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Standard Terminology for Surgical Scissors—Inserted and Non-Inserted Blades¹

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1. Scope

1.1 This terminology defines basic terms and considerations for the components of scissors with either inserted or non-inserted blades (see Fig. 1). Instruments in this terminology are limited to those fabricated having scissor blades made from stainless steel and used for surgical procedures.

1.2 *This international standard was developed in accordance with internationally recognized principles on standardization established in the Decision on Principles for the Development of International Standards, Guides and Recommendations issued by the World Trade Organization Technical Barriers to Trade (TBT) Committee.*

2. Referenced Documents

2.1 *ASTM Standards:*²

F899 Specification for Wrought Stainless Steels for Surgical Instruments
F1079 Specification for Inserted and Noninserted Surgical Scissors

2.2 *ISO Standard:*

ISO 7741 Instruments for Surgery—Scissors and Shears General Requirements, Testing³

3. Terminology

DEFINITIONS OF THE INSTRUMENTS

blade—the segment that contains the cutting edge which may be with or without serrations.

bottom scissor half—the component which contains the threaded end of the screw.

distal end—the working end, comprised of two blades, that is furthest from the surgeon when in use.

¹ This terminology is under the jurisdiction of ASTM Committee F04 on Medical and Surgical Materials and Devices and is the direct responsibility of Subcommittee F04.33 on Medical/Surgical Instruments.

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² For referenced ASTM standards, visit the ASTM website, www.astm.org, or contact ASTM Customer Service at service@astm.org. For *Annual Book of ASTM Standards* volume information, refer to the standard's Document Summary page on the ASTM website.

³ Available from American National Standards Institute (ANSI), 25 W. 43rd St., 4th Floor, New York, NY 10036, <http://www.ansi.org>.

finger rings—the feature of the scissors that forms the gripping surface for the surgeon (commonly classified as the ring-handled feature).

joint—the junction where the scissor blades are secured by a screw, allowing the instrument to pivot.

proximal end—that portion of the instrument that is closest to the surgeon when in use.

ride—the edge which acts as a cam.

ride relief—the contoured area between the shank and ride

rounded blade—a blade having a radius on its outer surface which forms a transition between the outer edge and the cutting edges.

screw—the fastener which joins the scissor halves

serrations—corrugations in the cutting edge of the blades.

shank—(1) the part of either scissor half that yields configuration, length, and leverage; (2) the part of the scissor half between the finger ring and joint.

surgical scissors with inserts—a stainless steel instrument, available in various sizes and configurations, and used in surgical procedures for cutting body tissue, gauze, and suture. An instrument of this type has tungsten carbide, stellite, or other inserts.

top scissor half—the component which contains the screw head at assembly.

DEFINITIONS OF PHYSICAL PROPERTIES OF THE INSTRUMENT

blade alignment—the positioning of the blades with respect to tip match-up and blade setting.

chamfer—the broken external edges of the instrument.

corrosion—the formation of rust.

finish, n—final surface visual appearance classified as follows:
bright or mirror finish, n—highly reflective surface.

satín, matte, or black finish, n—reduced reflective surface (as compared to bright or mirror finish) varying from a dull appearance to a blackened surface.