

# LYMPH NODE LOCATOR

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## LYMPH NODE LOCATOR INSTRUCTION MANUAL

Steps to process tissue in the LNL.

- Wear gloves and eye protection while loading the device and while processing tissue.
- Start by using manual palpation to remove the larger LNs from the gross specimen. This is to prevent double counting of lymph nodes and double counting possible metastases.
- Follow fixation protocol (incise surface, cut strips, overnight in large volume of Carnoy's, acetone, or 95% alcohol).
- Ensure distal cap is in place before loading and processing.
- Remove cover on top of specimen chamber (pull back and up)
- Remove threaded drive shaft with the round handle. Start by releasing the holder. To remove the holder, pull out and slightly rotate the two round knobs (rotation locks in the open position) . Place the holder on the bench.
- Take tissue out of Carnoy's, acetone, or 95% alcohol, squeeze firmly with hands to remove excess fluid
- Put strips of tissue into the specimen chamber
- Force tissue into the distal, closed, part of the specimen chamber (forcefully pack with fingers or thumb)
- Fill remainder of specimen chamber (continue to push tissue towards distal end with fingers)
- When the chamber is full, use the unlocked drive shaft to force tissue forward before replacing holder
- Replace drive shaft holder. Put the holder in place on top of the threaded shaft. Then rotate the two round knobs and a spring will pull the pins into the closed position. **NOTE:** the drive shaft holder is small but important for device function. Be sure to keep track of it at all times, and especially during device cleaning.
- Put the loading chamber top in place ( down and forward)
- Rotate the round handle to begin tissue compression (use the small protruding knob)
- Observe the fluid/fat flowing from the holes of the specimen chamber
- When compression becomes difficult, PAUSE, then, using finger grips on the large round handle, continue to rotate (put fingers in depressed areas on periphery of hand grip and turn)

- Stop after rotation of the handle becomes difficult and no more compression is occurring (fat/ fluid stops flowing through the the loading chamber holes).
- Reverse the drive shaft handle a few turns to decrease pressure on distal cap
- Remove the distal cap and slide the cutting attachment in place in its track.
- Turn the drive shaft handle to force the tissue block from the specimen chamber into the cutting chamber
- Stop turning when all of the tissue block is in the cutting chamber and the metal tip of drive shaft can be seen in the proximal cutting chamber
- Leave the metal rip of the drive shaft in place in the cutting chamber to support the proximal end of the tissue cube.
- Put the short distal place holder blade (the stub) in a slot adjacent to the tissue block to prevent movement of the distal tissue cube when cutting
- Cut the block through each slot using the specially designed knife with a trimming blade.
- When all cutting is done, reverse the drive shaft back into the specimen chamber (in preparation of removing the cutting chamber)
- Lift up to take the cutting chamber off of the loading chamber
- Insert the lifting blade (bevel side up) under the serially sectioned tissue block through the open end of the cutting attachment and lift up to remove all of the tissue block.
- Lightly grip the cut tissue block proximal and distal ends with fingers to keep block intact; place cut tissue cube on the cutting table
- Start at one end of cut block and sequentially peel off cut sections. Put the cut sections into individual tissue cassettes in sequence using the same orientation for all pieces.
- Place closed cassettes in formalin as soon as possible ( prevents excessive drying).

### HOW TO CLEAN THE LNL AFTER EACH USE

- Clean the Lymph Node Locator loading chamber and cutting chamber with briskly running water and a brush with stiff bristles (a scrub brush or a dish washing brush).
- Focus on all holes in the **loading chamber** and remove all tissue fragments (to prevent carryover). In the rare event a grossly visible tissue fragment remains, use an applicator stick to remove it.
- For the **cutting chamber** focus on the slots and remove all tissue fragments with the brush (to prevent carryover).

## LYMPH NODE LOCATOR PARTS NAMES AND IDENTIFICATION

