

LASCORAL[®]

INSTRUMENTS THAT WORK



Have you ever had trouble with:

- Needle Holders that freeze during surgery?See pages 8-9
- Needle Holders that don't hold the needle?See pages 6-11
- Cutting tissue cleanly?.....See pages 16-17
- Retrieval of separated endodontic files?See pages 18-21
- Joint fatigue during the location of a canal, or initial instrumentation of a calcified canal?See page 22
- Breaking the tips of periotomes?.....See page 23
- Drawing grafts through a tunnel without complication?See page 24
- Abutments, or other implant components falling off the driver?.....See page 26

OUR STORY

Founded in 1979, Laschal® has earned a reputation for being the best in class. Described by end-users as the Rolls Royce of surgical instruments. Stronger than steel, lighter than titanium, the performance is simply unparalleled. Where common instruments last an average of six months, Laschal instruments approach a decade of performance without decay in structural integrity.

12 Patents

150 Products

20 Countries

40 Dealers

30 YEARS OF EXCELLENCE **Our Founder, Dr. Jeffrey Lasner**

Over 25 years ago while struggling to operate with loose carbon-steel scissors, Dr. Jeffrey Lasner resolved to determine why his traditional pivoted instruments so frequently failed. He discovered that the pressure under which the hardened, stiff blades meet to create the necessary shear for a clean cut is stronger than the pivotal attachment of the rivet. Over time, this constant force caused scissors to loosen and splay in the critical tip area. A new design was needed that would relieve the internal stresses inherent in every commonly manufactured pivoting instrument.



SUTURING

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- Flawless Needle Holders **NEW** . Pgs 8-9
- Cutting Edge Needle Holders Pgs 10-11
- Corn Suture Aid Forceps Pg 12
- Tying/Tissue Forceps Pg 13
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SUTURE REMOVAL

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ENDODONTICS

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SCISSORS/FORCEPS COMBO

The Concept That Started It All

For Easily Removing Sutures With One Hand, Leaving Your Other Hand Free For Patient Stabilization.

First it grabs, then it cuts. Squeeze, hold in closed position and pull.

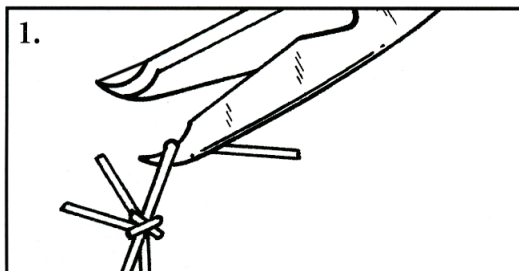


← WATCH THE VIDEO

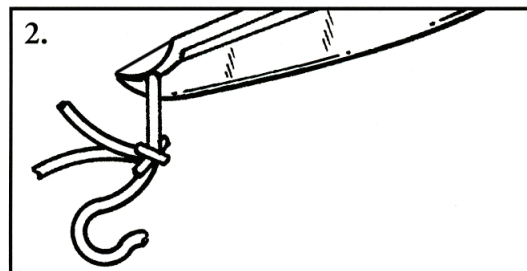
N-103F



How to use it



1. Engage the suture on the **right hand side** of the knot...



2. Close, hold tightly in **closed position**, and remove the suture

SoftTouch® Suture Scissor For Suture Removal

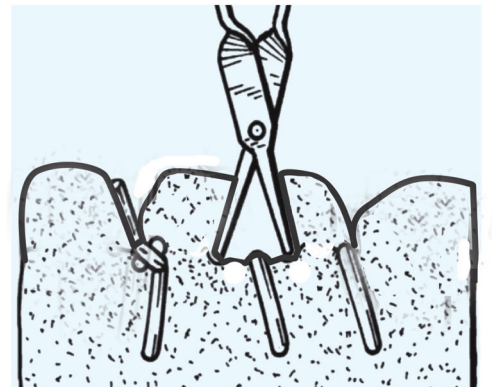
WATCH THE VIDEO →



MPF-N-4CXF



- **Easily Cut Sutures Without Cutting Tissue**
- **Gently Pushes Irritated Tissue Aside to Reveal Buried Sutures, Then Cuts Without Any Trauma**



Snagless® Needle Holder



← WATCH THE VIDEO

PCF-N-7TCL/R



- ***No Joint to Snag a Suture While Tying a Knot***
- ***Universal - Holds Every Size Needle Without Losing its Shape or Strength***

Other **Snagless**[®] Options

PCF-N-7TCLC/R 18cm curved Baraquer



PCF-N-TCL 15.5cm straight Castroviejo



PCF-N-TCL	15.5cm straight	Castroviejo	<i>(shown above)</i>
PCF-N-TCL/C	15.5cm curved	Castroviejo	
PCF-N-TCL/R	15.5cm straight	Baraquer	<i>(shown on page 6)</i>
PCF-N-TCLC/R	15.5cm curved	Baraquer	
PCF-N-7TCL	18cm straight	Castroviejo	
PCF-N-7TCL/C	18cm curved	Castroviejo	
PCF-N-7TCL/R	18cm straight	Baraquer	
PCF-N-7TCLC/R	18cm curved	Baraquer	<i>(shown above)</i>

MICRO MODELS

Diamond dusted tips.
Tips are 65% smaller than regular Snagless. Perfect for the smallest sutures.

PCF-N-7TCLR/M	17.75cm straight	Baraquer
PCF-N-7TCLCR/M	17.75cm curved	Baraquer

SPOTLIGHT LASCHAL®

**NEW
2018**

Flawless Needle Holder

FNH-S



- **Freeze-Free** - Unlike All Traditional Castroviejo Locks, the Patented Thumb-Lock Never Freezes or Fails
- **Diamond Tips** - Stronger Than Suture Needles - Greater Survivorship
- **Rifled** - Smooth Snagless Design Doesn't Catch Sutures While Tying a Knot
- **Ambidextrous** - No Horizontal Torque Created When Disengaging the Lock - Never Fails to Disengage
- **Universal** - Holds All Size Needles Without Losing its Shape or Strength

Other **Flawless** Options

FNH-C 18cm curved Baraquer



FNH-S 18cm straight Baraquer



FNH-S	18cm straight	Baraquer
FNH-C	18cm curved	Baraquer
FNH-6S	15cm straight	Baraquer
FNH-6C	15cm curved	Baraquer

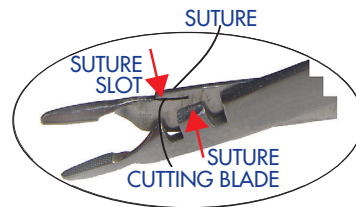
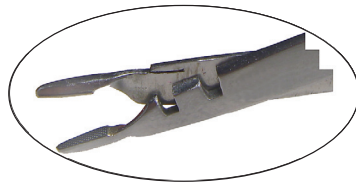
CUTTING EDGE

NEEDLE HOLDERS

CE2-731-10RL



← WATCH THE VIDEO



- **Two in One - a Needle Holder and a Scissor**
- **Built-in Guillotine for Cutting Suture Tags**
- **Holds Every Size Needle without Splaying or Losing its Shape**

Other **CUTTING EDGE** NEEDLE HOLDERS

CE2-731-10RL 18.2cm straight Baraquer



CE2-631-10L/C 15.7cm curved Castroviejo



CE2-631-10L	15.7cm straight	Castroviejo
CE2-631-10L/C	15.7cm curved	Castroviejo
CE2-631-10RL	15.7cm straight	Baraquer
CE2-631-10RL/C	15.7cm curved	Baraquer
CE2-731-10L	18.2cm straight	Castroviejo
CE2-731-10L/C	18.2cm curved	Castroviejo
CE2-731-10RL	18.2cm straight	Baraquer
CE2-731-10RL/C	18.2cm curved	Baraquer

*Available with Flawless thumb-lock upon request

CORN FORCEPS

Used to Ensure Precise Tissue Penetration by the Suture Needle

The tips of the forceps grasp onto attached gingivae, and the suture needle is guided through the grooves, ensuring proper placement of the suture.

PCF-N-CORN/45

Corn Forceps with 45° angle and diamond dust for slip resistance



PCF-N-CORN

15.25cm Corn Forceps with straight tips and diamond dust for slip resistance



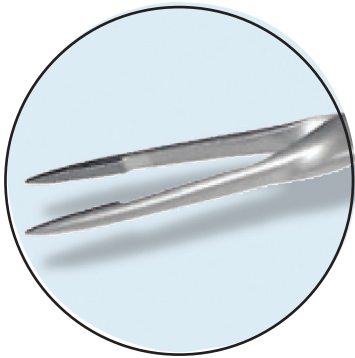
TYING/TISSUE FORCEPS

Pressure Limited Atraumatic Forceps

Reduces tissue trauma caused by instruments during manipulation and anastomosis.

PLAF/R/F

- Flexible tips
- Tungston-carbide inserts



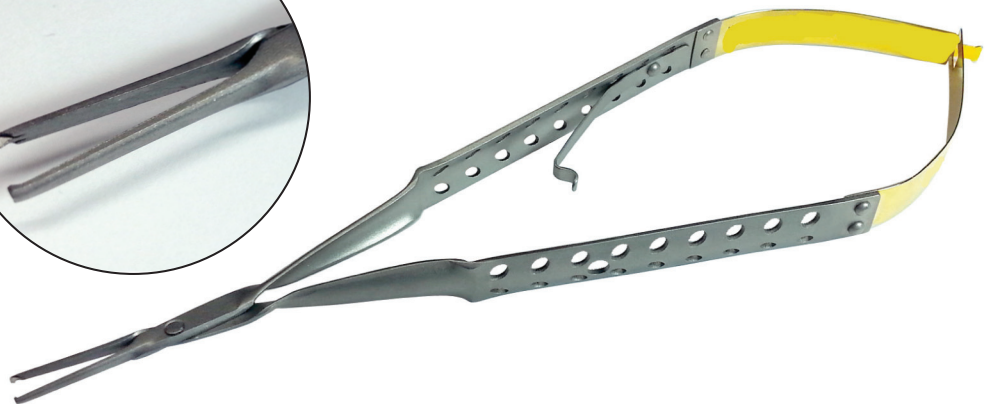
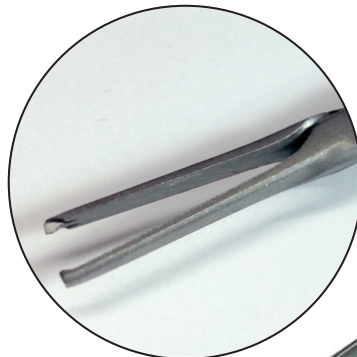
PLAF/R/1X2

- 1X2 Rat-tooth
- Perfect for use as a tying forceps



PLAF/R/1X2/L

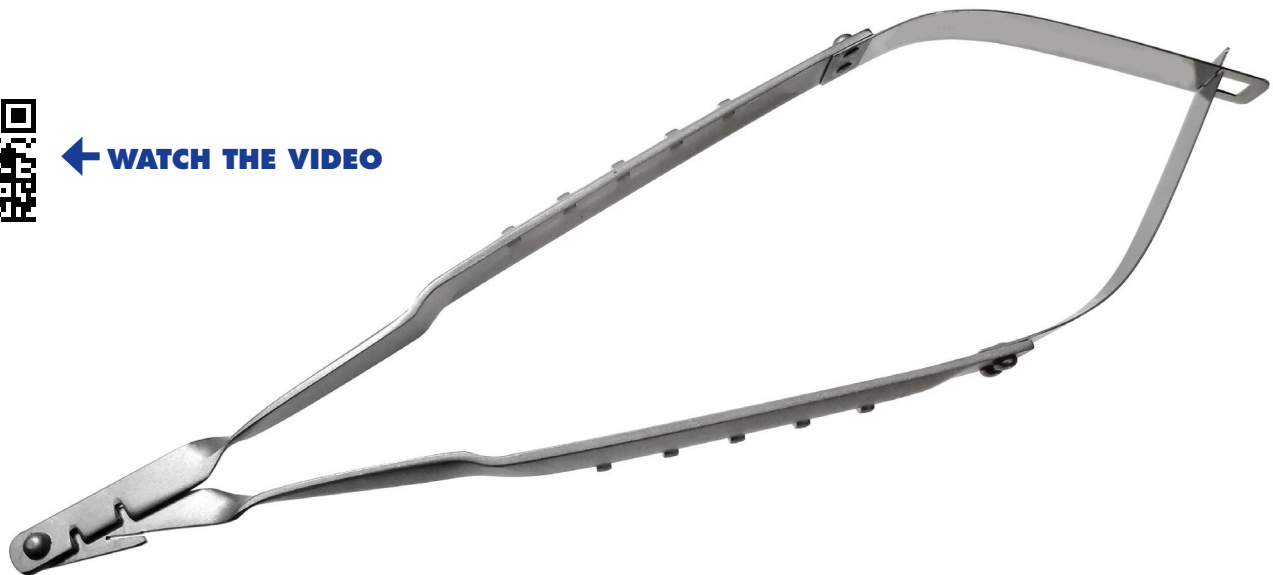
- 1X2 Rat-tooth with lock



The Safest Suture Cutter. Period.



← WATCH THE VIDEO



SC-1

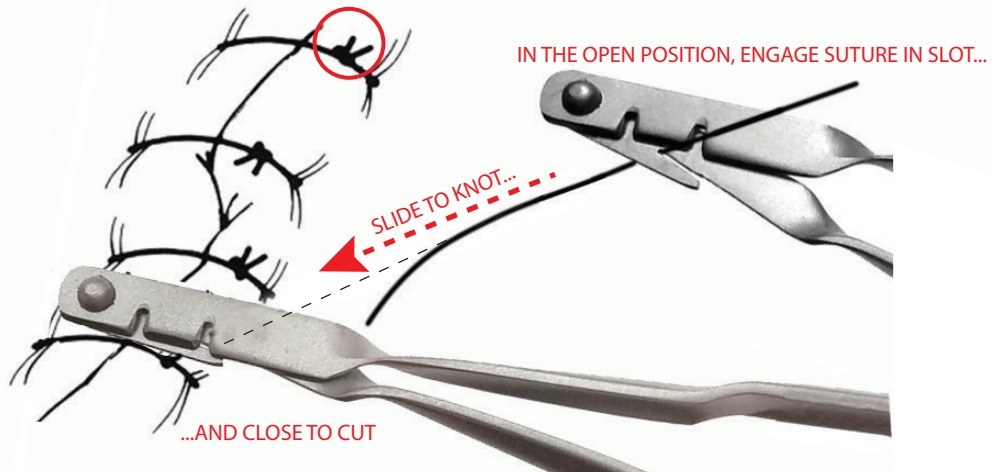
- ***No Sharp Edges, No Exposed Blades***
- ***Perfect 1mm Tags Every Time,
Ideal For Resorbable Sutures***

Automatically and safely trim suture 1mm above the knot, exactly on the knot, or at any other desired length.

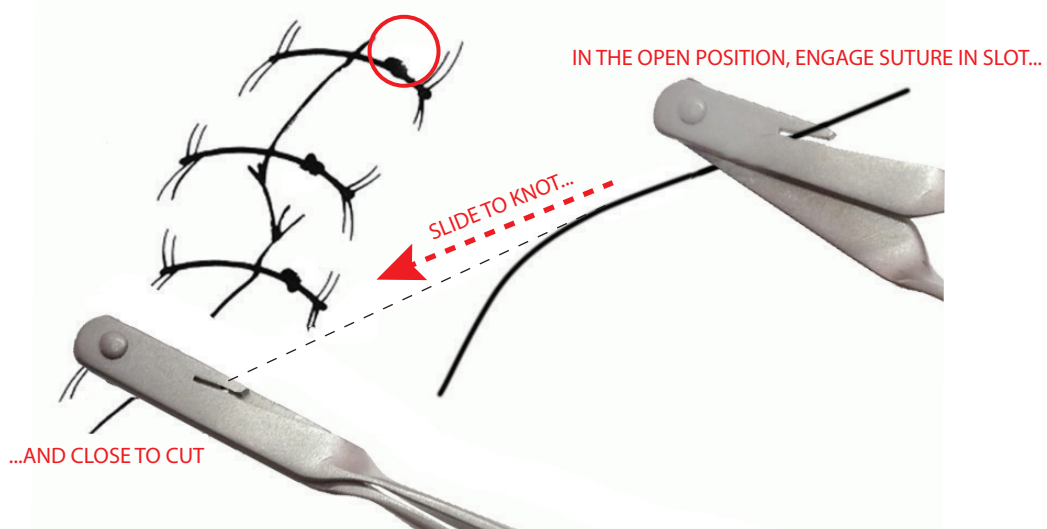
SC-1



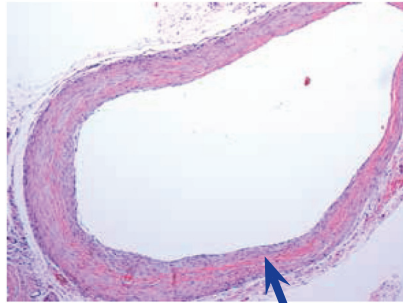
FACE UP - leaves exactly 1mm tag above knot



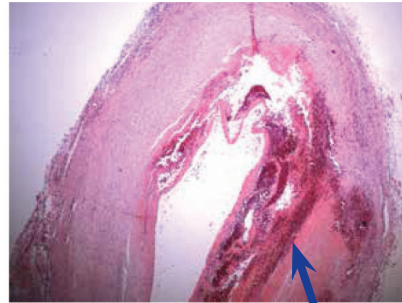
FACE DOWN - cuts exactly on knot, leaving no tag



VEIN GRAFT



Laschal
Vein walls intact



Competitor
Vein walls destroyed

- 1- **ZERO** degree contact point during shear, and always cuts at the tip
- 2- **ZERO** crushing or tearing of tissue
- 3- **ZERO** carbon content - cannot rust or corrode

MPF-N-1

15.7cm scissors with 2.2cm straight sharp/sharp blades



MPF-N-1C

15.7cm scissors with 2.2cm curved sharp/sharp blades



MPF-N-4

14.75cm scissors with 1.25cm straight sharp/sharp blades



MPF-N-4C

14.75cm scissors with 1.25cm curved sharp/sharp blades



MPF-N-6

15.5cm Littauer scissors with 1.25cm straight blades



MPF-N-6A

15.5cm Littauer scissors with 2.0cm straight blades



MPF-N-4XF

14.75cm scissors with 1.25cm straight, duck-billed blunt/blunt blades



MPF-N-4CXF

14.75cm scissors with 1.25cm curved, duck-billed blunt/blunt blades



71-15-30C

18cm periodontal scissors with 2cm curved blades with 30° angle (gold plated springs)



51-15-30C

15.5cm periodontal scissors with 2cm curved blades with 30° angle



51-15-45C

15.5cm periodontal scissors with 2cm curved blades with 45° angle



51-12-30C

14.5cm scissors with 1.0cm curved blades with 30° angle



51-12-45C

14.5cm scissors with 1.0cm curved blades with 45° angle



DS-1

14.7cm Vannas scissors with 1.2cm straight blades



DS-1C

14.7cm Vannas scissors with 1.2cm curved blades



DS-G

14.75cm 'reach anywhere' stork-shaped scissors with 1.25cm blades



All scissors may be custom serrated and/or have the handle length increased by 2.5cm. Contact Laschal: 914-949-8577

Technological Advancements in Cutting from Laschal Surgical

Dr. Dardik is a surgeon-scientist who seeks to use the power of molecular biology to achieve a modern understanding of vascular disease, and the basic science laboratory to perform cutting edge research to ultimately benefit patients with vascular disease.

Dr. Dardik trained at Yale, the University of Pennsylvania, and the Johns Hopkins Hospital before his appointment to the Yale faculty in 2001.

The Dardik Laboratory studies the healing and function of blood vessels and synthetic blood vessel substitutes that are used in patients having vascular bypass surgery. The histologic slides prepared by the Dardik Laboratory clearly define the gross iatrogenic damage caused by the use of conventional scissors as compared to the minimalization of damage when using the Laschal scissors.

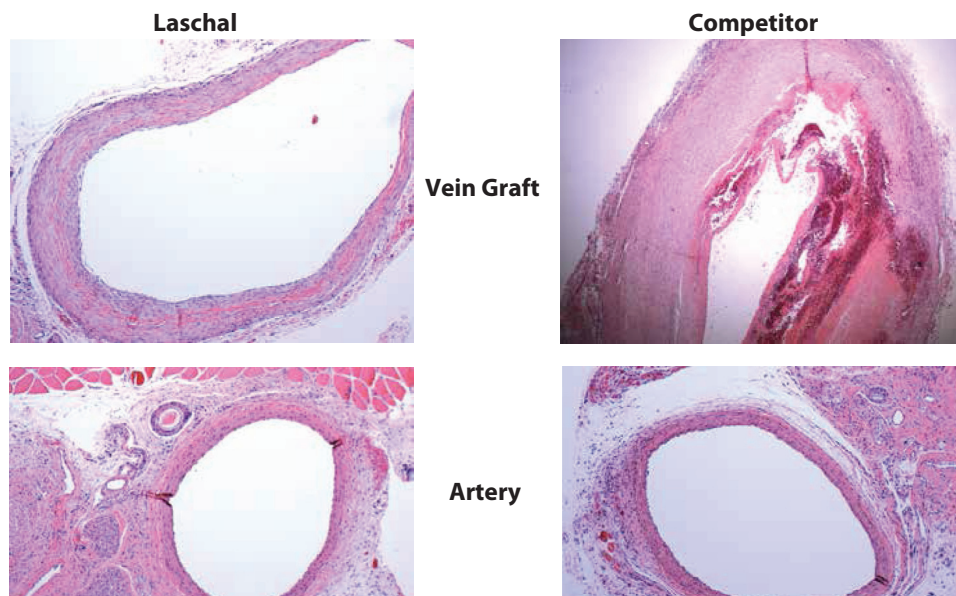
Why this technology works:

Scissors do not cut by cutting, they cut by shearing. Scissors do not initially fail because they get dull. They initially fail because they get loose. They get loose because the pressure that is created by the blades coming together in a zero degree clearance in order to 'shear' the material placed there between is greater than the resistance provided by the screw or rivet that pivots the blades together. Whatever is being cut, from the thinnest, single layered, true epithelial tissue to atherosclerotic arteries, a lateral pressure is placed upon all scissors blades which tend to separate them.

Conventional scissors must be made with a relatively narrow shearing angle between the blades because, in order to increase the edge strength, they must be hardened by a process known as heat treatment. In addition to hardening the blades, the 'heat treatment' process also reduces flexibility and makes the blades more brittle. The net effect is that the blades must be set at a very narrow angulation. If these blades were to be set at an increased angle in order to increase the efficiency of the 'shear', the blades would either 'bite' into one-another or hasten the failure of the pivoting screw or rivet. In such a scissors, a separation of the blades by as little as a .0001" (1/10,000") during surgery is enough to create margins that are 'crushed' rather cleanly cut, with the predictable results.

The Laschal scissors are made of spring stainless steel that is capable of being set at angulations that are at least 300% that of conventional scissors. The result is that, no matter what is being cut, any lateral pressure placed upon the blades is not enough to effectively separate the blades. Ultimately, there is a proven cleaner cut and improved surgical result.

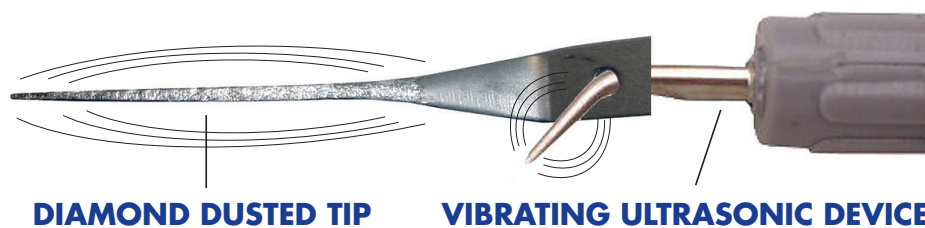
Less tissue damage in the vein graft cut with a Laschal scissors



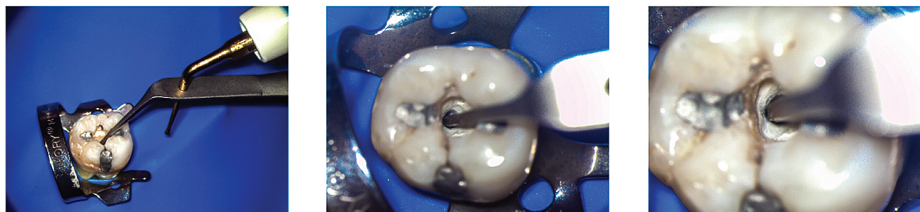
For Creating a Trough, Making Deep Separated Files Accessible



- Four color coded diamond dusted probes: 45°, 75°, 90°, 110°
- Micro Thin - for access to tightest areas
- Unbreakable
- Diamond dusted on both sides - creates trough between file and dentinal wall
- Can follow dilacerated (curved) canals



CLINICAL PHOTOS





INTRODUCTION

- The fracture of endodontic instruments during root canal mechanical instrumentation is a mishap procedural that creates a difficulty in routine root canal therapy.
- Although fractured instruments may not compromise the outcome of the treatment, the retained file fragments may impede microbial control beyond the obstruction.
- Attempts to remove fractured instruments may lead to transportation of the prepared root canal or perforation, and/or over enlargement which could lead to the weakening of the tooth.
- The separation rates of stainless steel instruments have been reported to range between 0.25% and 6%, while NiTi instruments between 1.3% and 10%. Many techniques have been used to remove separated instruments; however, it is not possible to use the same technique for every clinical case.

SUMMARY

- The aim of this table clinic is to present an instrument retrieval technique using the diamond dusted probes from LASCHAL FXP SYSTEM along with an ultrasonic device.
- LASCHAL FXP SYSTEM along with ultrasonic device is a valuable alternative method to retrieve separated instruments from the root canal system. When it is not possible to retrieve the instrument from the root canal, using LASCHAL FXP SYSTEM, it helps to create space between a file and the root canal wall, facilitating the bypassing of the separated instrument.

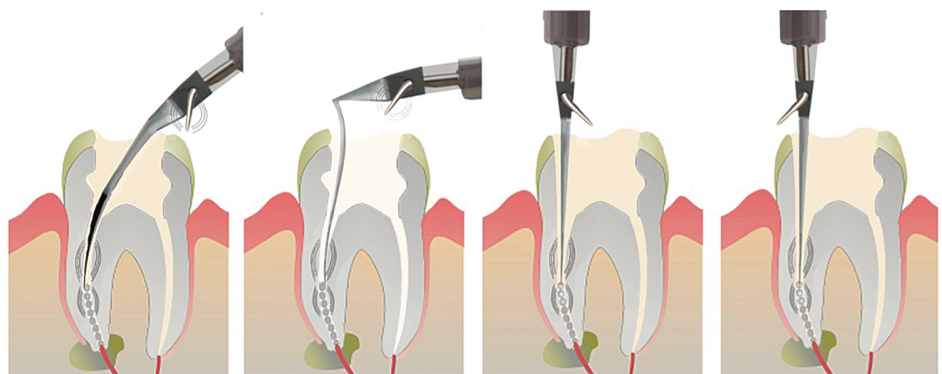
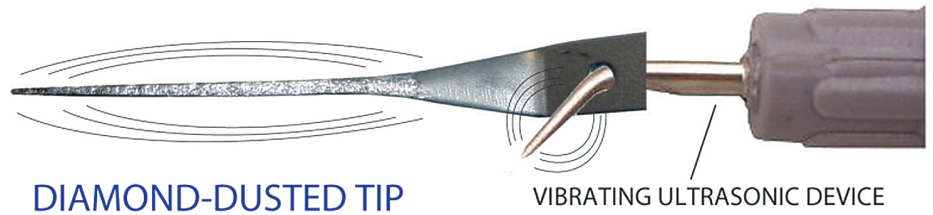
ACKNOWLEDGEMENT

Dr. Carolina Cucco, Dr. Darya Dabiri, Dr. Diogo Guerreiro, Dr. Indaiá Leibovich, Dr. Jeffrey Lasner and Rackham Graduate School.

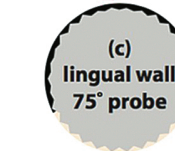
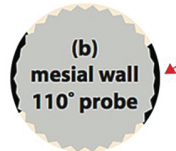
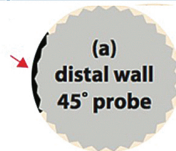
REFERENCES

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- Hulsman M, Schinkel I. Influence of several factors on the success or failure of removal of fractured instruments from the root canal. *Endod Dent Traumatol* 1999;15:252-8
- Iqbal M K, Kohli M R, Kim J S. A Retrospective Clinical Study of Incidence of Root Canal Instrument Separation in an Endodontics Graduate Program: A PennEndo Database Study *J Endod* 2006; 32:1048-52
- Maradati A A, Hunter M J, Dummer P M. Management of intracanal separated instruments. *J Endod.* 39: 569-81

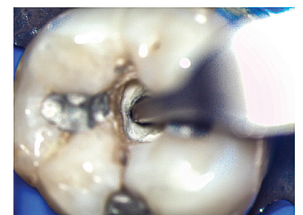
TECHNIQUE



Images With Permission From Dr. Jeffrey Lasner



CLINICAL PHOTOS



STEIGLITZ FORCEPS

PCF-N-75SL/M

75° N/S Forceps with serrated carbide inserts



← **WATCH THE VIDEO**

PCF-D-N-75SL/M

Extra-thin micro diamond dusted N/S Forceps



- ***For Retrieving Separated Files And Silver Points***
- ***World's Most Narrow Steiglitz, Reaches Deeper Than All Others***
- ***Flexible Prongs Create Linear Torque and Never Splay, Making Them Stronger Than All Others***

Other STEIGLITZ FORCEPS

- **North/South angulations address the bucco-lingual chamber orientation of anteriors and bicuspids**
- **East/West angulations address the mesio-distal chamber orientation of molars**

With serrated carbide inserts

N/S Forceps

PCF-N-45SL/M

PCF-N-75SL/M

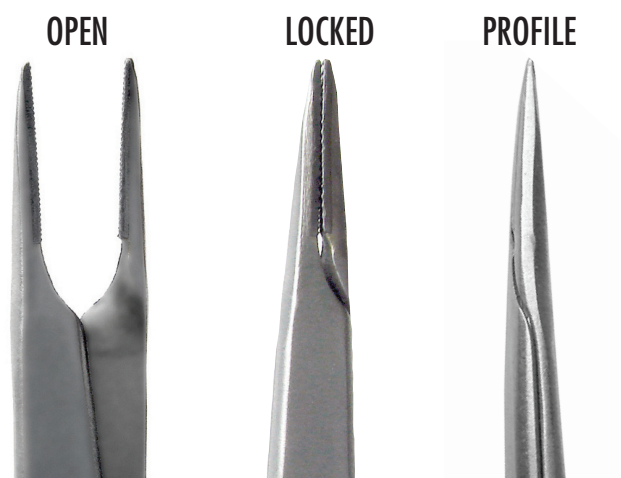
PCF-N-90SL/M

E/W Forceps

PCF-N-45SPL/M

PCF-N-75SPL/M

PCF-N-90SPL/M



Extra thin for deeper access

N/S Micro Diamon Dusted Forceps

PCF-D-N-45SL/M

PCF-D-N-75SL/M

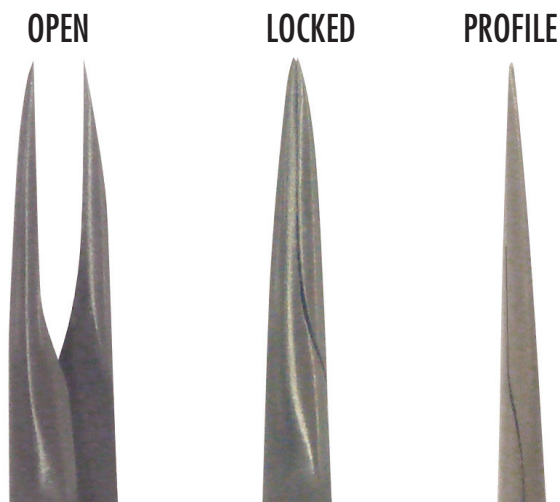
PCF-D-N-90SL/M

E/W Micro Diamon Dusted Forceps

PCF-D-N-45SPL/M

PCF-D-N-75SPL/M

PCF-D-N-90SPL/M



TACTILE ENDO FILE FORCEPS

For Locating Canal Entries, and Taking Your Fingers Out of Your Line of Sight.

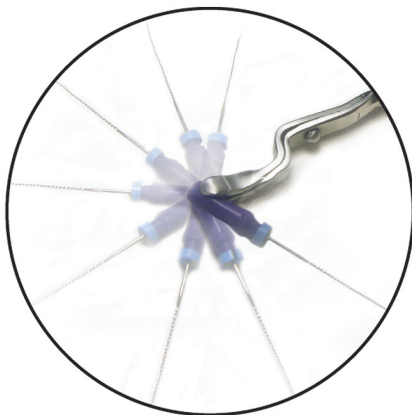
- Allows perfect line of sight with mirror or microscope
- Ultra lightweight - you feel **EVERYTHING**



PHOTO COMPLIMENTS OF DR. HOLGER DENNHARDT, LANDSHUT, GERMANY

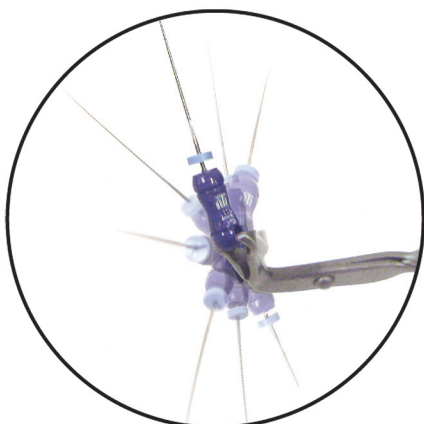


← **WATCH THE VIDEO**



PCF-N-90AHF/L

The prongs engage the parachute holes facilitating a 270° mesio-distal rotation for easy access to difficult canals e.g. mesialbuccal canals of maxillary second molars



PCF-N-75CHF/L

Engage the prongs of the PCF-N-75CHF/L into the parachute holes for 270° bucco-lingual rotation

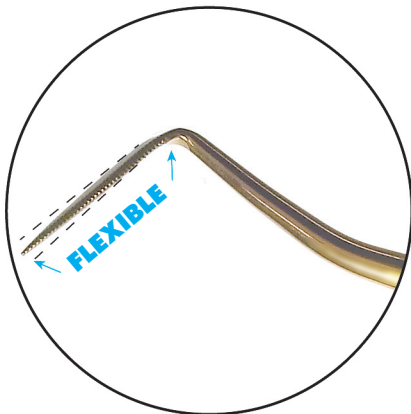


SERRATED PERIOTOMES BY LASCHAL®

***Periodontal ligaments are natural rubber bands.
Trying to stretch them to the point of failure is
a terrible idea...***

Saw through them instead!

- Saw through ligaments in up/down motion
- Flexible tips resist breakage
- Specially cut micro-serrated edges never dull
- Less bleeding
- Less damage to surrounding tissue
- Promotes stronger healing



FB-1



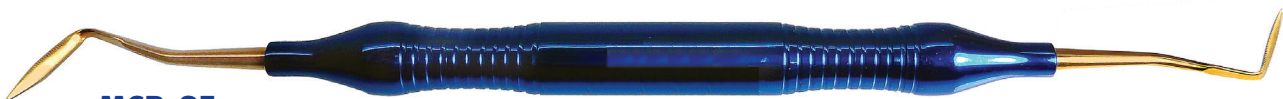
SM-1F



MSP-1F



MSP-2F



TUNNEL GRAFT FORCEPS

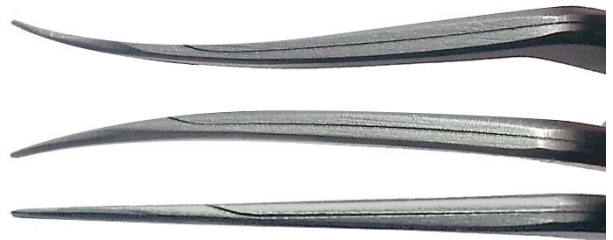
The Quickest And Safest Way to Place a Tissue Graft. Draw it into Place.



- Eliminates risk of blunt dissection caused by using a suture
- Micro Thin, Ball Points - for uninterrupted passage through tunnel
- 75° E/W angulation - ideal for all areas and applications
- Pressure limiting construction - maximal closure and locking will not damage graft
- Diamond dusted - for slip resistance
- Three models to choose from: **TF-R** Curved right

TF-L Curved left

TF-S Straight



1. Create tunnel in any standard manner



2. Close forceps and walk through tunnel



3. Grasp connective tissue graft



4. Withdraw graft through tunnel

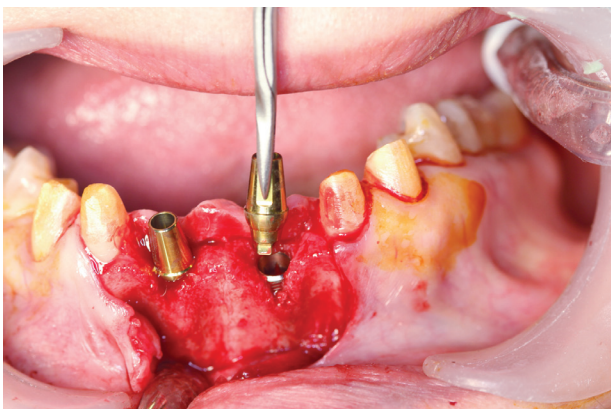
ABUTMENT/HEX ALIGNMENT

For Precisely Aligning Abutment Hexes.

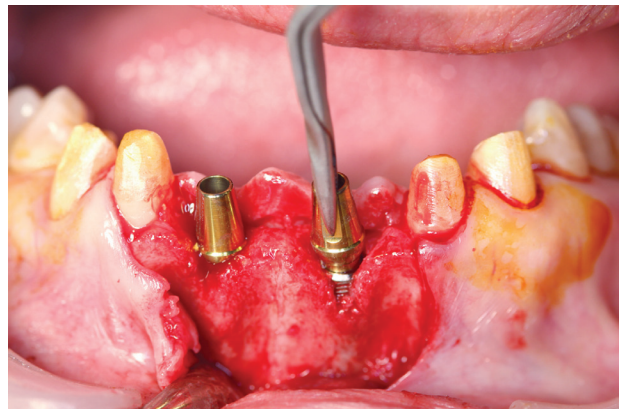
HEX-75



Clinical images of alignment and final seating of implant related internal hexes



Initial approach and alignment of abutment onto implant



Final seating prior to permanent attachment

HEALING ABUTMENT AND COMPONENT FORCEPS

Gently Hold and Stabilize Healing Abutments and Components During Placement.



← WATCH THE VIDEO

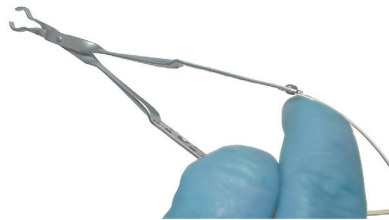
- Never drop an abutment or component again



HAF/90

- Uses natural spring torque to create the desired grip

HAF/75



*HAF/90 shown



- Spread open to engage and disengage the abutment or component

PCF-N-7-COMP

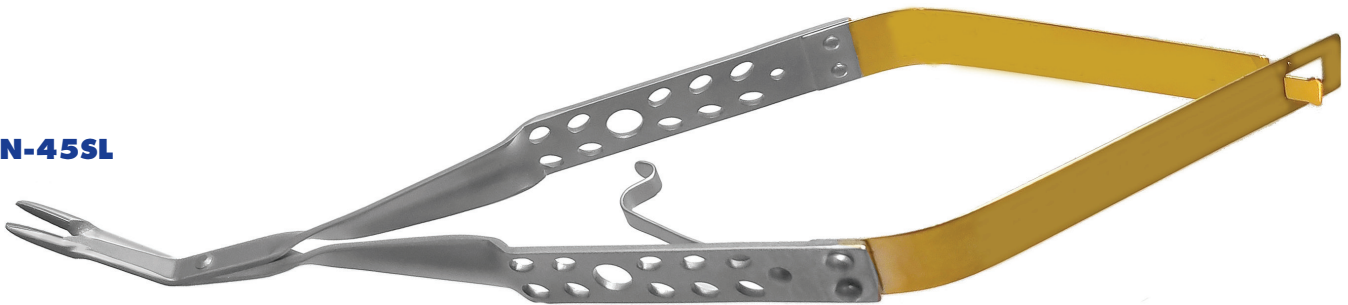
For manipulating tiny components with diameters of 0.5mm - 7.0mm. Any size screw or component may be rotated between the locked prongs, with absolute safety and bio-compatibility. Ideal for the placement of healing abutments in areas with limited meso-distal space



The Fastest Way to Remove a Post.

- **Ultra light-weight**
- **Splay resistant**
- **Super strong**

PCF-N-45SL



Uses transferred ultrasonic oscillation to destroy cement bands

How to use it:

- 1.** Lock the instrument on the exposed post
- 2.** Snuggly place (any) ultrasonic tip in the neck of the instrument
- 3.** Gradually increase from low to high speed
- 4.** Ultrasonic vibrations begin to crack cement
- 5.** As post loosens, gently move side-to-side to remove the post

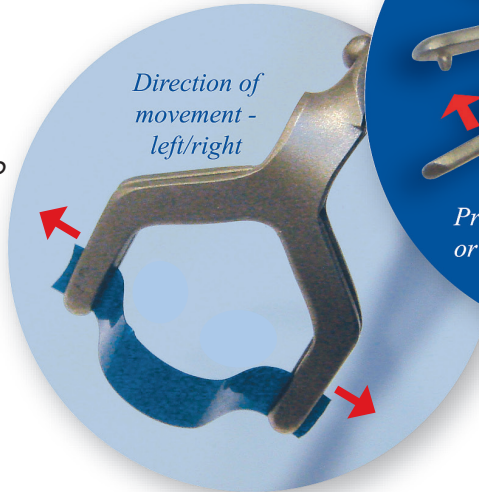
STRIP FORCEPS

Takes Polishing Strips and Lightening Strips Out of the Fingers.

PCF-LW/L



Loop polishing strip to access all restored surfaces or with articulating paper to uncover excessive contact during try-ins



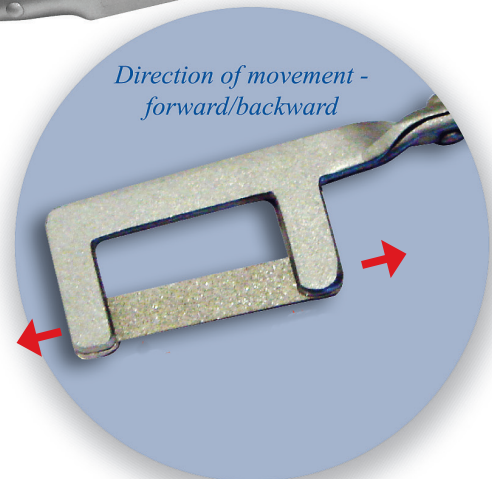
Direction of movement - left/right



Prongs tightly hold all polishing, or separating strips and saws

PCF-LW/L-ST

Prongs are in line with handle - more efficient for use with separating strips or saws



Direction of movement - forward/backward

- 1.** Reduces incidence of soft tissue trauma
- 2.** Greater economics - use shorter strips for each procedure (up to 5 uses per strip)
- 3.** Greater ergonomics - easy to prepare and use

RESTORATIVE FORCEPS

Inlays

PCF-N-45S/M

Microforceps for manipulating inlays



Crowns

PCF-N-45CCR

45° N/S Forceps for crowns, cores and bridges. Also facilitates removal of temporary crowns



PCF-N-CDF

30° N/S Diamond dusted contoured forceps for crown placement



Points

PCF-N-45S

45° N/S Forceps for points



Posts

PCF-N-45S/L

The fastest way to remove a post
See Raptor Forceps (page 27)



Matrix Bands

PCF-N-75SP/L

75° E/W Forceps for placement and removal of sectional matrix bands

PCF-N-75SP without lock (not shown)



LASCHAL INSTRUMENTS LAST LONGER

The Effects of Sterilization Procedures on the Performance and Durability of Surgical Instruments

Results

Throughout the 50 autoclave cycles, the five (5) Laschal devices (**L-1 to L-5**) demonstrated no visible changes in the appearance of the instruments (FIGURE 1). The Laschal devices also demonstrated no change in force to open the handles of the scissors and no visible changes or damage to the cutting edges of the scissors after 50 cycles. Also the five (5) Laschal devices (**L-1 to L-5**) demonstrated no apparent change in cut performance; the scissors consistently and smoothly cut the test material.

The Control Device (**C-1**) demonstrated no visible changes in appearance, no change in force to open handles, and no visible changes or damage to the cutting edges. After 33 autoclave cycles, however, the Control Device required more apparent force to cut (from a rating of 5 to 4) and the cut was noted as "rough" (FIGURE 2). After the 37th cycle, the performance of the Control Device required more force to cut (from a rating of 4 to 3) and was also noted as "rough". After the 38th cycle, the rating increased from a 3 to 4, but the cut performance dropped from a 4 to 3 following the 48th cycle and, was noted again as "rough". Also noted in the study, the Control Device (**C-1**) showed discoloration following the 47th autoclave cycle.

Conclusion

After 50 autoclave cycles, the Laschal **SERIES ZERO** - Ring Handle Tenotomy Scissors demonstrated consistent sharpness and performance, strength and stability. There were no changes in the performance and durability of Laschal Scissors test after test, whereas the performance and durability of the Control Device, an industry standard instrument, decreased notably after repeated autoclaving. In addition to consistent sharpness and performance, the Laschal test devices also demonstrated no visible changes in appearance, functionality (opening and closing), or damage to the cutting edges of the scissors.

FIGURE 1 *Laschal (L-1 to L-5)*

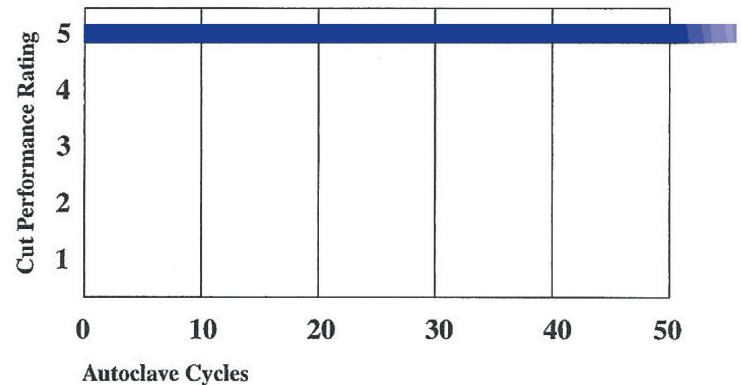
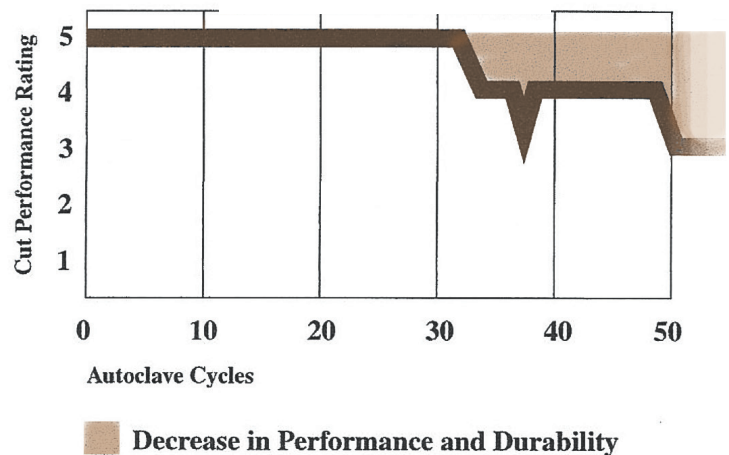


FIGURE 2 *Control Device (C-1)*



The Effects of Sterilization Procedures on the Performance and Durability of Surgical Scissors

Test Facility

Los Angeles Biomedical Research Institute at Harbor-UCLA Medical Center
1124 W. Carson Street, Torrance, CA 90502
(310) 222-3854
Fax (310) 222-6707

LASCHAL WARRANTY / REPAIR INFORMATION

The Laschal Warranty:

Laschal instruments are guaranteed for life against rust, rivet loosening, and breakage when used for indicated applications. For these defects, Laschal will repair or replace the instrument at its discretion without charge. Cutting edges, carbide inserts and Castro-Viejo needle holder locking mechanisms are guaranteed for two years. Other conditions apply (see below).

All instruments returned to Laschal for repair/reconditioning must be sealed in a verifiable, sterilized package. Laschal is not responsible for instruments lost in transit to Laschal.

MicroPoint Scissors:

- Lifetime guarantee against rust, rivet loosening, and breakage when used for indicated applications.
- Cutting edge guaranteed for two years or less from original invoice date:
 - One year or less, refurbished for free, excluding shipping charge.
 - Send instrument to Laschal USPS Delivery Confirmation or UPS.
 - Enclose \$8.00 for return shipping.
- Cutting edge after two years:
 - Send instrument to Laschal USPS Delivery Confirmation or UPS.
 - Enclose \$12.00 for complete Uniband refurbishment or \$18.00 for complete Featherlite refurbishment.
 - Return shipping included in refurbishment fee.

Pressure-controlled Forceps:

- Lifetime guarantee against rust, rivet loosening, and breakage when used for indicated applications.
- Carbide tip inserts guaranteed for two years from original invoice date:
 - Two years or less, refurbished for free, excluding shipping charge.
 - Send instrument to Laschal USPS Delivery Confirmation or UPS.
 - Enclose \$8.00 for return shipping.
- Carbide inserts after one year:
 - Send instrument to Laschal USPS Delivery Confirmation or UPS.
 - Enclose \$40.00 for refurbishment. Return shipping included in refurbishment fee.

Splay-resistant Castro-Viejo Needle Holders:

- Lifetime guarantee against rust, rivet loosening, and breakage when used for indicated applications.
- Locking mechanism guaranteed for two years or less from original invoice date:
 - One year or less, refurbished for free, excluding shipping charge.
 - Send instrument to Laschal USPS Delivery Confirmation or UPS.
 - Enclose \$8.00 for return shipping.
- Locking mechanism after one year:
 - Send instrument to Laschal USPS Delivery Confirmation or UPS.
 - Enclose \$50.00 for refurbishment. Return shipping included in refurbishment fee.

Ring handled instruments and Periostomes are unconditionally warranted within two years of purchase and guaranteed, without time restraints for quality and workmanship when used in the prescribed manners. Carbide inserts are wear related and will be replaced without charge if returned within one year of purchase, after which they may be replaced for \$42.00.

NORTH AMERICAN CUSTOMERS -

Return Instruments to: Laschal Surgical, Inc., Attn: Warranty Returns
120 Kisco Avenue, Suite R
PO Box 392, Mount Kisco, NY 10549

For Technical Support: Phone: 1-914-949-8577 / Fax: 1-914-683-3938

Repair Order Request Please Fill Out In Full. Thank You.

Send Returns to: Laschal Warranty Returns / 120 Kisco Ave., Suite R, Mt. Kisco, NY 10549 USA

Please note: All instruments returned for repair must be sterilized, in a sterile pouch, and returned in a box. Please do not return in a padded envelope, as this does not offer proper protection.

Any instruments returned contaminated or unsterilized will be discarded at the owner's expense. Sending instruments back in a padded envelope may void the Laschal warranty, as they can be further damaged in transit.

Practice Name _____ Practice Contact _____

Address _____ Phone # _____

City _____ State _____ Zip/Postal Code _____

Credit Card # _____ Exp ___/___ Code _____ Billing Zip _____

Item #	Description of the Problem	Date Purchased	Purchased From

LASCHAL[®] 1

[L'SHALL]

Verb

- 1. To Redefine The “Gold Standard”**
- 2. To Grow Continuously Through Innovation, Observation, and Attention**

synonyms

- Trendsetting
- Trailblazing
- Pioneering

