Direction for use	Directions for use of the Schioetz Tonometer	weight table than with the 5.5 g weight table, the rigidity is too	5. Metrological inspection	7. Cleaning and Disinfection
Schioetz – Tonometer	You have purchased a high quality Schioetz eye tonometer manu-factured in accordance with the specifications of Directive	pressure is lower than that indicated by the tonometer.	The metrological inspection can only be performed by the manufacturer or an authorised body. According to the Medical Product Operators ordinance of 29 June	by unscrewing it from the plunger thread and withdraw the plunger from the tube. Clean the plunger
Manufactured by :	93/42 EEC of 14.06.1993 and the Medical Products Act.	lower with the 10 g weight than	1998, metrological inspections should be carried out at intervals of	soaked in 70% alcohol. Rinse out
Gerhard Biro	1. Intended purpose	intra-ocular pressure is higher	·	dissolve any salt crystals from the tear fluid. The tonometer can be
Medizinische Apparate	The eye tonometer is designed for measuring the intra-ocular	than that measured with the tonometer. In patients with		disinfected with 70% alcohol. Also
Engeleswies 1	pressure.	abnormal rigidity, the pressure measured with the 5.5 g tonometer		rinse out the cavity with 70 % alcohol and then leave the
72393 Burladingen-Hausen Germany	2. Assembly and start-up (Fig.)	weight comes closest to the	1 scale division corresponds to a	tonometer to dry thoroughly.
0	Insert the plunger (1) in the	calibration values for the 5.5 g	stroke of 0.05 mm.	8. Inspection
BiŠRO	footplate (2). Screw the 5.5 g weight (3) onto the plunger. If necessary, insert the 7.5 g or 10 g weight (4) in the direction of the arrow.	influenced by abnormal corneal rigidity. In the critical pressure	Please note that the product described in the operating instructions is intended exclusively	and plunger is urgently recommended. Any nicks or scratches due to incorrect handling must be eliminated by the
	3. Information an the use of the	4. Preparations for pressure	for use by suitably trained personnel.	manufacturer.
	device	measurement		9. Sterilisation
In case of danger call:	1955 is the product of research by Friedenwald, Kronfeld, Ballantine and Trotter. The pressure of a healthy eye is approx. 16 mm Hg	After each pressure measurement, remove the plunger and clean it with alcohol ether. Immediately before the pressure measurement, reassemble and clean the tonometer, then place it on the		Although a sterilisation in a steam autoclave with forepressure at 134° Cels. for 3 minutes is possible for all models, we recommend autoclaving only for
Safety inspector Mr. Gerhard Biro	(pointer deflection 3.5 with 5.5 g weight) is very probably too high, while a tension of 24,5 mmHg (pointer deflection 2 to 3,5	test block (5). The pointer must be set to zero; deviations of max. 0.2		the stainless steel model. The other models have parts of aluminium, which may corrode by repeated steam autoclaving.
Phone : + 49 7475 7134 Fax: + 49 7475 211 Gerhard.Biro@t-online.de www.biro-medizintechnik.de	high. The values from the tonometer table 1955 for measurements with the 5.5 g and 10 g weights should not differ from each other by more than 3 mmHg for the same eye. If such comparative measurements produce	intra-ocular pressure measurement. After anaesthetising the cornea with an ordinary anaesthetic, place the tonometer in a vertical position at the centre of the cornea. Do not exert any pressure on the eyeball when		For autoclaving put the tonometer in a sterilisation bag or container. Please observe the instructions of the manufacturer of the autoclave.
© Biro, 2007	the rigidity of the cornea is abnormal. If values more than 3 mm	moving back the lids. Reliable pressure values can only be read off when the pointer shows a pulse.		€€0483

weight table than with the 5.5 g 5. Metrological inspection Directions for use of the 7. Cleaning and Disinfection **Direction for use** weight table, the rigidity is too high, and the actual intraocular Schioetz Tonometer After use, remove the 5,5 g weight The metrological inspection can have purchased a high You by unscrewing it from the plunger thread and withdraw the plunger pressure is lower than that indicated by only only be performed by the manufacturer or an authorised body. quality Schioetz eye tonometer manu-factured in accordance with Schioetz – Tonometer the tonometer. According to the Medical Product Operators ordinance of 29 June 1998, metrological inspections from the tube. Clean the plunger by wiping it with a gauze sponge the specifications of Directive 93/42 EEC of 14.06.1993 and the Medical Products Act. Conversely, if the mm Hg value is Conversely, if the mm Hg value is Operation lower with the 10 g weight than 1998, the 5.5 g weight, the rigidity is should b too low; in such cases. the actual 2 years. intra-ocular pressure is higher soaked in 70% alcohol. Rinse out Manufactured by : should be carried out at intervals of the footplate cavity thoroughly with warm distilled water in order to 1. Intended purpose dissolve any salt crystals from the **Gerhard Biro** than that measured with the tonometer. In patients with abnormal rigidity, the pressure 6. Technical data tear fluid. The tonometer can be The eye tonometer is designed **Medizinische Apparate** disinfected with 70% alcohol. Also measuring the intra-ocular for rinse out the cavity with 70 % alcohol and then leave the tonometer to dry thoroughly. Scale: 0 to 20 scale divisions Engeleswies 1 abnormal rigidity, the pressure measured with the 5.5 g tonometer weight comes closest to the actual pressure value, as the calibration values for the 5.5 g tonometer weight are less influenced by abnormal corneal rigidity. In the critical pressure pressure 0 to -1 scale division 72393 Burladingen-Hausen Germany 2. Assembly and start-up (Fig.) 1 scale division corresponds to a 8. Inspection Insert the plunger (1) in the footplate (2). Screw the 5.5 g weight (3) onto the plunger. If necessary, insert the 7.5 g or 10 g weight (4) in the direction of the stroke of 0.05 mm. The tonometer should be stored Frequent checking of the footplate in a closed container (case). rigidity. In the critical pressure ranges from 20 to 30 mm Hg. we recommend measurement with the and plunger is urgently recommended. Any nicks or Please note that the product described in the operating instructions is intended exclusively scratches due to incorrect arrow. 5.5 g tonometer weight. handling must be eliminated by the for use by suitably trained manufacturer. 3. Information an the use of the 4. Preparations for pressure personnel. device . measurement 9. Sterilisation The supplied conversion table 1955 is the product of research by After each pressure measurement, Although a sterilisation in a steam Friedenwald, Kronfeld, Ballantine with alcohol ether. Immediately and Trotter. The pressure of a healthy before the pressure measurement, eye is approx. 16 mm Hg reassemble and clean the (average value). A tension of 22 tonometer, then place it on the mointer deflection 3.5 with 5.5 g test block (5). The pointer must be remove the plunger and clean it with alcohol ether. Immediately autoclave with forepressure at 134° Cels. for 3 minutes is possible for all models, we In case of danger call: and irotter. The pressure of a healthy before the pressure measurement, eye is approx. 16 mm Hg reassemble and clean the (average value). A tension of 22 tonometer, then place it on the (pointer deflection 3.5 with 5.5 g test block (5). The pointer must be weight) is very probably too set to zero; deviations of max. 0.2 high, while a tension of 24,5 of a scale division are mmHg (pointer deflection 2 to 3,5 permissible. The patient should be with 5.5 weight) is definitely too in a recumbent position for the possible for all models, we recommend autoclaving only for the stainless steel model. The other models have parts of aluminium, which may corrode by repeated steam autoclaving Safety inspector 3 Mr. Gerhard Biro 01 autoclaving. repeated steam with 5.5 weight) is definitely too in a recumbent position for the high. The values from the intra-ocular pressure measurement. tonometer table 1955 for After anaesthetising the cornea For autoclaving put the tonometer in a sterilisation bag or container. Please observe the instructions of Phone : + 49 7475 7134 high. high. The values from the intra-ocular pressure measurement. tonometer table 1955 for After anaesthetising the cornea measurements with the 5.5 g and 10 g weights should not differ the tonometer in a vertical from each other by more than 3 position at the centre of the mmHg for the same eye. If such cornea. Do not exert any comparative measurements produce pressure on the eyeball when significant variations repeatedly, moving back the lids. Reliable the rigidity of the cornea is abnormal. If values more than 3 mm off when the pointer shows a Ha higher are obtained using the 10 g pulse. Fax: + 49 7475 211 Gerhard.Biro@t-online.de the manufacturer of the autoclave. www.biro-medizintechnik.de € 0483 © Biro, 2007 Hg higher are obtained using the 10 g pulse.