

SHOW SMOKE THE EXIT.

Introduce Valleylab™ smoke evacuation pencils to your open procedures. With two models to choose from — standard or telescoping — you can have the flexibility to facilitate access and visibility at the surgical site.^{1,†,‡}

360-Degree Swivel

Connection turns freely and easily to minimize drag on wrist^{1,‡‡}

All-In-One System^{1,Ω}

- Integrated suction tubing and ESU wire to simplify cord management over the surgical field^{1,††}
- Corrugated tubing for flexibility and range of movement^{1,‡‡}

Smooth and Precise

CUT/COAG rocker switch provides fingertip control

Compact, Ergonomic Design^{1,Ω}

- Front end has a low profile for enhanced visibility of the surgical field^{1,§}
- A narrow profile that's balanced for a secure grip^{1,‡‡,ΩΩ}

At-the-Source Smoke Capture^{2,3}

- Capture tube on the telescoping model can be securely adjusted without the need to lock/unlock
- Transparent cannula provides clear vision of the target tissue^{1,†}

Independent, Adjustable Blade^{§§}

- The option for a telescoping blade allows for independent length adjustment for improved versatility and choice^{1,†}
- An Edge™ nonstick coated blade electrode

Medtronic
Further, Together

Know the risks of surgical smoke

FOR YOUR PATIENTS. FOR YOUR STAFF. FOR YOURSELF.

Let's help protect the 500,000 healthcare workers who are exposed to surgical smoke every year.^{4,5} Our Valleylab™ smoke evacuation pencils capture smoke directly at the source.^{2,3}



150+

HAZARDOUS
CHEMICALS

have been identified in surgical smoke.⁶



27–30

CIGARETTES

is the approximate amount of surgical smoke produced daily in the OR.⁷



Contact your local representative
or call customer service
at 800.722.8772. Visit us at
medtronic.com/smokeevacuation

Order Code	Description	Length	Quantity
SEP5000	Valleylab™ Smoke Evacuation Rocker Switch Pencil, Edge™ Blade Electrode	10' (3 m)	20/case
SEP5015	Valleylab™ Smoke Evacuation Rocker Switch Pencil, Edge™ Blade Electrode	15' (4.6 m)	20/case
SEP6000	Valleylab™ Telescoping Smoke Evacuation Rocker Switch Pencil, Edge™ Blade Electrode	10' (3 m)	20/case
SEP6015	Valleylab™ Telescoping Smoke Evacuation Rocker Switch Pencil, Edge™ Blade Electrode	15' (4.6 m)	20/case

† Compared to a nonextendable smoke evacuation pencil; 16 out of 19 surgeons surveyed agreed.

‡ Compared to a nonextendable smoke evacuation pencil; 17 out of 19 surgeons surveyed agreed.

§ Compared to the current device they are using; 15 out of 19 surgeons surveyed agreed. ¶ 17 out of 19 surgeons surveyed agreed.

†† 31 out of 31 nurses surveyed agreed.

‡‡ 19 out of 19 surgeons surveyed agreed.

§§ SEP6000/6015 only.

Ω 15 out of 19 surgeons surveyed agreed.

References

1. Based on internal test report #RE000128533 rev A, Marketing claims validation report. July 2018.
2. Based on internal test report #RE00125194 rev A, Surgical validation report. July 2018.
3. Based on internal test report #R0038994 rev A, Non-IEC verification report: smoke evacuation test. July 2018.
4. Ball K. Surgical smoke evacuation guidelines: compliance among perioperative nurses. *AORN J.* 2010; 92(2):e1–e23.
5. Laser/Electrosurgery Plume. Occupational Safety & Health Administration Website. <http://www.osha.gov/SLTC/laserelectrosurgeryplume/>. February 2016.
6. Pierce JS, Lacey SE, Lippert JF, Lopez R, Franke JE. Laser-generated air contaminants from medical laser applications: a state-of-the-science review of exposure characterization, health effects, and control. *J Occup Environ Hyg.* 2011;8(7):447–466.
7. Hill DS, O'Neill JK, Powell RJ, Oliver DW. Surgical smoke—a health hazard in the operating theatre: a study to quantify exposure and a survey of the use of smoke extractor systems in UK plastic surgery units. *J Plast Reconstr Aesthet Surg.* 2012;65(7):911–916.