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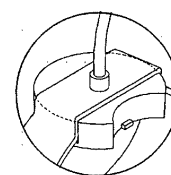
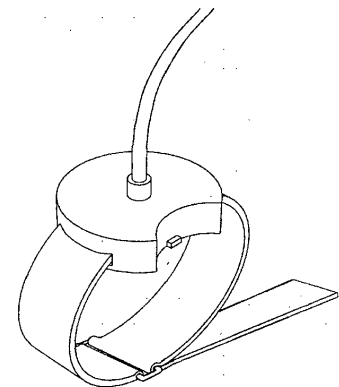
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• **Zijlstra, Godert****1215 GB Hilversum (NL)**(54) **Ultrasound device for guided puncture of vascular access**

(57) The invention relates to an ultrasound device, in particular an ultrasound device that is designed for vascular imaging, especially for guiding vascular puncture. It comprises an ultrasound imaging probe that can be stabilized at the point of puncture by integrated straps or by a handle designed to rest the probe like a stethoscope on the skin as to enable puncture at suitable spots of the human body to gain access to the vascular system. In this way the major problem for lesser trained hands to combine the plane of imaging of the probe with the imaging plane of the needle is overcome. The manual puncture process is aided by the ultrasound device by showing an image of the vessel to be punctured both in a longitudinal and an axial way, which together with the stabilized position of the device, enables the manual puncture to be as accurate as possible.

Figure 1

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Description

[0001] The invention relates to an ultrasound device, in particular an ultrasound device that is designed for vascular imaging, especially for guiding vascular puncture. It comprises an ultrasound imaging probe that can be stabilized at the point of puncture by integrated straps or by a handle designed to rest the probe like a stethoscope on the skin as to enable puncture at suitable spots of the human body to gain access to the vascular system. In this way the major problem for lesser trained hands to combine the plane of imaging of the probe with the imaging plane of the needle is overcome. The manual puncture process is aided by the ultrasound device by showing an image of the vessel to be punctured both in a longitudinal and an axial way, which together with the stabilized position of the device, enables the manual puncture to be as accurate as possible.

[0002] In the prior art relating to vessel puncture under ultrasound guidance, the existing methods are mainly suited for specialist procedures. It comprises a traditional ultrasound probe on which a device is mounted that can guide a puncture needle in a fixated manner under an adjustable degree with the human body. This procedure involves a manual control over the ultrasound probe, with left or right hand, while using the other hand to control the puncture process. This known method, like any other method including a manually controlled ultrasound probe of any sort, requires extensive experience and coordination during the puncture process. Also the ultrasound probe and device are not specifically designed for vascular access and hence will be a general utility ultrasound device which will require even more specialist knowledge as to programming and adjusting for optimal image for the purpose of vascular access.

[0003] The invention aims at removing the restrictions of existing vena puncture with ultrasound guidance. It does so by having a probe which is both particularly designed for vascular imaging in typical access areas, both in terms of imaging depth as width of imaging area, and is equipped with e.g. fixating straps, or any other mechanism for stabilizing the probe, that will eliminate the need for coordinating the probe with a free hand. Furthermore both the probe and the imaging screen have indication marks that enable the alignment between the probe and the vessel that requires the puncture.

[0004] The result of this combination is that both hands can be used for the needle puncture process. Less imaging adjustment is required to get accurate ultrasound guidance and the alignment between vessel and needle tip at point of access of the human body is indicated, all leading to more accurate punctures that require less attempts and harm/discomfort for the patient.

[0005] The before mentioned ultrasound probe is new and innovative in the sense that the probe is designed in such a way that it can be stabilized in any of the regular vascular access points like e.g. armpits or wrists. This is achieved by integrating the contact point of the probe in

a flat surface which allows for stable contact with the human body. Existing ultrasound probes, even if equipped with fixating straps, would not be able to give a stable and frozen image of the designated area. A key technological step forward is to enable the probe to have stable contact with the skin by fixating the probe, and not as in the prior art by fixating the needle guidance. A fixated probe with a stable image will enable a more controlled access to the vascular system and will require less professional knowledge and training by the medical practitioner, since they can use both hands, like in a non-guided vena puncture, to make the needle puncture.

[0006] To further aid the guidance and control during the vena puncture, the probe will have a clear puncture area shaped as a half circle retraction from the diameter of the probe. The flat surface of the extended probe that has contact with the puncture area has in that sense a tiny half circle gap. In the deepest part of the half circle, there is a small indicator that corresponds with an indicator line on the display. This way the probe can be aligned with the ultrasound image on screen to the extent that the indicator on the probe can be placed on top of the vein to be punctured by looking at the image on screen to see when the vein and the on screen indicator are aligned. If they are aligned on the image, the probe should be stabilized for example by fixating straps or by a dedicated handle to keep the alignment. At that point the indicator on the probe, being placed and fixed in position to the vein, will provide a clear puncture entry point for the needle.

[0007] After the needle has entered the body, the screen will aid the puncture by showing a double image. It shows the vein to be punctured in a longitudinal and axial way, to be able to keep alignment and direction with the indicators on screen and probe, and it will show a cross section view of the vessel to be able to assess entry of the vein with the needle and hence also when to stop the puncture from extending deeper into the body. The result is a full three dimensional assistance of the vena puncture by the indicators and the double image on screen.

[0008] The combined results of a ultrasound probe designed for stable contact with the puncture area, fixated in place so no further manual control on the probe is required, the indicator alignment in the needle entry area of the probe with the indicator on the screen, and the double image providing also a depth dimension to the ultrasound imaging, gives maximum control, i.e. free to use both hands to guide the needle, and maximum accuracy, i.e. visibility of the vein to be accessed, for gaining intravenous access.

[0009] In conclusion vessel puncture for gaining access to the circulation of a patient is probably the most executed procedure in outpatient and clinical healthcare. Emergency departments and ambulances, hematology labs, operating theatres, Intensive care units, hemodialysis departments, oncology departments and many other places like CT scans and MR suites require easy and sure

and fast single puncture of a vessel to guarantee access to the circulation. Ultrasound assistance making easy such punctures for even unpracticed staff will be a huge step forward in daily medicine!!

is in line with the high number of vessel punctures performed in modern day healthcare practice.

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Claims

1. A dedicated linear ultrasound probe for image guided vessel puncture. The probe comprises a flat surface contact area for application on the skin at the required puncture position to enable a stable position and image of the puncture area. The probe comprises of a retraction area in the surface dedicated for the precise puncture position without having to fix the needle to the probe, hence keeping all freedom of movement for guiding the needle into the vessel. 10 15
2. The imaging probe according to claim 1, **characterized by** the ability to fixate and stabilize the probe at the required skin level puncture area without manual interference. The fixating straps or a design with a fixed probe holder, or any other means of keeping the probe in position without using a hand, enables bimanual guidance of the needle puncture which relates best to the experience of personnel typically involved in vessel punctures. 20 25
3. The imaging probe according to claim 1, where the retraction area of the probe has an indicator at the deepest point of the retraction area that is aligned with an indicator at the image display to facilitate easy alignment of the longitudinal image of the vessel and the probe. After the indicator line on the screen is visually aligned with the image of the vessel by moving the probe over the skin, and the probe is fixed into position, the indicator on the probe provides an easy entry indicator for the needle puncture of the skin. 30 35 40
4. The imaging probe according to claim 1 provides longitudinal and axial simultaneous or alternative switchable imaging planes on the screen for maximum guidance of the needle entry into the vessel. After having aligned the indicators on the probe and the screen as in claim 3, and the needle has punctured the skin, the practitioner will have both hands free to control the needle to the point that it punctures the anterior vesselwall, and to the point that, after entering the vessel, the puncture stops to prevent the needle of going too deep and penetrating the posterior vesselwall with a consequent haematoma. 45 50
5. The imaging probe according to claim 1, with the addition of an easily exchangeable and sterile cover to enable the required level of patient hygiene, without having to sterilize the entire probe. This will enable a high usage rate of the imaging device, which 55

Figure 1

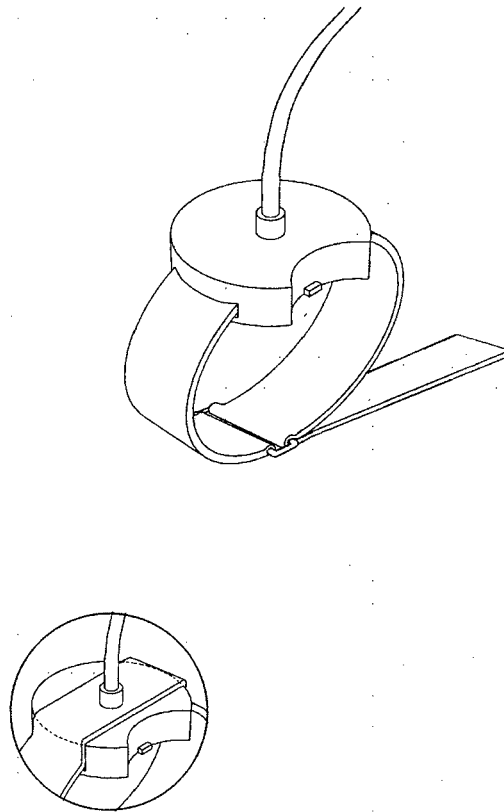


Figure 2:

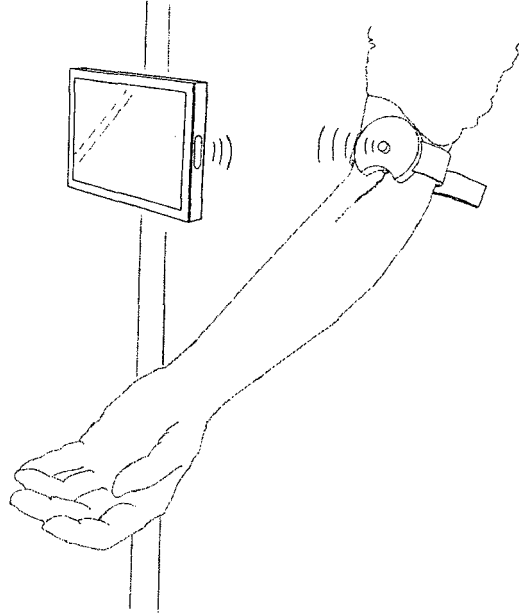
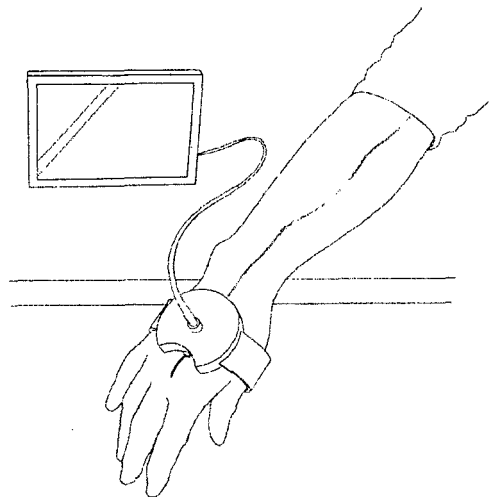


Figure 3:





EUROPEAN SEARCH REPORT

Application Number
EP 12 07 5049

DOCUMENTS CONSIDERED TO BE RELEVANT			
Category	Citation of document with indication, where appropriate, of relevant passages	Relevant to claim	CLASSIFICATION OF THE APPLICATION (IPC)
X	US 2007/016030 A1 (STRINGER BRADLEY J [US]) 18 January 2007 (2007-01-18) * columns 3,33-44; figures 1-4, 8 *	1-5	INV. A61B8/08 A61B17/34
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			TECHNICAL FIELDS SEARCHED (IPC)
			A61B
The present search report has been drawn up for all claims			
Place of search Munich		Date of completion of the search 24 August 2012	Examiner Koprinarov, Ivaylo
CATEGORY OF CITED DOCUMENTS X : particularly relevant if taken alone Y : particularly relevant if combined with another document of the same category A : technological background O : non-written disclosure P : intermediate document T : theory or principle underlying the invention E : earlier patent document, but published on, or after the filing date D : document cited in the application L : document cited for other reasons & : member of the same patent family, corresponding document			

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EPO FORM 1503 03 82 (P04C01)

**ANNEX TO THE EUROPEAN SEARCH REPORT
ON EUROPEAN PATENT APPLICATION NO.**

EP 12 07 5049

This annex lists the patent family members relating to the patent documents cited in the above-mentioned European search report.
The members are as contained in the European Patent Office EDP file on
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24-08-2012

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专利名称(译)	用于引导血管通路穿刺的超声装置		
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[标]申请(专利权)人(译)	Zijlstra简		
[标]发明人	ZIJLSTRA GODERT ZIJLSTRA JAN		
发明人	ZIJLSTRA, GODERT ZIJLSTRA, JAN		
IPC分类号	A61B8/08 A61B17/34		
CPC分类号	A61B8/0841 A61B8/4227 A61B8/4455 A61B17/3403 A61B2017/3413		
审查员(译)	KOPRINAROV , IVAYLO		
外部链接	Espacenet		

摘要(译)

超声装置技术领域本发明涉及一种超声装置，特别是一种超声装置，其设计用于血管成像，尤其用于引导血管穿刺。它包括一个超声成像探头，可以通过集成的带子或通过设计用于将探头像听诊器一样放在皮肤上的手柄来稳定，以便能够在人体的适当位置穿刺以进入血管系统。以这种方式，克服了较少训练的手将探针的成像平面与针的成像平面组合的主要问题。超声装置通过以纵向和轴向方式显示待穿刺的血管的图像来辅助手动穿刺过程，其与装置的稳定位置一起使得手动穿刺尽可能准确。

Figure 1

