1. **Capital Attachment and Power On**
   - Select amber light on front of CM until it turns green.
   - Attach holster and optional remote input accessory (keypad or footswitch).

2. **Place holster onto Cart holder**
   - First, distal (front) end of holster placed under “teeth” of holder.
   - Then, rotation knobs seated into grooves on holder (gray to gray).
   - Check screw on firing fork is tightened.

3. **Attaching Probe to Holster**
   - Ensure tab on tip protector is facing up.
   - 13th chamber / Marker Port of cup is aligned with the M on top of the probe.
   - Place probe parallel onto holster, use small motions to move probe distal to lock (listen for click).
   - When tip protector is on, needle cannot be rotated. Unlatch tip protector to check rotation.

4. **Ensure all tubing Connections are made**
   - Stop cock valve is in correct orientation.
   - Fluids Pinch is not engaged.
   - Tube set Cartridge to CM slot.
   - Probe Tubing Canister Connector (white) to Canister port (left “arm” on canister lid).
   - Control Module Source Tube (Gray) to Canister port (center port on canister lid).
   - Saline Spike (white) securely tightened and inserted into Saline Bag (first flip bag upside-down to remove cap, then insert, and hang).

5. **Initialize the device (Proceed to Initialization)**
   - Place into cart holder during initialization to avoid snagging cup on clothing.
   - 13th chamber is aligned with M on top of probe. (When initialization complete)
   - All chambers are fully seated into the cup on the probe. (When initialization complete)
   - Outer cup of the SMS is fully locked. (When initialization complete)

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* See Mammothome revolve® User Instructions Manual for Use
Choose a side of the holster

- Press and hold 1 flashing button on desired side until solid.
- Use the OPEN/CLOSE button to change sides of holster, if desired.
- Arm / Fire can only be done from holster (not from keypad or footswitch).
- Note: LED's on holster will be different when keypad or footswitch is attached.

Arm the device

- Press and hold ARM until flashing button and sound, then release.
- Hologic tables: Ensure device is ARMED prior to mounting onto Hologic table.
- GE upright: Do not arm with tip protector fully attached when adapter is on.

Standby

- When in Standby, if saline bag is higher than probe, it can leak at probe aperture.
  - Suggest to flip saline bag upside-down prior to use to reduce saline flow, but MUST orient right-side up before use!
  - Do NOT suggest pinching the lateral line for long period of time (beyond what is typical for meds insertion) – long duration of pinching may kink tubing.

Firing the device

- After device is mounted and placed through needle guide and targeted, fire the device.
- Once fired, aperture will be open.
- Biopsy Button can be pressed immediately after firing to take a sample (do not need to close aperture first).

Sampling

- When ready, begin taking samples:
  - Press and release Biopsy Button for individual sample (rotate aperture after sample).
  - Press and hold for continuous samples (rotate aperture after each sample).
- Reminder: Green LED’s indicate cutter movement and aperture ends closed.
- Rotate needle to the desired clock position when all Green LED’s are lit or beep is heard, indicating cutter is fully forward and aperture closed.
- Reminder: Chambers automatically index to next available chamber when Biopsy button activated.

After Sampling (BEFORE REMOVING COLLECTION CUP)

11a. Tap Vac: Quickly press and release VAC button to clear the probe after all sampling has occurred and before removal of the cup.

11b. OPEN*: Open the aperture
  - *Note: If a standard length marker is planned to be used, ensure aperture is set to FULL prior to opening.

11c. SteadyVac ON during specimen radiograph to keep cavity clear.

Removal of Samples

- When sufficient samples have been acquired, remove cup then remove chambers from cup.
- Place the chambers with tissue on imaging surface and push down to flatten.
- If heavy bleeder, put empty cup back on probe to retain fluid.

Marking

- Remove Cup.
- SteadyVac OFF (disable by selecting Open/Close or turn off SteadyVac at CM screen) just before ready to mark.
  - Note: Cutter and cup will return to position it was in prior to SteadyVac. IF OPEN prior to SteadyVac (step 11b), aperture will remain OPEN and cup aligned to marker port once SteadyVac is turned off. If aperture was left closed prior to SteadyVac, remember to now OPEN* the aperture prior to marker insertion.
- Align marker with the needle opening prior to deployment.
  - If using a rigid marker deployer: do not take post marker x-ray images with deployer still remaining in the probe. Remove probe and marker together or do not use rigid marker deployer.

* See Mammmotome revolve® User Instructions Manual for Use