

Easy to handle:

Sterile: Needles are gammasterilized, fully covered and protected with a sterility tab.

Efficient: an adequate blood sample with just a single push of the button.



Gentle: Electro-polished and silicone-coated needle is linearly driven to assure lower pain and quick healing.

Reliable: Risk of misuse or receiving an incorrect blood sample is eliminated through a unique, patented, self-destructive activation mechanism.

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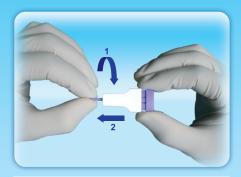


KEY FEATURES OF ACTI-LANCE®

- **Easy to handle:** intuitive activation, low firing force, no lancet loading required, 2 step operation only.
- Minimized pain: ultra sharp and silicone-coated needle, double spring mechanism to ensure high puncture speed and eliminate needle vibrations.
- Sufficient to lance once: different color-coded versions, right needle exposure length, adequate blood flow.
- **Self-destructive mechanism** excluding possibility of reuse, sterilized reliable sterility protector.



INSTRUCTIONS FOR USE



Twist off the protective cap and pull it straight out.



Place Acti-Lance®
on the desired puncture site
and press the top push button
to activate the device.



Gently apply intermittent pressure near the puncture site to obtain the required blood volume.

TECHNICAL DATA & ORDERING INFORMATION

Acti-Lance® Safety Lancets are available in three different color-coded versions to meet specific blood sample size applications and address most of skin types.



Acti-Lance® Lite is ideal for blood glucose monitoring purposes and is especially recommended for all patients with delicate skin including children.



Acti-Lance® Universal is perfect for most of the common tests done with capillary blood including blood glucose, cholesterol, hemoglobin, blood group classiffication, coagulation tests, virology tests and many others.



Acti-Lance® Special assures larger blood samples for the widest variety of clinical purposes. It is also perfect for heel sticks on neonates as well as finger sticks on adults in cases where the test requires more blood.



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