BRINGING NEW MEANING TO VALUE.

Standardize laparoscopic procedures in your hospital facility with CleanCoat™ laparoscopic electrodes.

PRODUCT INFORMATION GUIDE

CleanCoat™ laparoscopic electrodes

Medtronic
Further, Together
Redefining the standard in laparoscopic procedures – our CleanCoat™ laparoscopic electrodes.

We know the true meaning of any product innovation is in its value – for patients, surgeons and hospitals. That’s why we’re excited to announce our CleanCoat™ laparoscopic electrodes.

Designed for laparoscopic, single-use application, CleanCoat™ electrodes deliver exceptional surgical performance with greater efficiency. They do this because our electrode tips are coated in polytetrafluoroethylene (PTFE), which reduces eschar buildup.¹ That means you spend less time cleaning during a procedure.² Our coated electrodes may also deliver energy more efficiently and can be used across many procedures in your OR.

There are other benefits, too:

- Easier electrode tip cleaning²
- Eschar on the electrode tip increases current resistance. Electrodes clean and free of eschar will enhance performance by maintaining lower resistance within the surgical current³
- Disposable electrodes provide a fully insulated shaft for each case, protecting against stray current and reducing the risk of capacitive coupling and alternate site burns
- Optimized performance when used in conjunction with the Valleylab™ FT10 energy platform, provides more precise monopolar energy delivery than the ForceTriad™ energy platform⁴

We invite you to experience the value for yourself. Standardize your OR today with electrodes that set the standard for laparoscopic procedures.

Yours in partnership,

Medtronic
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CLEAN DESIGN. CLEAR RESULTS.

**Designed to give you optimal performance in laparoscopic procedures.**

**Designed to save you time**
- Polytetrafluoroethylene (PTFE) reduces eschar buildup on the electrode, which may require fewer wipes to clean than stainless steel.
- Reduction eschar buildup can potentially result in fewer removals and reintroductions through the trocar.
- Interchangeable in the sterile field

**Fortified for patient safety**
- Clear insulation provides visibility of the electrode tip
- Disposable electrodes provide a fully insulated shaft for each case, protecting against stray current and reducing the risk of capacitive coupling and alternate site burns
- Reduced eschar on the electrode tip may help reduce the incidence of unintended surgical fires at the site of electrode contact, helping to increase patient and operator safety.

**Enhanced compatibility**
- Optimized performance when used in conjunction with the Valleylab™ FT10 energy platform, provides more precise monopolar energy delivery than the ForceTriad™ energy platform.
- Can be used with all standard 5 mm laparoscopic ports
- Works with Medtronic hand switching pencils
- Features a variety of electrode tip configurations to meet procedural needs

**CleanCoat™ laparoscopic electrodes come in a range of styles and lengths**

- **Straight Spatula** (36 cm)
- **Curved Spatula** (36 cm and 45 cm)
- **Wire J** (36 cm)
- **Wire L** (36 cm and 45 cm)
- **Flat L** (36 cm and 45 cm)
### Advantages of CleanCoat™ laparoscopic electrodes over stainless steel electrodes.

<table>
<thead>
<tr>
<th>Advantage</th>
<th>Coated</th>
<th>Stainless Steel</th>
</tr>
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<tbody>
<tr>
<td>Reduces eschar buildup</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Easier eschar removal from electrode tip</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Reduces sticking on electrode tip</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>May help reduce the incidence of unintended surgical fires</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Potentially fewer reintroductions</td>
<td>✓</td>
<td></td>
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</table>
Laparoscopic Electrodes, Coated

CleanCoat™ Instructions for Use

**REF E3770-36C**
Laparoscopic Straight Spatula Electrode, Coated
36 cm

**REF E3771-36C**
Laparoscopic Curved Spatula Electrode, Coated
36 cm

**REF E3772-36C**
Laparoscopic Wire J-Hook Electrode, Coated
36 cm

**REF E3773-36C**
Laparoscopic Wire L-Hook Electrode, Coated
36 cm

**REF E3774-36C**
Laparoscopic Flat L-Hook Electrode, Coated
36 cm

**REF E3771-45C**
Laparoscopic Curved Spatula Electrode, Coated
45 cm

**REF E3773-45C**
Laparoscopic Wire L-Hook Electrode, Coated
45 cm

**REF E3774-45C**
Laparoscopic Flat L-Hook Electrode, Coated
45 cm

For use with most electrosurgical pencils.

These electrodes are intended for use in minimally invasive surgical procedures where monopolar electrosurgical cutting and coagulation are desired.

These electrodes are compatible with Covidien and other electrosurgical pencils accepting 0.95” (2.36 mm) diameter shafts.

Do not use if package is opened or damaged.

Not made with natural rubber latex.

**Warning**

This product cannot be adequately cleaned and/or sterilized by the user in order to facilitate safe reuse, and is therefore intended for single use. Attempts to clean or sterilize these devices may result in a bio-incompatibility, infection or product failure risks to the patient.

**Warning**

This device has been specifically designed for use in minimally invasive surgical procedures. Do not use for other procedures.

Connect adaptors and accessories to the generator only when the unit is off.

During procedures, be alert to these potential hazards:

- Do not use in patients who have electronic implants such as cardiac pacemakers without first consulting a qualified professional.
- Do not use in the presence of flammable anesthetics, oxidizing gases, or in close proximity to volatile solvents, as an explosion may occur. Do not place instruments near or in contact with flammable materials. Instruments that are activated or hot from use may cause a fire.
- When not using instruments, place them in a clean, dry, highly visible area not in contact with the patient. Inadvertent contact with the patient may result in injury.
- The electrode tip may remain hot enough to cause burns after the device is deactivated.
- Inadvertent activation or movement of the activated electrode outside of the field of vision may result in injury to the patient.
- Localized burns to the patient or physician may result from electrical currents carried through conductive objects (such as cannulas or scopes). Electrical current may be generated in conductive objects through direct contact with the active electrode, or by the active instrument (electrode or cable) being in close proximity to the conductive object.
- Do not use hybrid trocars that are composed of both metal and plastic components. For the operative channel, use all metal or all plastic systems. At no time should electrical energy pass through hybrid systems. Capacitive coupling of RF current may cause unintended burns.
- Due to concerns about the carcinogenic and infectious potential of electrosurgical by-products (such as tissue smoke plume and aerosols), protective eyewear, filtration masks, and effective smoke evacuation equipment should be used during procedures.
- When using with metal cannulas, the potential exists for abdominal wall burns to occur due to direct electrode contact or capacitive coupling of RF current. This is most likely to occur in instances where the electrosurgical generator is activated for extended periods at high power levels, including high current levels in the cannula.
- Aspirate fluid from the area before activating the instrument. Conductive fluids (e.g., blood or saline) in direct contact with or in close proximity to an active electrode may carry electric current of heat away from target tissues, which may cause unintended burns to the patient.
- Do not activate electrodes while in contact with other instruments as unintended tissue injury may occur.

**Warning**

- Ensure that the instrumentation insulation is intact and uncompromised. Compromised insulation may lead to inadvertent metal-to-metal sparking and neuromuscular stimulation and/or inadvertent sparking to adjacent tissue.
- Do not activate the generator in an open-circuit condition. To reduce the chances of unintended burns, activate the generator only when the active electrode is near or touching the target tissue.
- Do not activate the instrument when it is not in contact with target tissue, as this may cause injuries due to capacitative coupling.
- Use the lowest power setting that achieves the desired surgical effect and use a low-voltage waveform (pure cut or desiccate) to lessen the potential for the creation of carbon arcing at the probe tip.
- Carefully insert and withdraw active electrodes from cannulas to avoid possible injury to the patient or damage to the devices.
- The electrode has a coating to reduce the production of tissue smoke plume and aerosols. Cleaning the electrode tips may result in tip breakage or other damage.

**Notice**

If the coating is damaged, discard the electrode. Using coated electrodes at high power settings may cause damage to the coating.

**Important**

These electrodes are for use ONLY in 5 mm cannulas or larger cannulas with appropriate 5 mm adaptors.

Before installing, rotating, or removing the electrode, be sure that the pencil is not connected to an electrosurgical generator. Always grasp the electrode by the insulating sleeve.

Do not exceed 80 W in any mode of operation.

Do not exceed the maximum rated 3625 V in any mode of operation.

**Before Surgery**

**Precaution**

Improper electrode installation may cause arcing at the electrode connection or other hazardous conditions and may result in injury to the patient or surgical team.

To install the electrode:

1. Remove and discard the tip protectors.
2. Remove existing electrode from the monopolar electrosurgical pencil.
3. Insert the electrode shaft into the nose of the pencil until the end is fully seated. When installed properly, the insulating sleeve fits securely inside the nose of the pencil so that the nose of the insulating sleeve by at least 5 mm with no metal exposed.

**During Surgery**

**Precaution**

Electrodes that do not fit into a holster should be placed in a designated location with tips away from flammable material (e.g., drapes).

**Warning**

Conductive fluids (e.g., blood or saline) in direct contact with an active electrode or in close proximity to an active accessory may carry electrical current and cause unintended burns to the patient. This can happen as a result of either direct coupling with the active electrode or capacitive coupling between the active electrode and the external surface of the electrosurgical insulation. Therefore, to prevent unintended burns in the presence of conductive fluids:
- Always keep the tip of the active electrode away from adjacent tissue while activating the electrosurgical generator.
- Clear irrigation fluid from the active site prior to activating the pencil.

Prior to increasing the intensity, check the adherence of the neutral electrode and its connections.

**Precaution**

Do not activate the pencil when removing the electrode from a cannula. Only activate the pencil when the electrode is fully inserted in the cannula.

**Notice**

Wipe with moist gauze or other non-abrasive material.

**After Surgery**

**Precaution**

Single Use Only Dispose of electrodes safely after use according to hospital policy. Do not resterilize.

**STERILE (10)**

Single use Do not resterilize Sterile/Ready To Use

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www.covidien.com

REV 12/2015
Our full portfolio of CleanCoat™ laparoscopic electrodes

<table>
<thead>
<tr>
<th>Reorder Code</th>
<th>Description</th>
<th>Quantity</th>
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<tbody>
<tr>
<td>E3770-36C</td>
<td>CleanCoat™ Laparoscopic Straight Spatula Electrode 36 cm, coated</td>
<td>10/box</td>
</tr>
<tr>
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</tbody>
</table>
Experience the value for yourself. Contact your local Medtronic representative.

Always refer to the Instructions For Use (IFU) supplied with the product for complete instructions, indications, contraindications, warnings and precautions.

1. Based on internal test report RE00028862. Coated Flat L Hooks were tested vs. comparable stainless electrodes. Electrodes were activated on tissue 10 times without cleaning, and mass was recorded before and after each. December 2015.
2. Based on internal test report RE00028862. Coated Curved Spatulas were tested vs. comparable stainless electrodes. Electrodes were activated on tissue multiple times, wiped with a saline soaked pad between activations, and the mass was recorded at each stage. December 2015.
5. Based on internal test report RE00028862. Testing revealed less accumulation of eschar on coated electrode tips over the course of 10 activation cycles.