Single Balloon Enteroscope System
There’s only ‘one’ answer to your requirements: the Single Balloon System from Olympus

Despite the rapid technological advances of the 21st century, enteroscopy is still more difficult to take advantage of than upper gastrointestinal endoscopy or colonoscopy. Now, thanks to our groundbreaking Single Balloon System, Olympus has created a simple yet efficient enteroscopic system that redefines the nature of enteroscopy. The new EnteroPro maintains Olympus’s signature high image quality, while offering breakthrough capabilities in terms of operability and functionality that shed new light on a region once considered the “dark continent” of the human body.

- Easy operation at every step of the way from setup to observation and treatment
- High image quality and improved treatment performance achieved through the use of Olympus’s latest technology

Simple setup
Setting up the Single Balloon Enteroscope System is a snap so getting ready for an examination is never a bother. All you have to do is moisten the lining of the sliding tube connected to the balloon control unit with water and pass the scope through.

Simple operation
Since the Single Balloon Enteroscope System has only a single balloon, no complex operation is required. Just press the button on the compact remote control unit as required to manipulate the inflation and deflation of the balloon.
Single Balloon Enteroscope System

Patient-friendly latex-free design

To achieve a hypoallergenic, latex-free design, all components that comprise the overtube of the Single Balloon Enteroscope System – from the tube shaft to the balloon and tube tip – are made of silicone rubber. In addition, a hydrophilic lubricant coating has been applied to the lining of the overtube. This provides excellent lubrication between the scope and overtube, effectively supporting insertion into the deep part of the small intestine.

Compatible with Narrow Band Imaging and a wide range of video systems

The SIF-Q180 videoenteroscope comes with a high-resolution CCD that has built-in NBI compatibility when used connected to EXERA II videosystems. Yet it can also be used with EXERA I (CV-160) and even EVIS-140 legacy systems.
Complete functionality and exceptional operability have been achieved

High-performance scope that combines high-resolution image quality with excellent manoeuvrability

**SIF-Q180**

Superb imaging performance delivered by a high-resolution CCD

A high-resolution CCD chip incorporated in the distal end of the SIF-Q180 provides the high-quality images you need for accurate observation. Moreover, combining this scope with the latest EVIS EXERA II system puts the power of NBI observation at your fingertips, making it possible to explore new observational possibilities in the small intestine.

Normal observation

NBI observation
Wide 2.8 mm diameter channel in spite of 9.2 mm outer diameter

To improve manoeuvrability in insertion, the SIF-Q180 features a distal end diameter of just 9.2 mm while maintaining high image quality. In addition, an instrument channel diameter of 2.8 mm has been reserved to meet a wide range of treatment requirements.

Short distal end rigid section and small-bending angulation configuration

By making both the distal end rigid section and bending section length shorter than conventional enteroscopes, the SIF-Q180 can make smaller turns in the small intestine, supporting smoother insertion.

No balloon channel means the cleaning method is the same as conventional scopes

The Single Balloon Enteroscope System incorporates a balloon on the tube only. This means there is no need for a balloon dedicated air channel in the scope itself, so it can be cleaned in the same way as conventional scopes.
High-tech materials – only the best are good enough

Disposable sliding tube for reliable, smooth insertion

ST-SB1

Silicone rubber coated with hydrophilic lubrication

Although silicone rubber is used in the ST-SB1, a hydrophilic lubrication coating inside of the tube lining ensures better lubrication between the scope and overtube, assisting smooth, easy insertion into the deep part of the small intestine.

Eliminating risks associated with latex allergies

A latex-free design has been achieved by using silicone rubber, a substance that rarely causes allergies, throughout the ST-SB1.

Radiopaque material to enable position confirmation under fluoroscopy

Radiopaque material is used in the distal end of the ST-SB1 to allow confirmation of the tube tip under fluoroscopy, further enhancing insertion performance into the deep part of the small intestine.
Advanced balloon control unit for trouble-free operation

OBCU

Automatic pressure control function for maximum reliability

The OBCU is equipped with an automatic pressure control function. This safety function operates to suppress the balloon pressure and maintain it within a prescribed range.

Simple configuration facilitates all steps from setup to operation

All you have to do to set up the OBCU is connect the overtube. Operation is equally simple. Just press the control button repeatedly to inflate or deflate the balloon.

Operation possible either on the compact remote control or the front panel

Besides the front panel controls, you can operate the OBCU with this convenient, ergonomic remote control.

1. Install the reserver tank and connect it to the exhaust port.
2. Attach one end of the insufflation tube to the plug on the reserver tank.
3. Attach the other end to the insufflation plug on the overtube.
**Simplified principles of insertion**

The single balloon scope can be inserted into the deep small bowel by manipulating the balloon on the distal end of the overtube and the angulation mechanism of the scope. First insert the scope deeply and grasp the intestinal tract by angulating the scope’s distal end. Next, deflate the balloon on the overtube’s distal end, advance the overtube and then inflate the balloon. Then release the angulations and withdraw the overtube to shorten the proximal small intestine and further straighten it distal to the overtube. If during this free lumen is observed, try to simultaneously push the scope further down into the small intestine.

1. Insert the scope as deep as possible into the small bowel and fix the angulation of the scope.
2. Advance the overtube.
3. Inflate the balloon.
4. Withdraw the overtube and if possible, try to push the endoscope simultaneously.

**NBI observation is possible when the EnteroPro is combined with the latest EVIS EXERA II system**

The EnteroPro’s wide compatibility means that it can be connected to the EVIS 140 and EVIS EXERA I systems you already use. Also when it is combined with the latest EVIS EXERA II system, NBI observation is possible, facilitating more advanced observation of fine mucosal patterns.
Exceptional support for small intestine procedures – advancing enteroscopy into the future

The cutting edge

With the introduction of an innovative, yet surprisingly simple Single Balloon System, Olympus has literally opened up the small intestine to enteroscopy, helping this promising field take a quantum leap forward. Our line of versatile EndoTherapy instruments combined with the advanced capabilities of the EnteroPro SIF-Q180 endoscope create a synergy that will put you at the cutting edge of enteroscopy.

Wide range of EndoTherapy accessories for diagnosis and treatment

The versatile range of Olympus EndoTherapy devices for enteroscopy have been developed to cover everything required for sampling, haemostasis, polypectomy, foreign body removal and more.

Guaranteed compatibility for peace of mind

The new enteroscope and the corresponding EndoTherapy devices are the perfect match. 100% compatibility ensures efficient and reliable procedures and safety for your enteroscope.

Olympus quality for maximum reliability

With more than 50 years of experience in endoscopy, Olympus has developed high-precision manufacturing processes. Quality management and quality control set the most stringent standards to ensure compliance with international guidelines and regulations for medical devices to provide a perfect device for every application.
Versatile EndoTherapy accessories for diverse applications in enteroscopy

**Sampling**

EndoJaw biopsy forceps enable smooth insertion and passage through the endoscope channel especially in the routinely coiled position of the enteroscope. The unique swinging jaw mechanism aids tangential biopsies in the narrow lumen of the small intestine. All benefits of the EndoJaw biopsy forceps are also featured with EndoJawHot hot biopsy forceps. This device is excellent for small polyp removal with diathermy current.

**Haemostasis**

NM-200U-0423: This disposable needle is optimal for injection. The needle sheath facilitates smooth insertion into the endoscope and also acts as an extra stiff sheath to enhance penetration and prevent kinking. The ergonomic handle has a positive click action when the needle is extended.

HX-201YR-135: High rotatability facilitates targeting lesion, and makes the procedure easy and effective in the small intestine.

**Polypectomy**

SD-221U-25: Disposable electrosurgical snare with crescent shape. The pliant thin wire design is optimal for positioning and facilitates the capture of flat lesions. The integral handle features markings for easy and reliable polypectomy.

PW-5V-1: The reusable spray catheter diffuses dye evenly over a wide area and is thus extremely helpful for confirming the size and location of lesions.

**Foreign body removal and others**

FG-460YR: This 6-wire rotatable grasping basket enables highly effective and secure retrieval of EndoCapsule, foreign bodies and resected tissue within the small intestine.

Distal attachment D-201-10704: The soft distal tip design of the disposable attachment makes scope insertion easier. Made of colourless, transparent material, it allows clear unclouded view and ensures optimal observation of the mucosa.
## Available devices

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<thead>
<tr>
<th>Biopsy Forceps</th>
<th>Single use</th>
<th>Clip Fixing Device</th>
<th>Single use</th>
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<tr>
<td>FB-210U</td>
<td>Alligator jaw</td>
<td>HX-201YR-135</td>
<td>Rotatable clip fixing device</td>
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<td>FB-220U</td>
<td>Alligator jaw with needle</td>
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<td>FB-230U</td>
<td>Oval cup</td>
<td>Clip jaw angle</td>
<td>Standard</td>
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<tr>
<td>FB-240U</td>
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<th>Electrosurgical Snare</th>
<th>Single use</th>
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<td>SD-221U-25</td>
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<th>Reusable</th>
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<td>FD-230U</td>
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<tr>
<th>Hot Biopsy Forceps</th>
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<th>Handle for SD-310Z-25 &amp; FD-1Z-1</th>
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<td>FD-1Z-1</td>
<td>Oval cup</td>
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<td>Reusable snare handle</td>
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<th>Washing Pipe/Spray Catheters</th>
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<td>PW-1V-1</td>
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<th>Single use</th>
<th>Cleaning Brushes</th>
<th>Single use</th>
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<th>Distal Attachment</th>
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<td>D-021-10704</td>
<td>Soft cap, straight type</td>
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## Specifications

**EVIS EXERA II**  
Small Intestinal Videoscope  
**OLYMPUS SIF TYPE Q180**

### Optical System
- Field of view: 140°
- Depth of field: 3 to 100 mm
- Direction of view: Forward viewing

### Distal End
- Outer diameter: 9.2 mm

### Insertion Tube
- Outer diameter: 9.2 mm

### Bending Section
- Angulation range: Up 180°, Down 180°, Right 160°, Left 160°

### Total Length
- 2345 mm

### Instrument Channel
- Inner diameter: 2.8 mm
- Minimum visible distance: 3 mm from the distal end

### Single use Overtube
**ST-SB1**

### Insertion Tube
- Outer diameter: 13.2 mm
- Inner diameter: 11 mm

### Working Length
- 1320 mm

### Total Length
- 1400 mm

### Material on the Tube
- Silicone rubber

### Material on the Balloon
- Silicone rubber

### Hydrophilic Lubrication Coating
- Yes

### Power
- 100 V–240 V AC 50/60 Hz
- Consumption electric power: 150 VA

### Set Pressure of Balloon
- + 2.6 kPa
- 5.4 kPa
- 0.0 kPa

### Size (W×H×D)
- 374×151×486 mm

### Weight
- 11 kg (Balloon Control unit)
- 0.4 kg (OBCU Remote Controller)

### OBCU Remote Controller cover

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Specifications, design and accessories are subject to change without any notice or obligation on the part of the manufacturer.