

Simplify procedures for  
preinduction dilation.

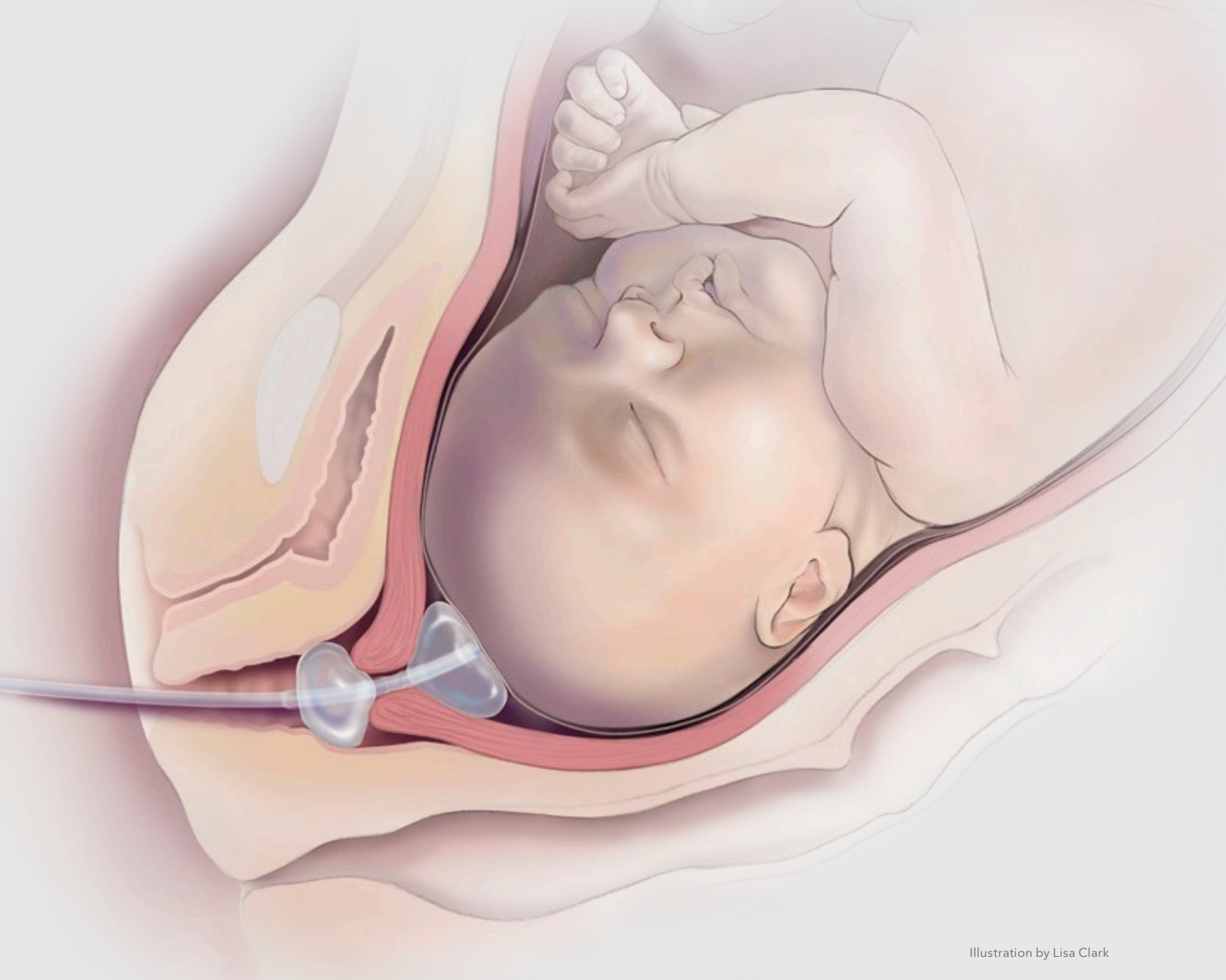
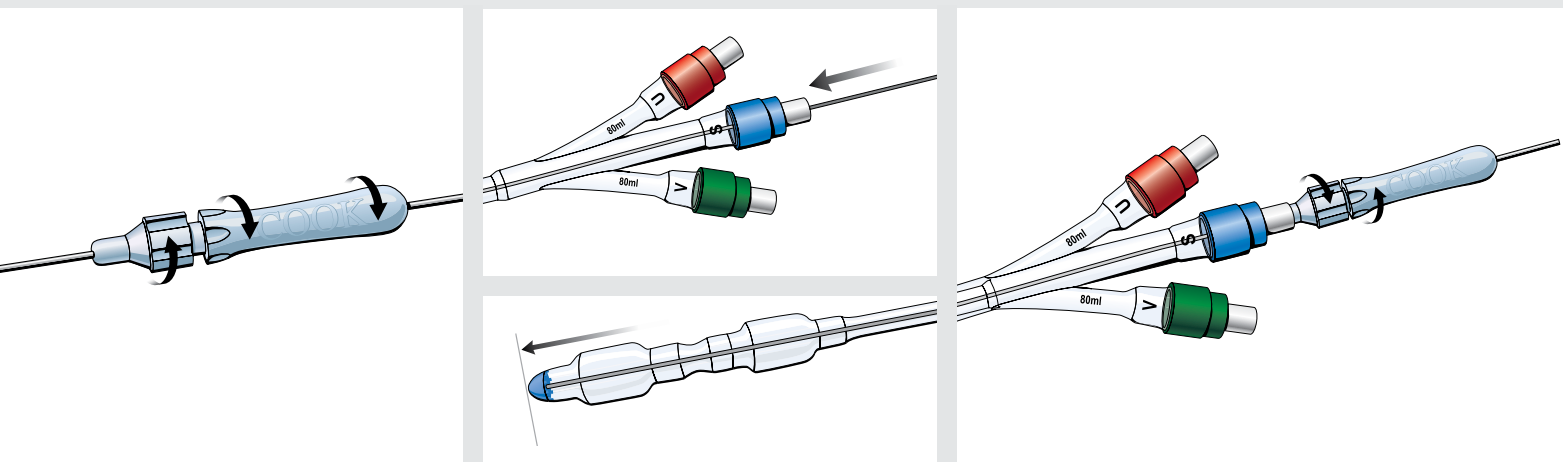


Illustration by Lisa Clark

## Cervical Ripening Balloon

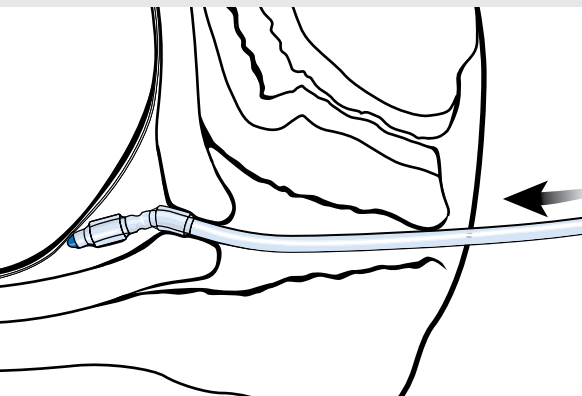
WITH STYLET

The Cook Cervical Ripening Balloon is a silicone double-balloon catheter with an adjustable-length malleable stylet. It is intended for mechanical dilation of the cervical canal prior to labor induction at term when the cervix is unfavorable for induction.

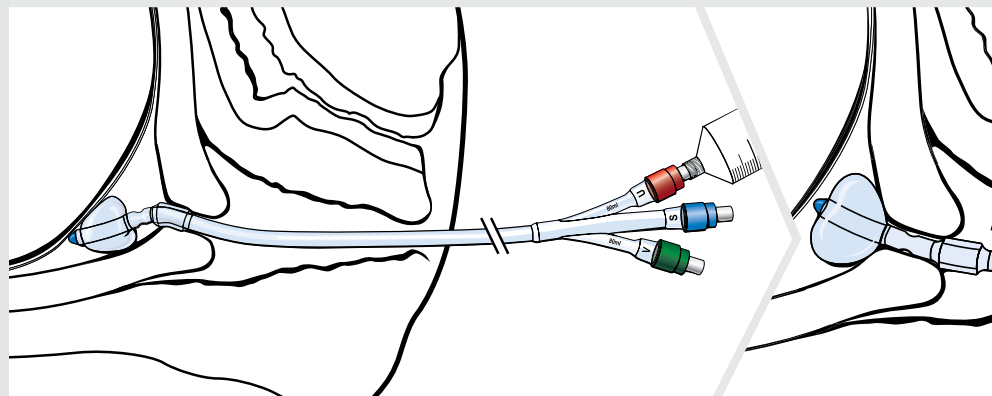


**1** Loosen the fitting on the proximal hub of the stylet and adjust the wire so that the distal tip of the stylet is even with the distal tip of the Cervical Ripening Balloon.

**2** Tighten the fitting so that the wire does not move during manipulation, and seat the adjustable handle firmly into the blue port labeled "S."



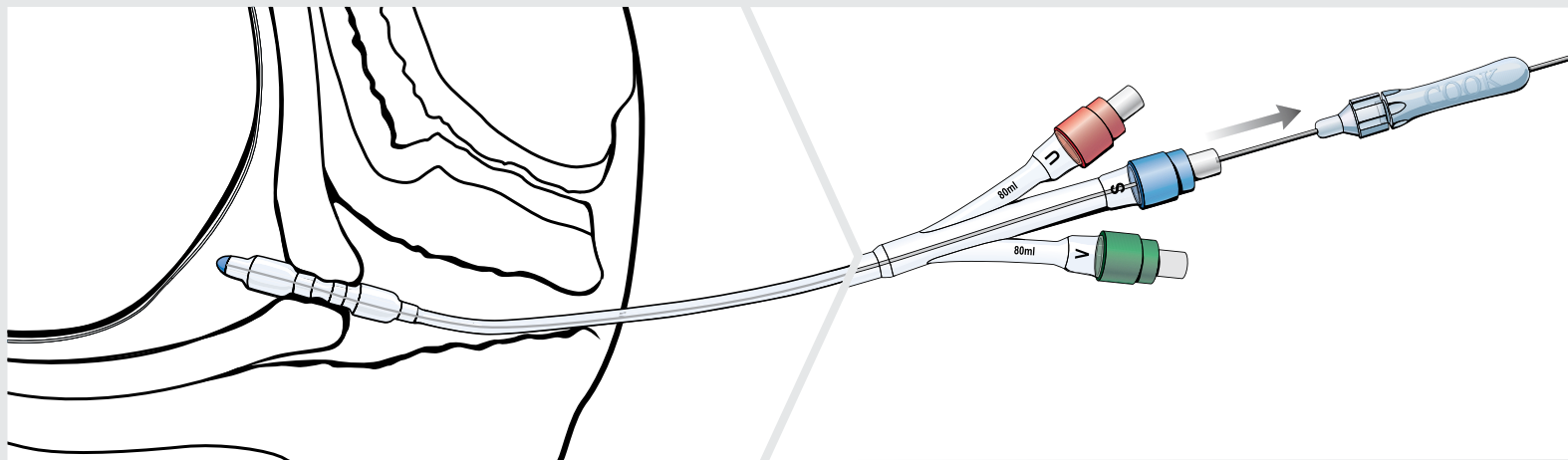
**4** Advance the Cervical Ripening Balloon through the cervix until both balloons have entered the cervical canal.



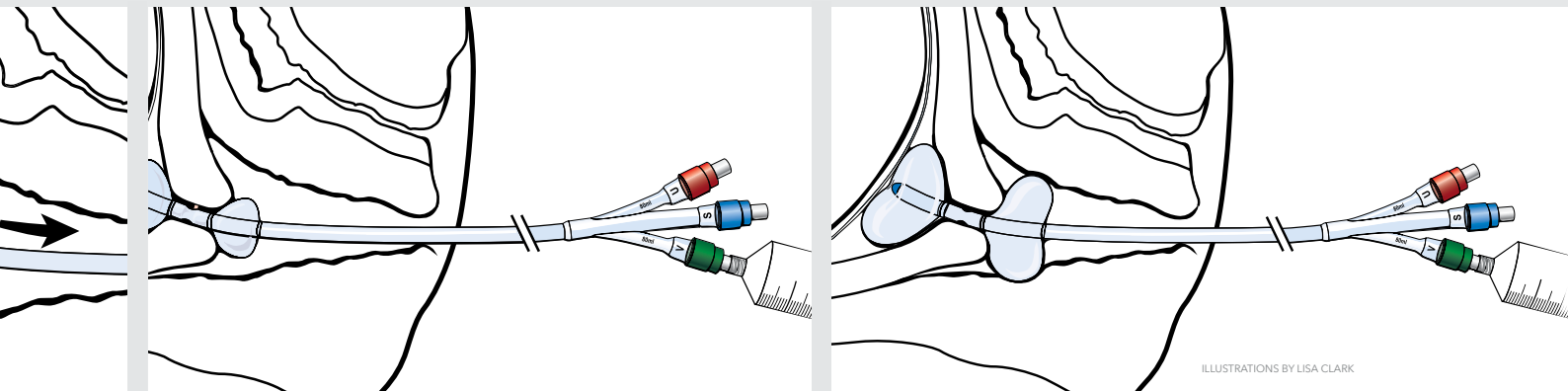
**5** Inflate the uterine balloon with 40 mL of saline. Once the uterine balloon is inflated, pull the device back until the balloon abuts the internal cervical os.

#### The Cervical Ripening Balloon:

- Does not require traction
- Creates steady pressure on the internal and external os throughout the dilation process
- Has been shown to improve Bishop scores in nulliparous women when compared to 30 mL Foley balloon catheters<sup>1</sup>
- Is a completely mechanical dilation method
- Ceases its mechanical action when the device is removed
- Is associated with reduced rates of tachysystole and increased rates of vaginal delivery within 24 hours compared to prostaglandin E<sub>2</sub>.<sup>2</sup>
- Has a stylet that is completely contained within the catheter



- 3** Use the stylet with the Cervical Ripening Balloon to traverse the cervix if necessary. **NOTE:** Once the cervix has been traversed and the uterine balloon is above the level of the internal uterine opening (internal os), remove the stylet before further advancing the catheter.



- 6** The vaginal balloon is now visible outside the external cervical os and should be inflated with 20 mL of saline.

- 7** Once the balloons are situated on either side of the cervix, add saline—a maximum of 80 mL per balloon. Time the placement of the balloon so that it is in place no longer than 12 hours before active labor is induced. For more information on the Cook Cervical Ripening Balloon with Stylet, please refer to the Instructions for Use.



## Cervical Ripening Balloon

WITH STYLET

The Cook Cervical Ripening Balloon is a silicone double-balloon catheter with an adjustable-length malleable stylet. It is intended for mechanical dilation of the cervical canal prior to labor induction at term when the cervix is unfavorable for induction.

Order Number	Reference Part Number	Fr	Length cm	Balloon Volume mL
G19891	J-CRBS-184000	18	40	80

Also available without stylet:



## Cervical Ripening Balloon

PREINDUCTION CERVICAL DILATION

The Cook Cervical Ripening Balloon is indicated for mechanical dilation of the cervical canal prior to labor induction at term when the cervix is unfavorable for induction.

Order Number	Reference Part Number	Fr	Length cm	Balloon Volume mL
G48149	J-CRB-184000	18	40	80

*Some products or part numbers may not be available in all markets. Contact your local Cook representative or Customer Service for more details.*

### Resources

1. Hoppe KK, Schiff MA, Peterson SE, et al. 30 mL single- versus 80 mL double-balloon catheter for pre-induction cervical ripening: a randomized controlled trial [published online ahead of print August 25, 2015]. *J Matern Fetal Neonatal Med*. doi:10.3109/14767058.2015.1067297.
2. Cromi A, Ghezzi F, Uccella S, et al. A randomized trial of preinduction cervical ripening: dinoprostone vaginal insert versus double-balloon catheter. *Am J Obstet Gynecol*. 2012;207(2):125.e1-e7. doi:10.1016/j.ajog.2012.05.020.

### Customer Service

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