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WO-A1-02/09797
WO-A1-92/05820
FR-A1- 2 992 222
US-A- 5 595 566
US-A1- 2006 030 819
US-B1- 6 454 746
US-B1- 6 767 336
US-B1- 7 001 364
US-B1- 7 066 909

DESCRIPTION

Field of the Invention

[0001] The present invention relates to self-injection device with a multi-position cap.

Background of the Invention

[0002] Medication delivery pens are hypodermic syringes used for self-injection of precisely measured doses of medication. Pens are widely used, for example, by diabetics to self-inject insulin. A typical prior art medication delivery pen includes a cartridge which contains a volume of liquid medication sufficient for several doses. The dose is injected into a tissue area, such as the intramuscular tissue layer, the subcutaneous tissue layer, or the intradermal tissue layer.

[0003] The assembly and operation of a typical pen injection device is described in commonly-assigned U.S. Patent No. 7,645,264, issued on January 12, 2010.

[0004] Pen injection devices, such as the exemplary pen injector 50, as shown in FIGS. 1 and 2, typically comprise a dose knob/button 24, an outer sleeve 13, and a cap 21. The dose knob/button 24 allows a user to set the dosage of medication to be injected. The outer sleeve 13 is gripped by the user when injecting medication. The cap 21 is employed by the user to securely hold the pen injector 50 in a shirt pocket, purse, or other suitable location.

[0005] FIG. 2 is an exploded view of the exemplary drug delivery pen 50 shown in FIG. 1. The dose knob/button 24 has a dual purpose and is used to both set the dosage of the medication to be injected and to inject the dosed medicament via a lead screw 7 and stopper 15 from a medicament cartridge 12, which is attached to the drug delivery pen through a lower housing 17. The lower housing 17 typically has dosage indicia on the exterior thereof. The medicament cartridge 12 is typically a glass tube sealed at one end with a septum 16 and at the other end with the stopper 15. In standard drug delivery pens, the dosing and delivery mechanisms are all found within the outer sleeve 13. Those mechanisms are not described in greater detail here as they are understood by those knowledgeable of the art.

[0006] A pen needle assembly 10 (hereinafter referred to as pen needle 10 for brevity) includes a hub 20, a patient needle 11 extending from a patient end of the pen needle, and a septum-penetrating needle cannula 18 disposed within the hub 20 on a non-patient side thereof. The septum-penetrating needle cannula 18 is in fluid communication with the patient needle 11. The hub 20 is preferably screwed onto the lower housing 17. In attaching the hub 20 to the lower housing 17, the septum-penetrating cannula 18 pierces the septum 16, but the septum 16 does not move with respect to the medicament cartridge 12. The stopper 15, however, is axially displaceable within the medicament cartridge 12 while maintaining a fluid

tight seal. The distal movement of the plunger or stopper 15 within the medicament cartridge 12 (due to advancement of the lead screw 7) causes medication to be forced into the patient needle 11 of the hub 20.

[0007] To protect a user, or anyone who handles the pen needle assembly 10, an outer shield 29, which attaches to the hub 20, covers the hub 20. The outer shield 29 can also be used as a handle or grip to screw hub 20 onto or off pen injector 50. An inner shield 28 covers the patient needle 11 within the outer shield 29. The inner shield 28 can be secured to the hub 20 to cover the patient needle 11 by any suitable means, such as an interference fit or a snap fit. The outer shield 29 and inner shield 28 are removed prior to use. The cap 21 fits snugly against outer sleeve 13 to allow a user to securely carry the pen injection device 50.

[0008] A pen injector, such as pen injector 50, can be designed to have the shortest length possible, or it can be designed to protect a pen needle 10 that has already been assembled to the pen injector 50. While it is highly desirable to produce the shortest, smallest pen possible, there are times when a user might want to pre-assemble a pen needle 10 to a pen injector. For example, a user may be going to a restaurant to eat and may need to provide an injection of very fast acting insulin just prior to eating. When timed properly, such an injection provides a more consistent glucose level. But the injection cannot be given too far in advance because the user's glucose level will drop too much. This situation effectively requires that the injection be given at the restaurant. For convenience, the user may wish to pre-assemble the pen needle 10 with the pen injector so that it is ready to use. If the pen injector 50 is designed to protect an assembled pen needle 10 within the cap 21 when the pen needle 10 is not assembled with the pen injector 50, the pen injector 50 is longer than it needs to be, and thus takes up more space. What is needed is a pen injector that can accomplish both modalities, one in which the pen injector is as small as possible, and one in which a pen needle can be accommodated while assembled to the pen injector.

US 6,767,336 discloses an automatic injector with a cartridge holder sleeve, a cartridge that is movably disclosed within the sleeve, a cannular hub with a cannular extending therefrom attached to the cartridge and a sharp protector that is actually manually movable between a first position and a second position.

WO 92/05820 discloses an invertible locking safety cover adapted at one end to be frictionally detained, a needle cartridge covering needle prior to use a syringe and at the other end to be positively locket the hub of mounting color prior to installation of the needle cartridge into needle carrier and after use of the syringe and retracting of needle into barrel.

Summary of the Invention

[0009] An aspect of the present invention is to provide a self-injection device with a body and a cap that can accommodate and protect a pen needle assembled to the body in a first mode, and that can minimize the size of the self-injection device in a second mode.

[0010] The foregoing and/or other aspects of the present invention are achieved by providing

a self-injection device, including a pen body connectable with a pen needle, and a cap selectively connectable to the pen body in a first orientation with respect to the pen body to minimize the length or volume of the self injection device, and in a second orientation to provide sufficient length or volume in an interior of the cap to house a pen needle connected with the pen body.

[0011] The foregoing and/or other aspects of the present invention are also achieved by providing a self-injection device, including a body selectively connectable with a pen needle at a first end of the body, and a cap having an interior cavity, the cap being connectable to the body in a first orientation with respect to the body, and in a second orientation with respect to the body that is axially further from a second end of the body than the first orientation, to accommodate the pen needle connected to the body within the interior cavity, the second end of the body being opposite to the first end.

[0012] The foregoing and/or other aspects of the present invention are also achieved by providing a method using a self-injection device comprising a body and a cap, the method including the operations of: at a first time, connecting the cap with the body in a first orientation in which the length or volume of the of the self-injection device is minimized; and at a second time, connecting the cap with the body in a second orientation in which, with respect to the first orientation, a length or volume in an interior of the cap is increased to house a pen needle connected with the pen body.

[0013] Additional and/or other aspects and advantages of the present invention will be set forth in part in the description that follows and, in part, will be apparent from the description, or may be learned by practice of the invention.

Brief Description of the Drawings

[0014] The above and/or other aspects and advantages of embodiments of the invention will be more readily appreciated from the following detailed description, taken in conjunction with the accompanying drawings, in which:

FIG. 1 is a perspective view of an exemplary drug delivery pen;

FIG. 2 is an exploded view of the exemplary drug delivery pen of FIG. 1;

FIG. 3 is a perspective view of a self-injection device in a first orientation in accordance with an embodiment of the present invention;

FIG. 4 is a perspective view of a the self-injection device of FIG. 3 in a second orientation;

FIGS. 5 and 6 are partial perspective views respectively illustrating the first and second orientations of the self-injection device of FIG. 3;

FIG. 7 is a perspective view of a body of the self-injection device of FIG. 3;

FIG. 8 is a perspective view of the cap of the self-injection device of FIG. 3;

FIG. 9 is another perspective view of a body of the self-injection device of FIG. 3;

FIG. 10 is a perspective view illustrating a connection mechanism of the self-injection device of FIG. 3

FIG. 11 is a perspective view of a self-injection device in accordance with another embodiment of the present invention;

FIG. 12 is a perspective view of a cap of the self-injection device of FIG. 11;

FIG. 13 is a perspective view of a body of the self-injection device of FIG. 11;

FIG. 14 is another perspective view of the body of the self-injection device of FIG. 11;

FIG. 15 is a perspective view of the self-injection device of FIG. 11 in the second orientation;

FIGS. 16 and 17 are perspective views illustrating an anti-rotation feature in accordance with an embodiment of the present invention; and

FIG. 18 is a perspective view of the body of the self-injection device of FIG. 11 illustrating a connection mechanism thereof.

Detailed Description of Exemplary Embodiments

[0015] Reference will now be made in detail to embodiments of the present invention, examples of which are illustrated in the accompanying drawings, wherein like reference numerals refer to the like elements throughout. The descriptions of these embodiments exemplify the present invention by referring to the drawings.

[0016] FIGS. 3 and 4 are perspective views illustrating first and second connection orientations of a self-injection device 100 in accordance with an embodiment of the present invention. As shown in FIGS. 3 and 4, the self-injection device (or pen injector) 100 includes a cap 104 and a body or pen body 108. The cap 104 and the body 108 are connectable to each other in first (for example, FIG. 3) and second (for example, FIG. 4) radial orientations. In FIG. 3, the cap 104 is connected with the body 108 in the first orientation to be as compact as possible. In other words, the overall volume and/or length of the pen injector 100 are minimized in the first orientation. In FIG. 4, the cap 104 is radially rotated with respect to the first orientation, and is connected to the body 108 in the second orientation to allow a pen needle 10 to be protected inside the cap 104. In other words, in the second radial orientation, there is sufficient volume and/or length in an interior of the cap 104 to house the pen needle 10 connected with the body 108.

[0017] The body 108 includes an axial protrusion 112 and an axial recess 116. Similarly, the cap 104 includes an axial protrusion 120 and an axial recess 124. In the first orientation, the respective axial protrusions 112 and 120 abut the respective axial recesses 116 and 124. In other words, as shown in FIG. 3, the body axial protrusion 112 abuts the cap axial recess 124 and the cap axial protrusion 120 abuts the body axial recess 116. In the second orientation, as shown in FIG. 4, body axial protrusion 112 abuts cap axial protrusion 120.

[0018] FIGS. 5 and 6 respectively illustrate further details of the first and second orientations. In FIGS. 5 and 6, the cap 104 is shown in dotted lines for clarity. As shown in FIG. 5, an outer sleeve or cartridge container 128 of the body 108 includes a screw thread 132 at a first end of the body 108 for connecting a pen needle 10 thereto. The cartridge container 128 holds a medicament cartridge in the body 108. In the first orientation, there is insufficient space in an interior cavity 136 of the cap 104 to accommodate a pen needle 10. In contrast, as shown in FIG. 6, in the second orientation, cap 104 protectively houses the pen needle 10.

[0019] FIG. 7 is a perspective view of the body 108 and FIG. 8 is a perspective view of the cap 104. As shown in FIG. 7, the body 108 includes a first body connector 140 disposed within the body axial recess 116. Correspondingly, as shown in FIG. 8, the cap 104 has a cap connector 144 disposed on an interior of the cap axial protrusion 120. As shown, the first body connector 140 is embodied as a radial protrusion and the cap connector 144 is embodied as a radial recess, but one skilled in the art will appreciate that the body connector 140 may be embodied as a radial recess and the cap connector 144 may be embodied as a radial protrusion without departing from the scope of the present invention. In addition, one skilled in the art will appreciate that the first body connector 140 and the cap connector 144 may be embodied as other types of connectors without departing from the scope of the present invention.

[0020] Showing another perspective view of the body 108, FIG. 9 illustrates an axial slot 148 of the cartridge container 128. Through the axial slot 148, the user can view the progress of the stopper (such as stopper 15) in the medicament cartridge (such as cartridge 12). FIG 10 is a perspective view of the cap 104 in which an interior surface of the cap 104 is shown in dotted lines. A radial connecting protrusion 152 projects inwardly from the interior surface of the cap 104. According to one embodiment, to secure the cap 104 and the body 108 in the second orientation, the radial connecting protrusion 152 engages the axial slot 148.

[0021] FIG. 11 is a perspective view of another pen injector 200 in accordance with an embodiment of the present invention. Like the embodiment of FIGS. 3-10, the pen injector 200 has a cap 204 and a body 208 with respective axial protrusions 212 and 220 and axial recesses 216 and 224. In addition, the pen injector 200 has an anti-rotation feature for preventing radial rotation of the cap 204 relative to the body 208, and therefore, preventing inadvertent collapse of the cap 204 onto a pen needle 10 assembled to the body 208.

[0022] According to one embodiment, the anti-rotation feature includes an axial horn protrusion 228 disposed on a top, radial side of the body axial protrusion 212, and a corresponding axial horn recess 232 disposed on a radial side of the cap axial recess 224. As

shown in FIGS. 11-14, according to one embodiment, the anti-rotation feature includes a pair of axial horn protrusions (or horns) 228 and a pair of corresponding axial horn recesses 232. When the cap 204 is secured with the body 208 in the first orientation, as shown in FIG. 11, the horns 228 interact with the horn recesses 232 to prevent rotation of the cap 204 relative to the body 208. In contrast, when the cap 204 is secured with the body 208 in the second orientation, as shown in FIG. 15, the horns 228 interact with radial sides of the cap axial protrusion 220 to prevent rotation of the cap 204 relative to the body 208.

[0023] According to another embodiment, as shown in FIGS. 16 and 17, the anti-rotation feature includes a key 234 axially disposed on the body 208 and a corresponding slot 236 formed between a pair of radial slot protrusions 238 disposed on the interior of the cap 204. When the key 234 is disposed in the slot 236, the cap 204 is prevented from radially rotating with respect to the body 208. Although the key 234 and slot 236 are illustrated as preventing rotation in the first orientation, the key 234 and slot 236 may be positioned axially further away from a second end of the body 208 opposite to the first end, and thereby prevent rotation in the second orientation. Alternatively, keys 234 and slots 236 may be disposed at both locations to prevent relative rotation in both the first and the second orientations.

[0024] Although the horns 228 are illustrated as being disposed on the body 208 and the horn recesses 232 are illustrated as being disposed on the cap 204, one skilled in the art will appreciate that the horns 228 may be disposed on the cap 204 and the corresponding horn recesses 232 may be disposed on the body 208 without departing from the scope of the present invention. Similarly, although the key 234 is illustrated as being disposed on the body 208 and the slot 236 is illustrated as being disposed on the cap 204, one skilled in the art will appreciate that the key 234 may be disposed on the cap 204 and the corresponding slot 236 may be disposed on the body 208 without departing from the scope of the present invention.

[0025] Additionally, although the embodiment shown in FIGS. 11-15 illustrates horns 228 and horn recesses 232, and FIGS. 16 and 17 illustrate a slot 236 and a key 234, one skilled in the art will appreciate that, without departing from the scope of the present invention, other shapes may be used to prevent inadvertent rotation of the cap 204 relative to the body 208 and thereby prevent the cap 204 from moving out of the second orientation and moving axially toward the second end of the body 208.

[0026] To secure the cap 204 to the body 208 in the first orientation, similar to the embodiment of FIGS. 3-10, the body 208 includes a first body connector 240 and the cap 204 includes a cap connector 244 (see FIG. 12). According to one embodiment, the first body connector is a radial protrusion and the cap connector 244 is a corresponding radial recess. One skilled in the art will appreciate that the cap connector may be a radial protrusion and the first body connector 240 may be a corresponding radial recess without departing from the scope of the present invention. As shown in FIG. 16, however, to secure the cap 204 to the body 208 in the second orientation, the body includes a second body connector 248. In the second orientation, the radially protruding second body connector interacts with the correspondingly radially recessed cap connector 244 to provide a snap-fit connection to secure the cap 204 to the body

208.

[0027] Although the radial connecting protrusion 152 is illustrated as the connection mechanism for securing the cap to the body in the second orientation in the embodiment shown in the first embodiment shown in FIGS. 3-10, and the second body connector 248 is illustrated as the connection mechanism for securing the cap to the body in the second orientation in the second embodiment shown in FIGS. 11-16, one skilled in the art will appreciate that the connecting protrusion 152 may be employed with the second embodiment and the second body connector 248 may be employed with first embodiment, without departing from the scope of the present invention.

[0028] Embodiments of the present invention provide a cap that is connectable to the body in a first orientation in which the cap is as compact as possible to allow the smallest pen injector. Additionally, the cap is connectable to the body in another orientation to provide space for protection for a pen needle that has been assembled to the pen injector.

[0029] Although only a few exemplary embodiments of the present invention have been described in detail above, those skilled in the art will readily appreciate that many modifications are possible in the exemplary embodiments without materially departing from the novel teachings and advantages of this invention. Accordingly, all such modifications are intended to be included within the scope that is defined by the appended claims.

REFERENCES CITED IN THE DESCRIPTION

This list of references cited by the applicant is for the reader's convenience only. It does not form part of the European patent document. Even though great care has been taken in compiling the references, errors or omissions cannot be excluded and the EPO disclaims all liability in this regard.

Patent documents cited in the description

- [US7645264B \[0003\]](#)
- [US6767336B \[0008\]](#)
- [WO9205820A \[0008\]](#)

Patentkrav

1. Selvinjektionsindretning (100, 200), som omfatter:
 - 5 et penlegeme (108, 208), som kan forbindes med en pennål (10); og
en hætte (104, 204), som selektivt kan forbindes med penlegemet (108, 208), idet hættens første orientering, inden den forbindes med pennålen (10), og dette for at minimere længden eller volumen af selvinjektionsindretningen (100, 200), ligesom hættens anden orientering, hvor hættens (104, 204) er radialt drejet i forhold til den første orientering, og dette efter at man har påsat pennålen (10), så at hættens første orientering får tilstrækkelig længde og volumen til at rumme pennålen (10), som er forbundet med penlegemet (108, 208).
- 15 2. Selvinjektionsindretning ifølge krav 1, hvor penlegemet (108, 208) og hættens første orientering (104, 204) hver omfatter et aksialt fremspring (112, 120, 212, 220) og en aksial udtagning (116, 124, 216, 224);
hvor det i forbindelse med hættens første orientering gælder, at de respektive fremspring (112, 120, 212, 220) aksialt ligger an i de respektive udtagninger (116, 20 124, 216, 224); og
medens det i forbindelse med hættens anden orientering gælder, at de respektive fremspring (112, 120, 212, 220) ligger aksialt an mod hinanden.
- 25 3. Selvinjektionsindretning ifølge krav 2, hvor
penlegemet (108, 208) omfatter en første legemsforbindelsesdel (140, 240), som er anbragt inden i den aksiale udtagning (116, 216);
hættens første orientering (104, 204) omfatter en hætteforbindelsesdel (144, 244), som er anbragt på det indre af det aksiale fremspring (120, 220), aksialt set ved siden af en ende af det aksiale fremspring (120, 220), således at der kan ske en samvirkning med den første legemsforbindelsesdel (140, 240), og således at hættens første orientering sikres på penlegemet (108, 208) i forbindelse med hættens første orientering; og

den første legemsforbindelsesdel (140, 240) omfatter enten et radiale fremspring eller en radial udtagning, og at hætteforbindelsesdelen (144, 244) omfatter det resterende træk blandt nævnte radiale fremspring og nævnte radiale udtagning.

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4. Selvinjektionsindretning ifølge krav 3, hvor:

penlegemet (108, 208) yderligere omfatter en anden legemsforbindelsesdel (248), som er anbragt aksialt ved siden af en ende af det aksiale fremspring (112, 212); og

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den nævnte anden legemsforbindelsesdel (248) omfatter enten det radiale fremspring eller den radiale udtagning og kan samvirke med hætteforbindelsesdelen (144, 244), så at hætten (104, 204) er fastgjort til skriveredskabslegemet (108, 208) i forbindelse med hættens nævnte anden orientering.

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5. Selvinjektionsindretning ifølge krav 3, hvor:

penlegemet (108, 208) yderligere omfatter en patronbeholder (128), som kan rumme en medikamentpatron (12) i penlegemet (108, 208), hvilken patronbeholder (128) har en aksial slids (148), hvorigennem man kan se indholdet i medikamentpatronen (12); og

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hætten (104, 204) yderligere omfatter et radiale fremspring (152), som kan indgribe i den aksiale slids (148) i patronbeholderen (128), så at man kan sikre hættens (104, 204) fastgørelse til penlegemet (108, 208) i forbindelse med hættens anden orientering.

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6. Selvinjektionsindretning ifølge krav 2, som yderligere omfatter et antidrejningstræk (228, 232, 234, 236, 238) til forhindring af drejning af hætten (104, 204) i forhold til penlegemet (108, 208), efter at man har forbundet hætten (104, 204) med penlegemet (108, 208).

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7. Selvinjektionsindretning ifølge krav 6, hvor trækket vedrørende antidrejning omfatter:

et par aksialt udragende horn (228), som er anbragt på rundtgående sider af penlegemets aksiale fremspring (212); og

et par aksiale hornudtagninger (232), som er anbragt på rundtgående sider af hættens aksiale udtagning (224), hvilke hornudtagninger (232) svarer til

5 de nævnte horn; og

hvor hornene (228) kan samvirke med hornudtagningerne (232), når hættens (204) er fastgjort på penlegemet (208), idet hættens har sin første orientering, og dette for at forhindre en relativ drejning af hættens (204) i forhold til penlegemet (208); og

10 hvor hornene (228) kan samvirke med de rundtgående sider af hættens aksiale fremspring (220), når hættens (204) er fastgjort på penlegemet (208) i forbindelse med hættens anden orientering, og dette for at forhindre en relativ drejning af hættens (204) i forhold til penlegemet (208).

15 8. Selvinjektionsindretning ifølge krav 6, hvor trækket vedrørende antidrejning omfatter:

et par aksialt udragende horn (228), som er anbragt på rundtgående sider af det aksiale hættefremspring (220); og

20 et par aksiale hornudtagninger (232), som er anbragt på de rundtgående sider af skriveredskabets aksiale udtagning (216), og hvor hornudtagningerne (232) svarer til hornene (228);

og hvor hornene (228) kan samvirke med hornudtagningerne (232), når hættens (204) er fastgjort til penlegemet (208) i overensstemmelse med den første orientering, og dette for at forhindre en relativ drejning af hættens (204) i

25 forhold til penlegemet (208); og

hvor hornene (228) kan samvirke med rundtgående sider af penlegemets aksiale fremspring (212), når hættens (204) er fastgjort til penlegemet (208) med sin anden orientering, og dette for at forhindre relativ drejning af hættens

30 (204) i forhold til penlegemet (208).

9. Selvinjektionsindretning ifølge krav 1, hvor den første orientering og den anden orientering er rundtgående orienteringer i forhold til penlegemet (108, 208).

10. Selvinjektionsindretning ifølge krav 1, hvor hættten (104, 204) kan forbindes med en første ende af penlegemet (108, 208); og hvor hættten (104, 204), når denne er forbundet med legemet (108, 208) og har sin anden orientering, befinder sig aksialt længere væk fra en anden ende af legemet (108, 208) end, når hættten er forbundet i forbindelse med sin første orientering, og dette for at kunne rumme pennålen (10), som er forbundet med nævnte legeme (108, 208) inden i et indre hulrum (136), hvilken anden ende af legemet (108, 208) befinder sig modsat den første ende.
- 10 11. Fremgangsmåde til brug af en selvinjektionsindretning (100, 200), hvilken indretning omfatter en hætte (104, 204) og et legeme (108, 208), som selektivt kan forbindes med en pennål (10), hvilken fremgangsmåde omfatter de operationer:
- 15 at man til et første tidspunkt, inden man forbinder pennålen (10), forbinder hættens (104, 204) med legemet (108, 208) idet sidstnævnte har en første orientering, hvor længden eller volumen af selvinjektionsindretningens (100, 200) er minimeret; og
- 20 at man til et andet tidspunkt, efter at man har forbundet pennåle (100) forbinder hættten (104, 204) med legemet (108, 208) idet denne har en anden orientering, og hvor med hensyn til den første orientering en længde eller et volumen i det indre af hættten (104, 204) forøges for at rumme pennålen (10) forbundet med penlegemet (108, 208), og hvor hættten (104, 204) er radialt drejet i forhold til den første orientering og er forbundet med penlegemet (108, 208) i forbindelse med den anden orientering.
- 25
12. Fremgangsmåde ifølge krav 11, hvor:
- 30 det træk, at man forbinder hættten (104, 204) med legemet (108, 208) i forbindelse med hættens første orientering, omfatter, at man orienterer et aksialt fremspring (120, 220) og en aksial udtagning (124, 224) i hættten (104, 204) til henholdsvis at kunne ligge aksialt an i en aksial udtagning (116, 216) og ligger an mod et aksialt fremspring (112, 212) på legemet (108, 208); og

at man forbinder hættten (104, 204) med legemet (108, 208) i forbindelse med den anden orientering, idet man orienterer det aksiale hættfremspring (120, 220), så at sidstnævnte aksialt ligger an mod det aksiale legemsfremspring (112, 212).

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13. Fremgangsmåde ifølge krav 11, hvor det træk, at man forbinder hættten (104, 204) med legemet (108, 208), idet dette har den anden orientering, omfatter, at man forbinder hættten (104, 204) i en stilling, som aksialt set er længere fra en ende af legemet (108, 208), end når der er forbundet og har den første orientering.

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14. Fremgangsmåde ifølge krav 11, hvor det træk, at man forbinder hættten (104, 204) med legemet (108, 208), idet hættten har den anden orientering, omfatter, at man bringer et radiale fremspring (152) i hættten (104, 204) i indgreb med en aksial patronbeholderslids (148) i legemet (108, 208).

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15. Fremgangsmåde ifølge krav 11, hvor den første orientering og den anden orientering er omkredsmæssige orienteringer i forhold til penlegemet (108, 208).

DRAWINGS

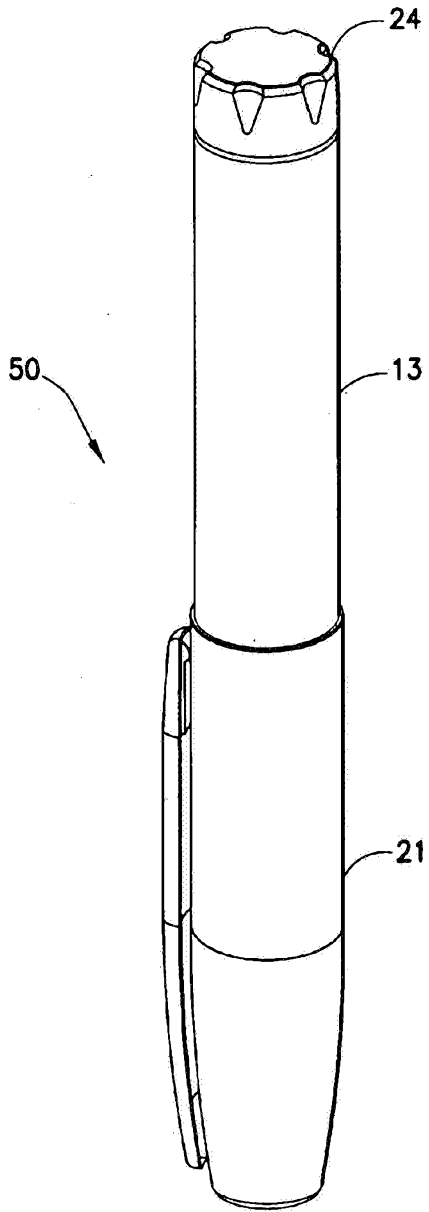


FIG. 1
PRIOR ART

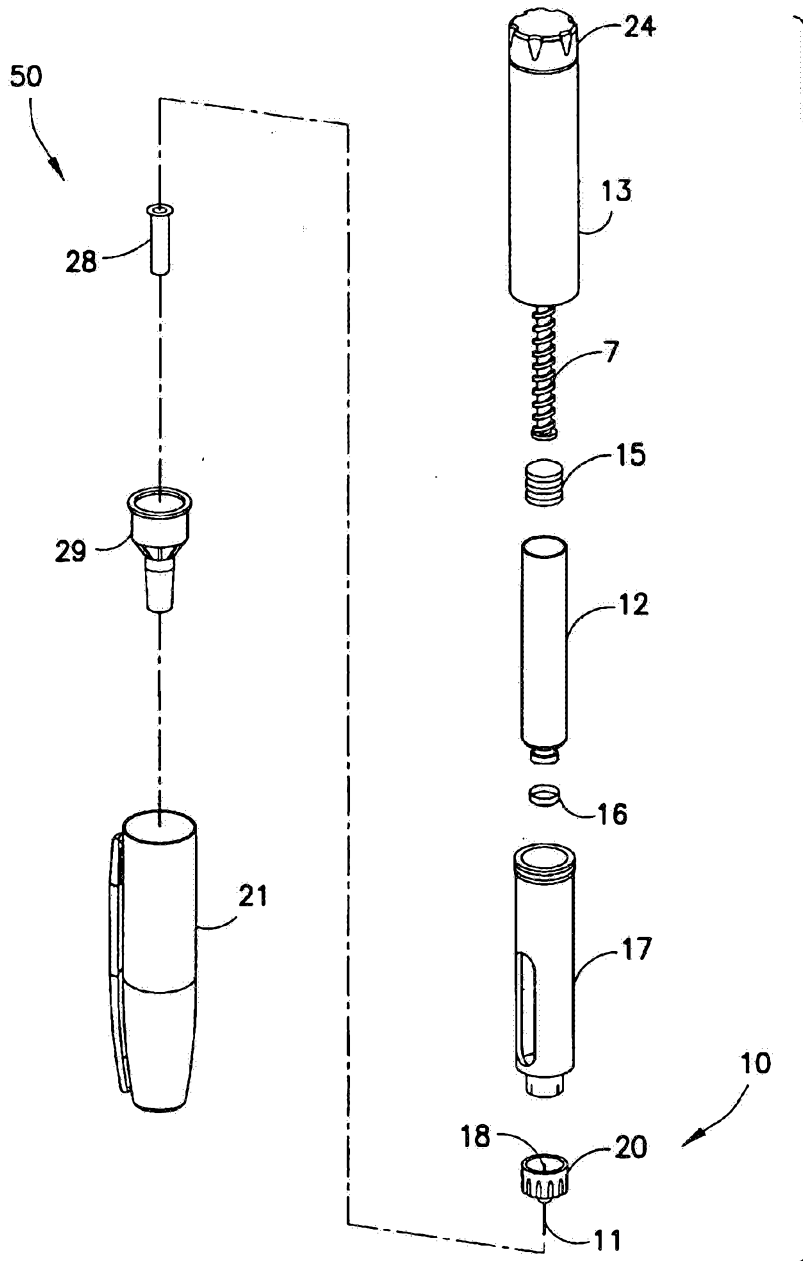


FIG.2
PRIOR ART

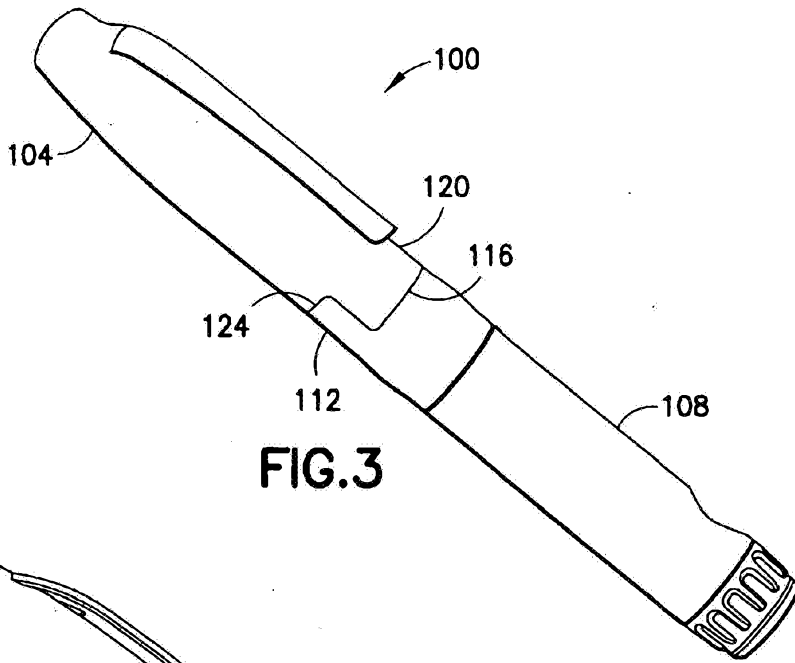


FIG. 3

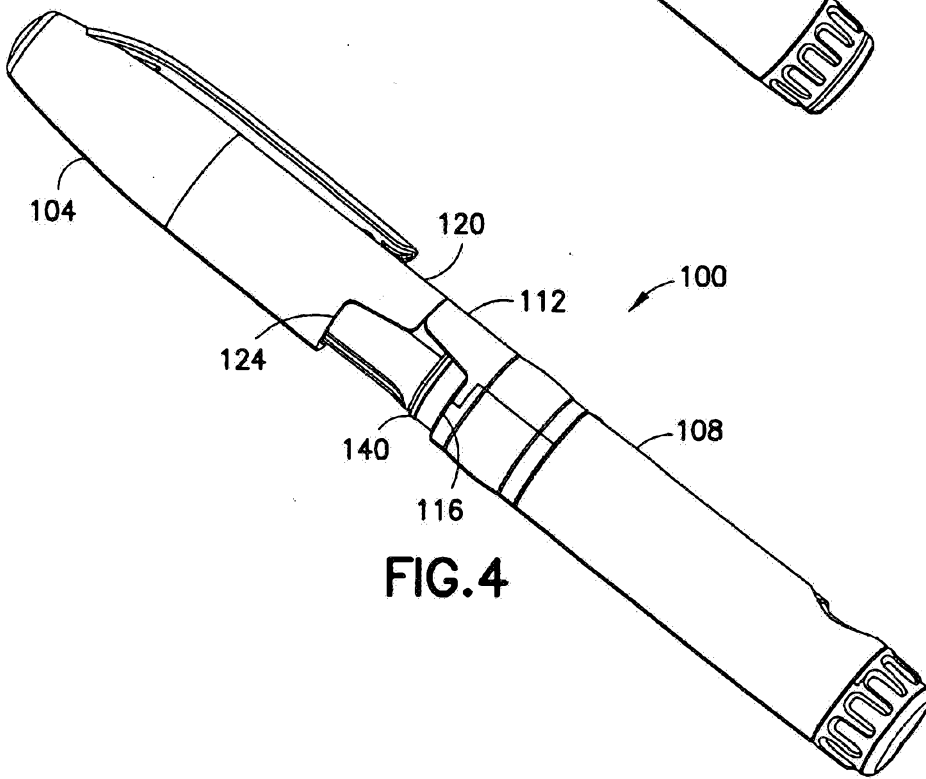
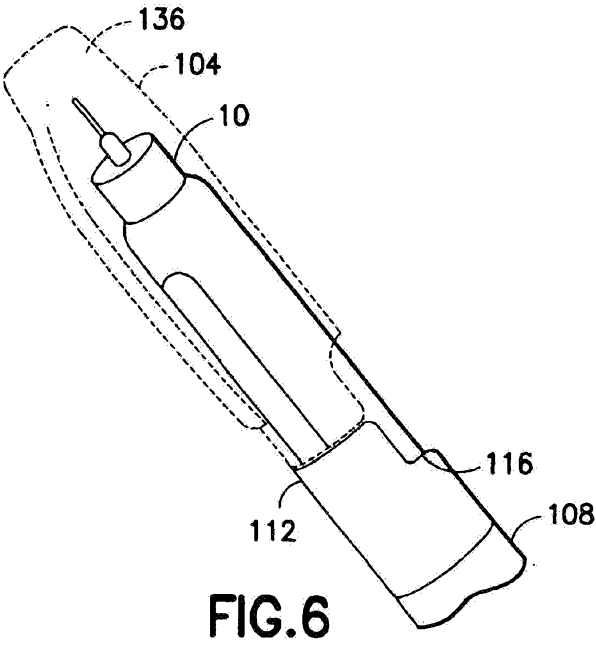
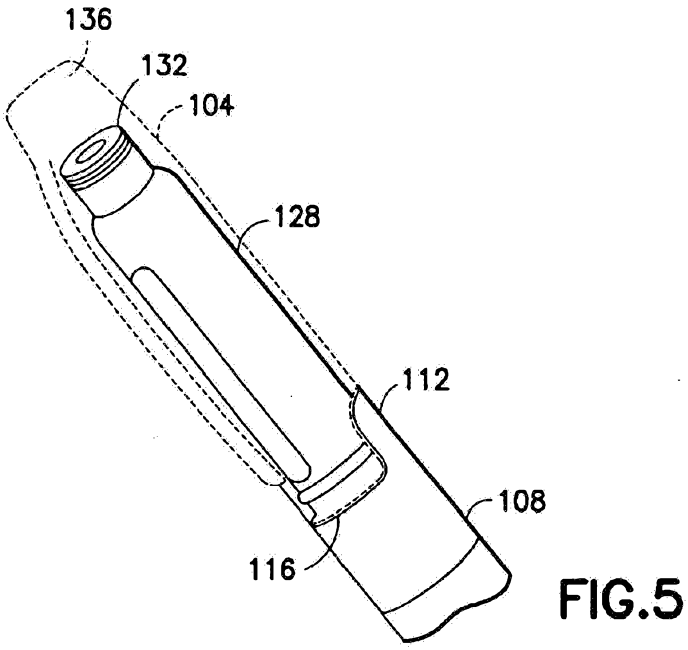


FIG. 4



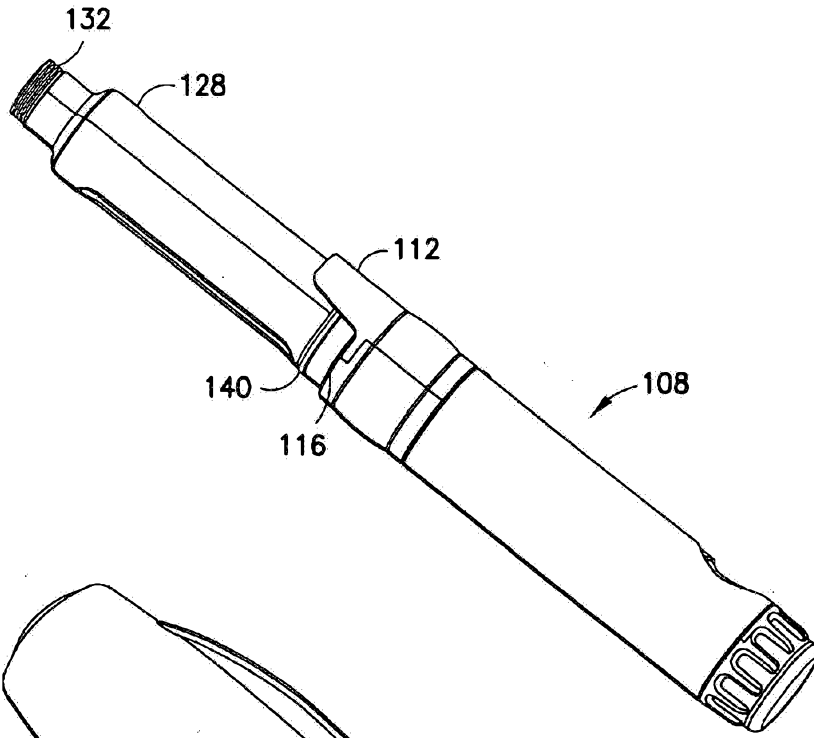


FIG. 7

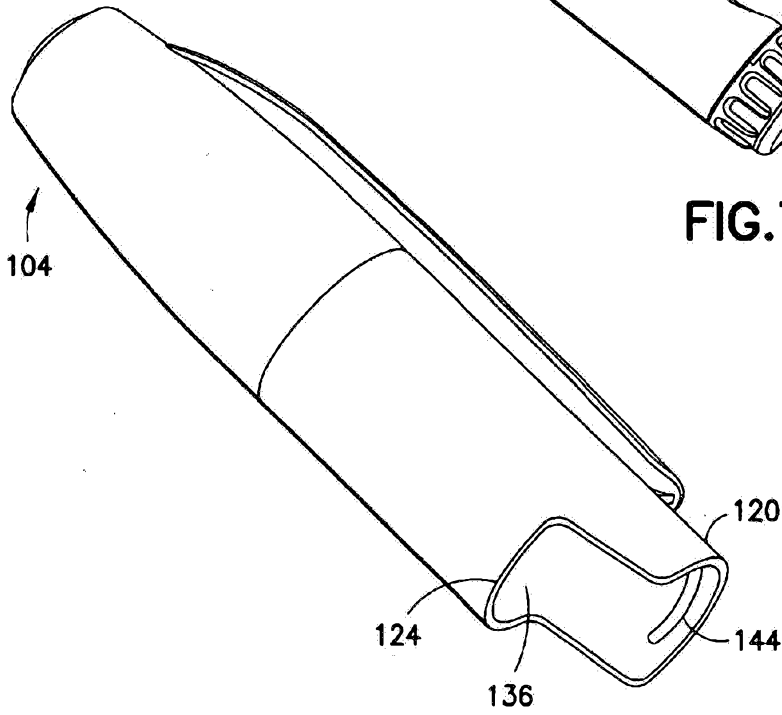


FIG. 8

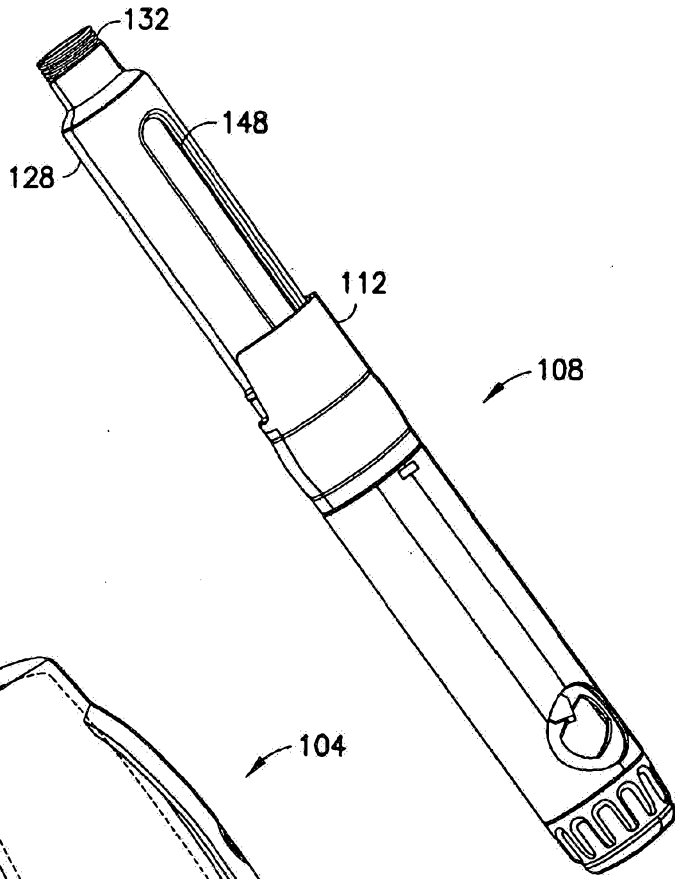


FIG. 9

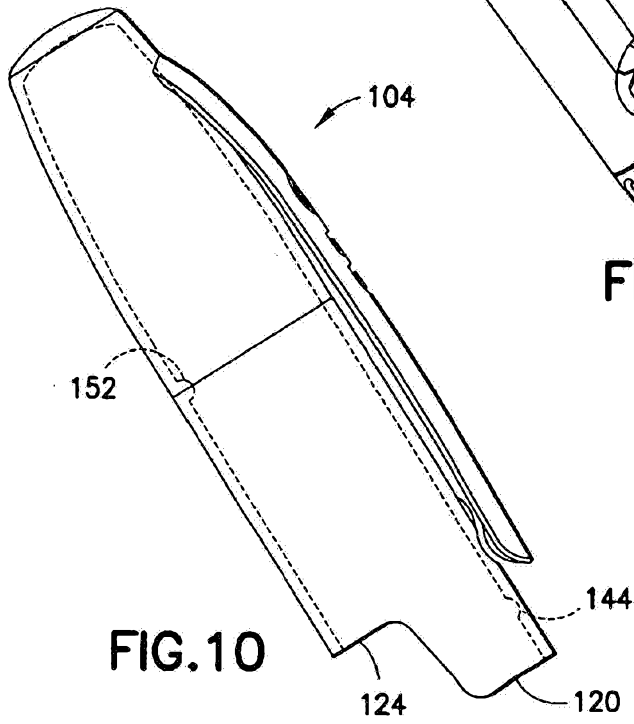


FIG. 10

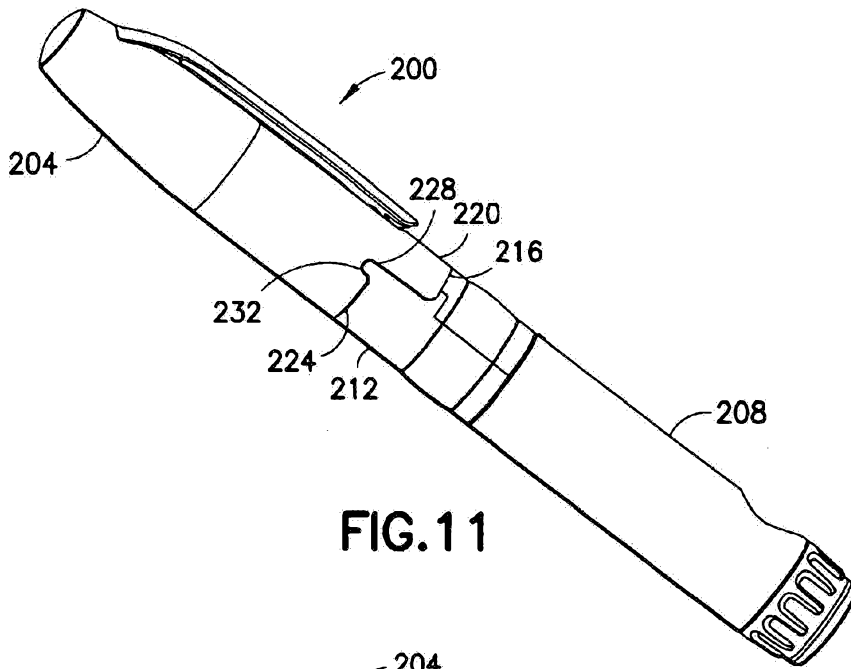


FIG. 11

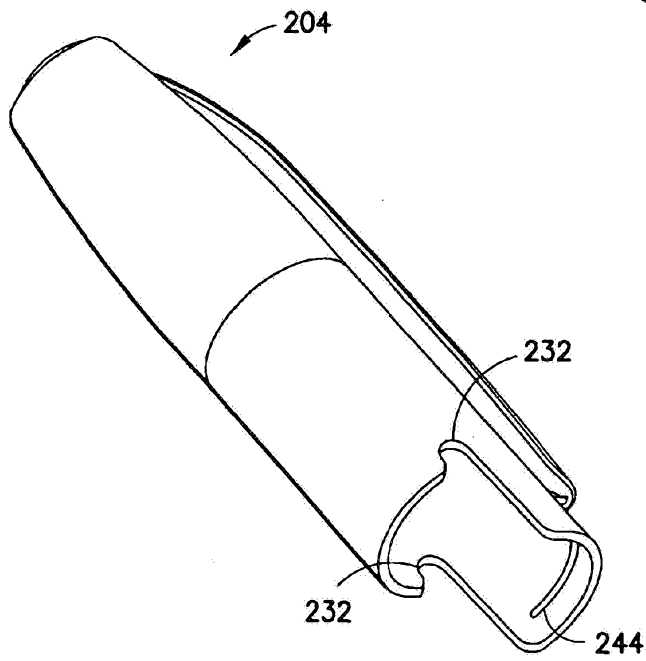


FIG. 12

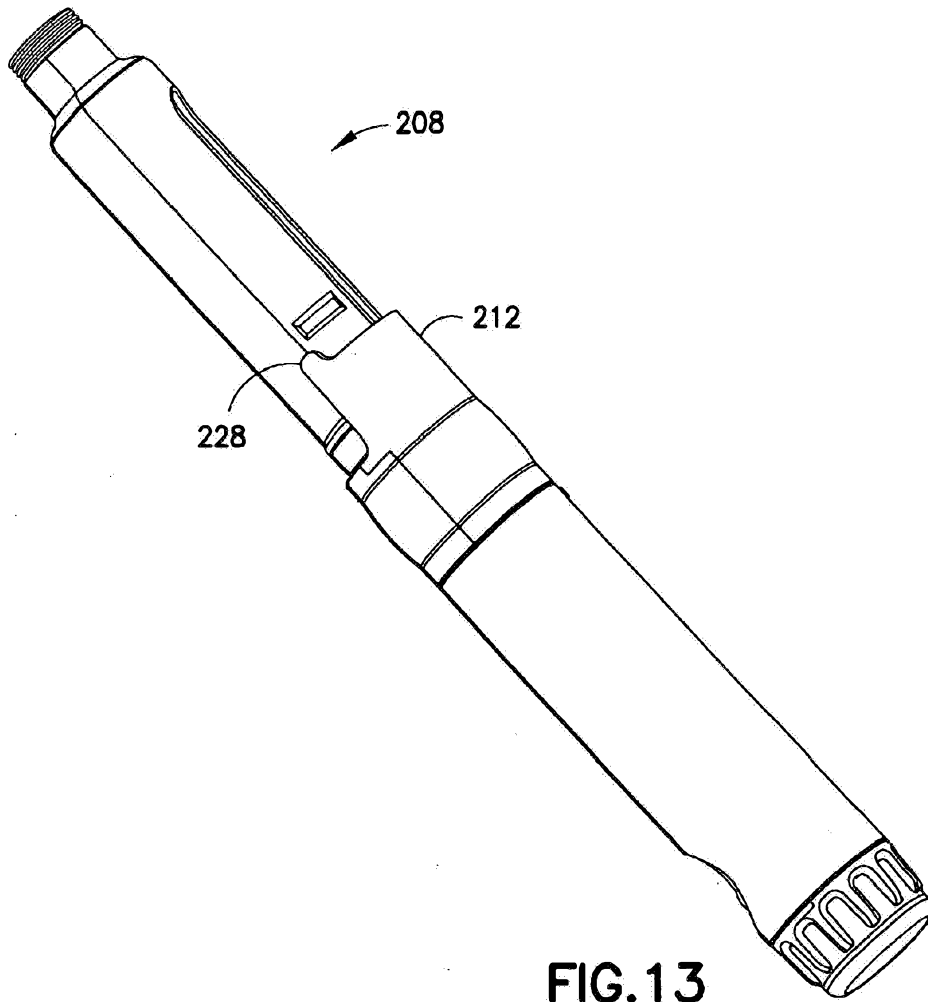


FIG.13

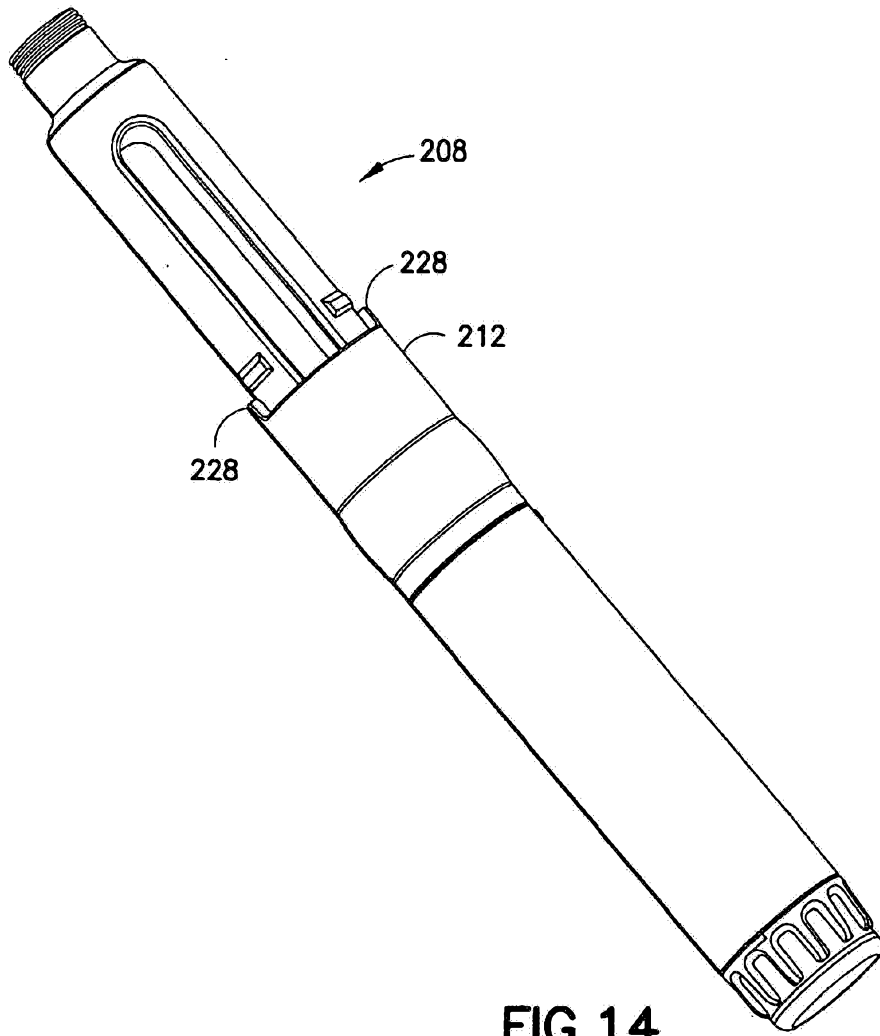


FIG.14

