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(54) **SYSTEMS AND METHODS FOR TISSUE TREATMENT**

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ABSTRACT

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Systems and methods are configured to treat a tissue by automatically linearly oscillating an instrument into a target site. A system may include a body having a length and configured to receive a portion of the instrument guide member having an exposed end and/or an instrument. The system may further include an actuator member disposed within the body and configured to linearly oscillate the instrument within the instrument guide member a fixed distance past the exposed end. The systems and methods can increase patient comfort while empowering clinicians by simplifying interventions for musculoskeletal disorders.

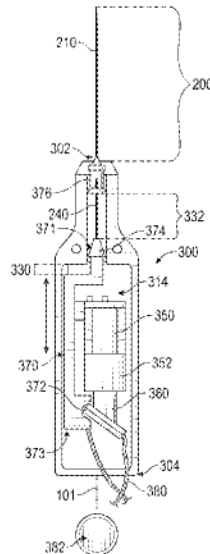
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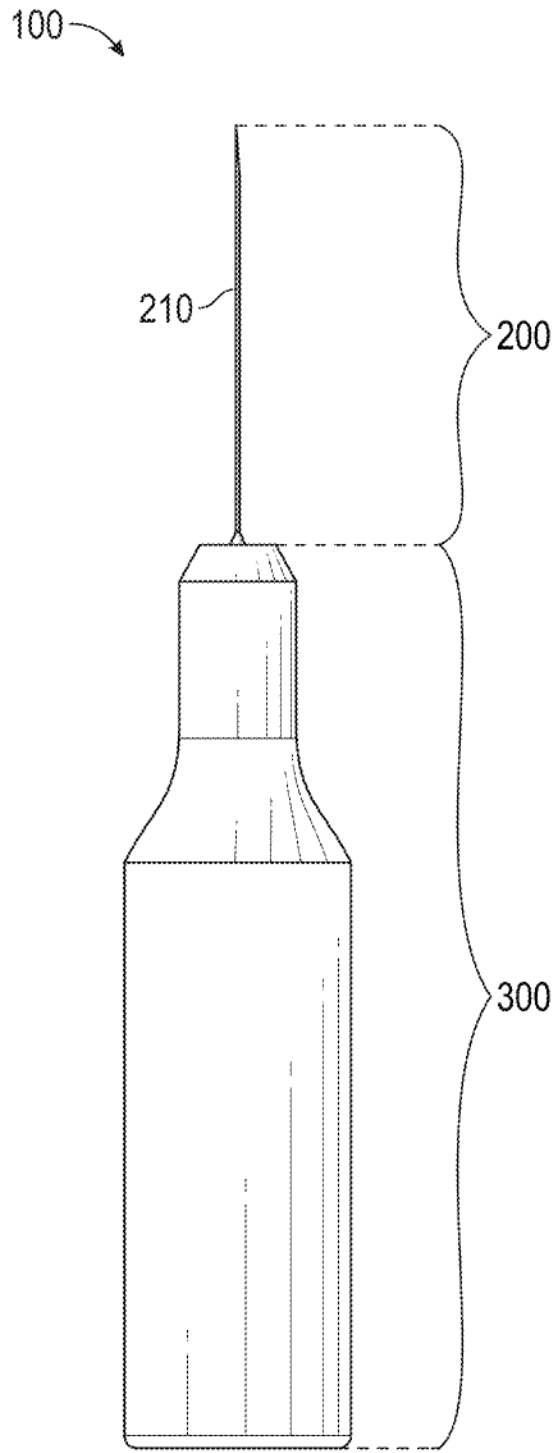


FIG. 1

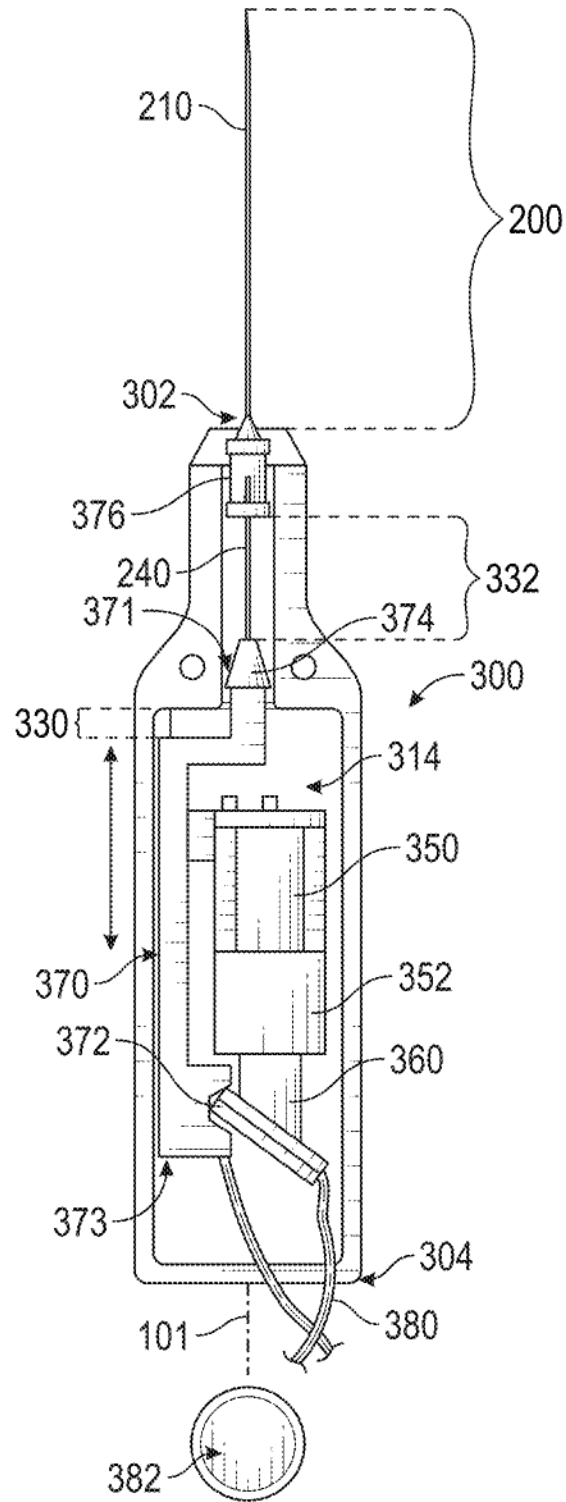


FIG. 2

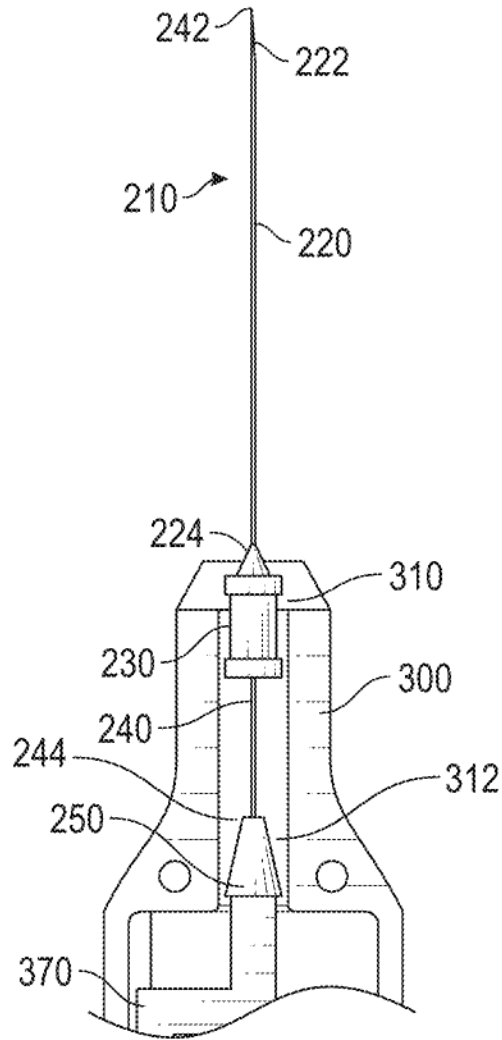


FIG. 3

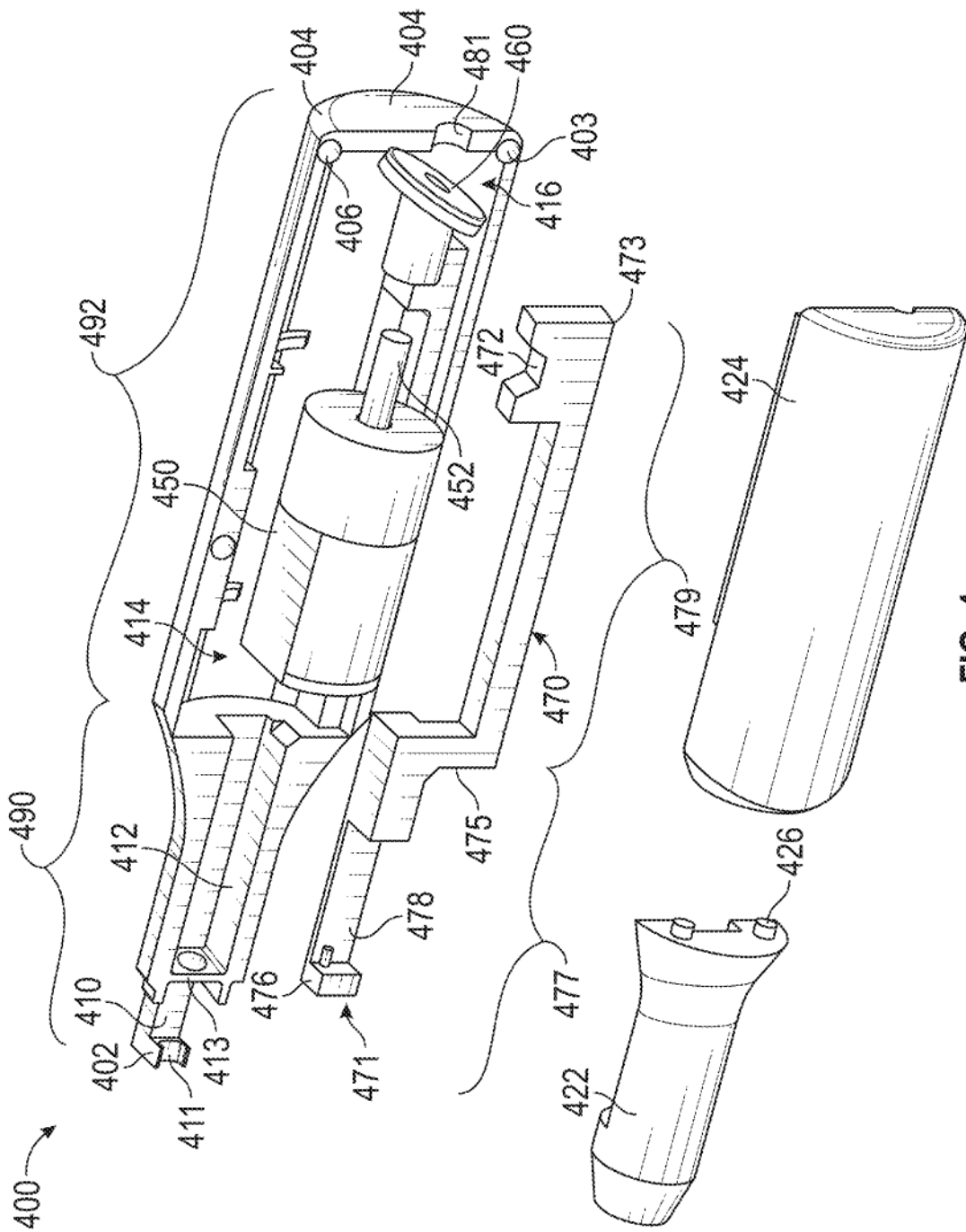


FIG. 4

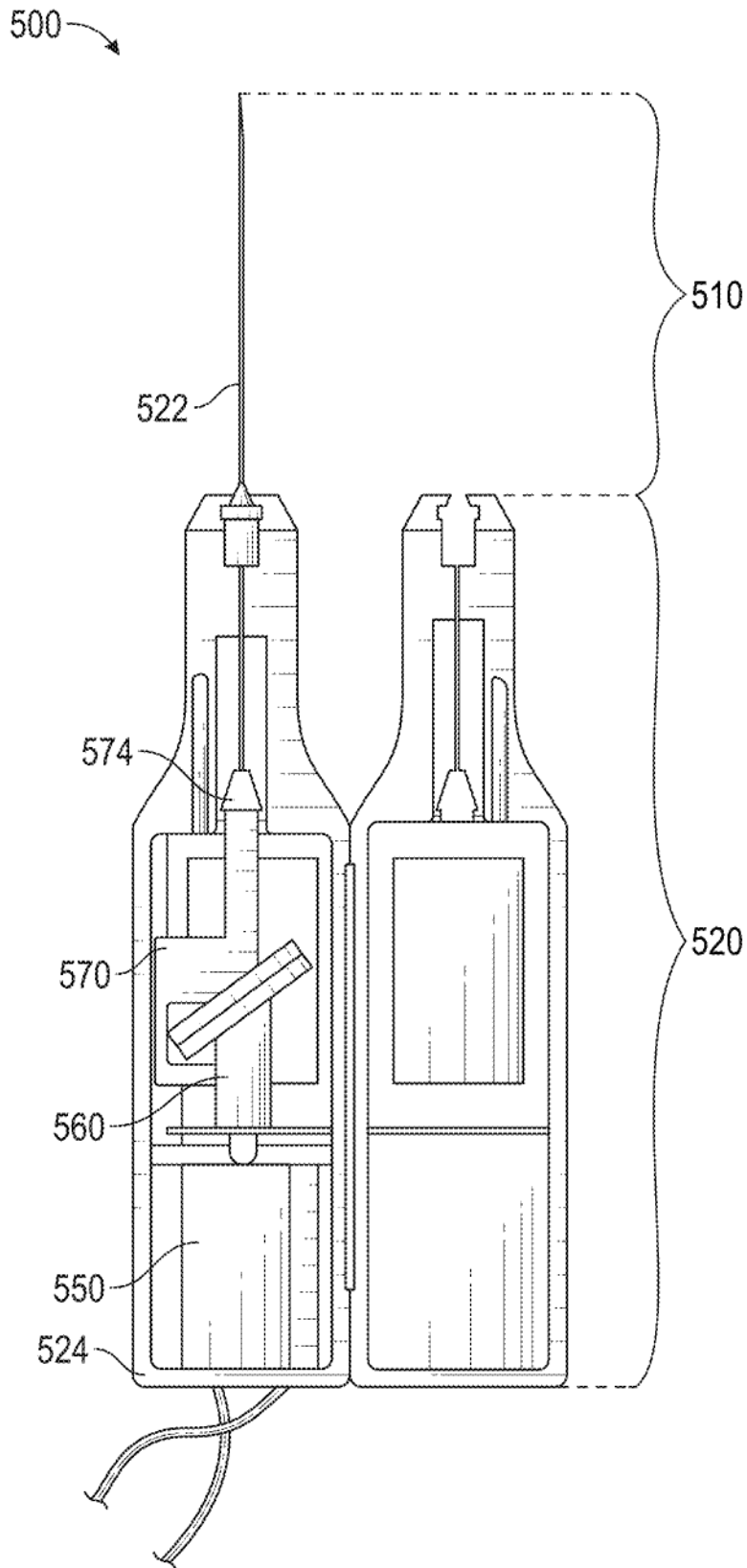


FIG. 5

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SYSTEMS AND METHODS FOR TISSUE TREATMENT

CROSS REFERENCE TO RELATED APPLICATIONS

This application is a continuation of U.S. application Ser. No. 15/307,070, filed Oct. 27, 2016, which is the national stage of PCT/US2015/027909, filed Apr. 28, 2015, which claims priority to U.S. Provisional Application No. 61/985,012, filed Apr. 28, 2014, all of which are hereby incorporated by reference.

BACKGROUND

Overuse of musculoskeletal tissues, such as tendons, plantar fascia, etc., can result in degenerative tissue (e.g., tendinopathy, plantar fasciitis, etc.) leading to pain and disability.

The damaged tissue is typically treated with NSAIDS, corticosteroid injections, physical therapy, platelet rich plasma injections, percutaneous needle tenotomy, or open surgery. Percutaneous needle tenotomy (PNT) is a minimally invasive procedure in which a needle is introduced to break up the tissue (e.g., scarred tissue, degenerated tissue, pathological tissue, etc.). This micro trauma induces an acute injury thus restarting the healing cycle and helping new, healthy tissue to form. However, a physician typically performs a PNT with manual repeated fenestration (see, e.g., <http://www.aapmr.org/education/Ultrasound/Tendinopathy/Documents/Finnoff-PRP.PDF>, and <http://www.mayoclinic.org/medical-professionals/clinical-updates/physical-medicine-rehabilitation/treating-recalcitrant-tendinopathy>) of the tissue with a needle or similar apparatus. Additionally, the procedure is typically performed in a surgical operating room setting thereby resulting in extensive costs.

SUMMARY

Thus, there is a need for accurate, efficient, and economic systems and methods for performing a percutaneous needle tenotomy.

The disclosure relates to systems and methods for treating a tissue site. In some embodiments, the system may include a body having a length and configured to receive a portion of the instrument guide member having an exposed end and/or an instrument; and an actuator member disposed within the body and configured to linearly oscillate the instrument within the instrument guide member a fixed distance past the exposed end.

In some embodiments, the system may include a body having a length and configured to receive a portion of the instrument guide member having an exposed end and/or an instrument; and an actuator member disposed within the body and configured to linearly oscillate the instrument within the instrument guide member a fixed distance past the exposed end without causing the instrument guide member to move.

In some embodiments, the system may include an instrument assembly including an instrument guide member having an exposed end and an instrument a body having a length and including a receiving member configured to removably attach the instrument assembly to the body; and an actuator member disposed within the body and configured to linearly oscillate the instrument within the instrument guide member a fixed distance past the exposed end without causing the instrument guide member to move.

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In some embodiments, the system may include a body having a length and configured to receive a portion of the instrument guide member having an exposed end and/or an instrument; and an actuator member disposed within the body and configured to linearly oscillate the instrument between forward and backward positions within the instrument guide member. In the forward position, the instrument may be disposed a fixed distance past the exposed end. In the backward position, the instrument may be disposed within the instrument guide member and/or the body.

Additional advantages of the disclosure will be set forth in part in the description which follows, and in part will be obvious from the description, or may be learned by practice of the disclosure. The advantages of the disclosure will be realized and attained by means of the elements and combinations particularly pointed out in the appended claims. It is to be understood that both the foregoing general description and the following detailed description are exemplary and explanatory only and are not restrictive of the disclosure, as claimed.

BRIEF DESCRIPTION OF THE DRAWINGS

The disclosure can be better understood with the reference to the following drawings and description. The components in the figures are not necessarily to scale, emphasis being placed upon illustrating the principles of the disclosure.

FIG. 1 shows a system according to some embodiments.

FIG. 2 shows a partial exposed view of a system according to some embodiments.

FIG. 3 shows an enlarged view of the system of FIG. 2.

FIG. 4 shows a partial, exploded view of a system according to embodiments.

FIG. 5 shows a system according to embodiments.

DETAILED DESCRIPTION

In the following description, numerous specific details are set forth such as examples of specific components, devices, methods, etc., in order to provide a thorough understanding of embodiments of the disclosure. It will be apparent, however, to one skilled in the art that these specific details need not be employed to practice embodiments of the disclosure. In other instances, well-known materials or methods have not been described in detail in order to avoid unnecessarily obscuring embodiments of the disclosure. While the disclosure is susceptible to various modifications and alternative forms, specific embodiments thereof are shown by way of example in the drawings and will herein be described in detail. It should be understood, however, that there is no intent to limit the disclosure to the particular forms disclosed, but on the contrary, the disclosure is to cover all modifications.

The methods and systems according to embodiments may be configured to mechanically treat targeted musculoskeletal tissue. For example, the methods and systems can be used to fenestrate and/or release of scar and/or degenerated tissue in tendon, ligament, muscle, and fascia; disrupt and/or remove soft tissue calcification; debride soft tissue, cartilage, or bone; among others; or a combination thereof. The systems can be designed to be an ergonomic and lightweight so that the system can be easily maneuvered by the clinician. The systems also can enable clinicians to perform procedures under local anesthesia in their office rather than the operating room, and therefore the systems can be a low-cost solution. The methods and systems can be used with medical imaging, for example, under ultrasound guidance. Therefore, the

methods and systems can increase patient comfort while empowering clinicians by simplifying interventions for musculoskeletal disorders.

The methods and systems are discussed with respect to treating a targeted area/site. Treating may include but is not limited to puncturing, fragmenting, cutting, lysing, debriding, among others, or any combination thereof. A targeted area may be any area of musculoskeletal tissue. For example, a targeted area/site may include but is not limited to tissue (e.g., tendons) in shoulders, elbows, knee, ankle, foot, among others, or any combination thereof.

FIG. 1 shows a system 100 configured to treat tissue according to some embodiments. As shown in FIG. 1, the system 100 may include an instrument assembly 200 and a (device) body 300. FIGS. 2 and 3 show partial exposed views of the system 100. FIG. 4 shows a partial, exploded view of a (device) body according to embodiments.

In some embodiments, the instrument assembly 200 may be configured to be removably attached to the body 300. The instrument assembly 200 may include an instrument guide 210 configured to provide access to a targeted tissue area and an instrument 240. The instrument guide 210 may be configured to provide a stabilizing path to the targeted tissue area for an instrument when attached to the body 300. The instrument guide 210 may be configured to be stationary when attached to the body 300 and the instrument 240 may be configured to linearly move within the instrument guide 210 to one or more fixed distances. In this way, the instrument 240 can be moved without moving the instrument guide 210. Thus, the instrument guide 210 can control the disruption to the targeted area by preventing the disruption of the surrounding tissue by the instrument guide 210 and/or the instrument 240.

In some embodiments, the instrument guide 210 may include an instrument guide member 220 having a first (exposed) end 222, a second end 224, and a length there between. The length of the instrument guide member 220 may vary and for example, may depend on the instrument to be guided, the target area to be treated, among others, or a combination thereof.

In some embodiments, the instrument guide member 220 may have an elongated tubular shape, for example, such as a cannula. In some embodiments, the instrument guide member 220 may have a circular cross-section. In other embodiments, the instrument guide member 220 may have a different cross-section, such as rectangular or triangular.

In some embodiments, the instrument guide member 220 may be configured to directly penetrate tissue to access the target area. In some embodiments, the instrument guide member 220 may include a tip configured to penetrate tissue. In some embodiments, the end 222 may include a sharp tip. The tip may include but is not limited to a pointed tip, tapered tip, blunt tip, as well as others. In other embodiments, the end 222 may have a different tip.

In some embodiments, the instrument 240 may include a first end 242, a second end 244, and a length there between. The length of the instrument 240 may vary and for example, may depend on the length of the instrument guide member 220, the target area to be treated, among others, or a combination thereof. In some embodiments, the instrument 240 may be the same, shorter, and or longer than the instrument guide 210.

In some embodiments, the instrument 240 may be any instrument configured to treat tissue. The instrument 240 may include but is not limited to an instrument configured to disrupt, debride, decorticate, fragment among others, or a combination thereof. The instrument may be configured to

puncture or pierce tissue. For example, the instrument 240 may include one or more hollow and/or solid needles. In some embodiments, the needles may include on the first end 242 and/or along a portion of the length a sharp point, one-sided serrated edge, a blunt point, a ball shape at the end (e.g., a mace), textured and/or granulated surface, a tapered point, a flat edge/end, a pointed tip, a bur tip, among others, or a combination thereof.

In some embodiments, the instrument assembly 200 may include one or more attachment members configured to removably attach the instrument assembly 200 to the body 300. In some embodiments, the instrument guide 210 and/or the instrument 240 may include an attachment member. The instrument guide 210 and/or the instrument 240 may be configured to be separately removable from the body 300 and/or the instrument assembly 200. For example, as shown in FIG. 3, the instrument guide 210 may include an attachment member 230 disposed at the end 224 and the instrument 240 may include an attachment member 250 disposed at the end 244. The attachment members 230 and 250 may be the same or different. For example, the attachment members 230 and/or 250 may include a hook, a plug, a magnet, a luer lock, among others, or a combination thereof. In some embodiments, the attachment members 230 and/or 250 may include an opening. For example, as shown in FIG. 3, the attachment member 230 may include an opening through which the instrument 240 may linearly move.

In some embodiments, the instrument assembly 200 may include an attachment member configured to removably attach the instrument assembly 200 (e.g., at least the instrument guide and the instrument) to the body 300. For example, the instrument assembly 200 may include a housing in which the instrument guide 210 and/or the instrument 210 may be included so that the instrument assembly 200 is self-contained and encased. In this example, at least the housing may include an attachment member configured to removably attach the instrument assembly to the body. In some embodiments, the instrument guide 210 and/or the instrument 240 may additionally be configured to be separately removable from the instrument assembly 200. For example, the instrument guide 210 and/or the instrument 240 may be configured to be removed from the housing and/or each other. By way of example, the instrument guide 210 may be configured to be removable from the instrument assembly 200, the instrument 240 and/or body 300 so that the instrument guide 240 can remain in the patient after being used. In this example, the instrument guide 240 may be configured to deliver therapeutic agent(s) to the site.

In some embodiments, the housing and/or the instrument guide may include a mechanism configured to receive a syringe to deliver a therapeutic agent. For example, the mechanism may be a luer lock mechanism that is configured to attach a syringe to the instrument guide and/or housing.

The body 300 may include a first end 302, a second end 304, and a length there between. The body 300 may also include a longitudinal axis 101 that is parallel to its length. In some embodiments, the body 300 may include one or more inner compartments disposed along the length for one or more components of the system 100.

As shown in FIG. 3, in some embodiments, the system 100 may include an actuator 350 disposed in the body 300 and configured to cause the instrument 240 to linearly oscillate within the guide member 220 so that the instrument 240 extends past the (exposed) end 222 one or more fixed distances. The fixed distance can correspond to the maximum length that the instrument 200 is exposed past the instrument guide (e.g., the maximum distance between the

end 242 of the instrument and end 22 of the instrument guide). In some embodiments, the actuator 350 may be a motor.

In some embodiments, the system 100 may include a rotatable drive shaft 352 disposed adjacent to the actuator 350. In some embodiments, the body 300 may include an inner compartment 314 in which the actuator 350 and the rotatable drive shaft 352 may be fixedly disposed.

In some embodiments, the system 100 may include at least one rotatable member 360 disposed in the body 300 on the rotatable drive shaft 352 (not visible; see FIG. 4) of the actuator 350. In some embodiments, the rotatable member 360 may be a barrel cam. As shown in FIG. 2, the rotatable member 360 may be a radial/disc cam tilted at a defined angle with respect to the actuator. In some embodiments, the rotatable member 360 may be another type of cam. For example, the rotatable member 360 may be a curved disc, cylindrical cam, a drum cam, a globoidal cam, among others, or a combination thereof. In other embodiments, the at least one rotatable member 360 may be one or more gears.

In some embodiments, the system 100 may include a linear oscillating member 370 disposed in the body 300 and configured to move linearly with respect to the length of the body 300. In some embodiments, the linear oscillating member 370 may be an elongated shaft. In some embodiments, the linear oscillating member 370 may include a first end 371, a second end 373, and a length there between. In some embodiments, the linear oscillating member 370 may be disposed within the body 300 so that it extends from the rotatable member 360 between the instrument 240 and/or the instrument guide 220.

In some embodiments, the linear oscillating member 370 may include one or more receiving members configured to receive the rotatable member 360. As shown in the FIG. 3, the linear oscillating member 370 may include a receiving member 372 for the rotatable member 360. As shown in FIG. 2, the receiving member 372 may be disposed near the end 373. In some embodiments, the receiving member 372 may be a slot and/or aperture configured to receive the rotatable member 360 and in which the rotatable member 360 may rotate. When the rotatable member 360 is disposed in the receiving member 372, the rotatable member 360 may be configured to transform the rotary motion of the actuator 350 via the rotatable member 360 to cause the instrument 240 to linearly oscillate.

In some embodiments, in operation, the actuator 350 may be configured to rotate 360° (e.g., make full revolutions) to cause the linear oscillating member 370 to move in a linear, oscillating manner. In other embodiments, in operation, the actuator 350 may be configured to rotate a partial revolution (e.g., rotate less than rotate 360°) and reverse rotation direction when the actuator 350 reaches the end of the partial revolution in that direction to cause the linear oscillating member 370 to move in a linear, oscillating manner via the linear oscillating member 370.

In some embodiments, the body 300 may include one or more receiving members for the instrument assembly 200. In some embodiments, the body 300 may include one or one receiving members disposed about the first end 302. For example, the body 300 may include a self-contained opening and/or slot configured to receive one or more attachment members of the instrument assembly 200. In this example, the instrument assembly 200 may be encased and may include one or more attachment members on the bottom (e.g., the side opposite the exposed end of the instrument guide 220). For example, the body may include a first receiving member 310 and a second receiving member 312

for respectively receiving attachment members 230 and 250 of the instrument assembly 200.

In some embodiments, the one or more receiving members for the instrument assembly 200 may be disposed within the one or more inner compartments of the body 300. In some embodiments, the linear oscillating member 370 may include a receiving member 374 configured to receive the tool 240. In some embodiments, the receiving member 374 may be disposed about the end 371. In some embodiments, the receiving member 374 may be disposed within the linear oscillating member (see FIG. 5). In some embodiments, the body 300 may include a receiving member 376 for the instrument guide 210.

In some embodiments, the body 300 may be ergonomically configured to fit within the user's hand. In some embodiments, the body 300 may include contoured surfaces to facilitate grasping by the user. In some embodiments, the body 300 may include a trigger member configured to directly or indirectly cause the actuating member 350 to be activated (i.e., powered). For example, the trigger member may be a button or a mechanical switch configured to directly activate the actuating member 350. In some embodiments, the button or mechanical switch may be disposed on the body 300 to ergonomically align with a user's thumb or other fingers when the body 300 is held in the user's hand.

In some embodiments, the body 300 may include additional and/or alternative buttons or switches. For example, the body may include a dial or press a button configured to adjust the fixed distance of the instrument 240. In another example, the body 300 may include a dial or press a button configured to adjust the speed of the linear oscillation of the instrument 240. In a further example, the body 300 may include a button to control the position of the instrument with respect to the instrument guide (e.g., when the power to the actuator is stopped). In this example, the button may be configured to cause the actuator to move so that the instrument is retracted within the instrument guide. In some embodiments, the actuator 350 may cause the instrument 240 to retract within the instrument guide member 220 when the actuating member 350 is deactivated.

In some embodiments, the trigger member may be a foot-operated switch that is either electrically connected to the body 300 or wirelessly coupled to the body 300 (e.g., via blue-tooth communication technology). In some embodiments, a computer that is either electrically connected to the body 300 or wirelessly coupled to the body 300 may be configured to control and/or activate the actuating member 350. In some embodiments, the foot-operated switch and/or computer may control one or more output functions (e.g., speed, fixed distance, or the like) in addition to and/or in the alternative to the controls being located on the body 300.

In some embodiments, the system 100 may include a power source 380. The power source 380 may be any source configured to provide electrical power to the body 300. For example, the power source 380 may be configured to directly or indirectly deliver power to the actuator 350. In some embodiments, the power source 380 may be a battery 382 disposed within an inner compartment of the body 300. The battery 280 may be rechargeable and/or replaceable. In some embodiments, the power source 280 may be an external source, such as a power supply or wall socket, or a combination thereof.

In some embodiments, as shown in FIG. 3, the actuator 350 may be disposed between the rotatable member 360 and the instrument 240. The linear oscillating member 370 may be disposed adjacent to the actuator 350 so that the linear oscillating member 370 extends along the length of actuator

from about the rotatable member **360** and the instrument assembly **200**. In this way, the body **300** may have a more compact and narrower design.

In operation, the actuator **350** may be configured to control, the instrument **240** so that it linearly oscillates a fixed distance (i.e., the length of the exposed instrument **200** past the instrument guide member **220** at end of oscillation (e.g., the maximum distance between the end **242** of the instrument **240** and the end **222** of the instrument guide **210**)). In this way, the instrument can repeatedly puncture and/or fenestrate and/or pierce the target tissue. In some embodiments, the fixed distance may be based on the angle and/or rotation of the rotatable member; the distance between the instrument guide, the instrument, and/or body (e.g., linear oscillating member; see area **332**); and/or the distance between the linear oscillating member and the inner compartment (e.g., area **330**).

In some embodiments, the system **100** may be configured to oscillate one or more fixed distances. For example, the fixed distance may be set by the user. The body **300** and/or instrument assembly **200** may be configured to set one or more fixed distances for which the instrument **240** may repeatedly move. For example, the fixed distance may correspond to the distance between the instrument **240** and instrument guide **210** selected by the user on the instrument assembly **200**; the angle and/rotation of the rotatable member **370**; among others; or a combination thereof.

In operation, the actuator **350** (e.g., via the linear oscillating member **350**) can cause the instrument **240** to repeatedly move linearly between a forward position (away from the body **300**) and a backward position (towards the body **300**) along the longitudinal axis **101** of the body with respect to the instrument guide member **220** and/or body **300**. In the forward position, the instrument **240** may extend a fixed distance beyond the instrument guide member **220** and therefore a portion of the instrument **240** corresponding to the fixed distance may be exposed to treat the tissue. In the backward position, the instrument **240** may be disposed within the instrument guide member **230**, instrument assembly **200**, and/or a self-contained portion of the body **300**. In some embodiments, the instrument **240** may be configured to be disposed in a resting position. In this way, although the instrument assembly **200** may be exposed to tissue and bodily fluid, the components of the body **300** may remain sterile.

To activate the actuator **350**, a user may press the triggering member (e.g., power button) to cause the actuator **350** to rotate thereby causing the rotatable member **360** to rotate (via the rotatable drive shaft **352**). The rotatable member **360** and actuator **350** may be disposed so that the rotation motion is about the longitudinal axis **101** of the body **300**. The rotation motion of the rotatable member **360** can then cause the linear oscillating member **370** to linearly oscillate along the central axis **301** (e.g., repeatedly move forward/backward with respect the length of the device). The linear oscillating member **370** can then transfer the linear motion to the instrument **240**. The instrument **240** can be configured to linearly oscillate within the stationary instrument guide member **220**. In some embodiments, the backward and forward positions of the instrument **240** with respect to the instrument guide member may be configured to depend on the angle of the portion of the rotatable member **360** that is disposed within the linear oscillating member **370**.

In some embodiments, the system **100** may include a controller (e.g., a microprocessor and/or any type of processor) configured to control the speed and/or revolutions of the actuator **350**, a position of the instrument **240** with

respect to the instrument guide member **220**, among others, or a combination thereof. For example, the actuator **350** may be configured to cause revolutions at different speeds, which can be selectable by the user. In another example, the controller may be configured to control the position of the instrument **240** with respect to the instrument guide member **200** when the power to the actuator **350** is discontinued (e.g., by powering off or by selecting a button). For example, the controller may cause the instrument **240** to move to the resting position.

FIG. **4** shows a partial exploded view of a body **400**. FIG. **4** does not show an instrument assembly. It is understood that the embodiments of the instrument assembly **200** described with respect to FIGS. **1-3** may also be used with the system shown in and described with respect to FIG. **4**. It is understood that the embodiments of the body, actuator, rotatable member, and linear oscillating member, described with respect to FIGS. **1-3** may also apply to the body, actuator, rotatable drive shaft, rotatable member, and linear oscillating member described with respect to FIG. **4**, and vice versa. The body, actuator, rotatable drive shaft, rotatable member, and linear oscillating member described with respect to FIG. **4** may be similar with some respects to the body, actuator, rotatable drive shaft, rotatable member, and linear oscillating member described with respect to FIGS. **1-3**.

Like the body **300**, the body **400** may have a first end **402**, a second end **404**, and a length there between. In some embodiments, the body **400** may include one or more sections. In some embodiments, the body **400** may include a first section **490** and a second section **492**. In other embodiments, the body **400** may include more or less sections.

Like the system **100**, the system shown in FIG. **4** may include an actuator **450** including a rotatable shaft **452**, a rotatable member **460**, and a linear oscillating member **470**. The actuator **450** may be configured to rotatably drive the rotatable member **460**, which in turn causes the linear oscillating member **470** to linearly oscillate (i.e., repeatedly move in a backward and forward manner).

As shown in FIG. **4**, the linear oscillating member **470** may include a first end **471**, a second end **473**, and a length there between. In some embodiments, the linear oscillating member **470** may include one or more sections. In some embodiments, the linear oscillating member **470** may include a first section **477** and a second section **479**. In some embodiments, the first section **477** may include a portion of the linear oscillating member **470**, for example, from first end **471** to intermediary area **475**, and the second section **479** may include a portion of the linear oscillating member **470**, from the intermediary area **475** to the second end **475**. In some embodiments, like the oscillating member **370**, the oscillating member **470** may include a receiving member **472** configured to receive the rotatable member **460**. The receiving member **472** may be configured so that the rotatable member **460** may be rotate within the receiving member **472**.

In other embodiments, the body **400** may include one or more inner compartments configured to receive the actuator **450**, the rotatable shaft **452**, a rotatable member **460**, and the linear oscillating member **470**. In some embodiments, the body **400** may include a first inner compartment **412** to receive the instrument assembly **200** and/or a portion of the linear oscillating member **470**; a second inner compartment **414** to receive a portion of the linear oscillating member **470**, the actuator **450**, and/or the rotatable member **460**; and a third inner compartment **416** to receive a power source. In

some embodiments, the inner compartment **412** may be disposed in the first section **490** and the inner compartments **414** and **410** may be disposed in the second section **492**.

In some embodiments, the actuator **450** and the second section **479** may be disposed in the inner compartment **414** so that the actuator **450** is disposed within the length of the second section **479**.

In some embodiments, the linear oscillating member **470**, the actuator **450**, and the rotatable member **416** may be fixedly disposed within the inner compartments. In some embodiments, the instrument assembly **200** and/or the power source (not shown; see FIG. 2) may be fixedly disposed within the inner compartments. In some embodiments, the instrument assembly **200** and/or the power source may be removably disposed within the inner compartments. For example, the body **400** may be a reusable device and the instrument assembly **200** may be replaced for each use. In another example, the power source may be a replaceable battery. In these examples, the inner compartments that are configured to be accessible to replace the instrument assembly **200** and/or power source may be self-contained so as not to contaminate the other inner compartments.

In some embodiments, the first section **490** may be configured to communicate with the instrument assembly **200**. For example, in some embodiments, the first section **490** may be configured to directly and/or indirectly receive the instrument assembly **200**. By way of example, the first section **490** and/or the linear oscillating member **470** may be configured to receive the instrument assembly **200**. By way of example, the body **400** may include a receiving member **410** (e.g., an inner compartment) to receive an instrument guide **210**. When the instrument guide **210** is disposed in the receiving member **410**, the receiving member **410** may be configured to fixedly dispose the instrument guide **210** so that it is stationary while the instrument **240** is moving.

In some embodiments, the linear oscillating member **470** may include a receiving member **478** configured to receive the instrument **240**. When the instrument **240** is disposed in the receiving member **478**, the instrument **240** may move with the linear oscillating member **470**. The linear oscillating member **470** may include an opening and/or channel **476** through which an instrument may be disposed so that it can extend through the body **400**.

The body **400** may be configured so that the instrument assembly **200**, instrument guide **210** and/or the instrument **240** may be removed after use. The body **400** may also include an opening and/or aperture **411** through which the instrument guide **210** and/or instrument **240** may extend through the body.

In some embodiments, the embodiments, the receiving members **410** and/or **478** may be omitted. For example, the opening and/or aperture **411** may be configured to receive and communicate with an encased instrument assembly **200** so that the linear oscillating member **470** can cause the instrument **210** to linearly oscillate.

In some embodiments, the body may include one or more cases configured to cover the one or more inner compartments. In some embodiments, the one or more cases may be configured to be removably attached. As shown in FIG. 4, the body **400** may include cases **422** and **424**. For example, the case **422** may be configured to be fixed to the body **400** to cover the first section **490** and the case **424** may be configured to be removable attached to cover the second section **492**. The case **422** may include one or more attachment members **426** configured to attach the case **422** to the case **424** and the case **424** may include complimentary receiving members. In some embodiments, the body **400**

may include complementary receiving members **406** configured to receive the case **422** and/or the case **424**. The attachment members, for example, may be a protruding member and the receiving members may be holes. In other embodiments, the one or more attachment members may be different. For example, the one or more attachment members may be magnetic, hook, luer lock, among others. In other embodiments, the body may include one case that may be configured to be fixed and not removable by the user.

It will also be understood that the configurations of body, actuator, rotatable member, and linear oscillating member, shown in FIGS. 1-4 are not limited to those shown in the figures and may include other configurations. For example, these components disposed in a different configuration, as shown in FIG. 5. FIG. 5 shows a system **500** according to some embodiments. As shown in FIG. 5, a system **500** may include an instrument assembly **510** and a body **520**. Like the body **300**, the body **500** has a first end **522**, a second end **524**, and a length there between. The body **300** may include an actuator **550**, a rotatable member **560**, and a linear oscillating member **570**. The system **500** is similar to the system **100** but for the locations of the actuator **550**, the rotatable member **560**, and the linear oscillating member **570**. As shown in FIG. 5, the rotatable member **360** may be disposed between the instrument assembly **200** and the actuator **550**. In this example, the linear oscillating member **570** can have a shorter length because the actuator **550** can be disposed not along the length. The system **500** may operate in a similar fashion as the system shown and described with respect to FIGS. 1-4.

In other embodiments, the actuator may include a drive shaft that is configured to move linearly (i.e., oscillates in a forward/rearward directions or axially). In this example, the rotatable drive shaft, rotatable member/or the linear oscillating member may be omitted and/or replaced with different components.

In some embodiments, one or more components of the system may be made of echogenic material. In this way, the one or more components may be visible under medical imaging.

In some embodiments, the system may be used in a method of treating a tissue site. For example, the system may be used to debride, fragment, or lyse tissue in a controlled manner so as to induce a controlled injury. The system can be used in an office or ambulatory surgical suite under external or internal medical imaging guidance, such as ultrasound, fluoroscopy, and/or other internal imaging visualization modalities.

In some embodiments, the method of treating a tissue site with the system may include attaching the instrument assembly to the body. For example, a case may be removed to access a first section of the body to attach the instrument guide and instrument. In other example, a housing including the instrument assembly may be attached to the body without having to remove a case. Next, the instrument guide may be inserted into a patient to the targeted tissue site, for example, using medical imaging guidance. After the instrument guide is in place, the clinician may activate the actuator (e.g., by pressing the triggering member) to cause the instrument to repeatedly move linearly oscillate. In this way, the actuator causes instrument to automatically and repeatedly move linearly into the target site past the instrument guide a fixed distance. The repeated motion of the instrument can cause debridement/lysing/fragmentation of the tissue to thereby cause localized disruption/damage to the targeted tissue. In some embodiments, the clinician may select the fixed distance and/or speed before and/or after the

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insertion of the instrument guide. After the desired debridement/fragmentation is achieved, the clinician may stop the activation of the actuator. In some embodiments, the body and/or a part of the instrument housing may be removed while leaving the instrument guide in the target site. In this way, the instrument guide may be used to access the target site, for example, to deliver a therapeutic agent. Because at least most of the body is self-contained, the body can be reused with a new instrument assembly for another patient.

In some embodiments, one or more components of the system may be sterilized. In some embodiments, one or more parts of the system may be reused. For example, the body may be configured to be reused. In some embodiments, one or more parts of the system may be disposable. In further embodiments, the system may be a single, use device. For example, the instrument assembly 200 may be configured to be a single, use device.

In some embodiments, the system may be part of a kit. In some embodiments, the kit may include the instrument assembly and/or the body. In some embodiments, the kit may include one or more instrument assemblies. For example, the kit may include a plurality of different kinds and/or sizes of instruments, corresponding instrument guides, or a combination thereof.

While the disclosure has been described in detail with reference to exemplary embodiments, those skilled in the art will appreciate that various modifications and substitutions can be made thereto without departing from the spirit and scope of the disclosure as set forth in the appended claims. For example, elements and/or features of different exemplary embodiments may be combined with each other and/or substituted for each other within the scope of this disclosure and appended claims.

That which is claimed is:

1. A method for treating a targeted tissue site, the method comprising:

providing a tissue treatment device comprising a body including first and second receiving members configured to receive and releasably retain a self-contained instrument assembly thereto, and an actuator disposed within the body and configured to linearly oscillate the instrument within the instrument guide member;

attaching a self-contained instrument assembly to the body of the tissue treatment device, the instrument assembly including both an instrument guide member and an instrument at least partially disposed within the instrument guide member, wherein the instrument assembly is received and releasably retained to the body by way of engagement between the first receiving member of the body and a corresponding attachment member of the instrument assembly and engagement between the second receiving member located at a distal portion of the body and configured to operably couple with the instrument;

accessing, via the instrument guide member of the instrument assembly, a targeted tissue site; and

activating the actuator to cause the instrument to linearly oscillate within the instrument guide member a fixed distance past an exposed end of the instrument guide member to thereby treat tissue at the targeted tissue site.

2. The method of claim 1, wherein the body includes one or more inner compartments, at least one of the one or more inner compartments being self-contained.

3. The method of claim 1, wherein the tissue treatment device further comprises:

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a rotatable member disposed on a shaft of the actuator, the shaft and the rotatable member being configured to rotate about a longitudinal axis of the body; and

a linear oscillating member including a first receiving member configured to receive a portion of the rotatable member;

wherein the rotatable member is configured to transform rotations of the shaft via the linear oscillating member to cause the instrument to linearly oscillate.

4. The method of claim 3, wherein the actuator is disposed between the rotatable member and the instrument.

5. The method of claim 3, wherein the linear oscillating member includes a second receiving member configured to receive and releasably retain a portion of the instrument.

6. The method of claim 1, wherein the instrument guide member is configured to be stationary with respect to the body of the tissue treatment device.

7. The method of claim 1, wherein the instrument comprises a first end for treating the tissue at the targeted tissue site based upon repeated linear motion of the first end of the instrument a fixed distance past the exposed end of the instrument guide member and into repeated contact with the tissue.

8. The method of claim 7, further comprising repeatedly contacting the tissue with the first end of the instrument to cause localized disruption and/or damage to the tissue at the targeted tissue site.

9. The method of claim 8, wherein causing localized disruption and/or damage to the tissue induces a controlled injury for promoting formation of healthy tissue at the targeted tissue site.

10. The method of claim 8, wherein the first end of the instrument is configured to cause at least one of disruption, debridement, fragmentation, puncturing, piercing, and a combination thereof, to the tissue at the targeted tissue site.

11. A method for treating a targeted tissue site, the method comprising:

providing a tissue treatment system comprising a body including an actuator disposed within and a self-contained instrument assembly releasably coupled thereto, the instrument assembly includes both an instrument guide member and an instrument at least partially disposed within the instrument guide member and the body includes first and second receiving members configured to receive and releasably retain at least a portion of the instrument assembly to the body by way of engagement between the first receiving member of the body and a corresponding attachment member of the instrument assembly and the second receiving member located at a distal portion of the body and configured to operably couple with the instrument to thereby releasably retain both the instrument guide member and the instrument to the body;

accessing, via the instrument guide member of the instrument assembly, a targeted tissue site;

activating the actuator to linearly oscillate the instrument within the instrument guide member a fixed distance past an exposed end of the instrument guide member without causing the instrument guide member to move with respect to the body; and

treating tissue at the targeted tissue site based on repeated linear oscillation of the instrument.

12. The method of claim 11, wherein the tissue treatment system further comprises:

a rotatable member disposed on a shaft of the actuator, the shaft and the rotatable member being configured to rotate; and

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a linear oscillating member including a first receiving member configured to receive a portion of the rotatable member;

wherein the rotatable member is configured to transform rotations of the shaft via the linear oscillating member to cause the instrument to linearly oscillate.

13. The method of claim 12, wherein the actuator is disposed between the rotatable member and the instrument.

14. The method of claim 12, wherein:

the body includes one or more inner compartments, at least one of the one or more inner compartments being self-contained; and

the actuator, the rotatable member, and at least a portion of the linear oscillating member are disposed within one of the one or more inner compartments that are self-contained.

15. The method of claim 14, wherein the tissue treatment system further comprises a power source configured to activate the actuator, the power source being disposed in one of the one or more inner compartments.

16. The method of claim 11, wherein the actuator includes a shaft configured to rotate with respect to the body.

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17. The method of claim 16, wherein the tissue treatment system further comprises:

a rotatable member disposed within the body, the rotatable member being configured to rotate with respect to the body upon rotation of the shaft; and

a linear oscillating member disposed within the body, the linear oscillating member being configured to linearly oscillate with respect to the body upon rotation of the rotatable member.

18. The method of claim 11, wherein the repeated linear oscillation of the instrument causes repeated linear motion of a first end of the instrument and into repeated contact with the tissue at the targeted tissue site to cause at least one of disruption, debridement, fragmentation, puncturing, piercing, and a combination thereof, to the tissue at the targeted tissue site for inducing a controlled injury.

19. The method of claim 18, wherein causing localized disruption and/or damage to the tissue induces a controlled injury for promoting formation of healthy tissue at the targeted tissue site.

20. The method of claim 18, wherein the instrument comprises a hollow needle or a solid needle.

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