Syringes - 2-Piece Technology

2-Piece Design
To ensure leak tightness, the syringe plunger has a larger diameter than the barrel. At the same time, the syringe barrel has to have thin wall technology to be flexible enough to accommodate the plunger movement. This requires precision molding of barrel and plunger. The resin formulation used for the barrel is self-lubricating so there is no need for additional lubrication with silicone oil.

Graduations
Scale markings typically in cubic centimetres (cc) or millilitre (ml) units. These units of measure are equivalent.

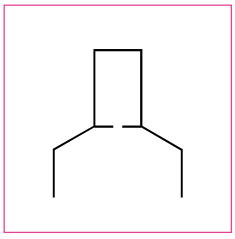
Barrel
Reservoir for holding liquid, clearly graduated to allow accurate and visual measurement of the syringe contents.

Flanges
The "wings" that jut out from the side of the syringe barrel providing an area or surface for the index finger and middle finger to grasp during aspiration or administration.

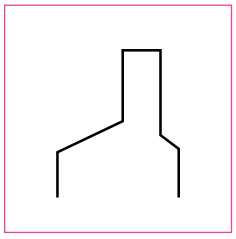
Thumb Press
The clinician presses to push the plunger rod down into the barrel to expel its content

Plunger Rod
A piston-like device inside the barrel

The anatomy of a 2-piece syringe (without stopper)



Concentric Luer Slip Tip:
A friction-fit connection that requires the clinician to insert the tip of the syringe into the needle hub or another attaching device in a push-and-twist manner. This will ensure a connection that is less likely to detach. Simply sliding the attaching device onto the syringe tip will not ensure a secure fitting.



Eccentric Luer Slip Tip:
Allows for work requiring closer proximity to the skin. Generally used for venipunctures and aspiration of fluids. Also see luer slip instructions.