Standing together against surgical smoke

Your Neptune SafeAir Smoke Evacuation Portfolio

SafeAir Smoke Evacuation Pencil
SafeAir Telescopic Smoke Evacuation Pencil
SafeAir Compact Smoke Evacuator
Neptune 3 Waste Management System
The choice is yours: scalable solutions

SafeAir Smoke Evacuation Pencils

Data shows that surgical smoke particles can travel 40 mph and multiply to more than 1 million particles/cubic foot in five minutes.¹ ¹² That’s why professional organizations advocate “on tip” smoke evacuation directly at the surgical site.¹³ ¹⁴ ¹⁵ ¹⁶ To achieve this, we offer two SafeAir Smoke Evacuation Pencils; standard and telescopic. This enables use on open surfaces and inside cavities, giving you more functionality and more relief from surgical smoke.

2-in-1 monopolar pencils; easy, efficient way to perform smoke evacuation and electrosurgical cutting and coagulation

Captures smoke – and the potential hazards it carries – directly at the source for optimal effectiveness reducing exposure

Designed similar to electrosurgical pencil with emphasis on end-to-end balance; eases transition to a multi-functional pencil

Size, <1oz weight (21.7g without tubing or wire), and ergonomics help preserve surgeon’s natural touch and technique

Compatible with the SafeAir Compact Smoke Evacuator and the Neptune System

A Compatible with a spectrum of SafeAir electrodes and Colorado Needles

B Tactile buttons provide security and control; available in push button or rocker switch

C Ribbing and knurling optimize grip and comfort

D Fully integrated suction/power cord is light and pre-stretched, for ease of motion and tangle-free cord management

E Electrode and suction sleeve telescope simultaneously; plus easy electrode changes since suction sleeve remains permanently attached

F Suction sleeve adjusts forward or backward, and encircles electrode for smoke capture at any angle

G Pencil shaft telescopes up to 4.75”, for a smoke inlet reach of 5”

H Locking ring secures telescopic shaft

Surface use: pencil shaft retracted with suction sleeve forward

Inside open cavities: pencil shaft extended with suction sleeve backward
It’s one small box that makes a big difference in your O.R. air quality. It provides suction for either SafeAir Smoke Evacuation Pencil (standard or telescopic) and is easily portable for use in the O.R. or other procedure rooms. But what you may like best are its many features that allow you to customize performance settings to suit the needs of various surgeons, patients and procedures.

A. Auto activation via integrated sensor that detects pencil current

B. ULPA filtration provides multiple benefits
   - ULPA media – captures potentially hazardous submicron particulates with 99.999% efficiency
   - Carbon media – activated charcoal bed removes volatile organic compounds and odors from the air
   - AORN compliant

C. Lighted indicator visibly tracks filter life; shows when change is needed

D. Proprietary vacuum design ensures near instant “on-tip” suction at the power level set
   - No ramp-up time required to reach desired suction power
   - Customizable via 10 speed settings

E. Multiple activation modes: automatic, permanent and foot switch

F. Customizable time delay; up to 10 seconds of smoke evacuation after pencil deactivation

“I created a lot of Bovie smoke in my time...without any protection. The more I thought about it, the more I became convinced that this was the origin of my deadly disease.”

Anthony Hedley, orthopaedic surgeon and owner of the Hedley Orthopaedic Institute

SafeAir Compact Smoke Evacuator

Simple to use; front panel coincides left-to-right with chronological setup steps

Easily portable with minimal footprint (28.66 lbs; 5.5” H x 14.96” W x 11.8” D)
Neptune 3
Waste Management System

For the ultimate in streamlined functionality, look to the Neptune 3 Waste Management System. Not only does it provide smoke evacuation, but also quickly and efficiently suctions and locks away surgical site and floor fluids. The result is a simple way to perform multiple tasks while reducing exposure to potential hazards, from the floor you walk on to the air you breathe.

Safety and efficiency

- Reduces hazardous exposure by suctioning surgical site fluid, floor fluid and surgical smoke
- Integrated smoke evacuator comes standard; ULPA filtration helps fulfill AORN recommendations on surgical smoke18
- Closed system locks away suctioned fluids during cases, manifold changes, docking and transport; reducing exposure and spills
- Three layers of protection at manifold site via patented SealShut Technology; no open access points to internal canister
- Compatible with SafeAir Smoke Evacuation Pencils
- Auto mode automatically detects surgical smoke and adjusts flow
- Enables patient-to-patient use via simple manifold change

We’re better, together

Stryker’s Smoke Free O.R. Program provides product recommendations, education and financing options that help smooth your transition to a smoke-free O.R. Here’s how we can assist you on all fronts.

Flex Financial provides a number of financing options and/or helps to customize an acquisition program that can make your new purchase possible.

Stryker’s Learn Program offers continuing education, including courses on smoke dangers/evacuation that can help you fulfill Step 7 of AORN’s Go Clear program.

Implementation our sales representatives and product specialists can help facilitate smooth product training and implementation.

ProCare Services offers a range of service plans delivered by localized technicians.
Protecting you
as you protect others

As part of the O.R. team, you provide lifesaving and life changing care every day. And you do it in an environment with inherent risks such as surgical smoke. Data shows it’s a genuine health concern spurring clinical, quality and safety groups around the world to take action – including us. With simple device solutions, education and financing options we’re here to help you create a safer, smoke-free O.R. By working together, we can change things for the better.

1 million particles/cubic feet
O.R. particles multiply from 60,000 particles/cubic foot to more than 1 million within 5 minutes of ESU activation\(^1\)

90% overall staff satisfaction
compared to 60% among canister users\(^2\)

82% of nurses believe mandatory evacuation will become the law of the land\(^3\)

75% of surgeons and 86% of O.R. managers believe smoke evacuation will soon be mandated\(^4\)

85% of all procedures use electrocautery and O.R. team members spend their days breathing its smoke\(^5\)

Triple threat
Surgical smoke has been shown to be cytotoxic, genotoxic and mutagenic\(^6,\,7,\,8\)

93% of nurses feel more comfortable with a smoke evacuator in the O.R.\(^9\)

Not scrubbed? Still not safe.
Surgical smoke affects everyone, even non-scrubbed O.R. staff\(^5,\,9\)

“Expense, convenience and apathy are unacceptable impediments when the health and safety of perioperative personnel may be compromised without these devices...available evidence indicates that it is time to mandate the use of smoke evacuation systems in every O.R.”

AORN Literature Review\(^11\)

Your wellbeing matters. By helping you reduce surgical smoke hazards, we aim to create a better O.R. workplace and experience for you, while also helping you comply with various surgical smoke and workplace safety recommendations. To learn more, or for a “hands on” demo, please call your Surgical sales representative or 800 253 3210. You may also learn more at neptunewastemanagement.com/SafeAir.

<table>
<thead>
<tr>
<th>U.S. part number</th>
<th>Product description</th>
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<tbody>
<tr>
<td><strong>SafeAir Telescopic Smoke Evacuation Pencil – push button</strong></td>
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<tr>
<td>0703-046-004</td>
<td>Integrated telescopic smoke evacuation pencil; coated 70mm blade; push button switch</td>
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<td><strong>SafeAir electrodes</strong></td>
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<td>0703-045-001</td>
<td>Foot pedal, compact smoke evacuator</td>
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*Non-sterile options for procedure packs available through distributors

Surgical

This document is intended solely for the use of healthcare professionals. A surgeon must always rely on his or her own professional clinical judgment when deciding whether to use a particular product during a surgical procedure being performed on a particular patient. We do not dispense medical advice and recommend that surgeons be trained in the use of any particular surgical product before using it in surgery.

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