



Designation: F 921 – 85 (Reapproved 2002)

## Standard Terminology Relating to Hemostatic Forceps<sup>1</sup>

This standard is issued under the fixed designation F 921; the number immediately following the designation indicates the year of original adoption or, in the case of revision, the year of last revision. A number in parentheses indicates the year of last reapproval. A superscript epsilon ( $\epsilon$ ) indicates an editorial change since the last revision or reapproval.

*This standard has been approved for use by agencies of the Department of Defense.*

### 1. Scope

1.1 This terminology covers basic terms and considerations for the components of hemostatic forceps. Instruments in this terminology are limited to those fabricated from stainless steel and for general surgical procedures. See Figs. 1 and 2.

### 2. Referenced Documents

#### 2.1 ASTM Standards:

F 899 Specification for Stainless Steels for Surgical Instruments<sup>2</sup>

#### 2.2 ISO Standard:

ISO 7151 Instruments for Surgery—Hemostatic Forceps—General Requirements<sup>3</sup>

### Definitions of Hemostatic Forceps

### 3. Terminology

**box lock**—the junction where the female member and the male member are secured forming the pivoting feature.

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

**female member**—the component that accommodates and encloses the male member at the box lock junction.

**finger rings**—the feature of both the female and the male members that forms the gripping surface for the surgeon (commonly classified as the ring-handled feature in ISO 7151).

**hemostatic forceps**—an instrument, available in various sizes and configurations, used in surgical procedures for the compression of blood vessels and the grasping of tissue.

**jaws**—parts that contain serrations to interrupt the flow of blood through any vessel.

**male member**—the component that is inserted through the female member and secured to the female member at the box lock junction.

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

**ratchets**—the portion of both the female and the male members possessing inclined teeth that forms the locking mechanism.

**serrations or teeth**—the gripping or clamping surfaces of the jaws.

**shank**—the part of either the female or the male member that yields configuration, length, and leverage.

### Definitions of Physical Properties of Hemostatic Forceps

**chamfer**—the broken edge of the jaw serrations and the external edges of the box lock surfaces.

**corrosion**—the formation of rust.

**elasticity**—the capacity of the instrument to undergo induced stress without permanent distortion or breakage of any component.

**finish**—the final surface visual appearance of the instrument classified as follows:

(1) bright or mirror finish—highly reflective surfaces.

(2) satin, matte, or black finish—reduced reflected surfaces (as compared to bright or mirror finish).

**hardness**—a measurement of the resistance to indentation.

**interdigitation**—the interlocking or meshing of the female and male jaw serrations.

**jaw alignment**—the positioning of the female and male jaws with respect to interdigitation (related to box lock function and ratchet performance).

**passivation**—the changing of the chemically active surface of stainless steel to a much less reactive state.

**stainless steel**—the raw material on the instrument that is in accordance with Specification F 899.

<sup>1</sup> 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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<sup>2</sup> *Annual Book of ASTM Standards*, Vol 13.01.

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

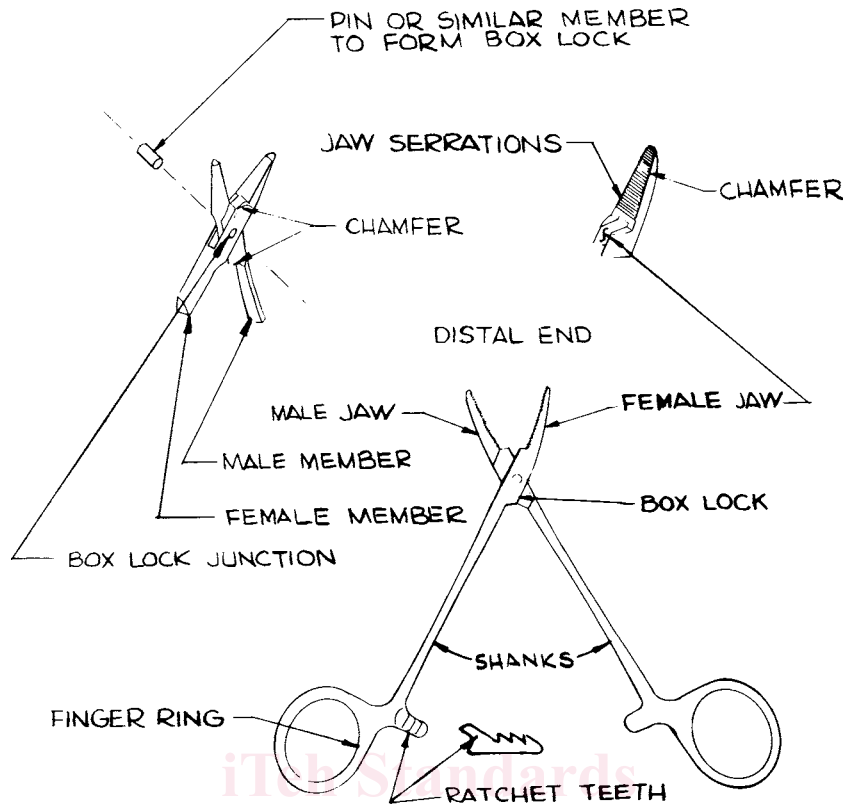


FIG. 1 Components of a Hemostatic Forceps

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