Disposable Circumcision Anastomat
Compose: It is mainly composed of host shell, mover, flexible handgrip, nail-cabin protective cap, gasket, circular blade, end cutting body, suturing nail, nail seat, circular anvil, concave seat and tail location adjusting knob.

Table 1:

<table>
<thead>
<tr>
<th>No.</th>
<th>Name of the part</th>
<th>No.</th>
<th>Name of the part</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>concave seat</td>
<td>10</td>
<td>connect part</td>
</tr>
<tr>
<td>2</td>
<td>nail seat</td>
<td>11</td>
<td>adjusting knob</td>
</tr>
<tr>
<td>3</td>
<td>circular anvil</td>
<td>12</td>
<td>safety pin</td>
</tr>
<tr>
<td>4</td>
<td>nail-cabin protective cap</td>
<td>13</td>
<td>fixed frame</td>
</tr>
<tr>
<td>5</td>
<td>nail-cabin</td>
<td>14</td>
<td>mover</td>
</tr>
<tr>
<td>6</td>
<td>suturing nail</td>
<td>15</td>
<td>handle support</td>
</tr>
<tr>
<td>7</td>
<td>host shell</td>
<td>16</td>
<td>spring</td>
</tr>
<tr>
<td>8</td>
<td>screw</td>
<td>17</td>
<td>the end cutting body</td>
</tr>
<tr>
<td>9</td>
<td>handle</td>
<td>18</td>
<td>circular blade</td>
</tr>
</tbody>
</table>
Application: Disposable Circumcision Anastomot is applied to circumcision suture of male genital organs.

Models: There are a total of seven models: ZSR-DCA-34, ZSR-DCA-30A, ZSR-DCA-26, ZSR-DCA-22, ZSR-DCA-18, ZSR-DCA-14 and ZSR-DCA-10. And the product is also with measuring scale.
**Principle:** the operating principle of anastomat is similar with that of stapler. Through a mechanical driving device, anastomat will be put into a module in advance. After passing through two layers of tissues, the suturing nail of single-use prepuce cutting anastomat will be blocked by the front pin-resisting seat and bent inward to make two layers of tissues nailed together. The suturing nail is made of 316L stainless steel; it has a relatively good biocompatibility. As suturing nails are lined up with equal distance and suturing tightness is appropriate, thus, the defects that the manual suture is too sparse or too dense and that the ligation is too tight or too loose can be avoided, which not only guarantees the good healing of tissues, but also largely shortens the operation time.
Operation Steps:

1. Before operation is performed, first measure the outer diameter of glans with a measuring scale, then choose the suitable model of devices to do operation;

2. Open the outer packing box of instruments, take out the disposable circumcision anastomat, then check whether the package is intact, whether the product is within service life, and whether the anastomat’s model is consistent with that marked on the outer packing box, and carefully read the operating manual;

3. Prepare the materials before operation, routine skin preparation, disinfecting, paving a towel, local anesthesia

4. Turn over the prepuce, perform thorough disinfection on glans and coronary sulcus;

5. If prepuce adhesion occurs, peel off the adhesion. In case of phimosis, the prepuce opening should be enlarged;

6. Evenly locate three or four hemostatic forceps and clamp the internal and external preputial moving edge, anticlockwise adjust the location adjusting knob at the end of prepuce cutting anastomat, and gently take out the concave seat, then put it into the prepuce, cover on the glans, and make the concave seat properly tilt and maintain its edge parallel with the coronary sulcus, fix the prepuce opening onto the screw with the rubber band or suture line, then make sure if the place to be cut is right or not;

7. Gently remove the nail-cabin protective cap and slowly insert the screw of well-fixed concave seat into the centre hole at the main body of anastomat, press the prenumul position with a finger. Then, clockwise screw the location adjusting knob to make the plane at the end of screw parallel with the plane at the back of location adjusting knob, or screw the knob as per clinical experiences of surgeon.
Operation Steps:

8. Remove the safety pin, hold the main body shell of anastomat with the left hand, and hold the flexible handgrip with right hand. Slowly and horizontally hold the flexible handgrip with appropriate strength till the end of well-fixed position and trigger the anastomat for about 10 seconds or so, do not lift the prepuce excessively during cutting, so as to cut and suture the prepuce in natural state.

9. Loosen the flexible handgrip, anticlockwise and slowly unscrew the location adjusting knob, slightly unscrew and back out the anastomat as well as the cut prepuce, and observe whether the prepuce has been cut completely. If less prepuce hasn’t been cut off, cut it with a scissor. After removing the anastomat, wrap the wound with a dry gauze for hemostasis by compression for 2-3 minutes. Then, cut the gaskets with a scissor at the direction of point 2, 4, 8 and 10 (the prenum positions can not be cut) to prevent edema in erection. Check the wound again, if there is less hemorrhage, do not need any special treatment, can wrap the wound directly, for if the punctate hemorrhage occurs, further suture the wound for hemostasis.

10. When bandaging the wound, firstly wrap the wound with a petrolatum gauze, in case of no petrolatum gauze, wet the gauze with iodine, wrap the wound with a dry gauze from distal end to root, then dress it with an self-adhered elastic bandage. It is suggested to dress it in two layers, loose outside and tight inside. In case of no self-adhered elastic bandage, please suture the outer dressing well to avoid loosening in a short time.
Postoperative Cares and Cautions

Free activities are permitted postoperative, but strenuous exercise must be avoided.

- Slight pain is normal after anesthesia effect disappears. Generally, the pain will be greatly relieved 2-3 hours postoperative; if you feel intense pain after 3 hours, orally take analgesics to relieve pain;

- If the tight dressing makes the urination difficult, the patients can slightly loosen the elastic bandage 3 hours after operation. The dressing should not be contaminated, otherwise, timely treatment should be made, such as dressing change.

- 3 days later, patients can open the bandage for dressing change, if no apparent bleeding or hematoma, disinfect the wound with iodine, more than three time each day, slightly dress the wound with a dry gauze after disinfecting and cleaning each time, to prevent discomfts even edema resulted from friction between glans and penile prenulum position and underpant.

- Within 7 days, wear a relatively tight underpant, with glans facing upwards, reduce penis shaking as far as possible.

- Shower is permitted after a week, keep the wound dry and disinfect the wound with iodine after shower. If the glans is too sensitive, simply wrap it with a dry gauze, otherwise, it is not necessary to wrap it.

- Strenuous exercise is forbidden within one month, sexual life is forbidden within 50 days.

- Generally, the suturing nails will fall off automatically one week after operation, most will fall off within 10-15 days, less after 15 days, rare after 4 week