



US007766824B2

(12) **United States Patent**
Jensen et al.

(10) **Patent No.:** **US 7,766,824 B2**
(45) **Date of Patent:** **Aug. 3, 2010**

(54) **SURGICAL HAND ACCESS APPARATUS**

(75) Inventors: **David Jensen**, Westbrook, CT (US);
Thomas Wenchell, Durham, CT (US)

(73) Assignee: **Tyco Healthcare Group LP**, North
Haven, CT (US)

(*) Notice: Subject to any disclaimer, the term of this
patent is extended or adjusted under 35
U.S.C. 154(b) by 623 days.

5,520,610 A	5/1996	Giglio et al.
5,522,791 A	6/1996	Leyva
5,524,644 A	6/1996	Crook
5,526,536 A	6/1996	Cartmill
5,545,179 A	8/1996	Williamson, IV
5,634,911 A	6/1997	Hermann et al.
5,636,645 A	6/1997	Ou
5,639,937 A	6/1997	Hover et al.
5,640,977 A	6/1997	Leahy et al.

(21) Appl. No.: **11/095,340**

(22) Filed: **Mar. 31, 2005**

(65) **Prior Publication Data**

US 2006/0229501 A1 Oct. 12, 2006

(51) **Int. Cl.**
A61B 1/32 (2006.01)

(52) **U.S. Cl.** **600/208**

(58) **Field of Classification Search** 600/206,
600/208, 215; 604/167.01, 167.02, 167.03,
604/167.04, 246, 523, 167, 256; 606/93-96,
606/200-203, 213, 215

See application file for complete search history.

(56) **References Cited**

U.S. PATENT DOCUMENTS

2,305,289 A	12/1942	Coburg
3,332,417 A	7/1967	Stanford et al.
3,427,226 A	2/1969	McNeely
3,427,227 A	2/1969	Chamberlin
4,069,913 A	1/1978	Harrigan
4,516,578 A *	5/1985	Shuffield 604/514
4,984,564 A	1/1991	Yuen
5,159,921 A	11/1992	Hoover
5,342,385 A	8/1994	Norelli et al.
5,366,478 A	11/1994	Brinkerhoff et al.
5,368,545 A	11/1994	Schaller et al.
5,411,483 A	5/1995	Loomas et al.
5,480,410 A	1/1996	Cuschieri et al.
5,514,133 A	5/1996	Golub et al.

(Continued)

FOREIGN PATENT DOCUMENTS

DE 3737121 C2 5/1989

(Continued)

OTHER PUBLICATIONS

European Search Report for EP 06005181, date of completion Jun.
26, 2006 (7 pgs).

(Continued)

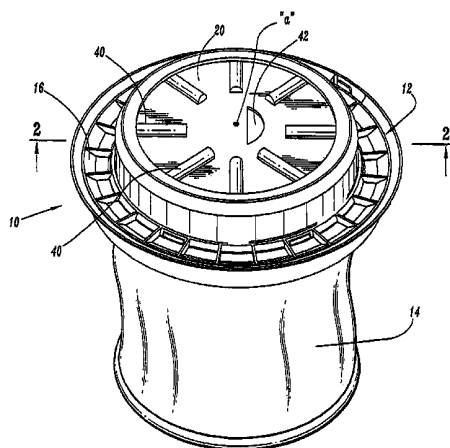
Primary Examiner—Cris L Rodriguez

Assistant Examiner—Hao D Mai

(57) **ABSTRACT**

A surgical access apparatus adaptable to permit the sealed insertion of either the surgeon's hand and/or surgical instruments during laparoscopic and endoscopic surgical procedures includes an access member having a passageway there-through and first and second seal members mounted across the passageway. The first and second seal members each has an aperture in non-overlapping relation to each other in the absence of the object positioned therein. The outer seal portion of the first seal member may include a plurality of expansible ribs and corresponding recesses arranged along respective lines of intersection with the axis of the first seal member.

32 Claims, 7 Drawing Sheets



U.S. PATENT DOCUMENTS

5,649,550 A 7/1997 Crook
 5,653,705 A 8/1997 de la Torre et al.
 5,672,168 A 9/1997 de la Torre et al.
 5,741,298 A 4/1998 MacLeod
 5,803,921 A 9/1998 Bonadio
 5,810,721 A 9/1998 Mueller et al.
 5,813,409 A 9/1998 Leahy et al.
 5,832,925 A 11/1998 Rothrum
 5,853,395 A 12/1998 Crook et al.
 5,899,208 A 5/1999 Bonadio
 5,906,577 A 5/1999 Beane et al.
 5,947,922 A 9/1999 MacLeod
 5,957,913 A 9/1999 de la Torre et al.
 5,964,781 A 10/1999 Mollenauer et al.
 5,997,515 A 12/1999 de la Torre et al.
 6,024,736 A 2/2000 de la Torre et al.
 6,033,426 A 3/2000 Kaji
 6,033,428 A 3/2000 Sardella
 6,042,573 A 3/2000 Lucey
 6,048,309 A 4/2000 Flom et al.
 6,077,288 A 6/2000 Shimomura et al.
 6,086,570 A 7/2000 Aboul-Hosn et al.
 6,099,505 A * 8/2000 Ryan et al. 604/167.04
 6,110,154 A 8/2000 Shimomura et al.
 6,142,935 A 11/2000 Flom et al.
 6,142,936 A 11/2000 Beane et al.
 6,149,642 A 11/2000 Gerhart et al.
 6,159,200 A 12/2000 Verdura et al.
 6,162,172 A 12/2000 Cosgrove et al.
 6,238,373 B1 5/2001 de la Torre et al.
 6,254,533 B1 7/2001 Fadem et al.
 6,254,534 B1 7/2001 Butler et al.
 6,315,770 B1 11/2001 de la Torre et al.
 6,319,246 B1 11/2001 de la Torre et al.
 6,382,211 B1 5/2002 Crook
 6,440,063 B1 8/2002 Beane et al.
 6,450,983 B1 9/2002 Rambo
 6,578,577 B2 6/2003 Bonadio et al.
 6,610,031 B1 * 8/2003 Chin 604/167.04
 6,814,700 B1 11/2004 Mueller et al.

6,840,951 B2 1/2005 de la Torre et al.
 6,846,287 B2 1/2005 Bonadio et al.
 6,981,966 B2 * 1/2006 Green et al. 604/167.02
 2001/0047188 A1 11/2001 Bonadio et al.
 2002/0019609 A1 2/2002 McFarlane
 2002/0038077 A1 3/2002 de la Torre et al.
 2002/0072762 A1 6/2002 Bonadio et al.
 2004/0015185 A1 1/2004 Ewers et al.
 2004/0092795 A1 5/2004 Bonadio et al.
 2004/0127772 A1 7/2004 Ewers et al.
 2004/0249248 A1 12/2004 Bonadio et al.
 2005/0020884 A1 1/2005 Hart et al.
 2005/0165433 A1 * 7/2005 Haberland et al. 606/167

FOREIGN PATENT DOCUMENTS

EP 0 950 376 A1 10/1999
 FR 2710270 9/1993
 FR 27100270 A 3/2003
 GB 2 071 502 A 9/1981
 GB 2 255 019 A 10/1992
 JP 10-108868 4/1998
 WO WO 95/04202 2/1995
 WO WO 95/07056 3/1995
 WO WO 95/22289 8/1995
 WO WO 95/27445 10/1995
 WO WO 95/27468 10/1995
 WO WO 98/35614 8/1998
 WO WO 98/48724 11/1998
 WO WO 99/25268 5/1999
 WO WO 00/32120 6/2000
 WO WO 00/35356 6/2000
 WO WO 00/54675 9/2000
 WO WO 00/54676 9/2000
 WO WO 00/54677 9/2000
 WO WO 01/08563 A2 2/2001
 WO WO 01/08581 A2 2/2001

OTHER PUBLICATIONS

European Search Report for EP 09000060 dated Jun. 9, 2009. (7 pages).

* cited by examiner

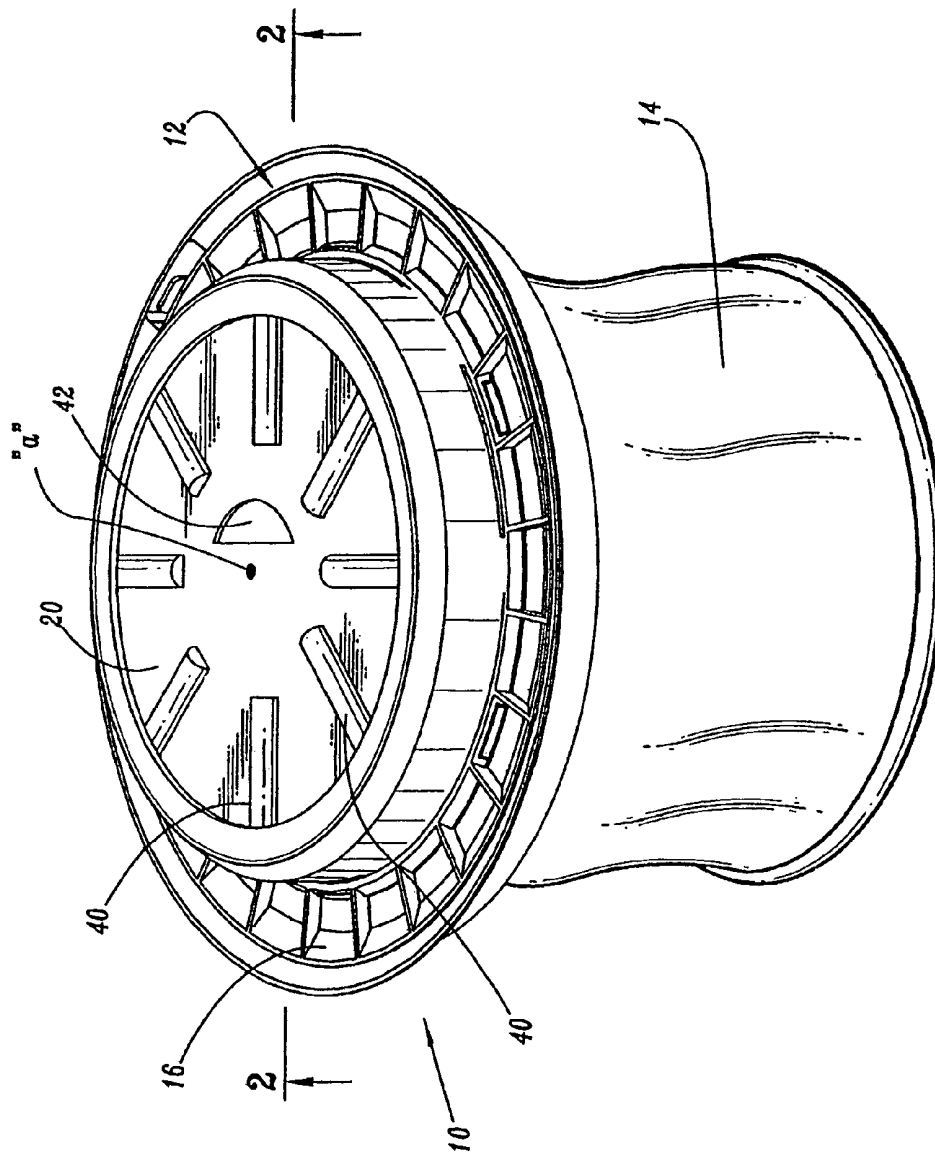


FIG. 1

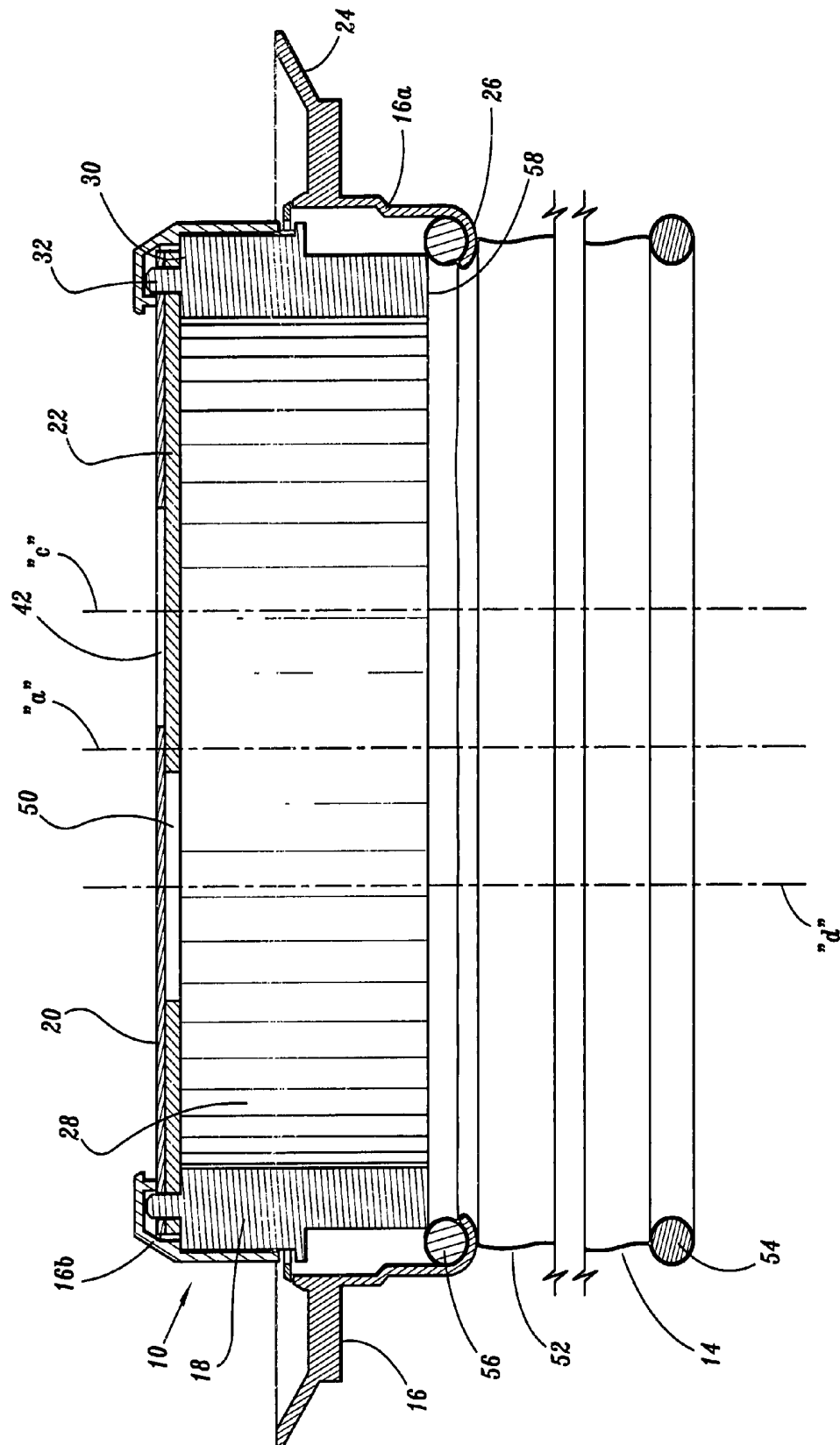


FIG. 2

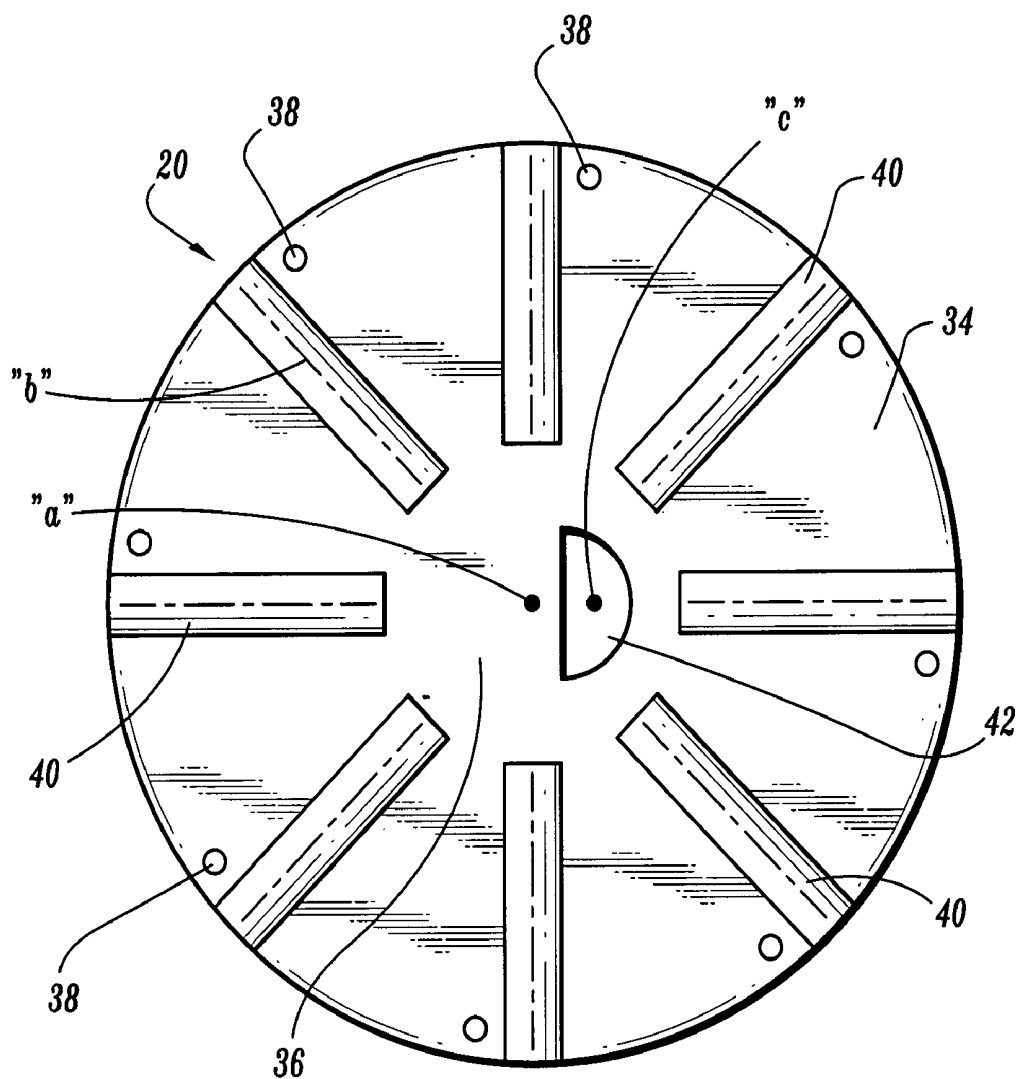


FIG. 3

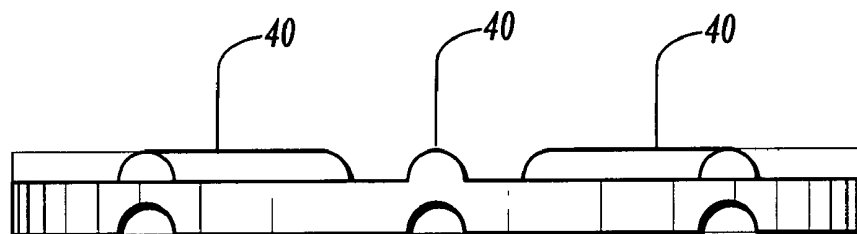
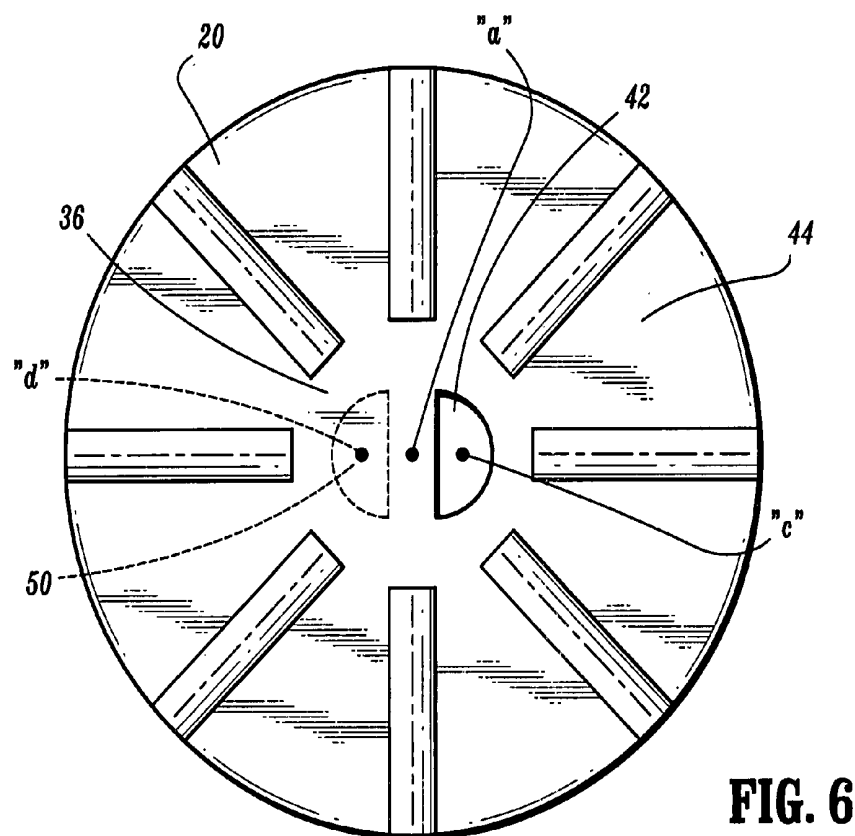
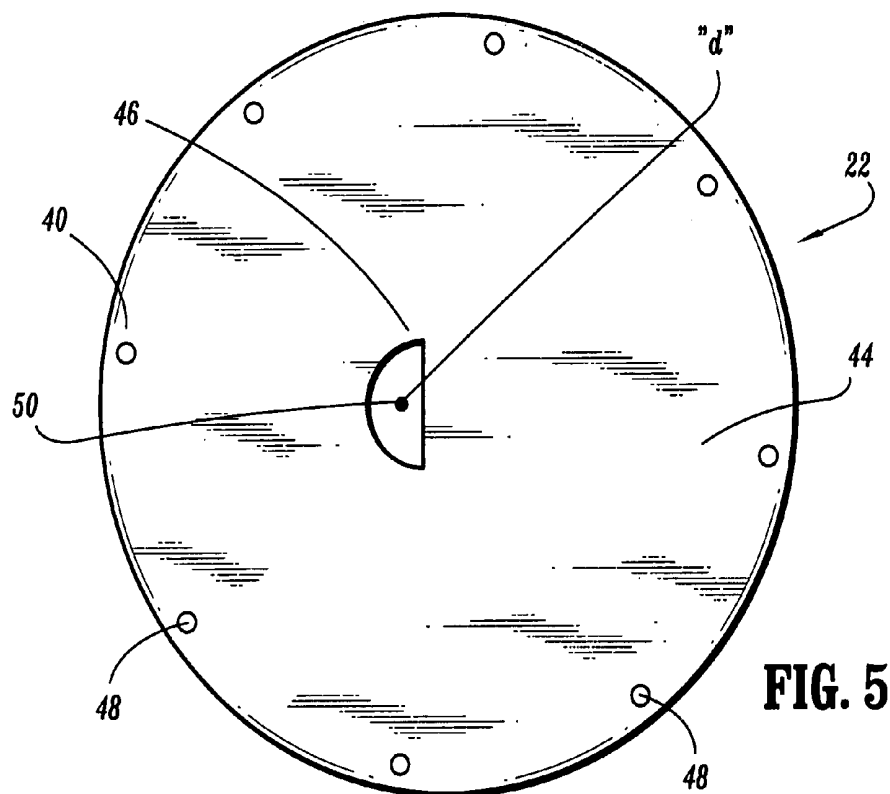
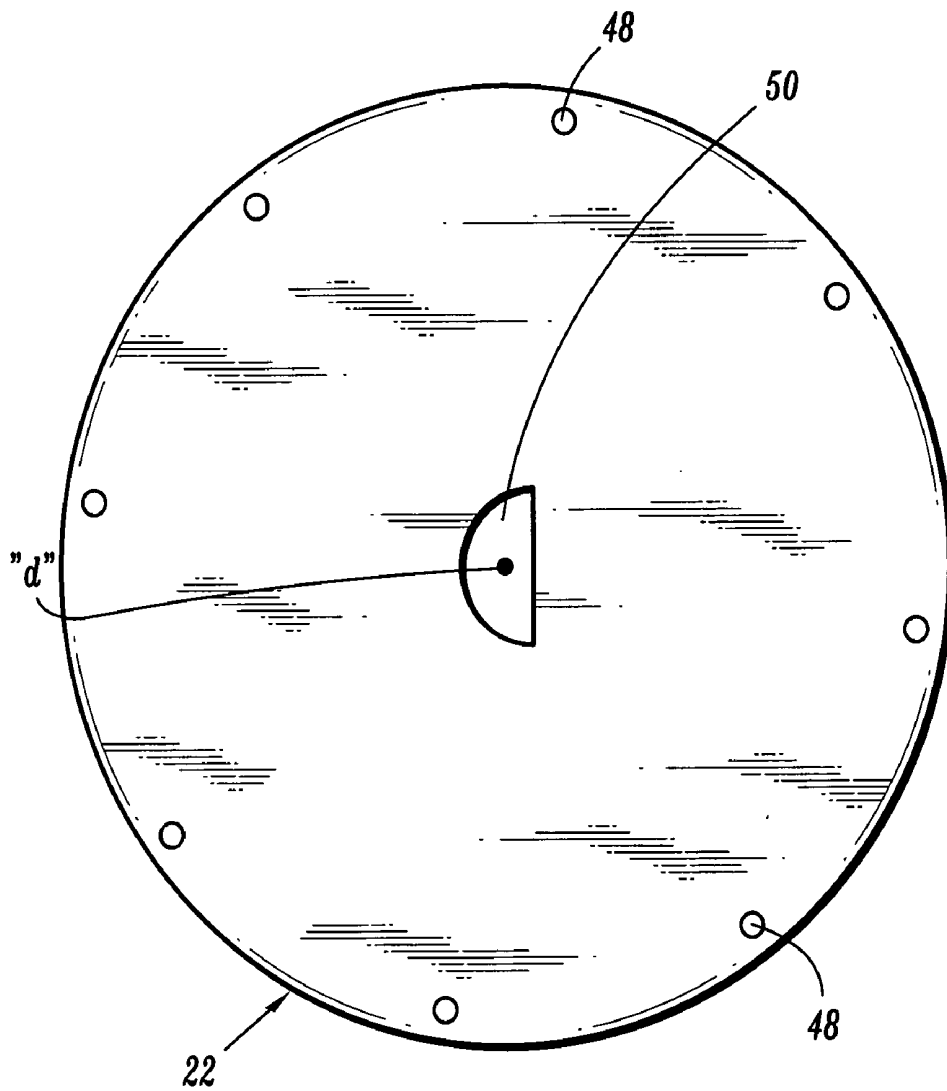
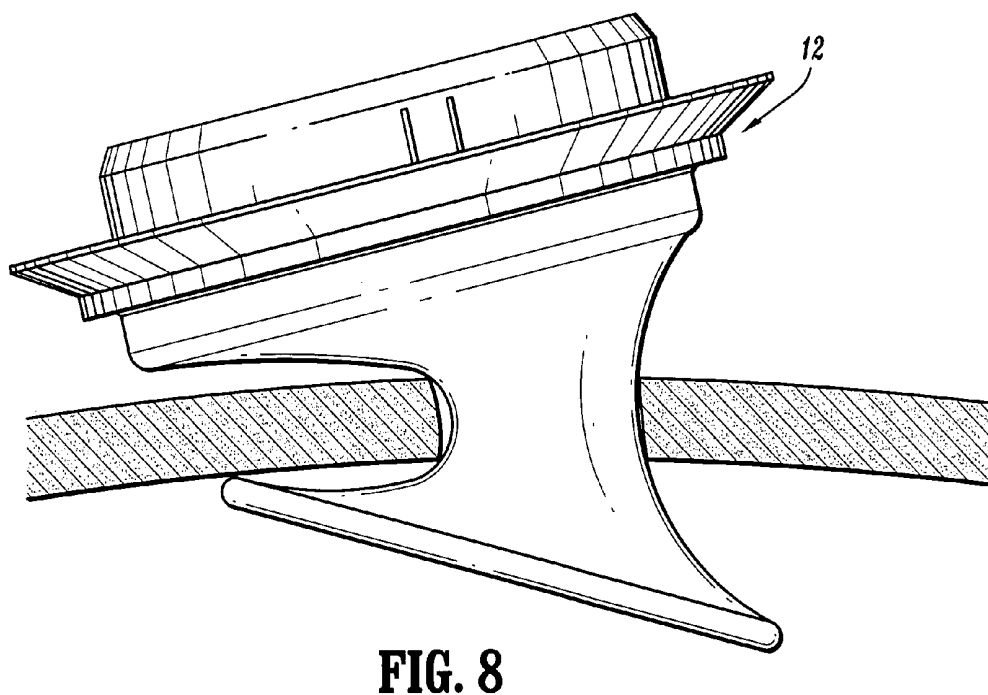
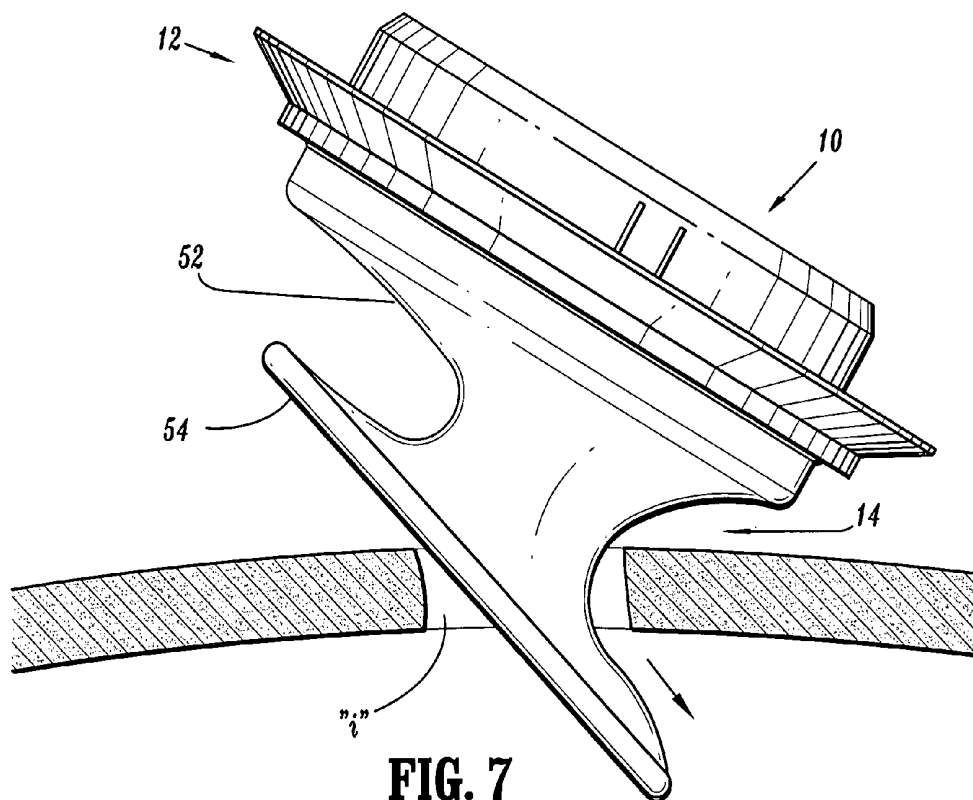


FIG. 4



**FIG. 5A**



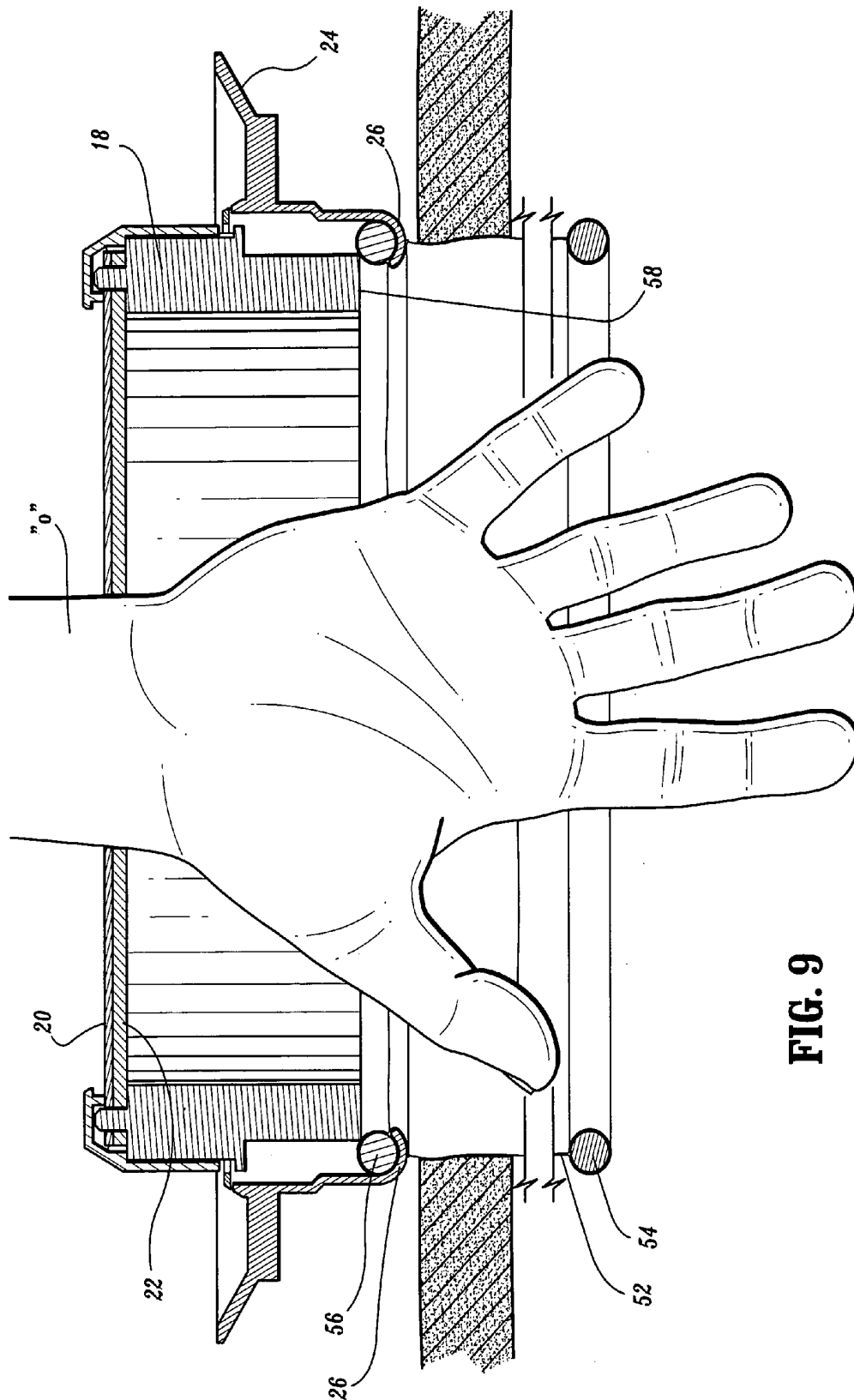


FIG. 9

SURGICAL HAND ACCESS APPARATUS

BACKGROUND

1. Field of the Disclosure

The present disclosure relates generally to surgical devices for facilitating sealed access across a body wall and into a body cavity and, more particularly, to a surgical access apparatus adaptable to form a seal about either the surgeon's hand and/or surgical instruments during laparoscopic and endoscopic surgical procedures.

2. Description of the Related Art

Minimally invasive surgical procedures including both endoscopic and laparoscopic procedures permit surgery to be performed on organs, tissues and vessels far removed from an opening within the tissue. Laparoscopic and endoscopic procedures generally require that any instrumentation inserted into the body be sealed, i.e. provisions must be made to ensure that gases do not enter or exit the body through the incision as, e.g., in surgical procedures in which the surgical region is insufflated. These procedures typically employ surgical instruments which are introduced into the body through a cannula. The cannula has a seal assembly associated therewith. The seal assembly provides a substantially fluid tight seal about the instrument to preserve the integrity of the established pneumoperitoneum.

Minimally invasive procedures have several advantages over traditional open surgery, including less patient trauma, reduced recovery time, reduced potential for infection, etc. . . . However, despite its recent success and overall acceptance as a preferred surgical technique, minimally invasive surgery, such as laparoscopy, has several disadvantages. In particular, surgery of this type requires a great deal of surgeon skill in order for the surgeon to manipulate the long narrow endoscopic instruments about a remote site under endoscopic visualization. In addition, in laparoscopic surgery involving the intestinal tract, it is often preferable to manipulate large sections of the intestines to perform the desired procedure. These manipulations are not practical with current laparoscopic tools and procedures accessing the abdominal cavity through a trocar or cannula.

To address these concerns, recent efforts have focused on hand-assisted laparoscopic techniques and procedures. These procedures incorporate both laparoscopic and conventional surgical methodologies. The hand assisted technique is performed in conjunction with a hand access seal which is an enlarged device positionable within the incision in, e.g., the insufflated abdominal cavity. The device includes a seal for forming a seal about the surgeon's arm upon insertion while permitting surgical manipulation of the arm within the cavity. However, known hand access seals are quite cumbersome and incorporate elaborate sealing mechanisms. Moreover, these hand access seals are ill-adapted to accommodate radial manipulation of the surgeon's arm within the seal.

SUMMARY

Accordingly, the present disclosure relates to a surgical access apparatus adaptable to permit the sealed insertion of either the surgeon's hand and/or surgical instruments during laparoscopic and endoscopic surgical procedures. In one preferred embodiment, the surgical access apparatus includes an access member having a passageway therethrough and first and second seal members mounted across the passageway. The first seal member includes an inner seal portion and an outer seal portion. The inner seal portion has an aperture for substantial sealed reception of an object inserted therein and

is arranged about a first seal axis. The outer seal portion includes at least one expansible rib dimensioned to facilitate movement of the aperture to a displaced position radially displaced from the first seal axis upon insertion of the object therethrough. The second seal member also has an inner portion defining an aperture for substantial sealed reception of the object and is arranged about a second seal axis radially displaced from the first seal axis. Preferably, the apertures of the first and second seal members are in non-overlapping relation and form a substantial seal within the passageway of the access member in the absence of the object inserted within the aperture of the first member. The first seal member is adapted to move to the displaced position upon insertion of the object therethrough whereby the apertures of the first seal member and the second seal member overlap. The outer seal portion of the first seal member may include a plurality of expansible ribs. The expansible ribs may be arranged along respective lines of intersection with the first seal axis of the first seal member.

In another preferred embodiment, the surgical access apparatus includes an access member having a passageway therethrough and a seal member mounted across the passageway. The seal member includes an inner seal portion and an outer seal portion. The inner seal portion has an aperture for substantial sealed reception of an object inserted therein and is arranged about a seal axis. The outer seal portion includes at least one expansible rib dimensioned to facilitate movement of the aperture to a displaced position radially displaced from the seal axis upon insertion of the object therethrough. The at least one expansible rib is generally arranged along a line of intersection with the seal axis of the seal member. The access member may further include a second seal member mounted adjacent the first seal member. The second seal member has an inner portion defining an aperture for substantial sealed reception of the object and is arranged about a second seal axis radially displaced from the first-mentioned seal axis. The first seal member is preferably adapted to move to the displaced position upon insertion of the object therethrough whereby the apertures of the first seal member and the second seal member overlap.

In another preferred embodiment, the surgical hand access apparatus includes a liner base adapted for insertion through an opening within body tissue for at least partial positioning within the body and an access housing mountable to the liner base. The access housing includes a housing member for positioning outside the body and defines a passageway dimensioned for permitting passage of either a surgeon's hand or arm of a surgeon, a first seal member mounted to the housing member and a second seal member mounted within the housing member adjacent the first seal member. The first seal member includes an inner seal portion and an outer seal portion. The inner seal portion has an aperture for substantial sealed reception of either the surgeon's hand or arm. The second seal member also has an inner portion defining an aperture for substantial sealed reception of either the surgeon's hand or arm. The first and second seal members form a substantial seal within the passageway of the housing member in the absence of the hand or arm of the surgeon. However, during insertion of either the surgeon's hand or arm within the aperture of the first seal member, the inner seal portion of the first seal member is adapted to move to position the aperture thereof in at least partial overlapping relation with the aperture of the second seal member to permit passage of the surgeon's hand or arm through the housing member. The outer seal portion of the first seal member includes at least one expansible rib (preferably, a plurality of ribs) dimensioned to

facilitate movement of the aperture of the first seal member to a displaced position radially displaced from the first seal axis.

BRIEF DESCRIPTION OF THE DRAWINGS

Preferred embodiments of the present disclosure will be better appreciated by reference to the drawings wherein:

Preferred embodiments of the present disclosure will be better appreciated by reference to the drawings wherein:

FIG. 1 is a perspective of the hand access apparatus in accordance with the principles of the present disclosure illustrating the access housing and liner base;

FIG. 2 is a cross sectional view of the access apparatus in accordance with the embodiment of FIG. 1 taken along lines 2-2 of FIG. 1;

FIG. 3 is a top plan view of a first seal within the access housing;

FIG. 4 is a side plan view of the first seal;

FIG. 5 is a top plan view of a second seal within the access housing;

FIG. 5A is a top plan view of an alternate embodiment of the second seal;

FIG. 6 is a top plan view of the first and second seals with the second seal depicted in phantom;

FIGS. 7-8 are views illustrating insertion of the hand access apparatus within an incision; and

FIG. 9 is a cross-sectional view similar to the view of FIG. 2 illustrating radial movement of the first seal during insertion of an object within the access housing.

DETAILED DESCRIPTION OF THE PREFERRED EMBODIMENTS

The surgical access apparatus of the present disclosure provides a substantial seal between the body cavity of a patient and the outside atmosphere before, during and after insertion of an object through the apparatus. Moreover, the access apparatus of the present disclosure is adapted for positioning within an incision and may retract the tissue defining the incision to permit access to the underlying tissue. The access apparatus is particularly adapted for accommodating the hand and/or arm of a surgeon during a hand assisted laparoscopic procedure and establishing a gas tight seal with the arm when inserted. However, the access apparatus may be adapted to receive other objects, such as surgical instruments. The access apparatus is further adapted to substantially close in the absence of the object to maintain the integrity of the insufflated peritoneal cavity.

Although the specific focus of this disclosure will be on a preferred laparoscopic procedure, it will be noted that laparoscopic surgery is merely representative of a type of operation wherein a procedure can be performed in a body cavity with access through a body wall.

In the following description, as is traditional the term "proximal" refers to the portion of the instrument closest to the operator, while the term "distal" refers to the portion of the instrument remote from the operator.

Referring now to FIGS. 1-2, hand access apparatus 10 includes two main components, namely, access housing 12 and liner base 14 which is mounted to the access housing 12. Access housing 12 is positioned external to the body, preferably, in contact with the outer skin of the body and consists of outer frame or housing member 16, seal support 18 disposed within the housing member 16 and first and second seals 20, 22. Housing member 16 preferably defines outer flange 24 dimensioned for engagement by the surgeon and lower U-shaped flange 26. U-shaped flange 26 contacts the skin of

the patient upon application of access apparatus 10. U-shaped flange 26 also serves to mount liner base 14. Housing member 16 defines housing axis "a" and internal longitudinal passage-way 28 extending through the housing member 16. Housing member 16 may be a single piece component or alternatively incorporate multiple pieces assembled together by conventional means. In one preferred embodiment, housing member 16 incorporates two components 16a, 16b as depicted in FIG. 2. Housing component 16b serves as a cover for enclosing first and second seals 20, 22 and is connected to housing component 16a in fixed relation.

Seal support 18 of access housing 12 is an elongated annular collar which extends at least partially within housing member 16. The upper surface 30 of seal support 18 includes a plurality (two are shown) of upstanding posts 32 peripherally spaced about the periphery of the upper surface 30.

Referring now to FIGS. 3-4, in conjunction with FIGS. 1-2, first seal 16 includes outer seal portion 34 and inner seal portion 36. Outer seal portion 34 defines a plurality of apertures 38 which receive corresponding posts 32 of seal support 18 to mount first seal 20 to the seal support 18. Outer seal portion 34 also includes a plurality of ribs 40 radially displaced about the outer seal portion 34. Ribs 40 define an undulating arrangement as shown in FIG. 4. The undulating arrangement permits expansion of outer seal portion 34 particularly during offset manipulation of the object relative to housing axis "a". Ribs 40 are each preferably arranged along a line of intersection "b" with housing axis "a" to permit uniform expansion and movement of first seal 20. Ribs 40 may take other shapes and forms such as, for example, a sinusoidal configuration, pyramidal, convex, concave etc. . . .

Inner seal portion 36 defines internal aperture or opening 42. Aperture 42 is arranged about first seal axis "c" (FIG. 2) which is preferably radially offset from housing axis "a". Aperture 42 may be any suitable geometrical shape including circular, elliptical, square, rectangular, or any other polygonal arrangement. In the preferred embodiment, aperture 42 is generally D-shaped. Inner seal portion 36 is adapted to radially move upon insertion of an object through aperture 42 as facilitated by ribs 40 to permit the aperture 42 to assume a position in general alignment with housing axis "a".

With reference to FIG. 5, in conjunction with FIGS. 1-2, second seal 22 includes outer seal portion 44 and inner seal portion 46. Outer seal portion 44 also includes apertures 48 disposed about its periphery for reception of posts 32 of seal support 18 to mount the second seal 22 within housing member 16. Inner seal portion 46 defines opening or aperture 50 which may be of any geometrical shape, but, preferably, is generally D-shaped. Aperture 50 is arranged to be a mirror image of aperture 42 of first seal 20. Aperture 50 is arranged about second seal axis "d" which is radially offset from housing axis "a". Alternatively, as depicted in FIG. 5A, aperture 50 may be centrally located within second seal 22 with second seal axis "d" coincident with axis "a" of housing member 16. This arrangement may minimize the degree of movement required by first seal 20 and also positions the object in the center of housing member 16 during use. Second seal 22 may optionally include expansible ribs of the type aforescribed in connection with first seal 20.

First and second seals 20, 22 are each adapted to form a substantial seal about an object inserted through their apertures 42, 50 and may stretch to accommodate larger size objects. First and second seals 20, 22 are preferably in juxtaposed contacting relation. First and second seals 20, 22 may be formed of an elastomeric material including commercially available MONOPRENE™. In one preferred embodiment, seals 20, 22 are fabricated from a resilient material, e.g.,

polyisoprene, with each having at least one layer of fabric material positioned adjacent the resilient material. Seals **20**, **22** may be fabricated from an elastomeric material molded with a fabric material. A friction resisting coating may be applied to seals **20**, **22**. Such seal is disclosed in commonly-assigned U.S. patent application Ser. No. 10/165,373 filed Jun. 6, 2002, the contents of which are incorporated in its entirety by reference.

FIG. 6 illustrates in plan view the arrangement of first and second seals **20**, **22** (with second seal **22** shown in phantom) prior to insertion of an object within the apertures **42**, **50** of the seals **20**, **22**. As shown, apertures **42**, **50** of first and second seals **20**, **22** are in non-overlapping relation, and arranged so that the respective apertures of the first and second seal do not overlap. With this arrangement and with first and second seals **20**, **22** in contacting relation, the seals **20**, **22** substantially seal longitudinal passageway **28** of housing member **16** to prevent escape of insufflation gases through access housing **12**.

Referring again to FIGS. 1-2, liner base **14** of access apparatus **10** will be discussed. Liner base **14** is intended for positioning within the incision of the patient to line the incision and/or retract the tissue defining the incision thereby providing access to the underlying body cavity. Liner base **14** includes liner member **52**, and lower ring **54** and upper ring **56** mounted to respective ends of liner member **52**. Liner member **52** may be a sheet of flexible material including, for example, polyethylene, polypropylene, etc., arranged in a tubular or sleeve-like configuration.

Liner member **52** may also include an elastomeric material and may incorporate rigid runners embedded within the material to increase its rigidity. Although in the preferred embodiment, liner member **52** is tubular, it is envisioned that the liner member **52** may incorporate several pieces, e.g., individual tabs or the like. Liner member **52** may or may not be impervious to fluids. Liner member **52** is adapted to line the incision so as to prevent contamination of the incision by any tissue which may be removed through the access apparatus, or in the course of the surgery. Generally, liner member **52** may also serve to retract the incision during placement of the liner base **14**, so that the patient's skin, fascia, and other tissue are drawn back, allowing access to the surgical site.

Lower ring **54** of liner member **52** is adapted for positioning through the incision and beneath the abdominal wall to engage the interior wall portions to thereby secure liner base **14** relative to the incision. Lower ring **54** is preferably flexible to facilitate passage through the incision and possesses sufficient resiliency to return to its original configuration upon entering the abdominal cavity. Lower ring **54** is preferably annular or ring-like in configuration and may be fabricated from a resilient or elastomeric material. Lower ring **54** may be fixedly secured to the end of liner member **52** through conventional means.

Upper ring **56** is substantially identical to lower ring **54**, i.e., upper ring **56** is also annular or ring-like in configuration and is attached to the other end of liner member **52** by conventional means. Upper ring **56** is received within U-shaped flange **26** of access housing **12** and is secured between the flange **26** and lower surface **58** of seal support **18** to secure liner base **14** to access housing **12**. Other means for attaching upper ring **56** to access housing **12** are also envisioned.

In further embodiments, seal support **18** discussed above in connection with FIGS. 1-9 is mounted to a different base for retracting the incision and preferably lining the incision. For example, the base **14** may comprise a flexible sleeve for lining the incision and an inflatable member at a proximal end of the sleeve for tensioning the sleeve. Other structures for the base

14 may be used as appreciated by those of ordinary skill in the art. The access apparatus **10** discussed above may also include an additional seal for sealing around the object inserted through the apparatus, such as a septum seal.

Operation

The use of the access apparatus **10** in connection with a hand assisted laparoscopic surgical procedure will be discussed. The peritoneal cavity is insufflated and an incision is made within the cavity, with e.g., a trocar, to provide access to the cavity as is conventional in the art. Thereafter, as depicted in FIGS. 7-8, liner base **14** is introduced within the incision. Specifically, lower ring **54** is passed through the incision "i" and placed within the body cavity. As noted, lower ring **54** may be contracted upon itself to facilitate passage through the incision "i" and then released to permit the lower ring **54** to return to its normal condition (under the influences of its inherent resiliency) within the cavity. Liner member **52** extends from lower ring **54** through the incision to line the incision as previously discussed.

With reference to FIG. 9, the procedure is continued by positioning access housing **12** adjacent the external body tissue with the outer surface of U-shaped flange **26** engaging the tissue surrounding the incision. Thereafter, an object such as the surgeon's hand or arm "o" is introduced within access housing **12** and advanced through aperture **42** of first seal **20**. As noted, inner seal portion **36** of first seal **20** moves radially as facilitated by expansion of ribs **40** to permit aperture **42** to at least partially overlap with aperture **50** of second seal **22** thereby permitting the surgeon to continue advancing his arm through access housing **12** and liner base **14**. The surgeon continues to advance his arm through aperture **50** of second seal **22** and within the abdominal cavity.

With access apparatus **10** in this position of FIG. 9, hand assisted surgery may then be effected by continued advancement of the surgeon's hand and arm through seals **20**, **22** of access housing **12** and into the body cavity. Seals **20**, **22** form a fluid tight seal about the arm. The desired hand assisted procedure may then be performed.

It will be understood that various modifications may be made to the embodiments disclosed herein. Therefore, the above description should not be construed as limiting, but merely as exemplifications of preferred embodiments. Those skilled in the art will envision other modifications within the scope and spirit of the claims appended hereto.

What is claimed:

1. A surgical access apparatus, which comprises:

an access member having a passageway therethrough and defining a central housing axis, and having a proximal end and a distal end;

a first seal member mounted across the passageway, the first seal member including an inner seal portion and an outer seal portion, and defining proximal and distal end faces, the inner seal portion having inner surfaces defining an aperture dimensioned for reception of at least one of the hand or arm of a user in substantial sealed relation therewith and being arranged about a first seal axis when in an initial position of the first seal member in the absence of the at least one of the hand or arm, the outer seal portion including at least one expansible rib extending in a proximal direction from the proximal end face of the first seal member and a corresponding at least one recess defined within the distal end face of the first seal member aligned with the at least one expansible rib, the at least one expansible rib and the at least one corresponding recess arranged to extend radially toward and away from the central housing axis along a general line

of intersection with the central housing axis, the at least one expansible rib and the at least one corresponding recess arranged to define an undulation within the outer seal portion adapted to facilitate movement of the aperture to a displaced position radially displaced from the first seal axis during manipulation of the object within the first seal member; and

a second seal member mounted adjacent the first seal member, the second seal member having an inner portion defining an aperture dimensioned for substantial sealed reception of the at least one of the hand or arm and being arranged about a second seal axis radially displaced from the first seal axis when in an initial position of the second seal member in the absence of the at least one of the hand or arm.

2. The surgical access apparatus according to claim 1 wherein the first and second seal members are arranged so that their respective apertures do not overlap in the absence of the at least one of the hand or arm positioned therein.

3. The surgical access apparatus according to claim 2 wherein the first seal member is adapted to move to the displaced position upon insertion of the at least one of the hand or arm therethrough so that the apertures of the first seal member and the second seal member overlap.

4. The surgical access apparatus according to claim 3 wherein the first and second seal members are in contacting relation when in respective initial positions thereof and being adapted to form a substantial seal within the passageway of the access member in the absence of the at least one of the hand or arm inserted within the apertures of the first and second seal members.

5. The surgical access apparatus according to claim 1 including a plurality of expansible ribs each extending in the proximal direction from the proximal end face of the first seal member, each rib having a corresponding recess within the distal end face of the first seal member beneath the respective rib, the expansible ribs and corresponding recesses arranged to facilitate movement of the aperture of the first seal member to the displaced position.

6. The surgical apparatus according to claim 5 wherein each rib and corresponding recess is arranged to extend radially toward and away from the central housing axis along respective lines of intersection with the central housing axis of the access member.

7. The surgical access apparatus of claim 6 wherein each rib is substantially linear.

8. The surgical access apparatus of claim 1 wherein the at least one rib is substantially linear.

9. The surgical access apparatus of claim 1 wherein the second seal member includes at least one expansible rib arranged to facilitate movement of the aperture of the second seal member to a displaced position radially displaced from the second seal axis during manipulation of the object therewithin.

10. The surgical access apparatus according to claim 9 wherein the second seal member includes a corresponding at least one recess adjacent a distal end face of the first seal member beneath the at least one expansible rib, the at least one expansible rib and the at least one expansible recess being arranged to facilitate movement of the aperture of the second seal member to the displaced position.

11. The surgical access apparatus of claim 1 wherein the first and second apertures are each generally D-shaped.

12. The surgical access apparatus of claim 1 wherein the second seal axis of the second seal member is in general alignment with the central housing axis in the absence of the object.

13. The surgical access apparatus according to claim 1 including a flexible liner operatively connected to the access member, the liner adapted for insertion through a tissue tract accessing the abdominal cavity of a patient.

14. A surgical access apparatus, which comprises:

- an access member having a passageway therethrough and defining a central longitudinal axis;
- a seal member mounted across the passageway, the seal member including an inner seal portion and an outer seal portion, the inner seal portion having inner surfaces defining an aperture for substantial sealed reception of at least one of the hand or arm of a surgeon inserted therein and being arranged about a seal axis, the outer seal portion including at least one expansible rib and having a corresponding at least one recess beneath the at least one expansible rib, the at least one expansible rib and the at least one recess dimensioned to facilitate movement of the aperture to a displaced position radially displaced from the seal axis upon passage of the at least one of the hand or arm therethrough, the at least one expansible rib and the at least one recess extending radially inwardly with respect to the seal axis from the outer seal portion toward the inner seal portion and being generally arranged along a line of intersection with the seal axis; and
- a liner member operatively connected to the access member, the liner member dimensioned and adapted for insertion through a tissue tract accessing the abdominal cavity of a patient.

15. The surgical access apparatus according to claim 14 including a second seal member mounted adjacent the first seal member, the second seal member having an inner portion defining an aperture for substantial sealed reception of the at least one of the hand or arm and being arranged about a second seal axis radially displaced from the first-mentioned seal axis.

16. The surgical access apparatus according to claim 15 wherein the first seal member is adapted to move to the displaced position upon insertion of the at least one of the hand or arm therethrough whereby the apertures of the first seal member and the second seal member overlap.

17. The surgical access apparatus of claim 14 wherein the at least one expansible rib is substantially linear.

18. The surgical access apparatus according to claim 14 wherein the seal member defines leading and trailing end faces, the at least one expansible rib dimensioned to extend outwardly in a general direction from the trailing end face to define a raised profile.

19. The surgical access apparatus according to claim 18 wherein the at least one recess is defined within the leading end face of the seal member.

20. The surgical access apparatus according to claim 14 wherein the liner member includes at least a flexible segment.

21. A surgical hand access apparatus, which comprises:

- a liner base member having at least a flexible segment dimensioned and adapted for insertion through an opening within body tissue for at least partial positioning within the body, the liner base member configured to line the opening in the body tissue and provide access to an underlying tissue site; and
- an access housing mountable to the liner base member, the access housing including:
 - a housing member for positioning outside the body and defining a passageway dimensioned for permitting passage of either a surgeon's hand or arm, the housing member defining a central housing axis;

a first seal member mounted to the housing member, the first seal member including an inner seal portion and an outer seal portion, the inner seal portion having an aperture for substantial sealed reception of either the surgeon's hand or arm and being arranged about a first seal axis, the outer seal portion including at least one expansible rib, the at least one expansible rib defining a raised portion adjacent a proximal end face of the first seal member and a recessed portion adjacent a distal end face of the first seal member in alignment with the raised portion to define an undulating arrangement dimensioned to facilitate movement of the aperture to a displaced position displaced from the first seal axis, the at least one expansible rib arranged to extend radially from the outer seal portion toward the inner seal portion along a general line of intersection with the central housing axis; and

a second seal member mounted within the housing member adjacent the first seal member, the second seal member having an inner portion defining an aperture for substantial sealed reception of either the surgeon's hand or arm and being arranged about a second seal axis different from the first seal axis;

wherein the absence of the hand or arm of the surgeon, the first and second seal member form a substantial seal within the passageway of the housing member, and, wherein, during insertion of either the surgeon's hand or arm within the aperture of the first seal member, the inner seal portion of the first seal member is adapted to move to position the aperture thereof in at least partial overlapping relation with the aperture of the second seal member to permit passage of the surgeon's hand or arm through the housing member.

22. The surgical hand access apparatus according to claim **21** wherein the outer seal portion of the first seal member includes a plurality of expansible ribs dimensioned to facilitate movement of the aperture of the first seal member to a displaced position radially displaced from the first seal axis.

23. The surgical access apparatus according to claim **22** wherein the raised portions of the expansible ribs of the first seal member are dimensioned to extend from the proximal end face of the first seal member, and corresponding recessed portions are disposed adjacent the distal end face of the first seal member beneath respective raised portions, the raised portions and corresponding recessed portions arranged to facilitate movement of the aperture of the first seal member to the displaced position.

24. The surgical hand access apparatus of claim **21** wherein the at least one expansible rib is substantially linear.

25. The surgical access apparatus of claim **21** wherein the second seal member includes at least one expansible rib arranged to facilitate movement of the aperture of the second

seal member to a displaced position radially displaced from the second seal axis during manipulation of the object there-within.

26. The surgical access apparatus of claim **21** wherein the second seal axis of the second seal member is in general alignment with the central housing axis in the absence of the object.

27. The surgical access apparatus according to claim **21** wherein the raised portion defined by the at least one expansible rib is dimensioned to extend from the proximal end face of the first seal member.

28. The surgical access apparatus according to claim **27** wherein the recessed portion is defined within the leading end face of the seal member.

29. A surgical access apparatus, which comprises:

an access member having a passageway therethrough and defining a central longitudinal axis, and proximal and distal ends; and

a seal member mounted across the passageway, the seal member including an inner seal portion and an outer seal portion, the inner seal portion having an aperture for substantial sealed reception of an object inserted therein and being arranged about a seal axis, the outer seal portion including a proximal end face and a distal end face, the outer seal portion including at least one expansible rib extending from the proximal end face to define a raised segment relative to the proximal end face, and having a corresponding at least one recess beneath the at least one expansible rib and defined within the distal end face, the at least one expansible rib and the corresponding at least one recess each arranged to be substantially linear extending along an axis orthogonal to the central longitudinal axis of the access member, the at least one expansible rib and the at least one recess dimensioned to facilitate movement of the aperture to a displaced position radially displaced from the seal axis upon insertion of the object therethrough.

30. The surgical access apparatus according to claim **29** wherein the at least one expansible rib and the corresponding at least one recess are generally arranged to extend radially toward and away from the central housing axis.

31. The surgical access apparatus according to claim **30** wherein the at least one expansible rib and the corresponding at least one recess are arranged to extend along a line of intersection with the central longitudinal axis of the access member.

32. The surgical access apparatus according to claim **29** including a flexible liner operatively connected to the access member, the liner adapted for insertion through a tissue tract accessing the abdominal cavity of a patient.

* * * * *

专利名称(译)	手术进入装置		
公开(公告)号	US7766824	公开(公告)日	2010-08-03
申请号	US11/095340	申请日	2005-03-31
[标]申请(专利权)人(译)	JENSEN DAVID WENCHELL THOMAS		
申请(专利权)人(译)	JENSEN DAVID WENCHELL THOMAS		
当前申请(专利权)人(译)	COVIDIEN LP		
[标]发明人	JENSEN DAVID WENCHELL THOMAS		
发明人	JENSEN, DAVID WENCHELL, THOMAS		
IPC分类号	A61B1/32		
CPC分类号	A61B17/3423 A61M39/0606 A61B2017/00265		
其他公开文献	US20060229501A1		
外部链接	Espacenet USPTO		

摘要(译)

一种外科进入装置，其适于在腹腔镜和内窥镜外科手术过程中允许外科医生的手和/或外科手术器械的密封插入，包括具有穿过其中的通道的进入构件以及跨越通道安装的第一和第二密封构件。在没有物体定位在其中的情况下，第一和第二密封构件各自具有彼此不重叠的孔。第一密封构件的外密封部分可包括多个可膨胀肋和沿着与第一密封构件的轴线相交的相应线布置的相应凹槽。

