

OPEN STAPLING. REVOLUTIONISED.

Ten years of clinical performance in minimally invasive surgery, now on your open stapler.

GIA™ Stapler
with Tri-Staple™ Technology



THE POWER OF THREE TRI-STAPLE™ TECHNOLOGY.

STRENGTH

Compared to a two-row linear stapler, the GIA™ stapler with Tri-Staple™ technology provides beneficial staple line leak pressure.^{1,†}

PERFORMANCE

To enhance performance in thick-tissue applications, the GIA™ stapler with Tri-Staple™ technology offers²:

- A new knife blade with every firing
- Less retraction force than two-row linear staplers^{†‡}

FLEXIBILITY

The GIA™ stapler with Tri-Staple™ technology can be used with interchangeable cartridges to accommodate different tissue applications²

ORDERING INFORMATION

GIA™ Stapler with Tri-Staple™ Technology

	DESCRIPTION	PURPLE (MEDIUM/THICK)	BLACK (EXTRA THICK)
80 mm	Stapler	GIA80MTS	GIA80XTS
	Cartridge	GIA80MTC	GIA80XTC



LESS STRESS

On tissue during compression and clamping^{3,‡}



GREATER PERFUSION

May be allowed into the staple line^{4,5,†,§}



CONSISTENT PERFORMANCE

Over a broad range of tissue thicknesses^{1,†}

**For more information, contact
your local Medtronic sales
representative today.**

†Compared to GIA™ staplers with DST Series™ technology (two-row linear staplers). ‡Compared to GIA™ staplers with DST Series™ technology and Ethicon™ linear cutter and proximate linear cutter. §Preclinical results may not correlate with clinical performance in humans.

1. Based on internal test report #RE00171002 rev 0. 80 mm GIA™ stapler with Tri-Staple™ technology purple and black design verification report. Aug. 14, 2019. 2. Based on internal test report #RE00218526. R&D memo. Aug. 27, 2019. 3. Based on report # RE00231875. Lily tissue compression comparison. Dec. 4, 2019. 4. Based on internal test report #RE00222215. Endo GIA™ with Tri-Staple™ technology testings performed and design similarities between Lily and Endo GIA™ with Tri-Staple™ technology memo. Oct. 16, 2019. 5. Eschbach M, Sindberg GM, Godek ML, et al. Micro-CT imaging as a method for comparing perfusion in graduated-height and single-height surgical staple lines. *Med Devices (Auckl)*. 2018;11:267–273.

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