

ECHOGENIC & HYBRID NEEDLES

for regional anesthesia



secma
medical innovation

SECMA EVOLUTION® ULTRASOUND NEEDLES FOR REGIONAL

The only ultrasound needle you will ever use....



In regional anesthesia, ultrasound-guided technique is widely used. However, even the best ultrasound scanner cannot always show the optimal image when using low echogenicity needles and cannulas. Here, the Evolution® needle will guarantee an unrivaled quality of the ultrasound image.

The needle is evident on the ultrasound image

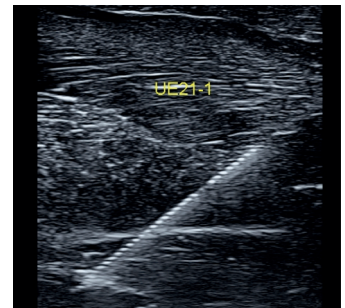
The adapted “dimples” on the surface of the needle significantly improve the result of the ultrasound image - especially on the tip of the needle. This technology tells the user the exact position of the needle tip, thus reducing the risk of nerve damage in the process. The echogenic dimples reflect the sound waves back to the transducer, making the needle clearly visible under ultrasound. The dimples encircle the entire tip of the needle so that all sides of the tip appear bright on the ultrasound image.

Atraumatic to the patient’s tissue

The unique and patented technology on the surface of the needle is shaped like a golf ball, which is very atraumatic to the tissue. This provides an optimal surface, which improves control.

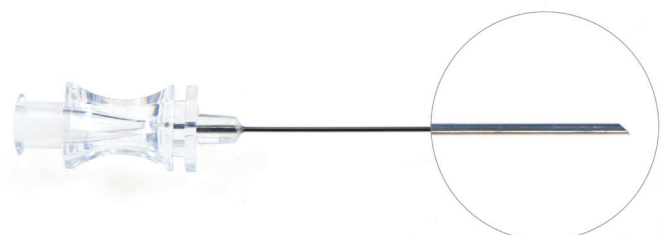
Imagine the surface of a golf ball..

The needles are designed specifically for research into muscular nerve damage. You can see them clearly on the ultrasound image thanks to an improved surface (like a golf ball), of steel tubes and a specially designed 30° back cut bevel.



With the Evolution® needle you are in total control!

Choosing the wrong needle can cause permanent damage to the nerve. You don't need to use force to penetrate due to the ingenious back cutout design. It is easy to navigate the needle due to the smooth surface and the patented 360° design, which ensures that you always have the optimal image



SECMA EVOLUTION® ULTRASOUND NEEDLES & CATHETER FOR REGIONAL ANESTHESIA



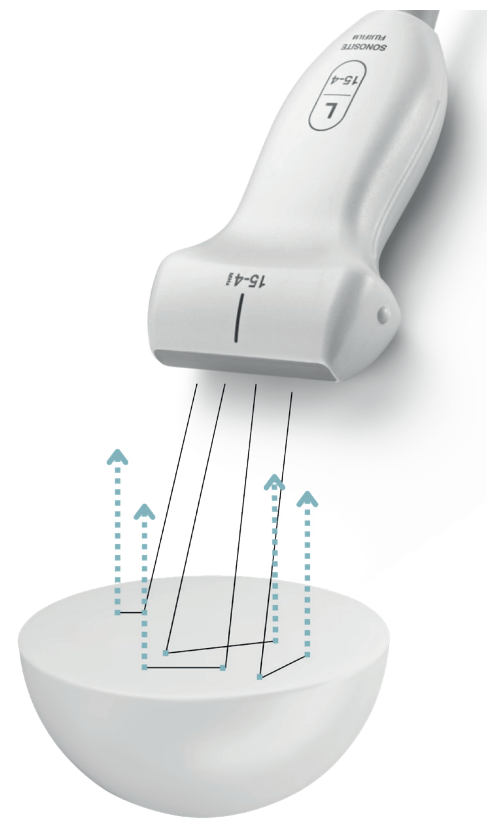
* 10 pieces per box

Item no.	Description	Pieces
USB025-24	Secma echogenic needle, Evolution®, ultrasound, 30° back-cut , 24Gx25 mm.	10
USB035-24	Secma echogenic needle, Evolution®, ultrasound, 30° back-cut , 24Gx35 mm.	10
USB050-24	Secma echogenic needle, Evolution®, ultrasound, 30° back-cut , 24Gx50 mm.	10
USB050-22	Secma echogenic needle, Evolution®, ultrasound, 30° back-cut , 22Gx50 mm.	10
USB070-22	Secma echogenic needle, Evolution®, ultrasound, 30° back-cut , 22Gx70 mm.	10
USB080-22	Secma echogenic needle, Evolution®, ultrasound, 30° back-cut , 22Gx80 mm.	10
USB090-21	Secma echogenic needle, Evolution®, ultrasound, 30° back-cut , 21Gx90 mm.	10
USB100-21	Secma echogenic needle, Evolution®, ultrasound, 30° back-cut , 21Gx100 mm.	10
USB120-21	Secma echogenic needle, Evolution®, ultrasound, 30° back-cut , 21Gx120 mm.	10
USB150-21	Secma echogenic needle, Evolution®, ultrasound, 30° back-cut , 21Gx150 mm.	10
EHB035-22	Secma echogenic hybrid needle, Evolution®, ultrasound, 22Gx35 mm.	10
EHB055-22	Secma echogenic hybrid needle, Evolution®, ultrasound, 22Gx55 mm.	10
EHB095-21	Secma echogenic hybrid needle, Evolution®, ultrasound, 21Gx95 mm.	10
EHB125-21	Secma echogenic hybrid needle, Evolution®, ultrasound, 21Gx125 mm.	10
EHB150-21	Secma echogenic hybrid needle, Evolution®, ultrasound, 21Gx150 mm.	10
26951-18	Secma echogenic catheter set, Echo PolyPlex®, US 50, 18Gx50 mm.	10
26991-18	Secma echogenic catheter set, Echo PolyPlex®, US 90, 18Gx90 mm.	10



WITH THE EVOLUTION NEEDLE YOU WILL GET..

- Developed in collaboration with anesthetists and ultrasound specialists.
- Unique surface (golf ball technology) on the needle that makes the needle more visible during ultrasound examination and with Sonosites Steep Needle Profiling function it will give optimal results.
- The entire needle has centimeter markings.
- Complete range of needles
- 30° (back-cut) needle for best penetration. (available in 20° (back-cut))
- The design of the Evolution needle means that the needle is very stable and that there is a reduced risk of it bending.



“ Testimonial

The future of ultrasound guided regional anesthesia **will demand needles that will enable blocks to be delivered to awake patients prior to surgery without discomfort**, for deep fascial plane blocks that penetrate the skin and muscles effortlessly, needles that are non-traumatic by design, and **needles that can also be easily visualized when using low frequency curved array transducers.**

This is where the quest of excellence for ultrasound guided regional anesthesia on an international scale is moving towards



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