

Products	Guardus <sup>®</sup> overtube, Roth Net <sup>®</sup> retriever, and Talon <sup>™</sup> grasping device	
Procedural Area	Foreign Body Removal	
71100		
Article	Endoscopic Retrieval Devices	
Publication	Diehl DL. ASGE Technology Committee. Endoscopic Retrieval Devices. American Society of Gastrointestinal Endoscopy 2009;69:997-1003	
URL	http://www.asge.org/uploadedFiles/Publications_and_Products/Practice_Guidelines/Endo%20retreval.pdf	
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Purpose	Provides a list of available snares, retrieval forceps, nets, graspers, baskets, and accessories for endoscopic retrieval and describes proper device selection for resected polyps, foreign bodies, and esophageal food impactions.	
Key Points	<ul> <li>Selection of a retrieval device is generally dictated by the shape and size of the foreign body or tissue to be removed. For some objects, a practice retrieval run performed outside the patient with a similar object can be helpful.</li> <li>The endoscope length and instrument channel size should also be considered before device selection.</li> <li>Experience and judicious selection of devices may be able to limit complication and enhance procedural efficiency in foreign body retrieval cases.</li> <li>Retrieval graspers are typically used for retrieving soft objects. The grip of existing graspers may not be secure with heavy or impacted objects (Article published before the release of the Talon™ grasping device).</li> <li>In addition to endoscopic retrieval devices, an esophageal overtube may be used in some clinical situations to enhance the safety and efficiency of retrieval by protecting the airway, providing a conduit for repeated luminal access, and protecting the mucosa from trauma related to sharp objects.</li> </ul>	
Conclusions	<ul> <li>Snares, forceps, and nets are most commonly used for foreign body retrieval.</li> <li>Existing pronged graspers may not provide the secure grip with heavy or impacted objects (Article published before the release of the Talon™ grasping device).</li> <li>Different devices may operate better in different locations of the GI tract, and physical characteristics of the object to be retrieved will dictate device selections.</li> <li>In some cases, esophageal overtubes can be used to prevent inadvertent release of an object into the trachea, protect the esophageal mucosa, and facilitate repeated endoscope insertion.</li> <li>This summary page does not replace a subscription.</li> </ul>	



**Table 1: Retrieval Device & Accessory Overview** 

Device	Object
Snares	Polyp Tissue Removal & Retrieval, Long Objects
Retrieval Forceps (Alligator, Rat tooth)	Small Flat Objects (Coins), Needles, Pins, Blades
Nets	Small Round Objects, Button Batteries, and Fragments of Tissue from Polypectomy or Endoscopic Mucosal Resection
Retrieval Graspers	Soft Objects (Polypectomy Specimans & Food Boluses)
Baskets	Biliary Stone Extraction, Long Objects, Some Small Objects
Magnetic Retrievers	No longer sold due to risk of losing magnet
Biliary Stent Retriever	Biliary Stents
Overtube	Sharp Objects, Objects requiring Multiple Intubations
Latex Hood	Retrieval of Sharp or Wide Objects