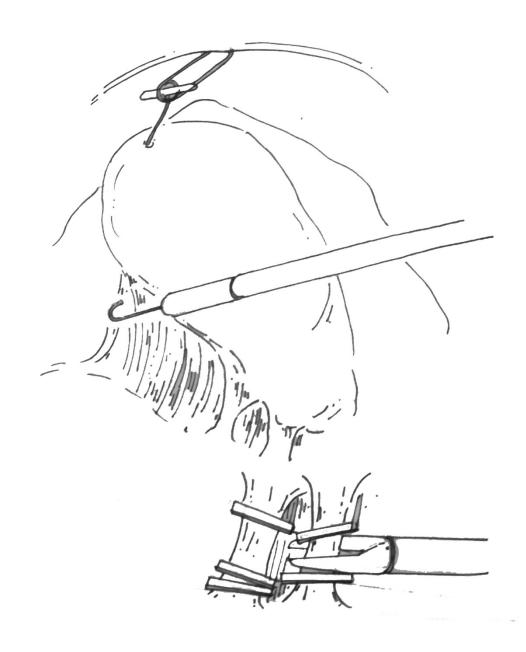


Removing the needle from the trocar



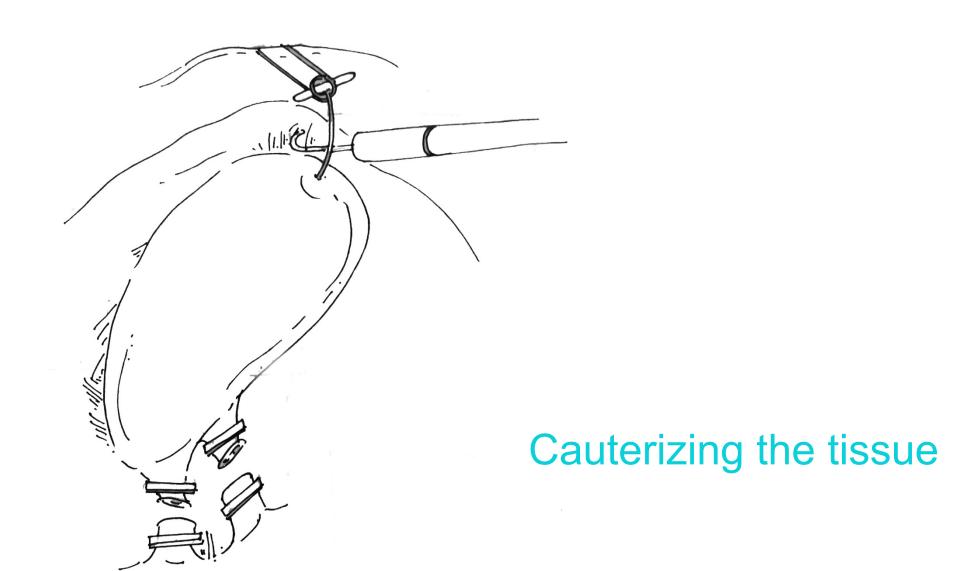
Attaching the hook to the peritoneum

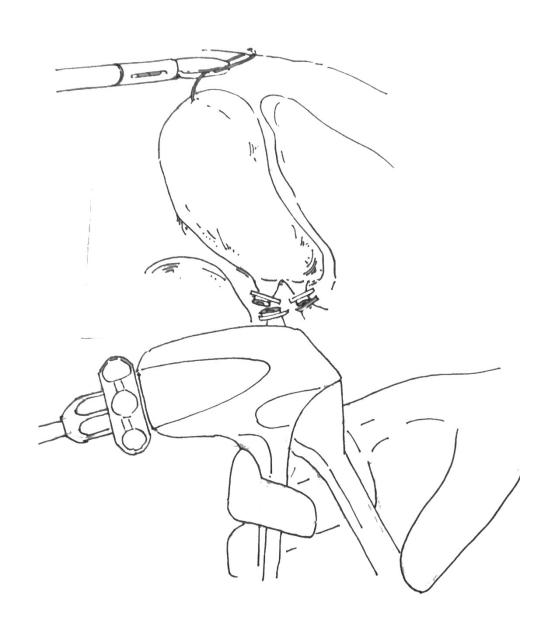
A separate grasper needs to be inserted.



Cauterizing the tissue

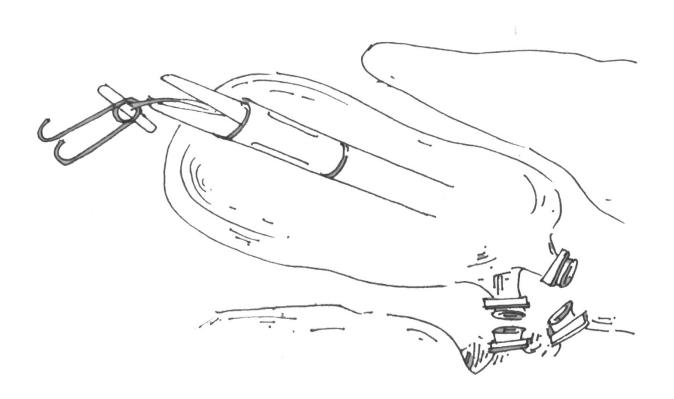
Clamping and separating the cystic duct and artery



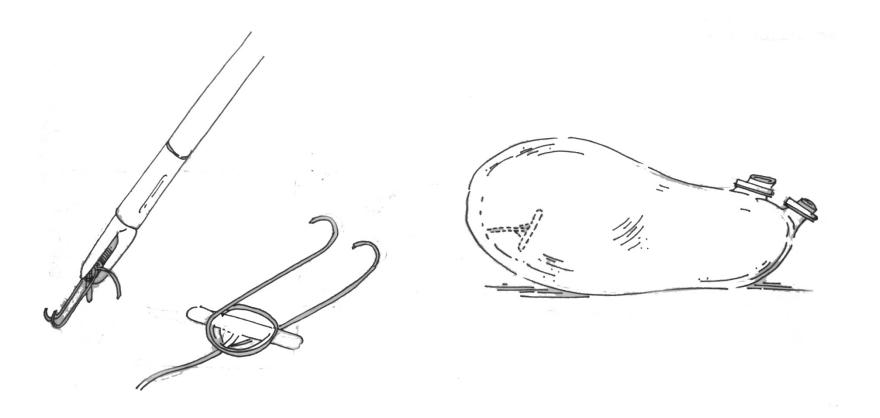


Removing the hook

Cutting the tag



Extracting the gallbladder and the tag





Why is a new deployer required?

Using a **grasper and needle simultaneously** is very difficult

The instruments need to be changed 5 times for deployment and removal of the tag

Grasping the gallbladder is difficult

Increased **Surgery time**

DESIGN BRIEF

To design an ergonomic laparoscopic device for deployment of the endo retractor.

PRIMARY NEEDS

- 1. Ergonomically comfortable.
- 2. All integrated design
- 3. Withstand autoclave temperatures.
- 4. Biocompatible material
- 5. Not cause any accidental damage to the surrounding organs.
- 6. The device should be usable through a 10 mm port.

SECONDARY NEEDS

- 1. The retractor should be easy to load and deploy.
- 2. Reduced interaction time with device.

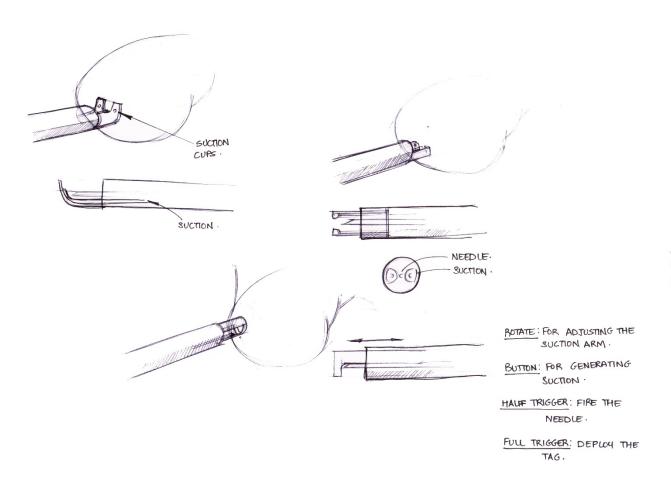
- PINCH
- CLAMP
- STRETCH 3.
- PULL Δ.
- STICK
- FRICTION 6.
- **VELCRO**
- MICRONEEDLES 8.
- FORCEPS
- 10. HOOKS
- 11. SILICON MAT 12. INTERLOCKING TEXTURES 13. ROLLERSIN OPPOSITE DIRECTION

 - 14. VACCUM CUPS
 - RINGS THAT GROW OR TRANSFORM
 - 16. HAIR MASSAGIR

- SEPERABLE-DEPLOYED BY A
- SEPARATE HOLDER
- TAG PACKED WITH A HOLDER SNAP AND TURN NEEDLE
- 4. LOADED FROM THE BACK
- 5. NAIL GUN
- SPRING LOADED
- 7. RECOIL
- 8. HALF TRIGGER FOR PIERCING AND FULL FOR DEPLOYMENT
- DISPOSABLE DEVICE
- 10. GRASPER IS DISPOABLE
- ATTACHED TO THE HOOK 11. SMALLED NEE PLE

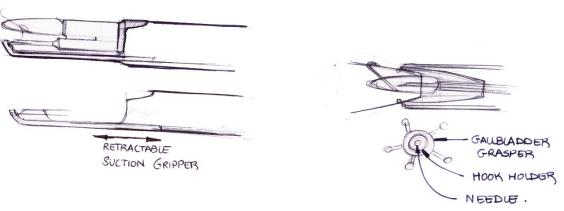
 ATTATOMIEN IN THE TIP

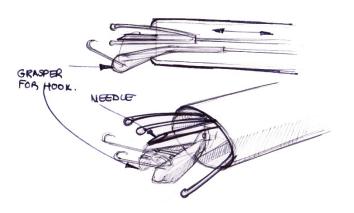
- SHEAR
 - BLADE
 - SHARP HOOK
 - BURN IT
 - SMALL CUTTING ROLLER
 - SAWING MOVEMENT
 - TWIST AND BEND
 - STRETCH TO BREAKING POINT
 - LASER
 - 10. TRIM
 - 11. MELT
 - 12. SHAVE
 - 13. BLADE ANVIL

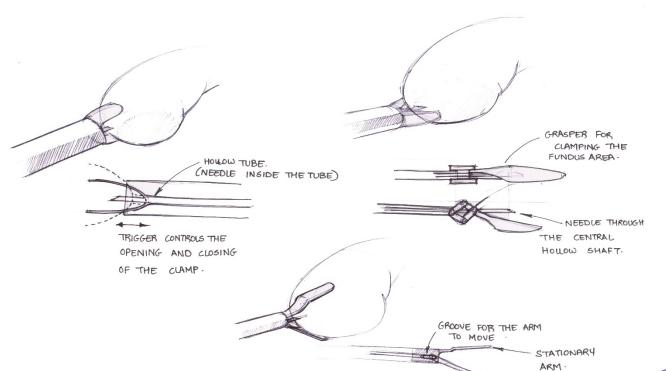


Stabilizing the gallbladder is a crucial step in the entire process as it facilitates easy and effective deployment of tag

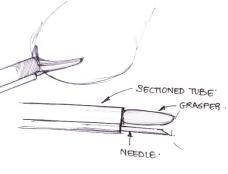
IDEATION FOR STABILIZING

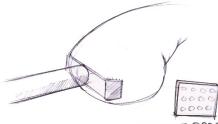




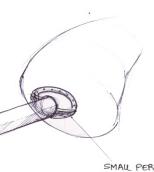


IDEATION FOR STABILIZING

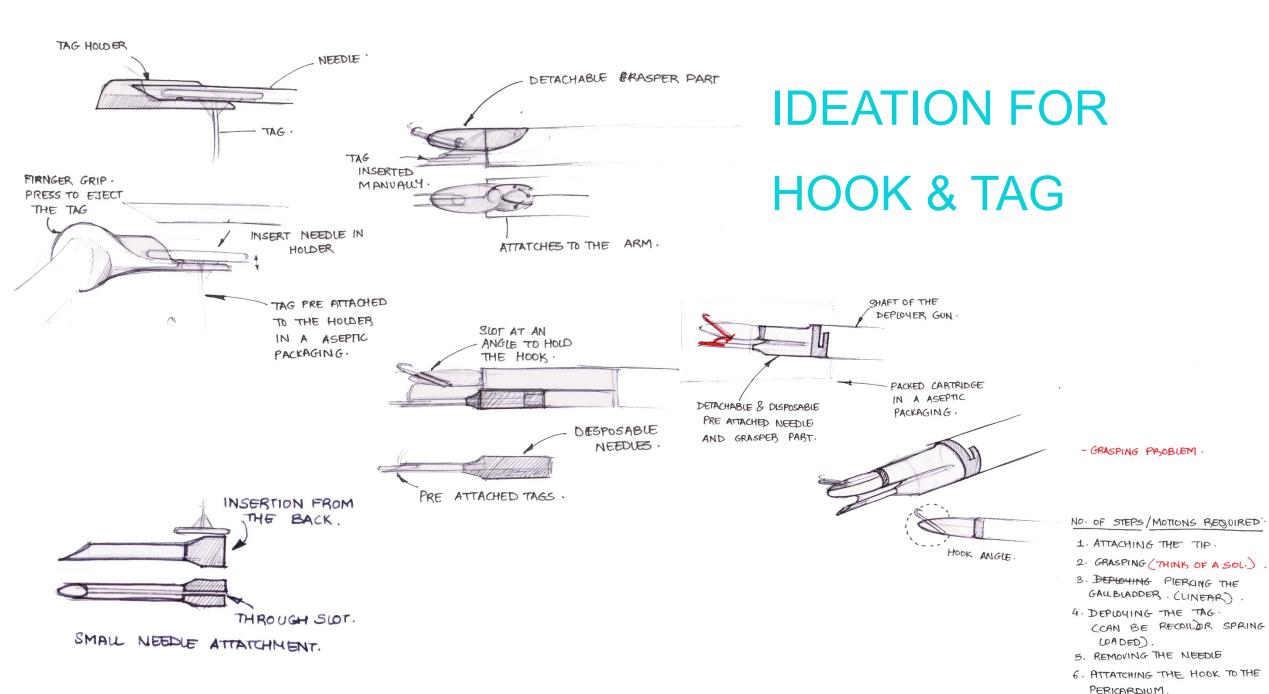


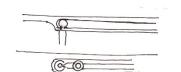


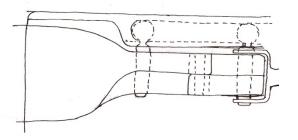
MICRO NEEDLE PADS TO GRASP THE GALL BLADDER.

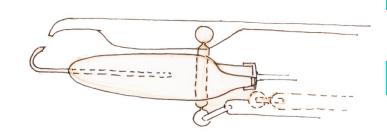


SMALL PERFORATIONS IN THE RING FOR SUCTION.

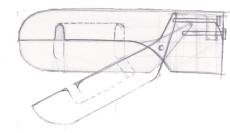




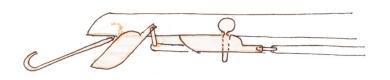




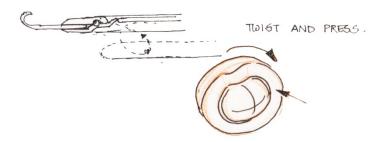
IDEATION FOR HOOK PLACEMENT



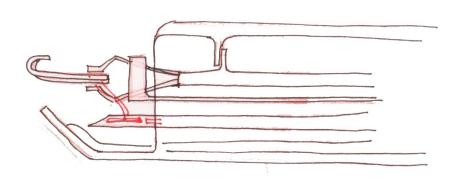


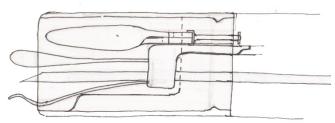


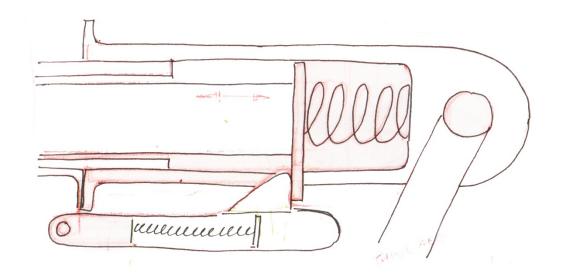




The grasper will have two sleeves that will open in succession to expose the grasper tip and to release the hook

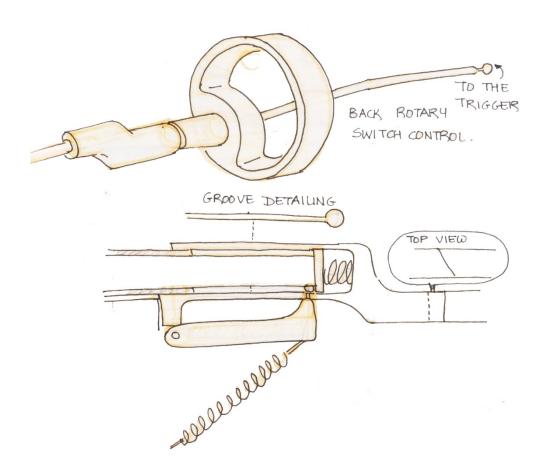


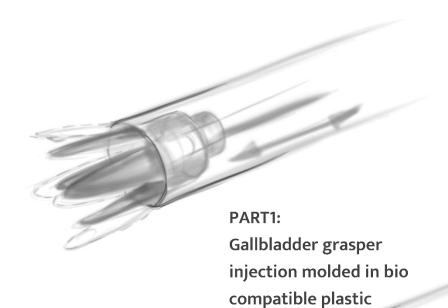




The needle and plunger require a successive movement.

IDEATION FOR NEEDLE & PLUNGER





CONCEPT 1

Linear movement for the gallbladder grasper.

Linear movement for the hook deployer
Half trigger press for the needle to pierce
Full trigger press for the deployment of the tag

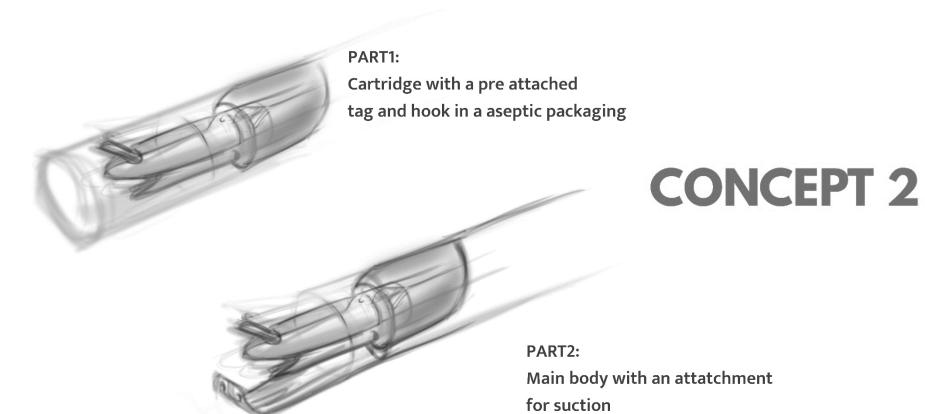
PART2:

Hook and tag preattached to a disposable tip



Two parts have to be attached.

Prepacked in a aseptics packaging



Suction generation, pneumatic
Linear movement for the hook deployer
Half trigger press for the needle to pierce
Full trigger press for the deployment of the tag

	Flower Grasper	Suction
Mechanism control	Linkages, other mechanical mediums can be used	Controlled by Suction machine or inbuilt chamber in the device
Movement required for operation	Linear	Linear
Components	Grasper, shaft, control	Suction head, tube, chamber, control
Precision	Focused precise movement	Focused movement required to locate the gallbladder
Advantages	 Easier to clean and maintain Less number of components Requires light pressure 	 Less possibility of damage as the head is made from silicone Very little pressure is required Possibility to develop similar devices Easier to operate individually
Disadvantages	 Can puncture the gallbladder The grip is not that good Requires more space Will require a grasper from port 3 to hold the liver 	Has multiple components Validation is essential for suction and to check the pressure required to hold it



Deployer testing for Suction

1.
SUCTION

2.
TAG DEPLOYMENT

NEEDLE AND PLUNGER

3.
HOOK GRASPER

TASKANALYSIS NEW CONCEPT

Piercing the gallbladder

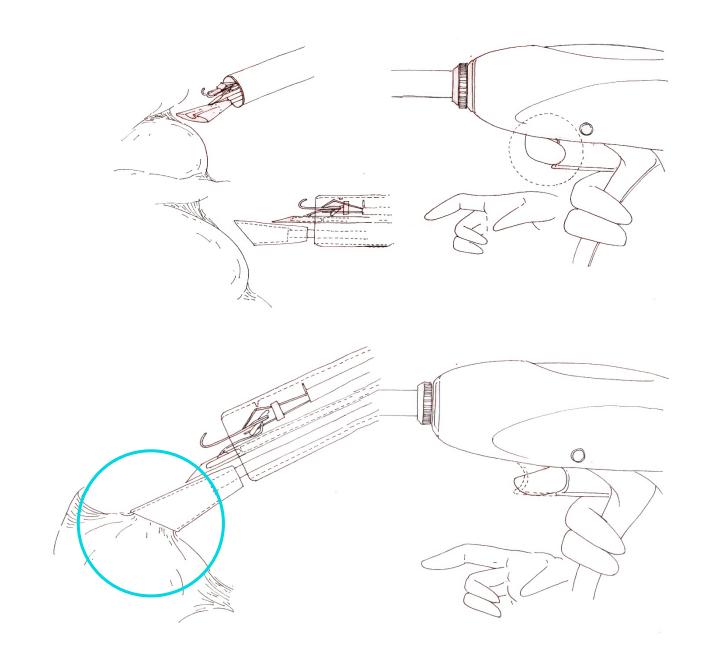
Beploying the tag

Releasing the suction

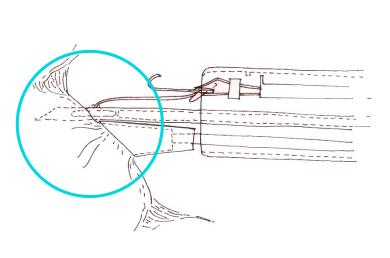
Retracting the needle and the plunger

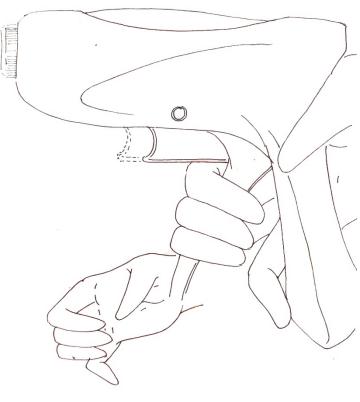
Exposing the grasper

Releasing the hook

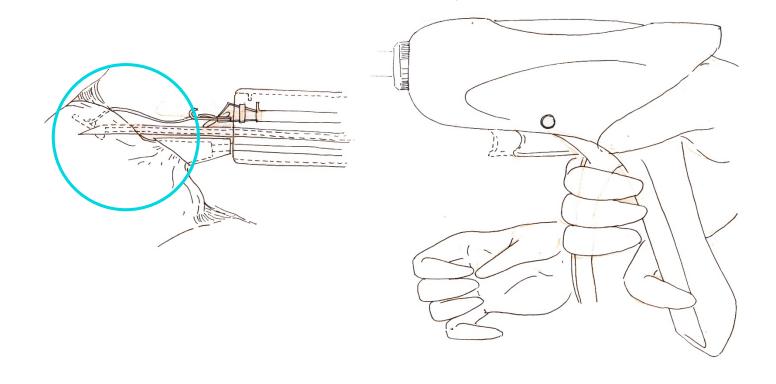


- Stabilizing the gallbladder using suction
- Piercing the gallbladder
- 3 Deploying the tag
- A. Releasing the suction
- Retracting the needle and the plunger
- Exposing the grasper
- Releasing the hook
- Retracting the grasper





- Stabilizing the gallbladder using suction
- Piercing the gallbladder
- 3. Deploying the tag
- A. Releasing the suction
- Retracting the needle
- Exposing the grasper
- Releasing the hook
- Retracting the grasper



Piercing the gallbladder

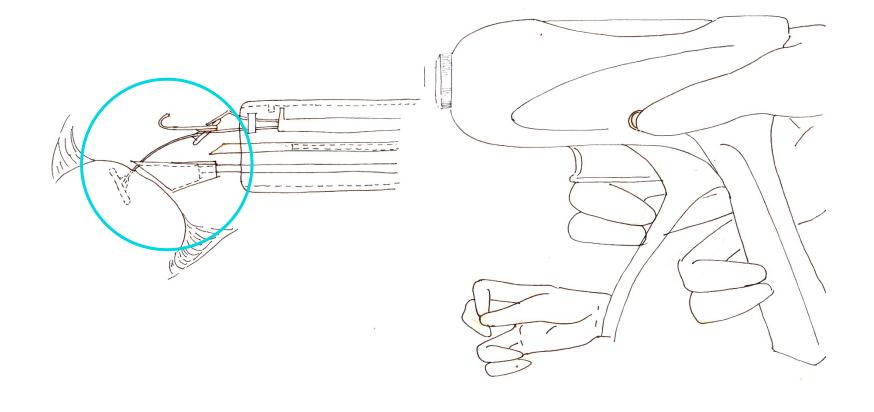
3 Deploying the tag

Releasing the suction

Retracting the needle and the plunger

Exposing the grasper

Releasing the hook



Piercing the gallbladder

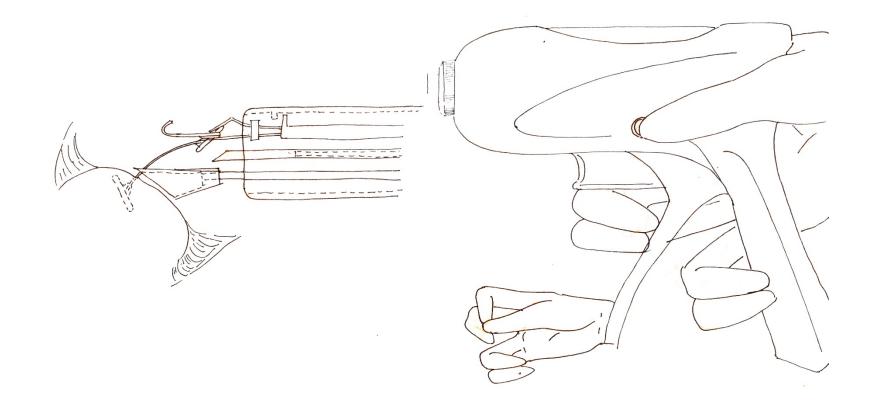
3 Deploying the tag

Releasing the suction

Retracting the needle and the plunger

Exposing the grasper

Releasing the hook



Piercing the gallbladder

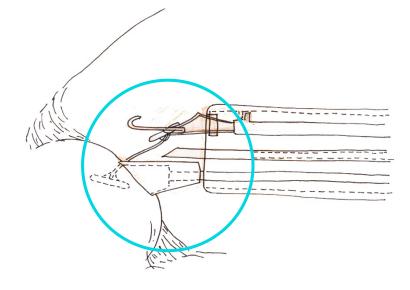
3. Deploying the tag

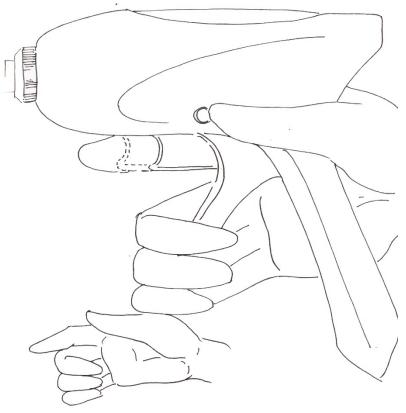
Releasing the suction

Retracting the needle

6 Exposing the grasper

Releasing the hook





Piercing the gallbladder

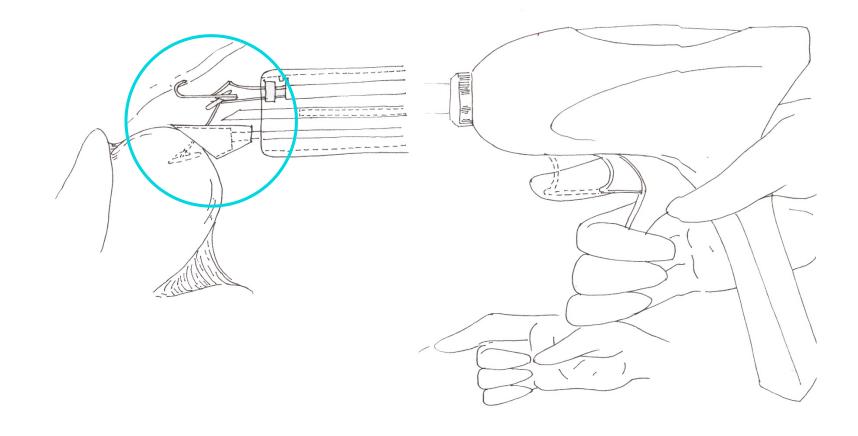
Beploying the tag

A. Releasing the suction

Retracting the needle and the plunger

Exposing the grasper

Releasing the hook



Piercing the gallbladder

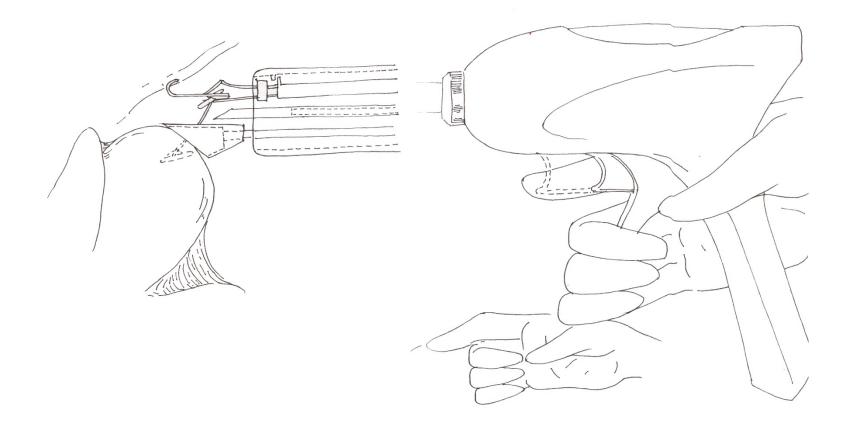
3 Deploying the tag

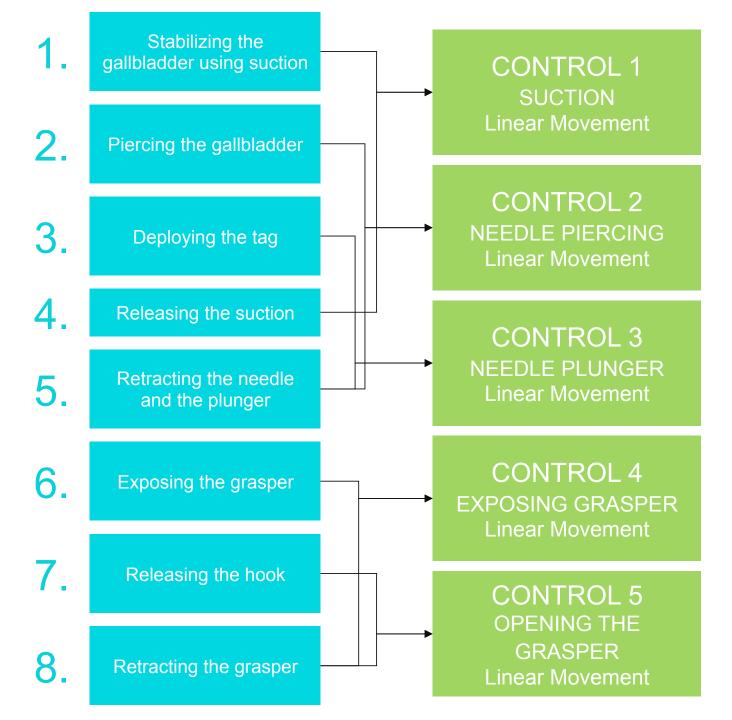
Releasing the suction

Retracting the needle and the plunger

Exposing the grasper

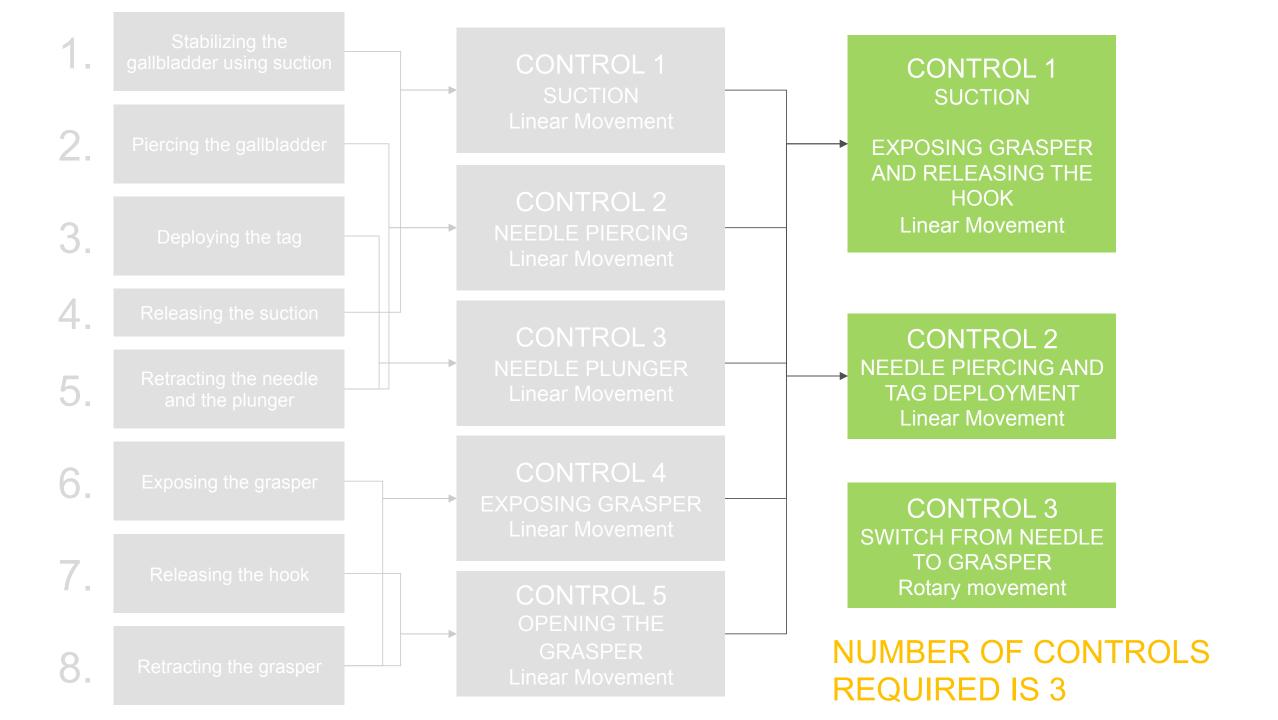
Releasing the hook



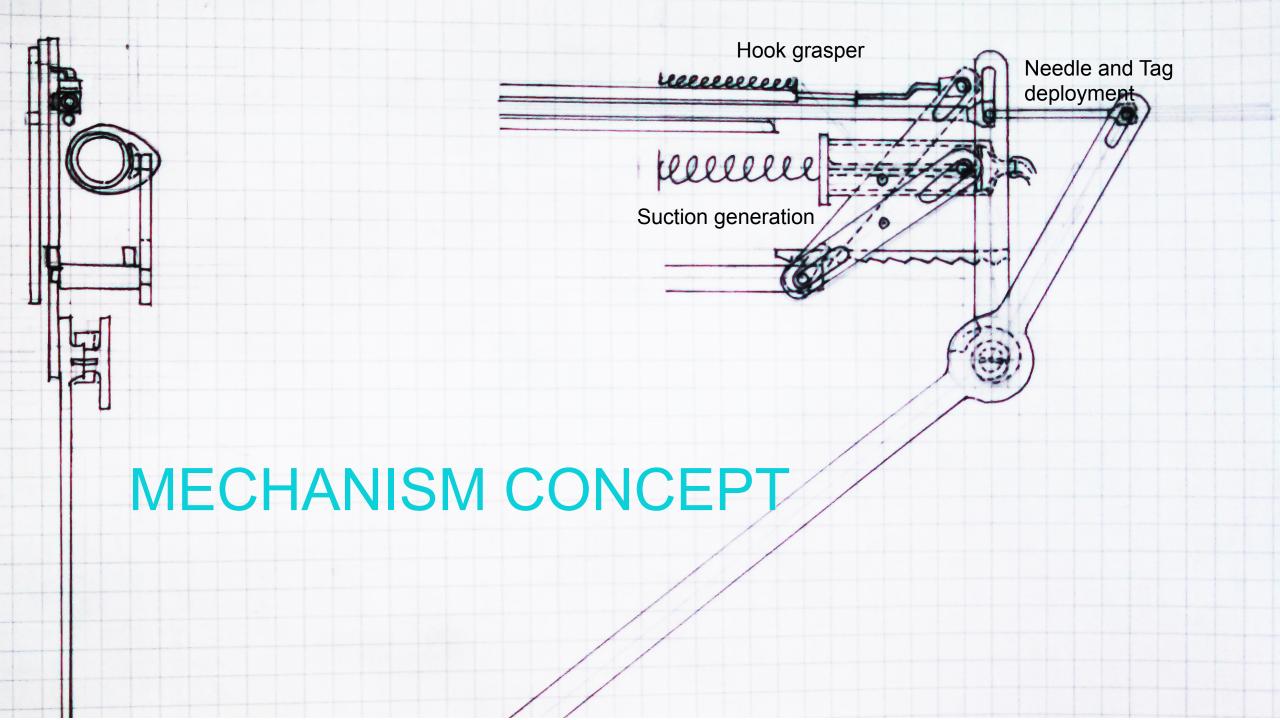


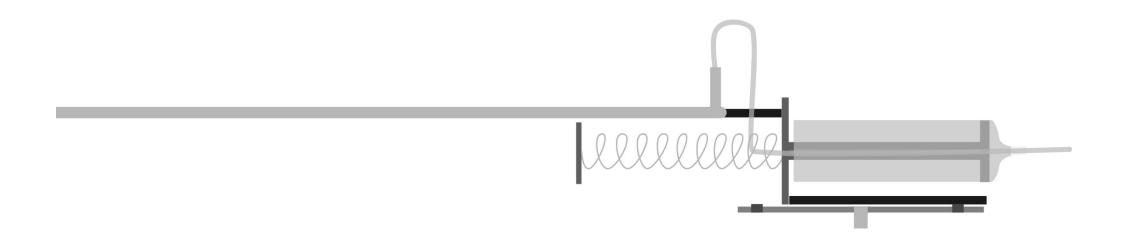
NUMBER OF CONTROLS REQUIRED IS 5.

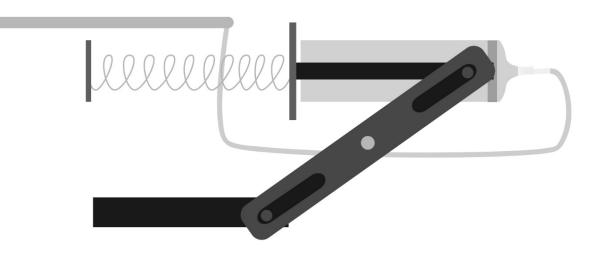
Can this be reduced?



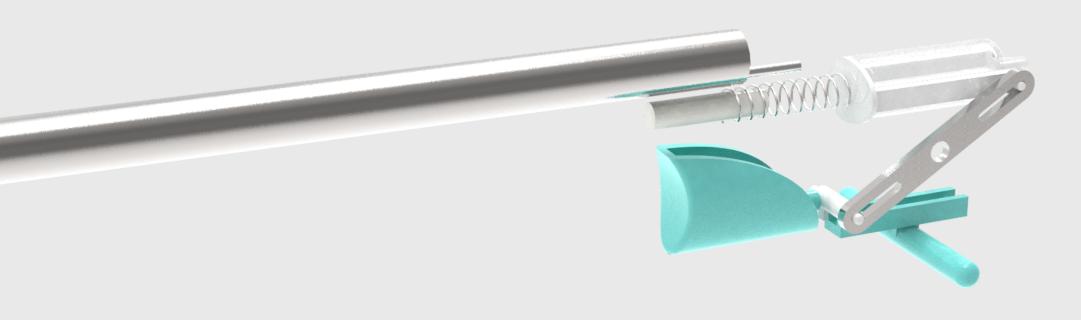
MECHANISM CONCEPT







SUCTION

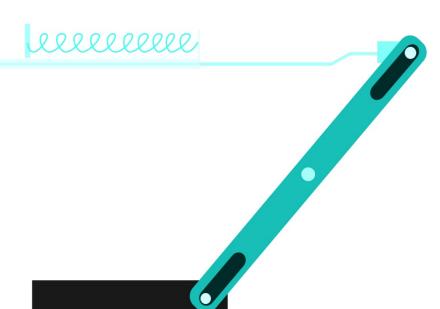


Syringe and Plunger: Polypropylene injection molded

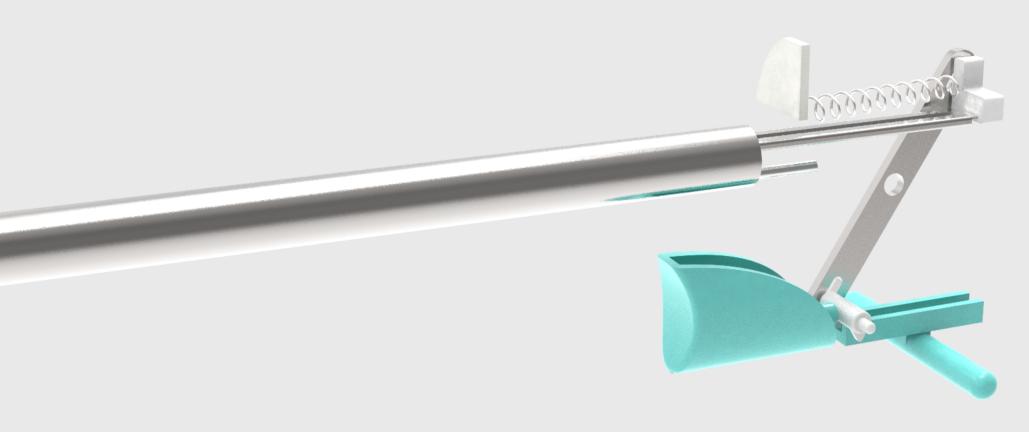
Switch: ABS, injection molded

DISPLACEMENT: 25 MM

MILLEUR



HOOK DEPLOYER



Grasper inner strips: Spring steel

Grasper outer casing: Stainless

steel 316L

Switch: ABS, injection molded

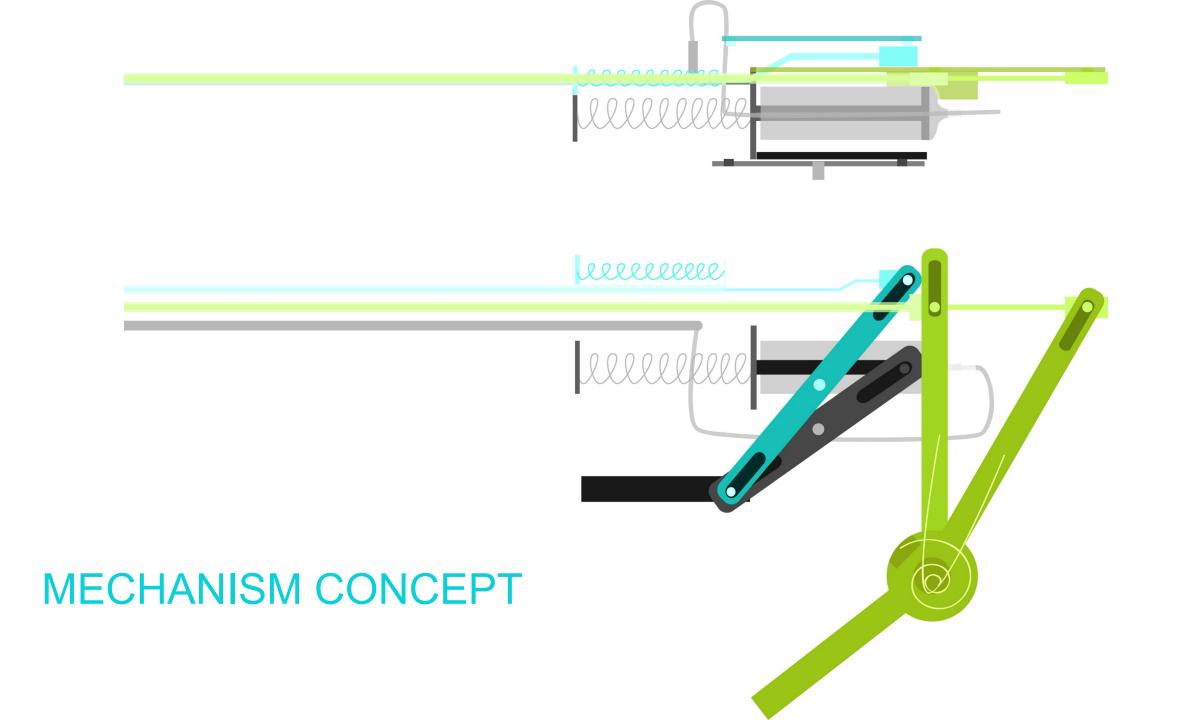
DISPLACEMENT: 20MM + 5 MM

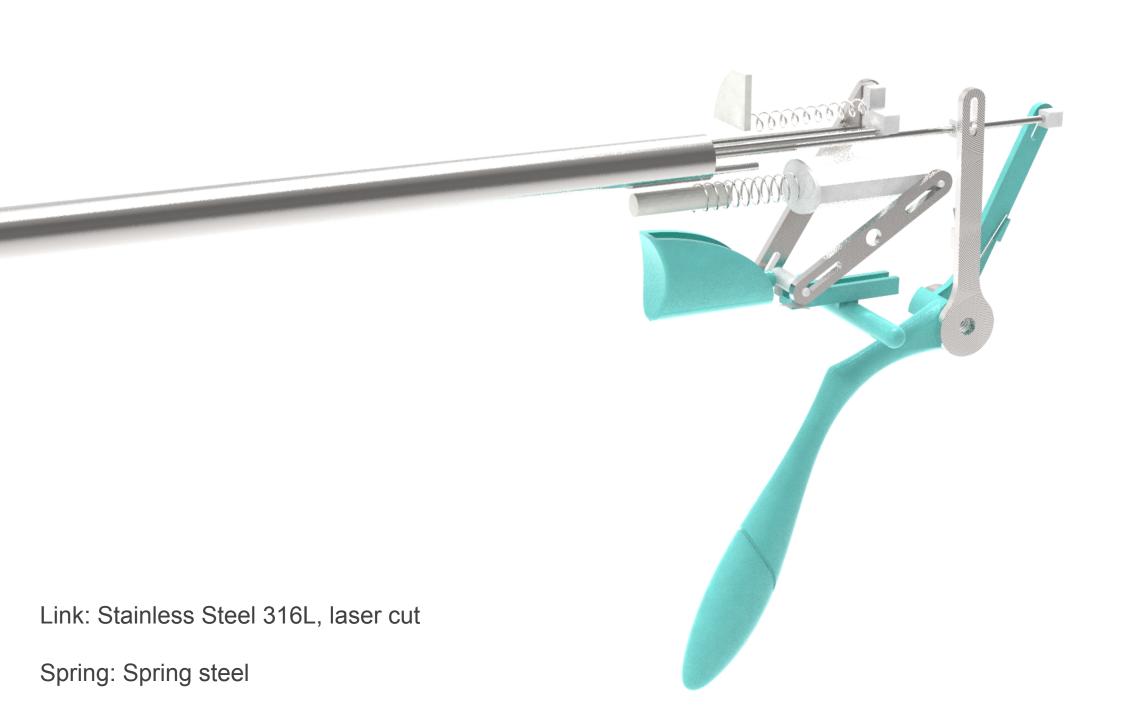




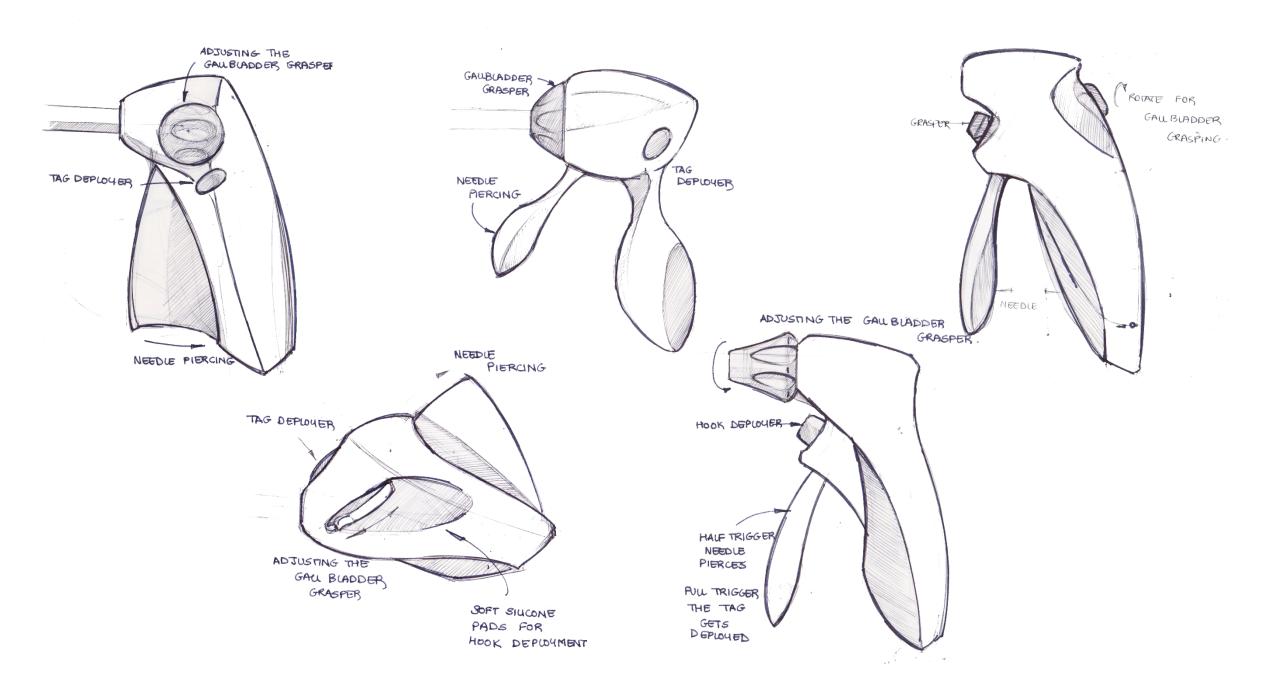
Needle and Plunger: Stainless Steel 316L

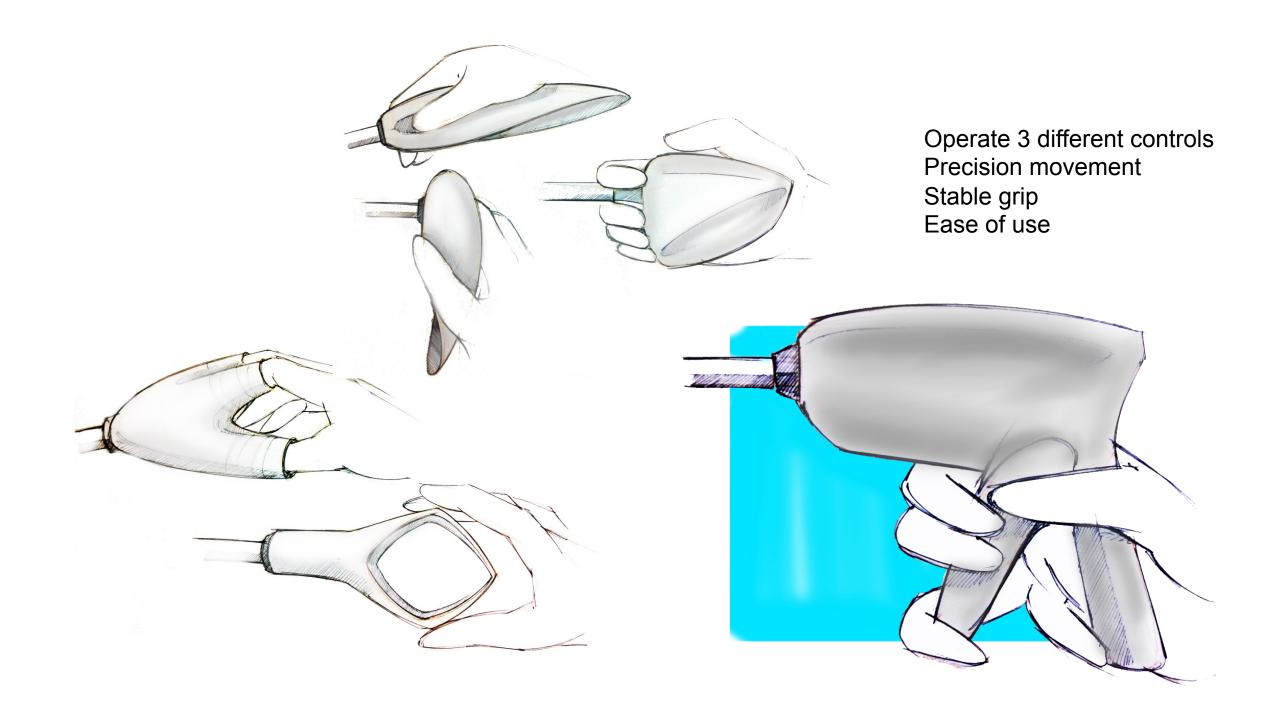
DISPLACEMENT: 20MM + 20MM





IDEATION FOR GRIP

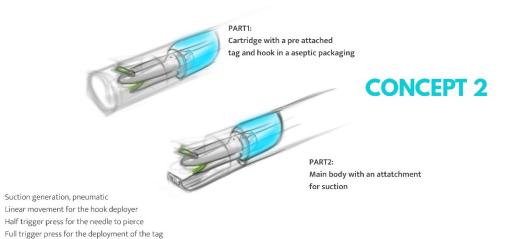




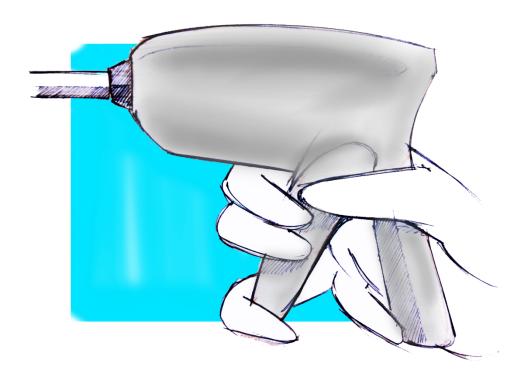








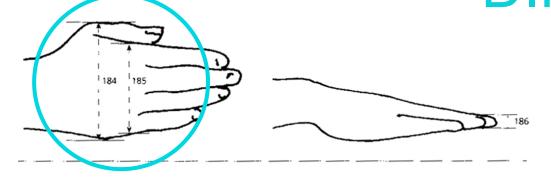


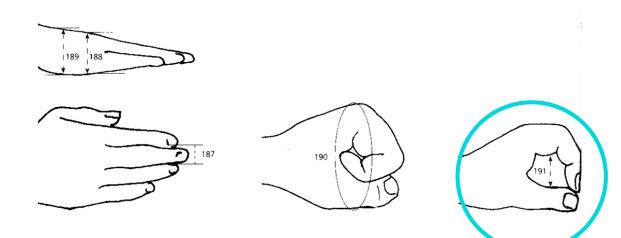


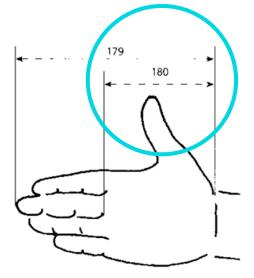
SUCTION

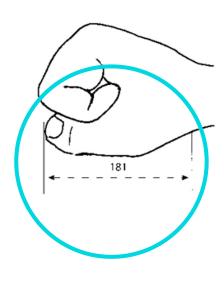
PISTOL GRIP

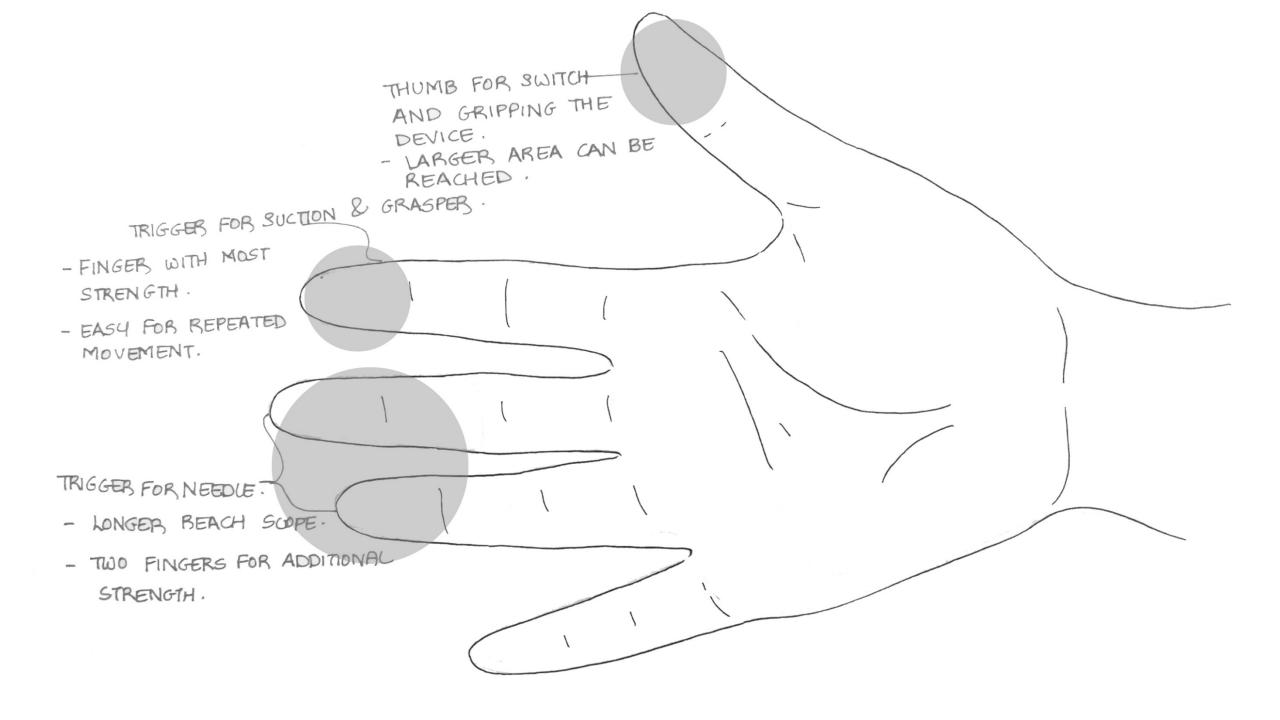
ANTRHROPOMETRIC DIMENSIONS







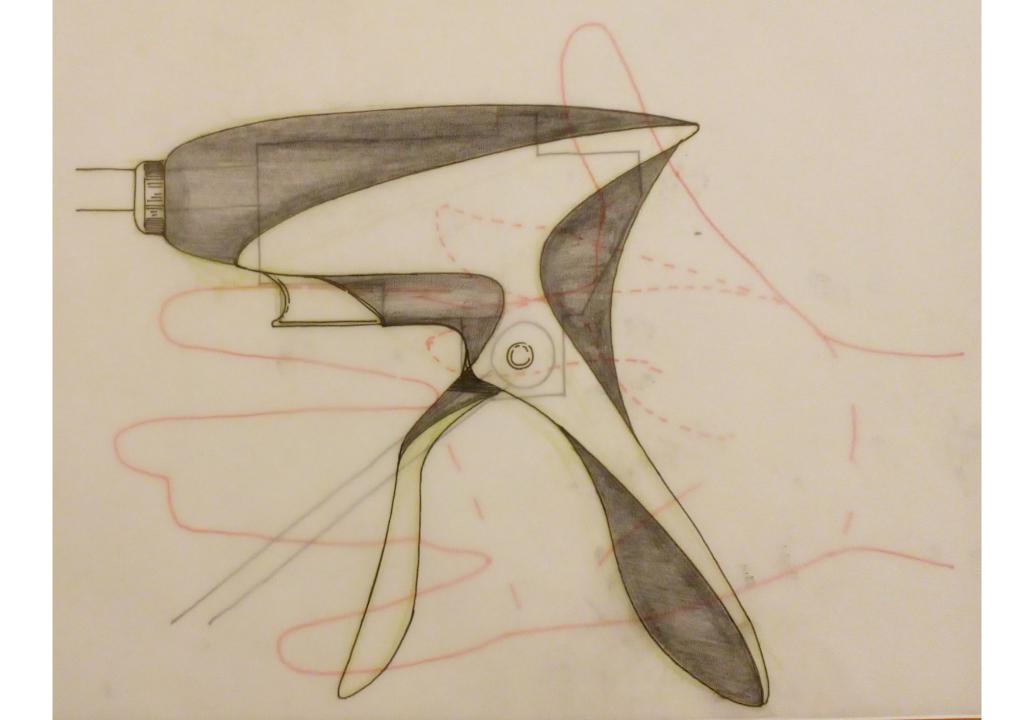


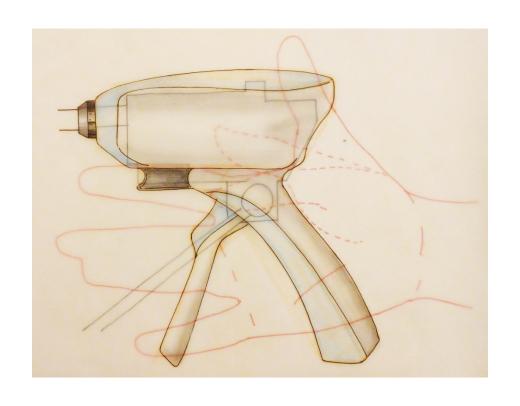


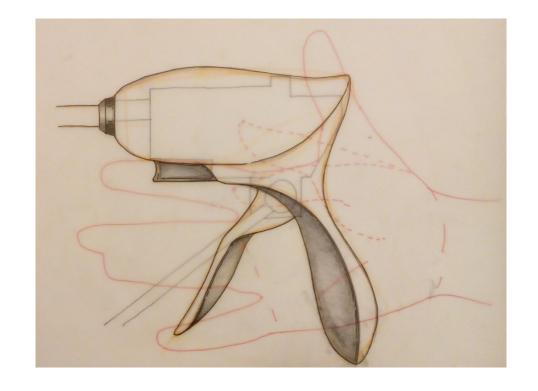


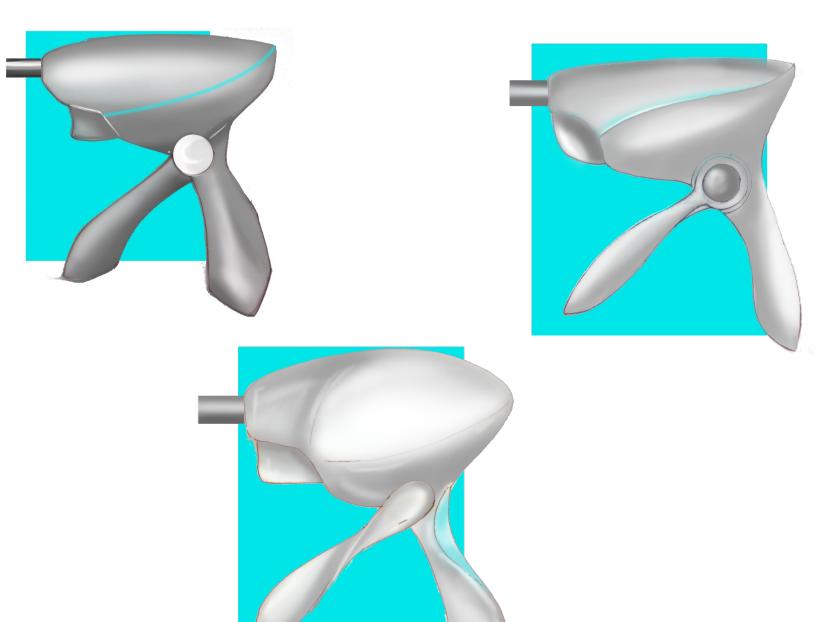


COMFOR T ORGANIC

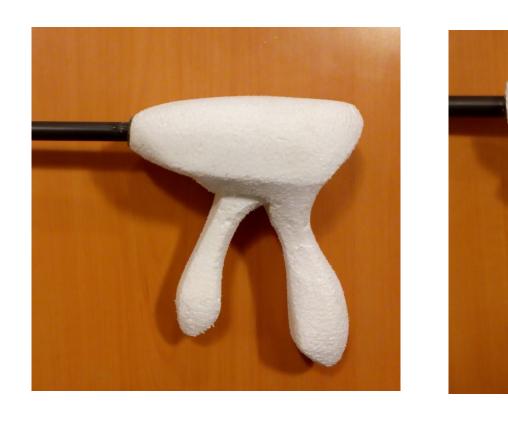








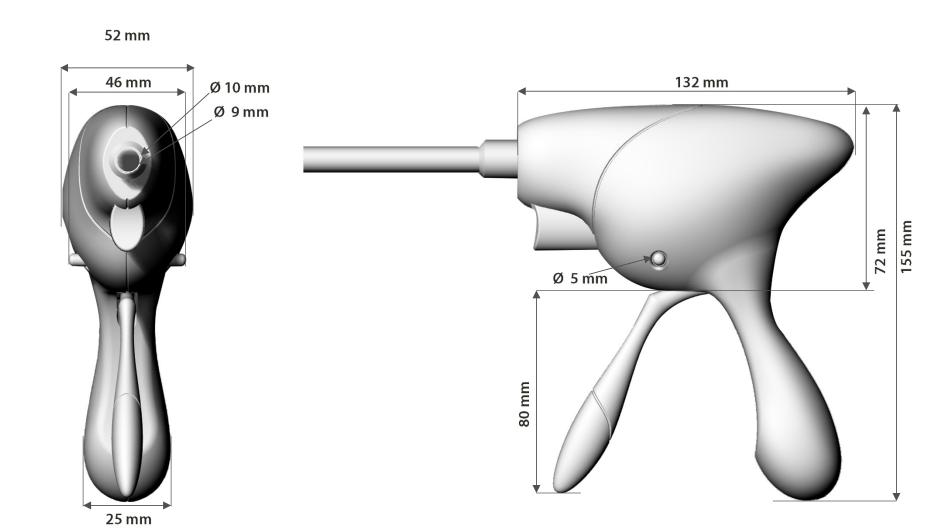


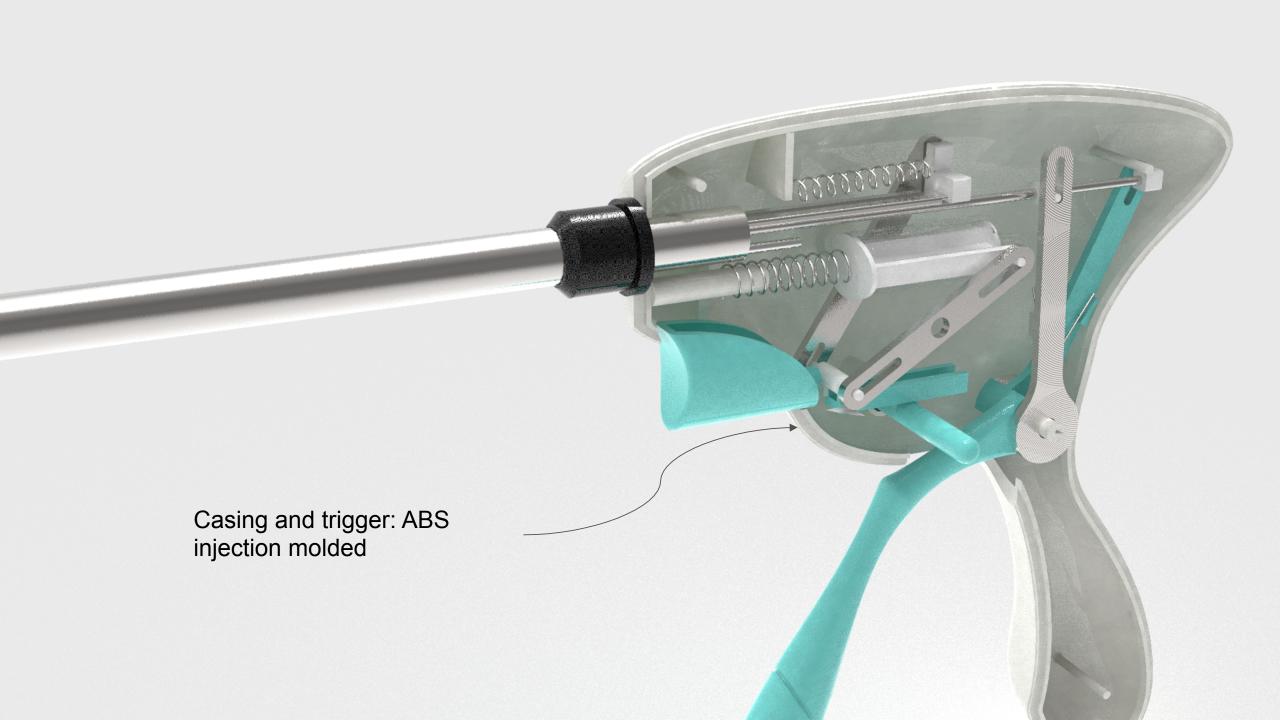


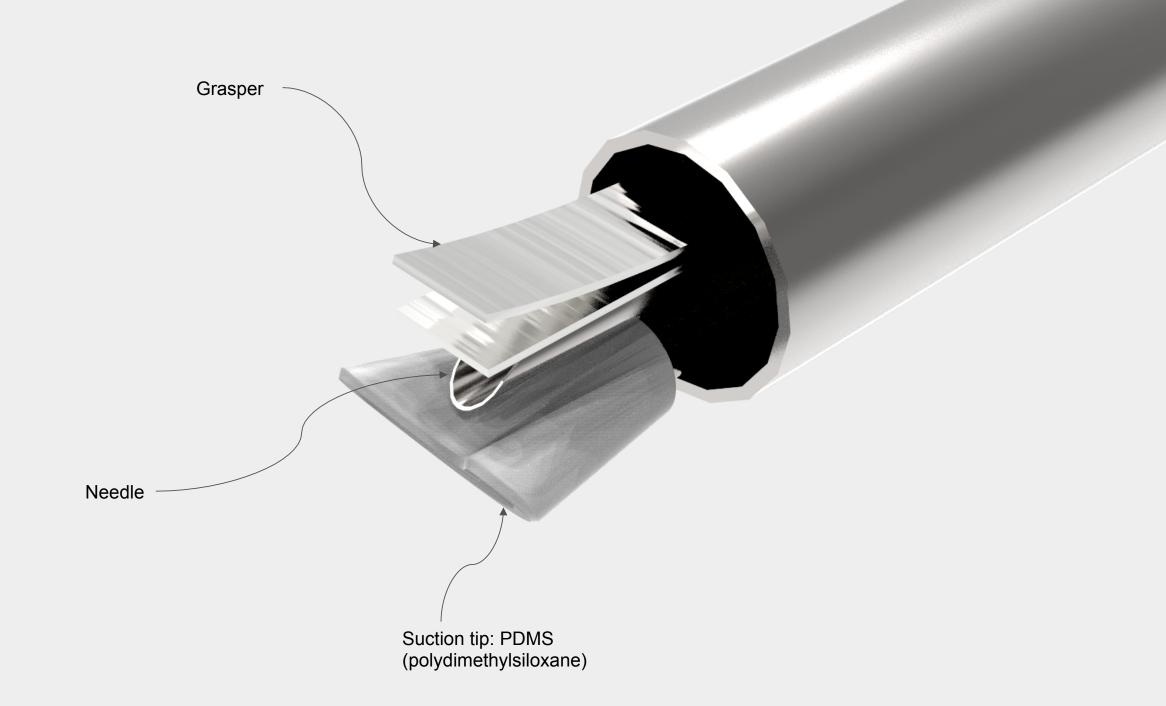












VALUE PROPOSITION PRIMARY USER

SURGEON

- Reduces incision, reduces chance of infection
- Quick installation
- Easy to prepare and saves time while installing
- Reduces human assistance

VALUE PROPOSITION PRIMARY USER

PATIENT

- Reduces one incision
- Reduces surgery cost

VALUE PROPOSITION SECONDARY USER

HOSPITAL MANAGEMENT

- Reduces cost
- Device is reusable and thus the recurring cost is of the endo retractor
- Increases productivity
- Aid for single port surgeries thus encouraging research and development in surgical techniques.

FUTURE SCOPE

 Design of a tray which will facilitate storage and gripping of the device during surgery.

THANK YOU