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(71) Applicant (for all designated States except US): ZYMO-GENETICS, INC. [US/US]; 1201 Eastlake Avenue East, Seattle, WA 98102 (US).

(72) Inventors; and

(75) Inventors/Applicants (for US only): ALEXANDER, William, Allan [US/US]; 7650 SE 27th Street, Unite #401, Mercer Island, WA 98040 (US). BISHOP, Paul, D. [US/US]; 28425 SE 8th Street, Fall City, WA 98024 (US). CARTER, Steven, R. [US/US]; 831 8th Avenue South, Edmonds, WA 98020 (US). LITTAU, Alisa, M. [US/US]; 23002 NE 152nd Place, Woodinville, WA 98077 (US).

(74) Agent: WEBSTER, Mary, S.; Nixon Peabody LLP, 401 9th Street, N.W., Suite 900, Washington, DC 20004 (US).

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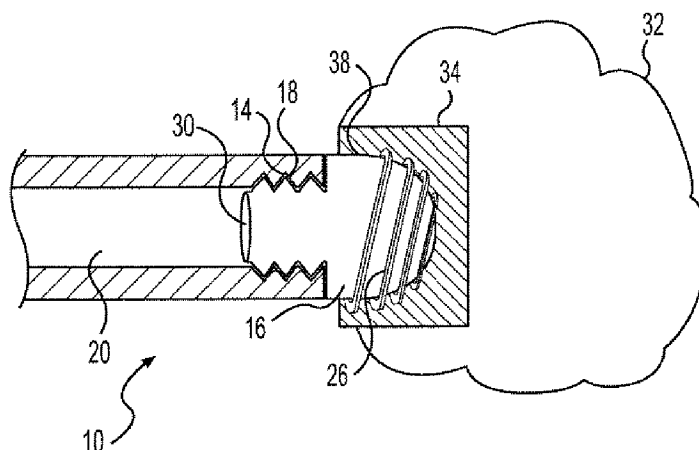


FIG. 8

(57) Abstract: Provided is a surgical applicator and applicator tip configured to attach in fluid communication, for the delivery of beneficial fluids. The applicator tip may also be configured to reversibly attach, in fluid communication, with a pledget. For example, the applicator tip may include male or female threads, and the pledget has threads that are complementary to the thread configuration of the tip. The applicator tip may further comprise at least one fluid transfer lumen for transfer of a fluid from the tip to the pledget. In one embodiment of the invention, the tip includes male threads and the pledget includes a pledget attachment portion. There are also provided methods for connecting the tip to the pledget. In one embodiment, a tip comprising male threads is attached to the pledget, comprising a pledget attachment portion, by tapping or pressing the tip into the pledget attachment portion.



MEDICAL DEVICES FOR DELIVERING FLUIDS DURING SURGERY AND METHODS FOR THEIR USE

RELATED APPLICATIONS

[0001] This application claims the benefit of U.S. Patent Application Ser. No. 61/125,504, filed April 25, 2008, which is incorporated herein by reference.

FIELD OF THE INVENTION

[0002] This invention relates generally to devices and methods for focused delivery of fluids, such as hemostatic agents, during surgery. More particularly, this invention provides for applicator tips configured to attach to an applicator and, optionally, a pledget or other porous matrix, and configured to deliver a fluid to a desired site during surgery. Various aspects address continual diffusion of fluid thru the tip or tip/pledget during surgery, allowing for precise application to a tissue with or without concurrent pressure application.

BACKGROUND

[0003] A particular challenge presented in surgical instrumentation relates to the delivery of non-viscous or viscous solutions such as pharmaceutical agents, hemostatic solutions, anti-adhesives, wound-healing agents, analgesics, and the like. Non-viscous solutions can be sprayed into a surgery site using various instruments, but the solutions often drip off desired target site and pool in the body cavity before the active component can provide its intended benefit. For example, when bleeding occurs during surgery, it may obstruct the surgeon's vision, and increase patient risks from loss of blood. Thus, the surgeon may deliver an active hemostat component, such as thrombin compositions reconstituted in saline, or other tissue sealant to a bleeding target site. For example, a thrombin solution can be sprayed into an insufflated lumen using a laparoscopic tool, but the solution typically does not adhere to the bleeding target site and instead pools to the floor of the cavity. In contrast, a more viscous, tacky thrombin solution may adhere better to a bleeding target site, but such viscous solutions are often opaque and obstruct the surgeon's view. Hence, there remains a need for a fluid-delivery apparatus for use in surgery for administering a continuous infusion of beneficial fluids, such as thrombin solutions, optionally with the application of pressure, at the site in need.

[0004] Tissue sealants (or tissue adhesives) are used for providing hemostasis and closing incisions during many surgical procedures. Tissue sealants may include fibrin, comprised of thrombin and a fibrinogen material, although other multiple component materials

are available. Tissue adhesives for making fibrin clots use different concentrations of fibrinogen solution in conjunction with a thrombin solution. Depending upon the percentages of fibrin and thrombin in each respective tissue adhesive solution, as well as the other components found in each solution, various factors impact the mixing and application of the components. These factors include viscosity of the initial fibrinogen and thrombin solutions and of the final mixed solution. When mixed together, thrombin and fibrinogen components usually coagulate very quickly, often yielding an adhesive gel within 10 or 20 seconds. When applied to a body's exterior, or when considerable access to the application site is possible, the tissue sealant's rapid coagulative properties are welcomed. Conversely, when a fibrin sealant is used during internal surgical procedures, such fast-acting properties may cause problems such as fouling or clogging of the applicator device during application.

[0005] Additionally, other considerations for laparoscopic instrument-based delivery of fibrin sealants include diameters or sizes of the fluid passages and the mixing compartment of the laparoscopic instrument, and mixing rate of the fibrinogen and thrombin solutions particularly in comparison to ejection rate if mixing occurs within the system. Typically, the individual components of the adhesive material are stored in isolated reservoirs.

[0006] There remains a need, however, for a fluid applicator system that is useful in surgery for delivering viscous fluids, or fluids that should be well-mixed for maximal activity. There is also a need for an applicator tip useful for both applying the fluid and holding it against the target site with a desired amount of pressure. Additionally, in particular cases, it may be beneficial to leave a biodegradable, bioadsorbable, fluid-laden applicator tip or pledget at a desired surgical site as a sustained release implant.

SUMMARY OF THE INVENTION

[0007] It is desirable to develop devices and methods for delivering fluids of any viscosity during general surgeries and minimally invasive procedures. Such devices may use standard available instruments for their preparation and application; produce an improved output for delivery of a fluid; and, when necessary, provide for fluid or agent mixing. Such a system has a wide variety of uses in the medical field. Thus, for example, there is a need for a device capable of effectively delivering a multi-component tissue sealant to a location *in vivo* from a remote location, with optional concurrent pressure application.

[0008] An aspect of the present invention provides for applicators, useful during surgeries, for delivering to a target site one or more fluids at a range of viscosities. The distal

end of the applicators can be connected to an applicator tip and/or a pledget or other porous matrix material, or, optionally, the distal end of the applicator can be constructed similarly to a desired pledget. A variety of porous pledgets (both bioabsorbable and non-absorbable) and construction thereof are incorporated by this disclosure. Thus, the distal end of the applicator can be connected to, or, optionally, constructed similarly to such dissector sponges.

[0009] These applicators allow for the delivery of low viscosity fluids to a target site by holding the fluid at the distal end of the applicator. For example, a thrombin composition reconstituted in saline is often a low viscosity solution. In one embodiment, the low viscosity fluid is maintained within the porous matrix the pledget or distal end of the applicator tip when constructed of a porous matrix similar to a pledget. The pledget or applicator tip may then be pressed to the target site and the low viscosity solution is brought in contact with the target site where its active components can operate. Thus, the low viscosity fluid is delivered to the intended site, avoiding the problem of fluid draining away from the site before activity takes place and providing a means to apply concurrent pressure. In addition, the fluid-laden pledget can be used to deliver the solution into sites that are difficult to access.

[0010] Similarly, the applicators encompassed herein allow for the delivery of multiple fluids to a target site. Different fluids can have different viscosities and/or can be rapidly reactive. For example, pharmaceutical agents (e.g., fibrinogen solution and thrombin solutions) may have different viscosities, thus preventing ease of mixing in a external sprayed stream. Moreover, some reactive pharmaceuticals (e.g., thrombin and fibrinogen) will rapidly react (e.g., form fibrin clots) when admixed, thus stymieing internal mixing. In certain embodiments of the instant invention, the two pharmaceutical agents remain separated until the two solutions enter the pledget (or distal end of the applicator tip if tip is constructed similarly to a pledget). At this point, the two solutions can properly mix outside the applicator without clogging the applicator. The pledget or tip is then pressed to the target site and the pharmaceutical agents are brought in contact with the target site, where they can provide benefit.

[0010] According to these and other aspects of the present invention there is provided a device for delivery of a fluid including an applicator having at least one lumen housed within the applicator, the applicator having a proximal end and a distal end, and an applicator tip having a proximal end and a distal end. The applicator tip proximal end includes at least one fluid delivery channel or semi-permeable material capable of fluidly connecting to the at least one lumen or fluid delivery tube in the applicator. The applicator tip distal end includes the at least one fluid-permeable material or an opening. The applicator distal end and the applicator tip proximal end are configured to detachably coupled to each other.

[0011] According to these and other aspects of the present invention there is also provided a method of delivering a fluid to a target site within a body cavity comprising coupling an applicator tip proximal end to an applicator distal end, wherein the applicator and applicator tip are in fluid communication. The applicator tip is contacted to a target site and at least one fluid from at least one source is delivered through the applicator to the applicator tip to the target site.

[0012] These and other features, aspects, and advantages of the present invention will become more apparent from the following detailed description.

BRIEF DESCRIPTION OF THE DRAWINGS

[0013] Fig. 1 is a cross-sectional view of an example applicator.

[0014] Fig. 2 is an enlarged cross-sectional view of a distal end of an applicator according to the present invention.

[0015] Fig. 3 is a perspective view of one embodiment of an applicator tip according to the present invention.

[0016] Fig. 4 is a perspective view of a pledget.

[0017] Fig. 5a is a perspective view of another embodiment of a pledget.

[0018] Fig. 5b is a perspective view of yet another embodiment of a pledget.

[0019] Fig. 6 is a cross-sectional view of an applicator according to the present invention.

[0020] Fig. 7 is a cross-sectional view of a distal end of another applicator according to the present invention.

[0021] Fig. 8 is a cross-sectional view of another distal end of an applicator detachably coupled to a tip, which in turn couples to a pledget according to the present invention.

[0022] Fig. 9 is a cross-sectional view of another embodiment of attachment of a pledget to an applicator according to the present invention.

[0023] Fig. 10 is a cross-sectional view of another pledget attachment embodiment for an applicator according to the present invention.

[0024] Fig. 11 is a cross-sectional view of another tip or pledget according to the present invention.

[0025] Fig. 12 is a cross-sectional view of an assembly of a fluid source, tip and pledget according to the present invention.

[0026] Fig. 13 is a perspective view of a manual or automated liquid applicator and tip configuration.

[0027] Figs. 13A-13D are alternative tip configurations for the applicator of Fig. 13.

[0028] Figs. 14A and 14B are cut-away views of a distal end of another applicator embodiment.

[0029] Figs. 15A-15D show another embodiment of a pledget applicator mount according to the present invention.

[0030] Fig. 16 is a perspective view of another embodiment of an applicator according to the present invention.

DETAILED DESCRIPTION

[0031] It should be understood that this invention is not limited to the particular methodology, protocols, and reagents, etc., described herein and as such may vary. The terminology used herein is for the purpose of describing particular embodiments only, and is not intended to limit the scope of the present invention.

[0032] As used herein and in the claims, the singular forms “a,” “an,” and “the” include the plural reference unless the context clearly indicates otherwise. Other than in the operating examples, or where otherwise indicated, all numbers expressing quantities of ingredients or reaction conditions used herein should be understood as modified in all instances by the term “about.”

[0033] All patents and other publications identified are expressly incorporated herein by reference for the purpose of describing and disclosing, for example, the methodologies described in such publications that might be used in connection with the present invention. These publications are provided solely for their disclosure prior to the filing date of the present application. Nothing in this regard should be construed as an admission that the inventors are not entitled to antedate such disclosure by virtue of prior invention or for any other reason. All statements as to the date or representation as to the contents of these documents is based on the information available to the applicants and does not constitute any admission as to the correctness of the dates or contents of these documents.

[0034] Unless defined otherwise, all technical and scientific terms used herein have the same meaning as those commonly understood to one of ordinary skill in the art to which this invention pertains. Although any known methods, devices, and materials may be used in the practice or testing of the invention, the methods, devices, and materials in this regard are described herein.

[0035] To address the problems for delivering various fluids, such as fibrin sealants, during surgery, numerous tissue adhesive applicators have been developed, such as those referred to in U.S. Patents No. 4,040,420; No. 4,359,049; No. 4,874,368; No. 4,902,281; No. 4,978,336; No. 5,368,563; and No. 5,474,540. A variety of types of these applicators exist including internal swirl or mixing chamber applicators, and external combining applicators such as external swirl applicators and external spray or stream overlapping applicators. U.S. Patents No. 5,116,315 and No. 6,921,381, herein incorporated by reference, describe swirl or other pre-ejection mixing applicators where mixing is performed by squirting or otherwise forcing both fluids into a chamber where the fluids mix, to some degree, based on turbulence in the chamber and the material properties, and are thereafter ejected from the applicator. In short, the mixing occurs inside the applicator and thus time is critical the contents must be ejected prior to coagulation. In some applications such as where one or more of the solutions or fluids is thick or highly viscous, internal swirling results in only marginal or partial mixing; although in other applications such as where all of the solutions or fluids are thin or not-highly viscous, substantial and effective mixing occurs.

[0036] In contrast, the applicators in U.S. Patents No. 4,040,420; No. 4,874,368; No. 4,902,281; No. 5,368,563; and No. 5,474,540 and U.S. Published Patent Application No. 2002/0165483 and No. 2007/0005007, are external combining applicators. The '563 patent relates to an external mixing device where each fluid is sprayed in a swirl pattern that overlaps the other fluid's swirl pattern resulting in fluid mixing. In contrast, the '368 and '540 applicators eject streams that intersect, whereby the fluids combine. External combining is the process of bringing the two solutions into contact with one another at the point of use for functional tissue adhesive creation. External combining eliminates premature mixing problems. With many external combining applicators, thorough mixing of the solutions does not occur, however, and instead only adjacent portions of the solutions mix while large percentages remain unmixed. This results in inefficient and somewhat uncontrolled coagulation. Moreover, many fibrin glue solutions contain at least one highly viscous component and are thus not readily nor effectively combined in an external manner, as the viscous solution does not combine or mix with the other solution whether it be thin (non-viscous), thick, or highly-viscous. In addition, highly viscous fluids often are difficult to expel or otherwise push out of a syringe or other storage chamber used in surgeries. This is particularly true when the syringes are actuated manually, and in designs with small diameter passages or channels which are typical in surgery, especially minimally invasive (e.g., laparoscopic) surgery. Moreover, the problem of adequate external mixing is applicable whether actuation is manual or via pressure from a compressed gas.

[0037] Provided herein are applicators useful during both general and minimally invasive (e.g., laparoscopic) surgeries for delivering to a target site one or more fluids at a range of viscosities. The distal end of the applicator can be connected to a pledget, or, optionally, the distal end of the applicator can be constructed to include a desired pledget. A variety of pledgets and the construction thereof are incorporated by this disclosure. For example, such pledgets include cotton and gauze, sponge, fused gelatin beads, gauze, plastic or any suitable porous material, either bio-adsorbable or non-bioadsorbable, or a combination thereof. One commercial pledget is the AUTO-COUNT® Dissector Sponge (Fabco, New London, CT). Thus, the distal end of the applicator tip can be connected to, or, optionally, constructed similarly to such dissector sponges. The applicators, therefore, allow for the delivery of low viscosity fluids to a target site by holding the fluid at the distal end of the applicator tip. For example, a thrombin composition reconstituted in saline is often a low viscosity solution. In the instant invention, the low viscosity fluid is maintained within the pores of the pledget, or distal end of the applicator when the tip is constructed of a material similar to a pledget. In use, the pledget or applicator tip is pressed to the target site and the low viscosity solution brought in direct contact with the site, wherein its active components can operate. Thus, the low viscosity fluid is delivered to, and maintained at, the intended site, avoiding the problem of draining away before beneficial activity occurs.

[0038] Similarly, the applicators of the present invention allow for the delivery of multiple fluids to a target site. Different fluids can be of varying viscosities and/or can be rapidly reactive. For example, fibrinogen solution and thrombin solution are typically two solutions with differing viscosities that are not mixed easily in an external sprayed stream, and that rapidly form fibrin clots when admixed, which makes internal mixing problematic. In certain embodiments of the instant invention, the thrombin solution and the fibrinogen solution remain separated until the two solutions enter the pledget (or distal end of the tip if the distal end of applicator tip is constructed similarly to a pledget). At this point, the two solutions can mix properly, externally to the applicator (such as a laparoscopic applicator device), without clogging the device. The pledget or tip is then pressed to the target site, delivering the fibrinogen/thrombin solution to the target site wherein it can operate.

[0039] Referring to Fig. 1, an applicator 10 has a distal end 12. Fig. 2 shows an exploded view of the distal end 12 of applicator 10. The applicator 10 may be made of plastic or metal or any suitable material that can be sterilized for use in surgery and constructed by typical known approaches. It may be re-usable or disposable. In the embodiment of Fig. 2, the distal end 12 includes female threads 14 for attachment to a complementary pledget or applicator tip. The

applicator 10 also defines a fluid delivery lumen 20. Alternatively, the interior of the applicator may define two or more lumen, or house at least one fluid delivery tube within the lumen.

[0040] Applicator 10 may have a diameter of and about 5-15 mm, about 10-20 mm or about 5-2 mm. The applicator may have a length of and about 30-50 cm or about 20-40 cm. For example, in specific variations, the length is about 30 cm, about 40 cm, or about 45 cm.

[0041] Fig. 3 shows an example of an applicator tip 16 that has male threads 18 at its proximal end 22. Thus, for example, the proximal end 22 male threads 18 complement the female threads 14 of the distal end 12 of applicator 10. The tip 16 also includes a fluid delivery lumen 30, running from the proximal end 22 to the distal end 24 of the tip 16 to the delivery port 28. Thus, applicator tip 16 includes a fluid delivery port 28, in communication with the fluid delivery lumen 30. Additionally, applicator tip 16 includes male threads 26 on the distal end 24 for optional attachment to a pledget. For example, the pledget 32 in Fig. 4 includes an attachment portion 34, into which the teeth of the male threads 26 of tip 16 may 'bite' to secure the pledget onto the applicator 10 distal end 12. The pledget 32 is made of any suitable porous material through which fluid will pass from fluid delivery port 28, as described herein.

[0042] Tip 16 may have a diameter of about 5-15 mm or about 5-12 mm and a length of about 5-15 mm, about 10-20 mm or about 15-25 mm.

[0043] Additionally, attachment portion 34 may attach to a variety of applicators or applicator tips, not necessarily requiring male threads. Thus, for example, as shown in Fig. 5a, the pledget 32 may include attachment portion 34 having a non-threaded shaft 36, or a threaded shaft 38 as shown in Fig. 5b.

[0044] Fig. 6 illustrates a single applicator tip 42 of the current invention, having a proximal end 22 and a distal end 24. The proximal end of the tip 22 includes male threads 18 and at least one fluid delivery lumen or channel 30. The distal end of the applicator tip 24 and 40 is configured to take the place of the pledget described in other embodiments. Thus, in this particular aspect, the material comprising 40 is a pledget-like material. This example tip 42 could be attached to applicator 10 by the complementary female threads 14 housed within the applicator distal end 12, which example structures are shown in Figs. 1 and 2.

[0045] The above embodiment(s) provides for a device for delivery of a fluid, comprising: (a) an applicator tip proximal end capable of detachably coupling to an applicator, such as a laparoscopic applicator; (b) an applicator tip distal end capable of coupling to a pledget attachment portion; (c) at least one fluid delivery lumen or channel at the tip proximal end capable of fluidly connecting to at least one lumen or fluid delivery lumen or tube within the applicator; and (d) at least one fluid delivery opening at the applicator tip distal end capable of

fluidly connecting to a pledget. For example, the tip proximal end is configured to detachably couple to the applicator device by a threaded or a pressure coupling.

[0046] In one aspect of this embodiment, the applicator tip's delivery lumina are configured to fluidly couple to an applicator's lumen or fluid delivery tube. In this aspect, in which the applicator has one lumen, a tip can have one fluid delivery lumen for fluid connection. Alternatively, an applicator may have one fluid delivery lumen or tube, and a tip may have at least two fluid delivery lumina, both of which fluidly connect with the applicator lumen or fluid delivery tube. Further, an applicator may have one fluid delivery lumen or tube and a tip one fluid delivery lumen in fluid contact. Or, an applicator may have two fluid delivery lumina or tubes, and a tip has two fluid delivery lumina, each fluidly connected applicator-to-tip. The fluid delivery lumen of the tip can be branched or single channel. Thus, the applicator tips may be configured to bring at least one fluid delivery lumen of the tip into fluid contact with at least one fluid delivery lumen of the applicator.

[0047] When the applicator of the current invention is configured to bring a fluid delivery lumen of the tip and a fluid delivery lumen of the applicator into fluid contact, the tip may be configured to properly align each channel to its respective position. Such alignment is useful to prevent premature mixing of solutions. For example, this can be a problem when two solutions are intended to be separated and those two solutions are fibrinogen solution and a thrombin solution: premature mixing may cause clotting of the device. Thus, one embodiment provides for an indicator mark on the tip that is configured to align with an indicator mark on an applicator. The indicator mark can be used to indicate, for example, that a first fluid delivery lumen of the tip is aligned with a first fluid delivery lumen of the applicator and a second fluid delivery lumen in the tip is aligned with a second fluid delivery lumen in the applicator.

[0048] Alternatively, the tip can be configured with a position locking member complementary to a position locking member on the applicator, wherein the position locking member is configured, when locked, to place the first fluid delivery lumen in the tip in alignment with a first fluid delivery lumen in the applicator, and a second fluid delivery lumen in the tip in alignment with a second fluid delivery lumen in the applicator. In this embodiment, the applicator tip may be configured to attach to a pledget. The attachment may not be releasable in instances where it is not desirable to leave material within a surgery site. There are instances, however, where the pledget can be releasably attached to the applicator tip. Hence, the pledget may be made of a biodegradable, biocompatible, and/or porous material. In certain embodiments, the pledget may further contain a radio-opaque material, which can facilitate, e.g., locating the pledget during and/or post-surgery.

[0049] Fig. 6 illustrates a single applicator tip 42 of the current invention, having a proximal end 22 and a distal end 24. The proximal end of the tip 22 comprises male threads 18 and at least one fluid delivery channel 30. The distal end of the applicator tip 24 and 40 is configured to take the place of the pledget described in other embodiments. Thus, this particular aspect, the material comprising 40 is a pledget-like material. This example tip 42 could be attached to applicator 10 by the complementary female threads 14 housed within the applicator distal end 12, which example structures are shown in Figs. 1 and 2.

[0050] As described above, the applicator tip distal end can include male threads. In this aspect, the pledget can comprise complementary female threads at the pledget attachment portion. Alternatively, the pledget can comprise a non-threaded cavity at the pledget attachment portion, useful for attachment by tapping the tip into the pledget attachment portion, as shown in Fig. 5A. Principles of tap and die are known in the art. A similar configuration employs a click-on/pop-off mechanism in which the pledget comprises a flange for securing it inside the distal end of an applicator having multiple spring arms with teeth that retain the pledget flange. The applicator can include a release mechanism, such as a bulb, that when advanced retracts the spring arms and pushes the pledget forward, releasing the pledget. Alternatively, the pledget attachment portion can have the male threads and the tip configured with female threads or a non-threaded cavity. Other mechanical attachments useful with the current invention are well known in the art.

[0051] In another embodiment, Fig. 7 illustrates a cross-sectional view of a distal end 12 of applicator 10 further illustrating female threads 14, which can be used for detachably coupling the applicator to an applicator tip of the invention. In this embodiment, the applicator 10 houses a pair of fluid delivery lumina, in this embodiment tubes 29. Thus, in attachment with tip 42 via female threads 14 and male threads 18, fluid delivery tubes 29 achieve fluid communication with fluid delivery lumen 30. When fluid delivery tubes 29 each contain a different agent, these agents are mixed within the delivery lumen 30 and the pledget material 40.

[0052] Alternatively, two fluid delivery lumina may be housed in the applicator tip, and in such case the applicator 10 and applicator tip 16 may bear complementary marks used to indicate when the applicator fluid delivery tubes are aligned with the fluid delivery lumen(a), such that the tubes and channels are in fluid communication. In this embodiment, the two fluids are mixed within the pledget or when otherwise expelled from the applicator tip.

[0053] An example of an application 10 attached to a tip 16, and a pledget 32 is shown in Fig. 8. Also shown in Fig. 8 is the fluid delivery tube 20 and female threads 14 of the

applicator 10, which in this figure are mated with the male threads 18 of tip 16, as the male threads 26 of tip 16 are embedded in the pledget attachment portion 34 of pledget 32. In this fashion, fluid lumen 20 is in fluid communication with the lumen 30 of the tip 16, which is in fluid communication with pledget 32 for delivery of active agent. Note that such configurations function for applicators in which fluid are delivered through the lumen of the applicator.

[0054] Fig. 9 illustrates an alternative embodiment for attaching a pledget attachment portion 34 to an applicator 10, comprising male threads 44 are present in the outer surface of the distal end 12 of the applicator. In this embodiment, the applicator-to-pledget connection is shown in Fig. 10, in which the tip 10 male threads 44 are embedded in the non-threaded shaft 36 of the attachment portion 34 of the pledget 32. In this embodiment, the fluid delivery tube 20 of applicator 10 is in direct fluid communication with the porous material of pledget 32.

[0055] Another embodiment of an applicator tip is shown in Fig. 11. The applicator tip 16 includes male threads 18 at the proximal end 22, and a single fluid delivery channel 30 that is branched to provide a plurality of fluid delivery subchannels 28 in the distal end 24 of the tip 16. In this tip embodiment, the fluid delivery openings from subchannels 28 may reach the surface of the tip or they may end internally, depending on the porosity of the material shaping the distal end 24. Additionally, the distal portion 24 of the tip 16 includes male threads 26.

[0056] Thus, the applicator tip can include a male threading at its distal end and at least one fluid delivery lumen, each of which form a fluid delivery opening at the tip distal end. Alternatively, the tip may include male threading at its distal end and one fluid delivery lumen, which forms a fluid delivery opening at the tip distal end. These lumina may be branched to distribute a fluid throughout the pledget, or they can be a single lumen to deliver a concentrated fluid bolus. When branched, each of the branched lumina preferably forms a delivery opening at the tip distal end.

[0057] In another embodiment, the applicator tip comprises a male threading at its distal end and two fluid delivery lumina, wherein each of the two fluid delivery lumina form a fluid delivery opening at the applicator tip distal end, and wherein at least one of the two fluid delivery lumina is a branched fluid delivery channel and each of the branches forms a delivery opening at the tip distal end. When branched, each of the branches may form a delivery opening at the tip distal end.

[0058] Fig. 12 shows an embodiment in which the applicator 10 includes at least one fluid source 46, a tip 16, and a pledget 32. Black arrows indicate the flow of fluid(s) from a source 46. The fluid is shown dispersing through the applicator fluid lumen 20 to the tip 16, and through the pledget attachment portion 34. This disbursement can be via multiple and/or

branched fluid delivery lumena in the tip and lumena in the pledget attachment portion. Alternatively, the pledget attachment portion can comprise a porous matrix material.

[0059] Fig. 13 depicts an embodiment of a manual or automated liquid applicator 10 and several alternative tip configurations. The +/- symbol at the proximal end of the applicator indicates that other pharmaceutical agents may optionally be used in addition or as an alternative to the recombinant human thrombin (rTH) in particular variations of the invention. In this embodiment, the fluids are held in a reservoir 11, that may be attached to applicator 10. The tip 16 is attached to the distal end 12 of the applicator 10 and has a proximal end 22 and a distal end 24, the distal end 24 having an opening or fluid-permeable material 28 for the release of fluid from the tip 16. The proximal end 22 of the applicator tip 16 reversibly attaches to the distal end 22 of the applicator 10 by any number of configurations. The tip 16 may consist of or include fused gelatin beads 13a; sponge 13b; an open tip for flowable pharmaceuticals 13c; cotton 13d, shown in Figs. 13A-13D, or other suitable materials known in the art. Each of the forgoing may be designed as screw-on tips, for example.

[0060] Another embodiment of the applicator is shown in Figs. 14A and 14B, showing cut-away views of a distal, tip end of an embodiment, wherein the end comprises a piston. The applicator includes a piston chamber 1 and a fluid delivery tube or lumen 2 in the center of the piston chamber. The piston chamber holds a dry pledget 4 (made of, e.g., cellulose, gelatin, fused gelatin microbeads), which may be retracted, or held in the retracted position within the delivery end 3 (*see* Fig. 14A). When delivery of active agent is desired, pledget 4 is loaded and extended, delivering active solution (e.g., thrombin such as rThrombin) to the site in need of treatment (*see* Fig. 14B). Although not shown, in some embodiments the distal end of the piston chamber can have a slight inward taper that can help to secure the pledget within the piston chamber 1.

[0061] Figs. 15A-15D show an embodiment in which a pledget 73 with a semi-pliable "flange mount" 74 (made of, e.g., notched cork or plastic) that may be attached to the distal end 72 of the applicator 10 by applying pressure to the proximal end of the flange mount 74 as in Figs. 15A and 15B. The proximal end of the pledget is then held within the body of the applicator by a spring system that comprises spring arms having retaining teeth 77 that secure the flange, as in Fig. 15C. An interior shaft 75, housed inside the applicator 10, includes a fluid delivery lumen 76 and a tapered tip that fits into the proximal end of the flange mount of the pledget, the flange mount also containing a fluid delivery lumen 78. Liquid is then delivered from the applicator into the pledget. The pledget and mount are removed by advancing the interior shaft 75, which may be "bulb"-actuated, for example be squeezing the handle 71 of the

applicator, that serves to retract the spring arms 77 as shaft advances, as shown in Fig. 15D (dashed arrow showing direction of shaft movement). Alternatively, the applicator may have an interior rim at the distal end that will catch and hold the flange mount. The interior shaft, when advanced against the pledget, deforms the flange and allows the shaft to expel the pledget. This mechanism also provides a “click-on/pop-off” method for reloading the applicator with a new pledget.

[0062] A further embodiment is shown in Fig. 16, which depicts an applicator 10 comprising at the distal end 81 at least two prehensile means 82 configured to hold a pledget. The prehensile means 82 are operated by an actuator mechanism 80 at the proximal end of the applicator, which is operably coupled through reciprocating means to the prehensile means 82 at the distal end. The actuator 80 causes the reciprocating means to move between first and second positions, which closes the prehensile means 82 thus providing a means for gripping a pledget. This design holds numerous configurations of pledget. The prehensile means 82 may also comprise small steel balls at the grasping-end, which facilitate releasing cotton pledgets (as opposed to sharper ends that might get stuck in cotton fibers, etc.). The applicator 10 may define an interior lumen or house a fluid delivery tube, to supply solution to the pledget.

[0063] As described above, the present invention provides for a pledget that is compatible with the applicator tip of the present invention. Thus, the pledgets include a pledget attachment portion. The pledget attachment portion of the applicator may be a semi-solid material comprising a female threaded shaft, a semi-solid material comprising a non-threaded shaft, a semi-solid material, a gauze-like netting, a cotton fiber, plastic, or combinations thereof. A semi solid material can be a piece of material that is solid except for fluid delivery channels running therethrough. In such an embodiment, the channels, which can be single or branched, are configured for fluid connection to the tip. Alternatively, a semi-solid material can be a matrix material that allows fluids to flow through the matrix as it is extruded towards the remaining pledget material. The pledget attachment portion material may be biodegradable, biocompatible and/or radio opaque. The pledget is a porous, fluid permeable material, such as cotton, gauze, sponge, fused gelatin beads, sponge, or a combination of such materials. Pledget materials are known in the art, and can include, but are not limited to, AUTO-COUNT® Dissector Sponges, gelatin sponges, cellulose sponges, dextran sponges, cotton swabs, gauze wound dressings, fused gelatin spheres, and others, as well as combinations thereof. An example pledget is cotton and gauze and an example pledget attachment portion is a semi-solid material comprising a female-threaded shaft.

[0064] An alternative embodiment combines the tip and the pledget into an improved single tip applicator. In this embodiment, the tip is configured to fluidly connect to a surgical (e.g., minimally invasive) device and is further configured to hold a variety of solutions with different viscosities, including low- and high-viscosity solutions, inclusive, and to hold and mix more than one solution wherein the solutions may have different viscosities and/or are rapidly reactive. In this embodiment, there is an applicator for delivery of a fluid includes:

(a) an applicator tip proximal end capable of detachably coupling to the distal end of an applicator; (b) at least one fluid delivery lumen at the applicator tip proximal end capable of fluidly connecting to the applicator; (c) an applicator tip distal end further comprising a fluid permeable, porous material. The applicator tip proximal end may be configured to detachably couple to the applicator by a threaded coupling.

[0065] In one aspect of this embodiment, the applicator tip's fluid delivery lumina are configured to fluidly couple to an applicator's fluid delivery lumina. In this aspect, wherein a minimally invasive (e.g., laparoscopic) applicator comprises one fluid delivery lumen, the applicator tip may comprise one fluid delivery lumen for fluid connection. Alternatively, an applicator comprises one fluid delivery lumen and a tip comprises at least two fluid delivery lumina, both of which will fluidly connect with the fluid delivery tube. Or, an applicator comprises one fluid delivery lumen and the tip comprises one fluid delivery lumen in fluid contact. Alternatively, an applicator comprises two fluid delivery lumina and its tip comprises two fluid delivery lumina, each fluidly connected. The fluid delivery channels of the tip can be branched or single channel. Thus, the tips of the current invention are configured to bring one or more fluid delivery lumina into fluid contact with one or more fluid delivery lumina of the applicator. Fluid delivery lumina can run from the proximal end to the distal end of the applicator tip, or from the proximal end to the interior of the applicator tip, such that a bolus of fluid may be released.

[0066] In a particular embodiment, the applicator tip distal end is a fluid permeable material, such as a cotton and gauze combination material or a sponge. These materials are known in the art for pledgets and are applicable here as well. The materials can include, but are not limited to, AUTO-COUNT® sponges, gelatin sponges, cellulose sponges, dextran sponges, cotton swabs, gauze wound dressings, fused gelatin beads or microspheres and others, as well as combinations thereof. In one embodiment, the tip distal end is cotton and gauze and the pledget attachment portion is a semi-solid material comprising a female threaded shaft.

[0067] In a further specific embodiment, there are methods of delivering a fluid to a target site within a body cavity comprising the steps of: coupling an applicator tip to a pledget

attachment portion as described above, wherein the tip distal end and the pledget attachment portion become fluidly connected; coupling this tip proximal end to an applicator device wherein the tip proximal end and the applicator distal end become fluidly connected; and extruding at least one fluid, each from a source, through the applicator to the tip proximal end, through the tip to its distal end, from the tip distal end into the pledget, and from the pledget to the target site.

[0068] In an aspect of this method, two fluids are extruded and admixed within the pledget. The two fluids may be a thrombin solution and a fibrinogen solution. The thrombin may be animal-derived, or be recombinant human thrombin. The admixed solution can then be delivered to the target site by pressing the pledget on the target site. The pledget may be cotton, gauze, fused gelatin beads, or a sponge. In another aspect of this method, one fluid is extruded. The one fluid may be a low viscosity fluid, such as a thrombin solution. The low viscosity solution is delivered to the target site by pressing the pledget on the target site.

[0069] The embodiments and methods described herein can be useful when adapted for known applicator and minimally invasive (e.g., laparoscopic) applicator devices, and the present invention is not limited to a particular type of applicator. Typically, such applicators either house, or attach to, a reservoir containing the medicinal fluid. The fluid is expelled from the distal end of the applicator by a means at the proximal end of the applicator, typically employing gas, air, or manual pressure, and may include a ratcheted trigger system to overcome backflow. These applicators may be configured as syringes or elongated syringes (cannulated), in which the fluid is held within the applicator itself and dispensed by pressure on the proximal end of the applicator device. *See* WO 01/39669; FloSeal Laparoscopic Applicator (Baxter, UK). Alternatively, the applicator may have a “gun” configuration. *See* WO 02/064192. The applicator, instead of or in addition to housing a reservoir, may also be in fluid communication with at least one external reservoir that contains the fluid(s) to be administered through the porous matrix of the tip and/or pledget. *See, e.g.,* U.S. Patent No. 6,228,051; FIBRIJET® 360° endoscopic applicator (Micromedics, Inc., St. Paul, MN). *See also* FIBRIJET® applicators (Micromedics, Inc., St. Paul, MN); and U.S. Patent application Pubs. No. 20030069537, No. 20020165483, No. 20070005007, and No. 20050096588. These various aspects provide the ability to continuously infuse the applicator tip with fresh solution (e.g., thrombin) while directly applying pressure to the site (e.g., the site of bleeding) in a broad range of circumstances. Additional applicator tips may be used with these devices for fluids with different viscosities (e.g., gels) or to address additional surgical needs such as debridement or leave-behind applicator tips or pledgets.

[0070] In an alternative embodiment, the applicator tip and pledget are combined into a single tip device. In this embodiment, there is a method of delivering a fluid to a target site within a body cavity comprising the steps of: coupling a tip proximal end to an applicator (e.g., a minimally invasive applicator such as a laparoscopic device), wherein the tip proximal end and the applicator are fluidly connected; and extruding at least one fluid, each from a source, through the applicator to the tip proximal end to the tip distal end, and then to the target site. In an aspect of this method, two fluids are extruded and admixed within the tip distal end. For example, the two fluids may be a thrombin solution and a fibrinogen solution. The admixed solution can then be delivered to a target site by pressing the tip distal end on the target site. The applicator tip distal end may be cotton and gauze, or a sponge, etc. In another aspect of this method, one fluid is extruded. The one fluid may be a low viscosity fluid, such as a thrombin solution. The low viscosity solution is delivered to the target site by pressing the tip distal end on the target site.

[0071] In a further method of use, the tip and pledget or the applicator are useful for debridement of tissue, tissue translocation, absorption of fluid substances, and combinations thereof in a body cavity. In one aspect, the pledget or applicator tip is cotton and gauze, thus allowing the pledget or applicator tip to be pressed to a tissue and scrape tissue debris, move tissues and/or absorb fluids. Such can be accomplished through the properties of the material used to configure the pledget or applicator tip.

[0072] Another embodiment of the present invention provides for surgical kits comprising an applicator, tips, and thrombin. For example, the kit contains an applicator with at least one detachable tip or pledget that allows for continuous application of thrombin through the tip, so that the surgeon or member of the surgical team can apply thrombin and concurrent pressure in surgery procedures. More specifically, the kit may include a minimally invasive (e.g., laparoscopic) applicator co-packaged with one or more detachable tips and thrombin, for example, recombinant human thrombin, such as 5,000 IU recombinant human thrombin. This gives the surgeon the ability to continuously infuse a cotton applicator tip with thrombin solution while directly applying pressure to the site of bleeding. The thrombin may be in solution, e.g., in saline solution, or may be a viscous solution such as a "flowable" microsphere/thrombin gel-like formulation. Additionally, the applicator tips may be configured to allow for debridement, or the tips or pledgets may be constructed of biodegradable, bioabsorbable materials that may be left at the site of bleeding.

[0073] From the foregoing, it will be appreciated that, although specific embodiments of the invention have been described herein for purposes of illustration, various modifications may be made without deviating from the spirit and scope of the invention.

What Is Claimed Is:

1. A device for delivery of a fluid to a surgical site comprising:
an applicator comprising at least one fluid delivery lumen, said applicator having a proximal end and a distal end; and
an applicator tip having a proximal end and a distal end, said applicator tip proximal end comprising at least one fluid delivery lumen or semi-permeable material capable of fluidly connecting to the at least one fluid delivery lumen of said applicator, and said applicator tip distal end comprising the at least one fluid-permeable material or an opening;
wherein the applicator distal end and the applicator tip proximal end are configured to detachably couple to each other.
2. The device of claim 1, wherein said applicator tip proximal end is configured to detachably couple to said applicator by a threaded coupling, a locking member, a flange-mount, a non-threaded shaft, or a semi-solid material a gauze-like netting, a cotton fiber, gelatin, fused gelatin beads, plastic, or a combination thereof.
3. The device of claim 1, wherein said at least one fluid delivery lumen of said applicator tip is a branched fluid delivery lumen.
4. The device of claim 1, wherein said applicator tip comprises two fluid delivery lumina, configured to fluidly connect to two fluid delivery lumina of a said applicator.
5. The device of claim 4, wherein said applicator and applicator tip have complementary indicator marks on the outer surfaces, wherein said outer marks are configured to indicate that a first applicator fluid delivery lumen is aligned with a first tip fluid delivery lumen, and a second applicator fluid delivery lumen is aligned with a second applicator fluid delivery lumen.
6. The device of claim 1, wherein said applicator tip is a fluid permeable material, gelatin, a cotton gauze, a sponge, a plastic, fused gelatin beads, or a combination thereof.
7. The device of claim 1, wherein said applicator tip comprises biocompatible, biodegradable material.

8. The device of claim 1, wherein said at least one fluid delivery lumen of the applicator tip is configured for the mixing of two fluids.

9. The device of claim 1, wherein said at least one fluid delivery channel and at least one fluid delivery opening of said applicator tip are configured for the delivery of a gel.

10. The device of claim 1 or 8, wherein said applicator tip has a diameter of about 5-15 mm or about 5mm-12 mm.

11. The device of claim 1 or 8 wherein said applicator tip has a length of about 5-15 mm, about 10 mm-20 mm, or about 15 mm-25 mm.

12. An applicator tip for delivery of a fluid to a surgical site, comprising:
an applicator tip proximal end configured to detachably couple to an applicator;
an applicator tip distal end, optionally configured to detachably couple to a pledget;
at least one fluid delivery lumen at said applicator tip proximal end configured to fluidly connect to at least one fluid delivery lumen of said applicator; and
at least one fluid delivery opening at said applicator tip distal end.

13. The applicator tip of claim 12, wherein said tip is configured to fluidly connect to a pledget.

14. The applicator tip of claim 12, wherein said tip further comprises a porous matrix.

15. The applicator tip of claim 14, wherein said applicator tip comprises biocompatible, biodegradable, and bioerodable material.

16. The applicator tip of claim 14, wherein said tip comprises cotton gauze, sponge, gelatin, or fused gelatin spheres.

17. The applicator tip of claim 12, wherein said at least one fluid delivery channel is configured for the mixing of two fluids.

18. The applicator tip of claim 12, wherein said at least one fluid delivery channel and at least one fluid delivery opening are configured for the delivery of a gel.

19. A pledget that is compatible with the applicator tip of claim 13, said pledget comprising a pledget attachment portion.

20. The pledget of claim 19, wherein said pledget attachment portion is selected from the group consisting of a flange mount, a locking member, a female threaded shaft, a male threaded shaft, a non-threaded shaft, a semi-solid material, a gauze-like netting, a cotton fiber, fused gelatin beads, plastic, and a combination thereof.

21. The pledget of claim 19, wherein said pledget is a fluid permeable material.

22. The pledget of claim 20, wherein said pledget is cotton gauze, sponge, gelatin, or fused gelatin spheres.

23. The pledget of claim 19, wherein said pledget is biocompatible and biodegradable.

24. A method of delivering a fluid to a target site within a body cavity comprising:
coupling an applicator tip proximal end as in any of claims 1-9 to an applicator distal end as in any of claims 1-9, wherein said applicator and applicator tip are in fluid communication;
contacting said applicator tip to a target site; and
delivering at least one fluid from at least one source through said applicator to said applicator tip to said target site.

25. The method of claim 24, wherein two fluids are admixed within said applicator tip.

26. The method of claim 24, wherein said two fluids are a thrombin solution and a fibrinogen solution.

27. The method of claim 24, wherein said fluid is a thrombin solution.

28. The method of claim 24, wherein said applicator tip comprises cotton, gauze, fused gelatin beads, or a sponge.

29. The method of claim 24, wherein said fluid is a low viscosity fluid.

30. The method of claim 24, further comprising detaching and placing said applicator tip at said target surgical site.

31. The method of claim 30, wherein said applicator tip is biodegradable and biocompatible.

32. A method of delivering a fluid to a target site within a body cavity comprising:
coupling an applicator tip proximal end as in any of claims 1-9 to an applicator as in any of claims 1-9, wherein said applicator tip proximal end and said applicator are coupled in fluid communication; and

extruding at least one fluid from a source, through said applicator to said applicator tip, and then to said target site.

33. The method of claim 32, further comprising the step of admixing two fluids within said applicator tip.

34. The method of claim 33, wherein said two fluids are a thrombin solution and a fibrinogen solution.

35. The method of claim 32, wherein said fluid is a thrombin solution.

36. The method of claim 32, wherein said fluid is a low viscosity fluid.

37. An applicator tip as in any of claims 1-18, wherein said applicator tip comprises (i) first and second fluid delivery lumina and (ii) a position locking member complementary to a position locking member on an applicator, wherein said position locking member is configured, when locked, to place said first tip fluid delivery lumen in alignment with a first applicator fluid delivery lumen and said second tip fluid delivery lumen in alignment with a second applicator fluid delivery lumen.

38. An applicator tip as in any of claims 1-18, wherein said applicator tip comprises (i) first and second fluid delivery lumina and (ii) an indicator mark on its outer surface, wherein said outer mark is configured to indicate alignment of said first applicator tip fluid delivery lumen with a first applicator fluid delivery lumen and said second tip fluid delivery lumen with a second applicator fluid delivery lumen.

39. An applicator for administering a fluid to a surgical site comprising:
an internal shaft housed within said applicator;
a fluid delivery tube contained within said shaft;
a mechanism that reversibly advances the shaft toward the distal end of said applicator;
wherein said distal end of said applicator is configured to receive and reversibly hold a pledget having a fluid delivery lumen for communicating with said applicator fluid delivery tube; and

wherein upon completion of the administration of the fluid, said shaft is advanced by said mechanism to expel said pledget from said distal end of said applicator.

40. The applicator of claim 39, wherein said internal shaft further comprises at least two spring arms, each having at least one prehensile member at its distal end configured to grasp a pledget; and

a spring arm retraction mechanism that releases said at least one prehensile member from said pledget when said shaft is advanced.

41. The applicator of claim 39 or 40, wherein said pledget comprises a flange mount on its proximal end for insertion into the distal end of said applicator.

42. An applicator for administering a fluid to a surgical site comprising:
an internal shaft housed within said applicator;
a fluid delivery tube contained within said shaft;
a piston mechanism that reversibly advances said shaft toward the distal end of said applicator;

a pledget reversibly connected to the distal end of said shaft, said pledget located within the distal end of said applicator and in fluid communication with said fluid delivery tube;

wherein said shaft advances and exposes said pledget beyond the distal end of said applicator, wherein said exposed pledget may administer the fluid.

43. An applicator for administering a fluid to a surgical site comprising:
a fluid delivery lumen contained within said applicator;
reciprocating means contained within said applicator for reciprocating movement between first and second positions;
prehensile means connected to said reciprocating means for gripping a pledget when said reciprocating means is moved between said first and second positions;
wherein said applicator is configured such that when said prehensile means has gripped a pledget, fluid may be delivered to said pledget via the fluid delivery lumen.

44. The applicator of claim 43, wherein said prehensile means comprise smooth, rounded distal ends.

45. The applicator of any of the foregoing claims wherein said applicator is a laparoscopic applicator.

46. The applicator of any of claims 39-43, wherein said pledget is a porous, fluid permeable material.

47. The applicator of claim 46, wherein said pledget is gelatin, a cotton gauze, a sponge, a plastic, fused gelatin beads, or a combination of these.

48. The applicator of any of claims 39-47, wherein said pledget is a biocompatible, biodegradable material.

49. A system for delivery of a fluid to a surgical target site comprising:
an applicator having a proximal end and a distal end;
at least one fluid delivery tube housed within said applicator;
an applicator tip having a proximal end and a distal end, said proximal end of the applicator tip detachably coupled to the applicator distal end;
at least one fluid delivery lumen at said applicator tip proximal end fluidly connected to said at least one fluid delivery lumen in said applicator;
said applicator tip distal end comprising a fluid-permeable material or an opening;

wherein, in use, said system delivers fluid from a source through said applicator delivery lumen and through said tip delivery lumen through said opening or fluid-permable material to said target delivery site.

50. The system of claim 49, wherein said applicator tip distal end is further configured to attach to a pledget comprising a porous matrix.

51. The system of claim 49 or 50, wherein said applicator tip or pledget comprises a biocompatible, biodegradable material.

52. The system of any of the claims 49-51, wherein the pledget contains a radio-opaque substance.

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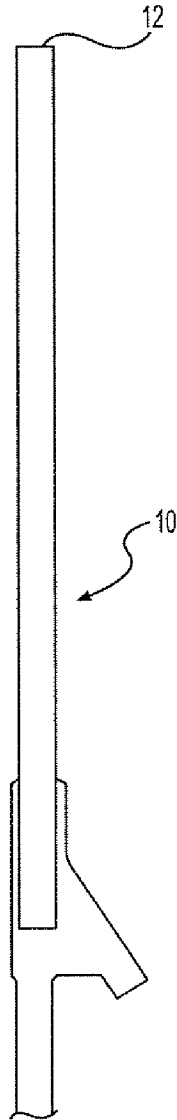
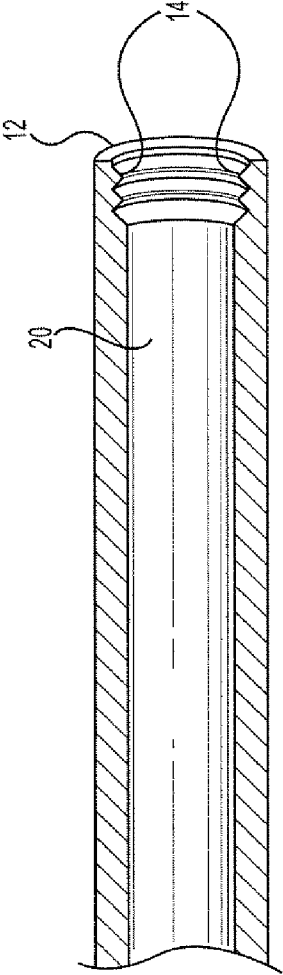


FIG. 1



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FIG. 2

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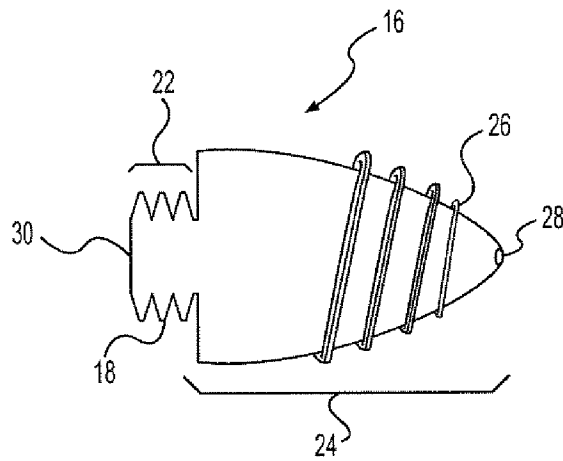


FIG. 3

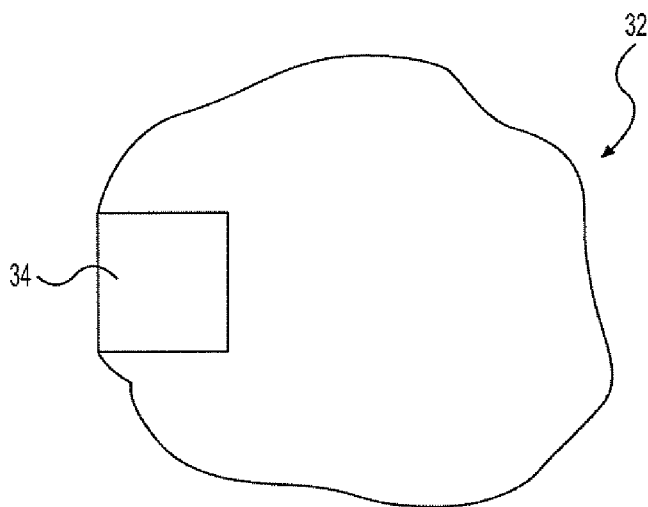


FIG. 4

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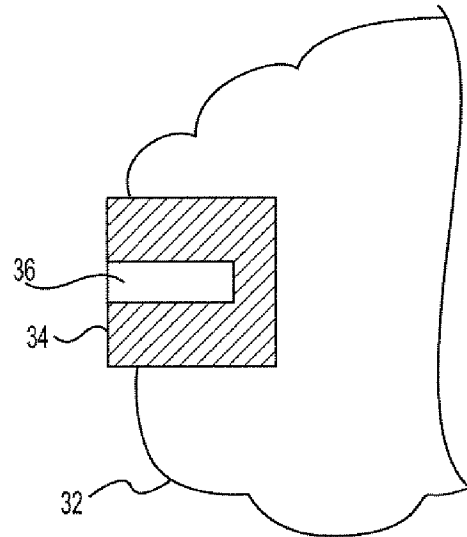


FIG. 5a

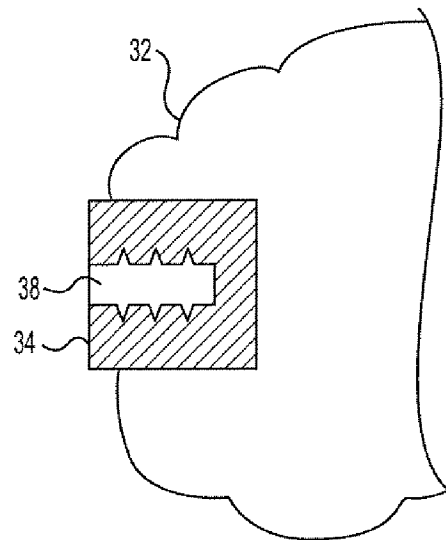


FIG. 5b

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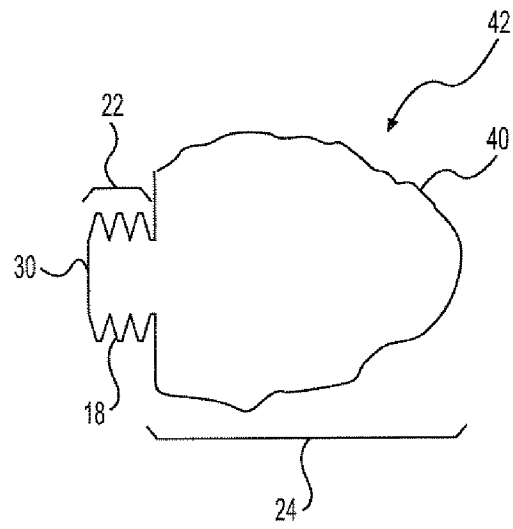


FIG. 6

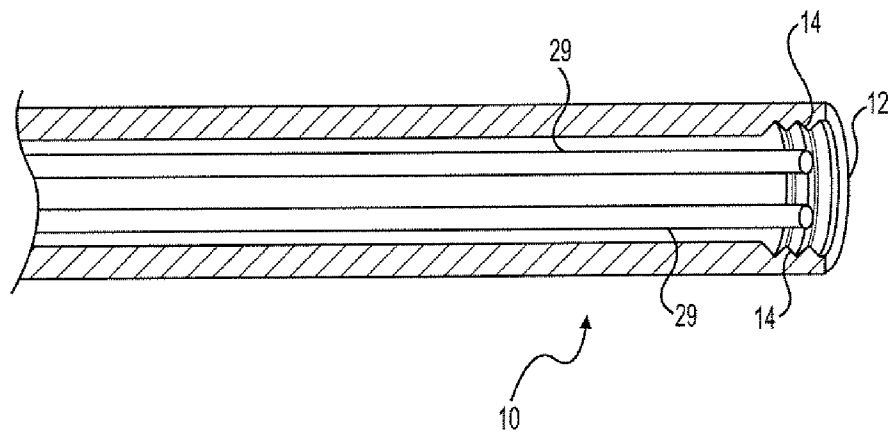


FIG. 7

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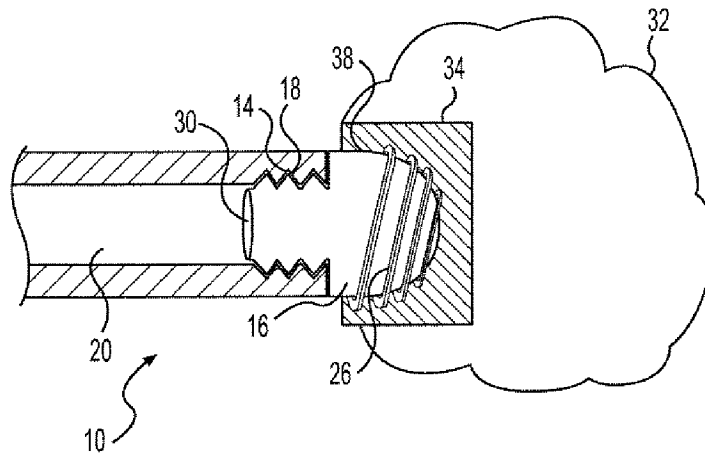


FIG. 8

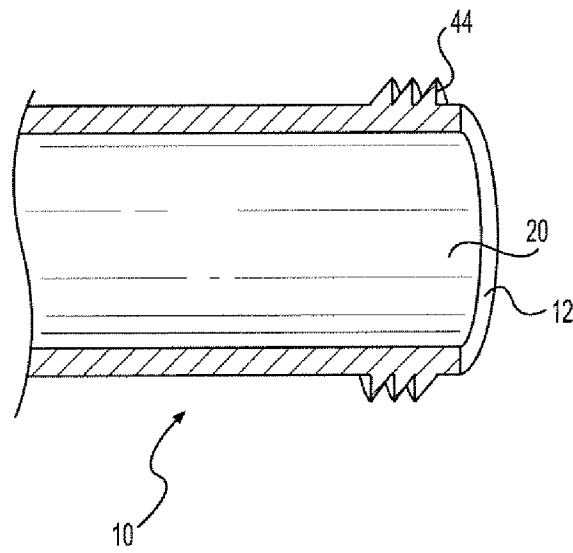


FIG. 9

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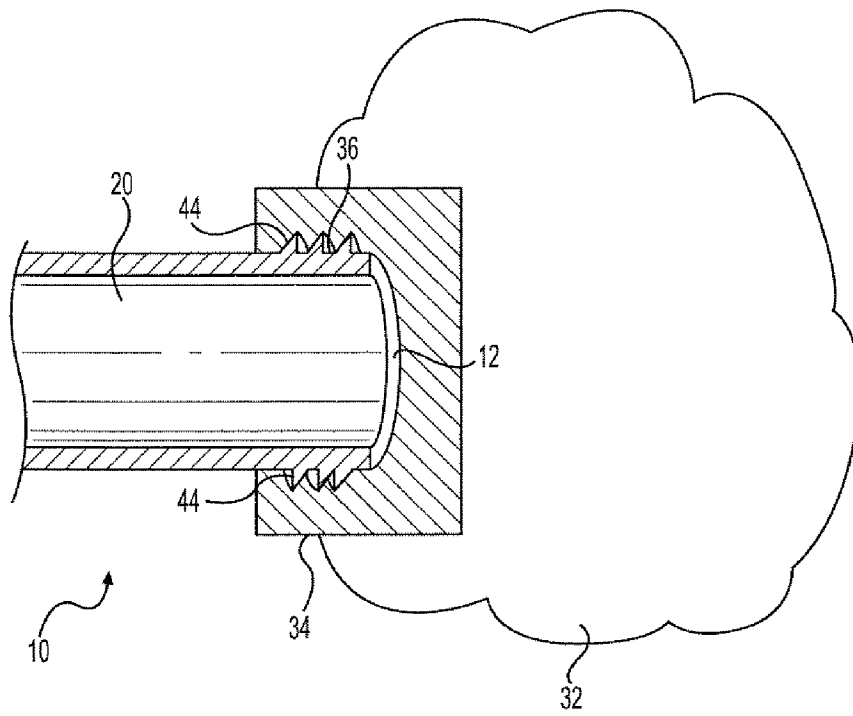


FIG. 10

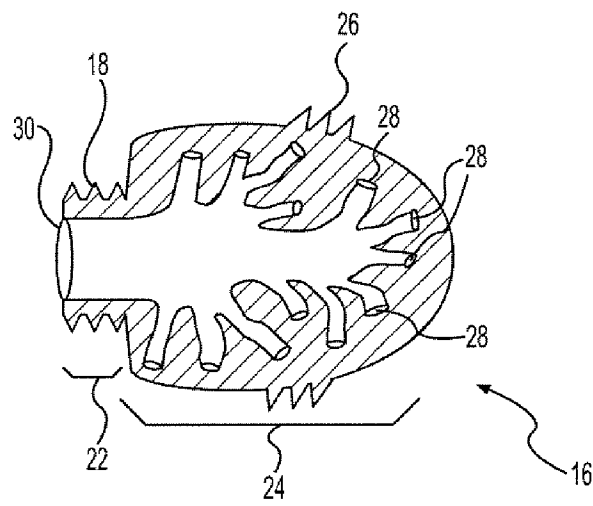


FIG. 11

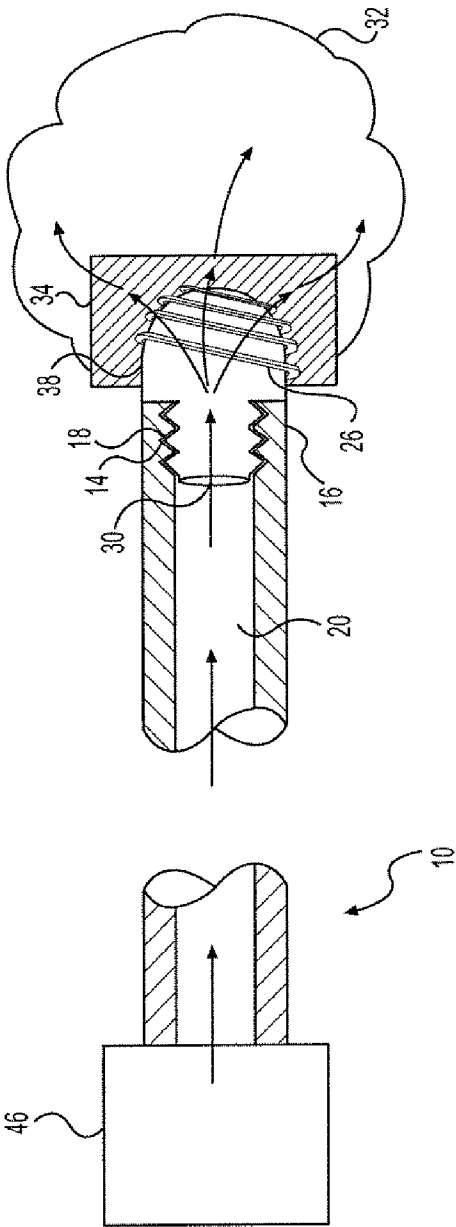


FIG. 12

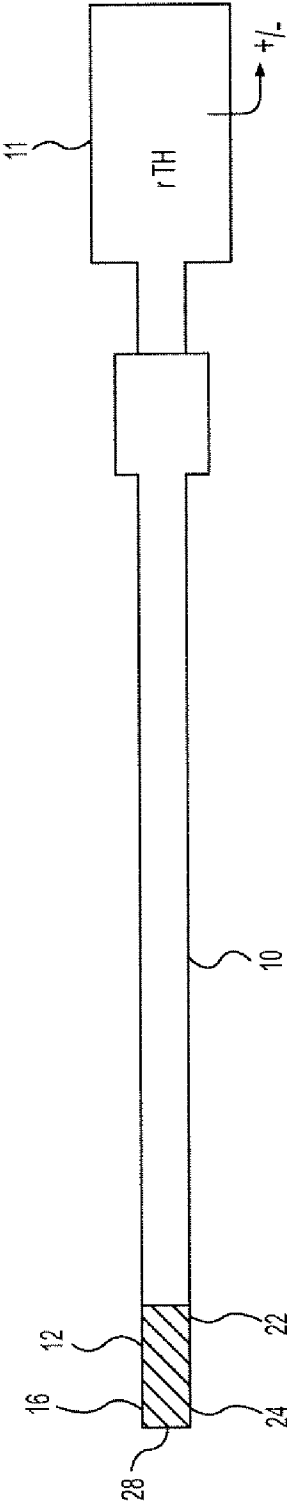


FIG. 13



FIG. 13A



FIG. 13B



FIG. 13C



FIG. 13D

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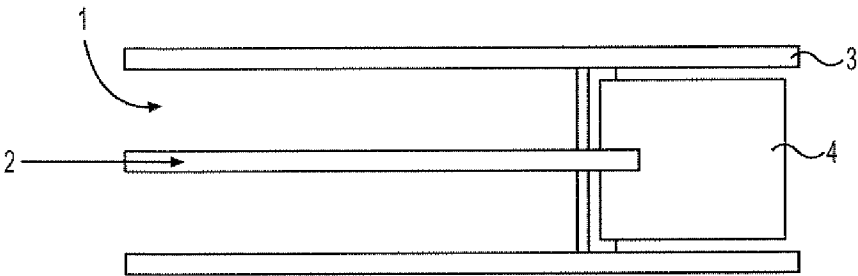


FIG. 14A

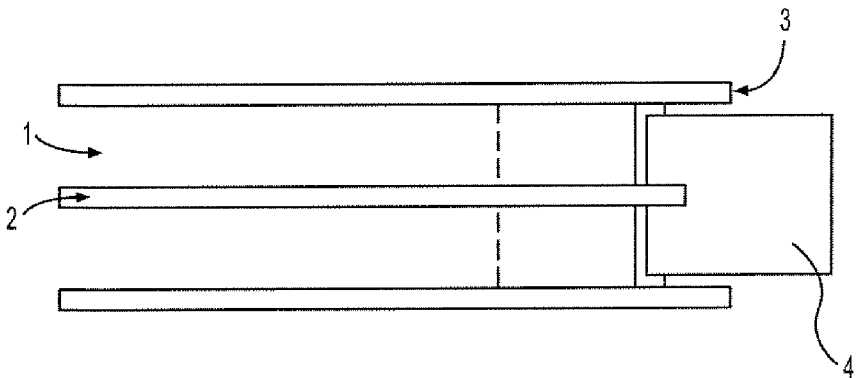
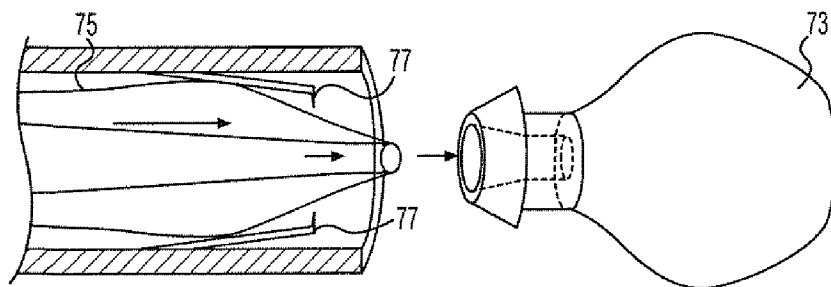
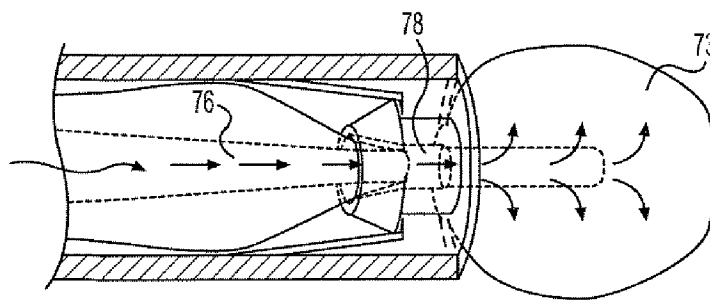
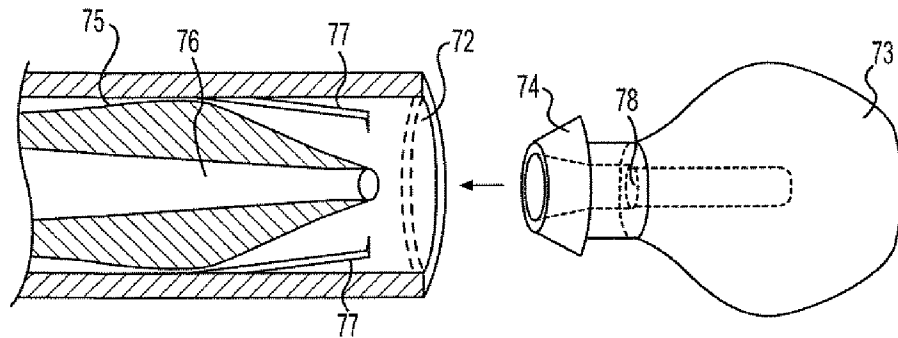
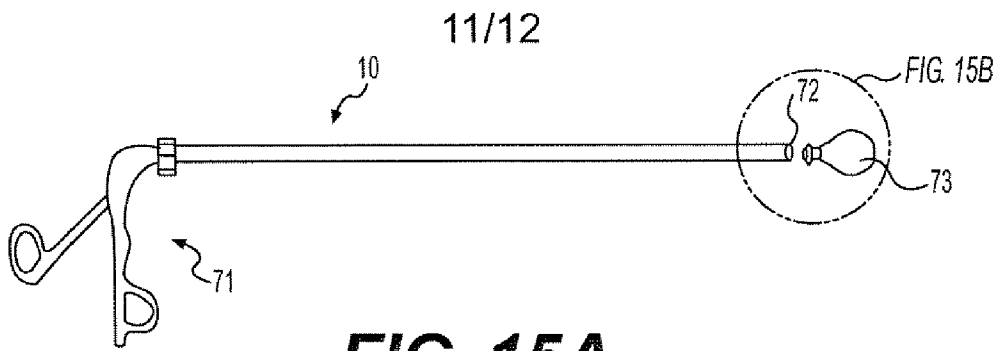


FIG. 14B



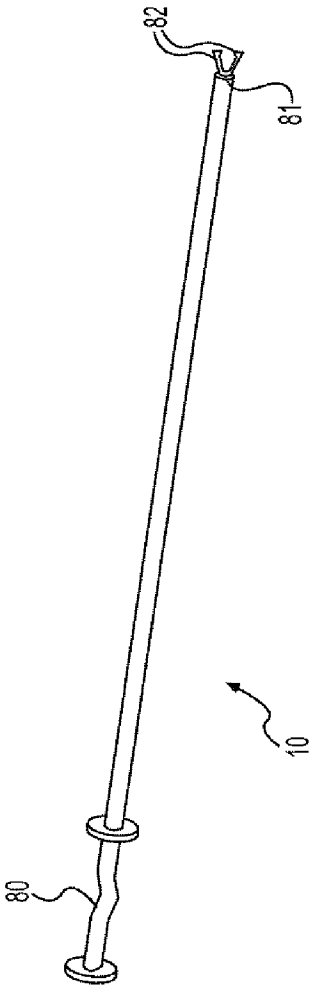


FIG. 16

INTERNATIONAL SEARCH REPORT

International application No.

PCT/US2009/041772

A. CLASSIFICATION OF SUBJECT MATTER

IPC(8) - A61B 17/00 (2009.01)

USPC - 604/82

According to International Patent Classification (IPC) or to both national classification and IPC

B. FIELDS SEARCHED

Minimum documentation searched (classification system followed by classification symbols)

IPC(8) - A61B 17/00; A61M 11/00, 25/00, 37/00, 39/00 (2009.01)

USPC - 239/398, 432; 604/48, 82, 83, 191, 214

Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched

Electronic data base consulted during the international search (name of data base and, where practicable, search terms used)

PatBase

C. DOCUMENTS CONSIDERED TO BE RELEVANT

Category*	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
X --- Y	US 2005/0096588 A1 (HAGMANN et al) 05 May 2005 (05.05.2005) entire document	1-4, 6-11, 24-27, 29, 32-36, 49, 51 ----- 5, 12-23, 28, 30, 31, 50
X --- Y	US 2004/0102730 A1 (DAVIS et al) 27 May 2004 (27.05.2004) entire document	39, 41-44 ----- 12-23, 28, 30, 31, 40, 50
Y	US 6,309,375 B1 (GLINES et al) 30 October 2001 (30.10.2001) entire document	5
Y	WO 2007/064906 A2 (BROMANDER et al) 07 June 2007 (07.06.2007) entire document	40

☐ Further documents are listed in the continuation of Box C.

* Special categories of cited documents:

"A" document defining the general state of the art which is not considered to be of particular relevance

"E" earlier application or patent but published on or after the international filing date

"L" document which may throw doubts on priority claim(s) or which is cited to establish the publication date of another citation or other special reason (as specified)

"O" document referring to an oral disclosure, use, exhibition or other means

"P" document published prior to the international filing date but later than the priority date claimed

"T" later document published after the international filing date or priority date and not in conflict with the application but cited to understand the principle or theory underlying the invention

"X" document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone

"Y" document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such documents, such combination being obvious to a person skilled in the art

"&" document member of the same patent family

Date of the actual completion of the international search

10 June 2009

Date of mailing of the international search report

06 JUL 2009

Name and mailing address of the ISA/US

Mail Stop PCT, Attn: ISA/US, Commissioner for Patents
P.O. Box 1450, Alexandria, Virginia 22313-1450

Facsimile No. 571-273-3201

Authorized officer:

Blaine R. Copenheaver

PCT Helpdesk: 571-272-4300
PCT OSP: 571-272-7774

INTERNATIONAL SEARCH REPORT

International application No.

PCT/US2009/041772

Box No. II Observations where certain claims were found unsearchable (Continuation of item 2 of first sheet)

This international search report has not been established in respect of certain claims under Article 17(2)(a) for the following reasons:

1. ☐ Claims Nos.:
because they relate to subject matter not required to be searched by this Authority, namely:
2. ☐ Claims Nos.:
because they relate to parts of the international application that do not comply with the prescribed requirements to such an extent that no meaningful international search can be carried out, specifically:
3. ☒ Claims Nos.: 37, 38, 45-48, 52
because they are dependent claims and are not drafted in accordance with the second and third sentences of Rule 6.4(a).

Box No. III Observations where unity of invention is lacking (Continuation of item 3 of first sheet)

This International Searching Authority found multiple inventions in this international application, as follows:

1. ☐ As all required additional search fees were timely paid by the applicant, this international search report covers all searchable claims.
2. ☐ As all searchable claims could be searched without effort justifying additional fees, this Authority did not invite payment of additional fees.
3. ☐ As only some of the required additional search fees were timely paid by the applicant, this international search report covers only those claims for which fees were paid, specifically claims Nos.:
4. ☐ No required additional search fees were timely paid by the applicant. Consequently, this international search report is restricted to the invention first mentioned in the claims; it is covered by claims Nos.:

Remark on Protest

- ☐ The additional search fees were accompanied by the applicant's protest and, where applicable, the payment of a protest fee.
- ☐ The additional search fees were accompanied by the applicant's protest but the applicable protest fee was not paid within the time limit specified in the invitation.
- ☐ No protest accompanied the payment of additional search fees.

专利名称(译)	用于在手术期间输送流体的医疗装置及其使用方法		
公开(公告)号	EP2271267A1	公开(公告)日	2011-01-12
申请号	EP2009734534	申请日	2009-04-27
[标]申请(专利权)人(译)	津莫吉尼蒂克斯公司		
申请(专利权)人(译)	ZymoGenetics公司 , INC.		
当前申请(专利权)人(译)	ZymoGenetics公司 , INC.		
[标]发明人	ALEXANDER WILLIAM ALLAN BISHOP PAUL D CARTER STEVEN R LITTAU ALISA M		
发明人	ALEXANDER, WILLIAM, ALLAN BISHOP, PAUL, D. CARTER, STEVEN, R. LITTAU, ALISA, M.		
IPC分类号	A61B17/00		
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代理机构(译)	JONES , ANDREW NICHOLAS		
优先权	61/125504 2008-04-25 US		
其他公开文献	EP2271267A4		
外部链接	Espacenet		

摘要(译)

提供了一种外科手术施加器和施用器尖端，其构造成以流体连通的方式连接，用于输送有益的流体。涂抹器尖端还可以配置成与拭子可逆地连接，以流体连通。例如，涂抹器尖端可包括凸形或凹形螺纹，并且该小拭子具有与尖端的螺纹构造互补的螺纹。涂抹器尖端还可包括至少一个流体输送腔，用于将流体从尖端传送到拭子。在本发明的一个实施例中，尖端包括阳螺纹，并且拭子包括拭子附接部分。还提供了用于将尖端连接到拭子的方法。在一个实施例中，包括阳螺纹的尖端通过将尖端轻敲或按压到拭子附接部分中而附接到拭子，包括拭子附接部分。