



ADJUSTMENT GUIDE

24-48 hours Post-Surgical Adjustment





24-48 hour after the surgery, (depending on patient's surgical recovery status) the sling level will be adjusted up to the minimum urethral support level to reach continence and avoid retention.

1- Explain the patient the procedure we will follow to reach continence.

2- Remove the gauzes that were placed over the manipulator to protect it after surgery.



3- Inject 250-300 cc of saline into the bladder (just up to the patient's first voiding sensation).



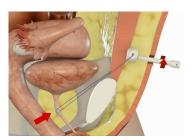
7- Repeat the step 6 until the patient is continent.



4- Withdraw the urethral catheter and ask the patient to stand up over a floor pad.



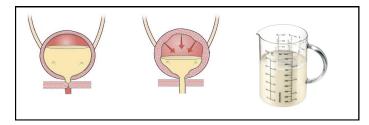
5- Ask the patient to perform Valsalva maneuvers. If leaking, turn the manipulator three complete clockwise turns and ask the patient to perform the Valsava maneuvers again.



6- If still leaking apply three manipulator clockwise complete turns and ask the patient to perform Valsalva maneuvers again.

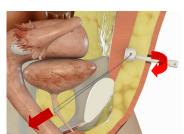


8- When the patient is continent, we know that three complete turns before she was incontinent (so the sling is at the minimum uretral support level for continence, and no more).



9- Ask the patient to go to the toilet for voiding and measure the residual.

10- If residual is less than 100-150cc., disconnect the manipulator and discharge the patient (go to point 13).



11- If residual is more than 150cc., 12- Restart the decrease the sling Support level by protocol from minimum 10 counterclockwise manipulator complete turns, while helping the urethral descend by a rigid urethral catheter.



point 3.





13- To disconnect the manipulator, insert the disconnector into the manipulator (the two dot marks will be aligned). Turn the disconnector 1/4 to align the disconnector dot mark with the manipulator line mark, and pull the manipulator out of the skin incision.

14– Close the minimal abdominal incision by Steri-Strips or stitches.



The Continence Company