



Mini Step™ and VersaStep™
trocar portfolio

Where legacy meets innovation

The foundational step that seamlessly
pairs with advanced technology

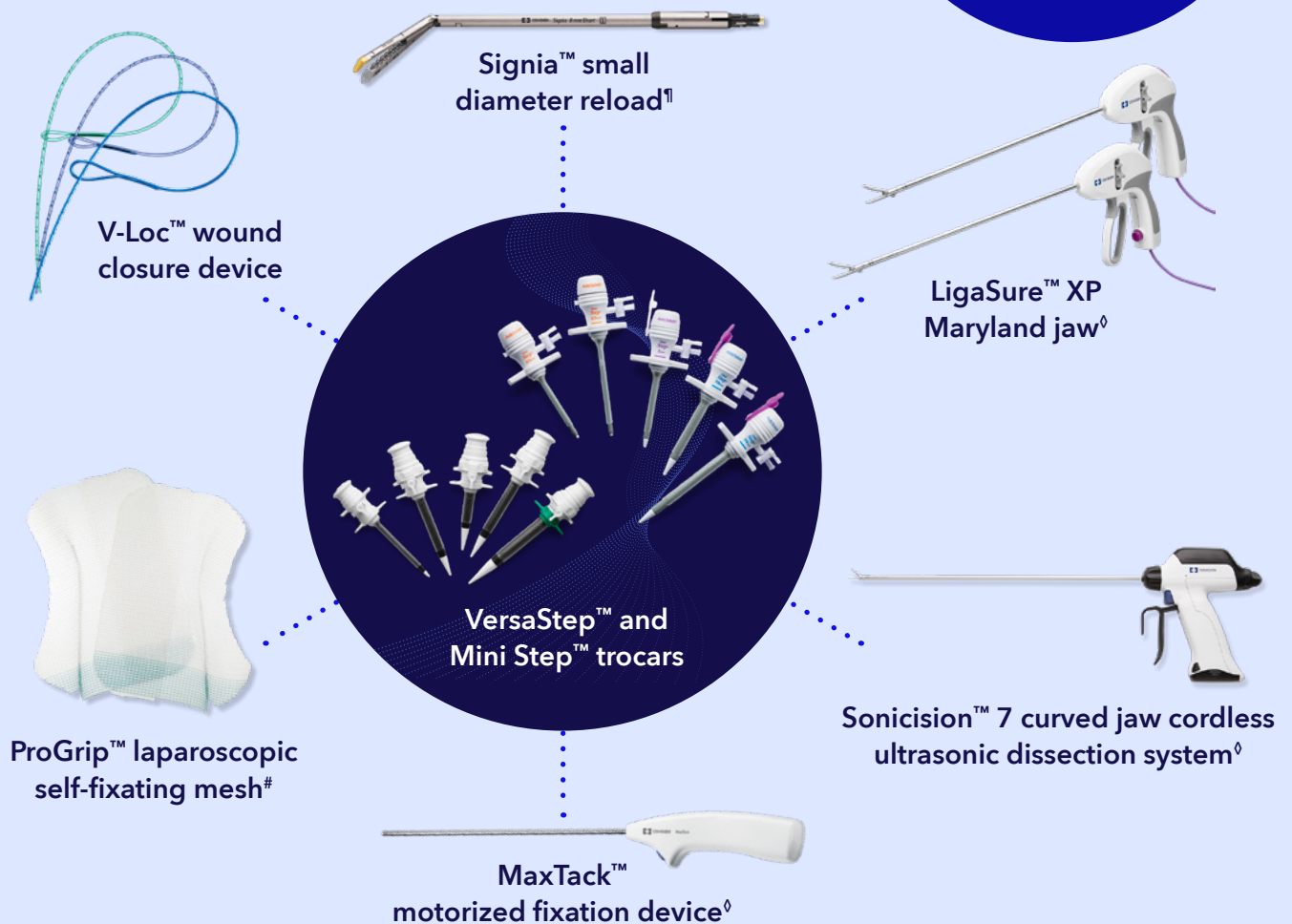


Our trocars are your foundation for cutting-edge technologies

Backed by 30 years of surgical precision, our trocars seamlessly integrate with our most advanced technologies in laparoscopic procedures, offering:

- **Future-forward versatility:** Support next-generation technologies in surgical solutions
- **Reliability:** Leverages Step™ technology to enable small defects, resulting in smaller wounds^{†,‡,§,1}
- **Flexibility:** Offers a comprehensive range of size options to accommodate varying procedures, devices, and patients' abdominal walls.

Use Mini Step™ and VersaStep™ trocars with our suite of innovative technologies



[†] Measured defect size of 5.4 x 3.8 mm was significantly smaller than plastic bladed trocars (7.7 x 4.9 mm, P < .01). [‡] Functional defect size as measured by bead technique of 13.12 +/- 0.35 mm was significantly smaller than plastic bladed trocars (14.12 +/- 0.64 mm, P < .001). [§] Animal data is not necessarily indicative of human clinical outcomes. [∅] SCD7A39 compatible with Mini Step™ 5 mm [¶] Compatible with Mini Step™ 8 mm [#] Refer to the instructions for use of ProGrip™ laparoscopic self-fixating mesh for compatibility with trocar sizes. Do not force the mesh through the trocar. Inappropriate insertion may lead to damage of textile and/or anatomical flap seam.

Reliability you can count on



Mini Step™ bladeless trocar

Access and flexibility for micro- or mini- laparoscopy

Mini Step™ bladeless trocars use Step™ radial dilation technology, which allows these trocars to yield a smaller wound for an equivalent cannula size compared to conventional bladed trocars.^{†,1}



VersaStep™ bladeless trocar

Ease of access without metal blades

Combines the advantages of Step™ radial dilation technology with the Versaseal™ Plus universal seal.²

Step™ radially expanding technology allows the VersaStep™ bladeless trocars to yield smaller fascial defects for an equivalent cannula size compared to conventional bladed trocars.^{‡,§,1}

[†] Based on a porcine pre-clinical model (n= 24, p<0.001). Preclinical results may not correlate with clinical performance in humans.

[‡] Measured defect size of 5.4 x 3.8 mm was significantly smaller than linear bladed trocars (10.5 x 6.1 mm, P <.001). Functional defect size as measured by bead technique of 13.12 +/- 0.35 mm was significantly smaller than linear bladed trocars (14.12 +/- 0.64 mm, P <.001).

[§] Animal data is not necessarily indicative of human clinical outcomes.

Flexibility for patients and procedures

Our VersaStep™ and Mini Step™ trocars provide a range of size options – from 2-3 mm for small instruments used in smaller abdomens to larger sizes that accommodate instruments up to 15 mm – offering flexibility to meet various procedural needs.





Step™ technology by size

	2/3 mm	5 mm	7/8 mm	11 mm	12 mm	15 mm
Short	MS100703	MS100705	MS100708		VS100712P	
Standard	MS101003	VS101005	MS101008	VS101011P	VS101012P	VS101015P
	Short	Standard				
Sleeves	VS100700	VS101000				
		S101000				



Trocar and needle compatibility and measurements

Mini Step™ and VersaStep™ trocars

Insufflation needles				Mini Step™ trocar		VersaStep™ trocar	
	Product code	Description	Length (mm/in)	Short	Standard	Short	Standard
	S110000†	Step™ short insufflation/access needle, 14-gauge, compatible with Step™ and VersaStep™ access system	Short† 75 mm / 3.0 in	Compatible MS100703 MS100708 MS100705	X	X†	X
	S100000	Step™ standard insufflation/access needle, 14-gauge, compatible with Step™ and VersaStep™ plus access systems	Standard 105 mm / 4.1 in	X	Compatible MS101008 MS101003	X	Compatible VS101015P VS101012P VS101011P VS101005 VS101000 (Sleeve)
	VS150000	VersaStep™ long insufflation/access needle, 14-gauge	Long 140 mm / 5.5 in	X	X	X	X
	VS070000†	VersaStep™ short insufflation/access needle, 14-gauge	Short† 60 mm / 2.4 in	X	X	Compatible VS100712P VS100700 (Sleeve)	X

Note: Needles can be used as insufflation needles as well as alongside our Mini Step™ / VersaStep™ trocars.

† Substitution of S110000 for VS070000 is possible but should be limited as it results in the insufflation needle extending 15 mm further from the sleeve.

Ordering information

Mini Step™ portfolio measurements (mm/in)

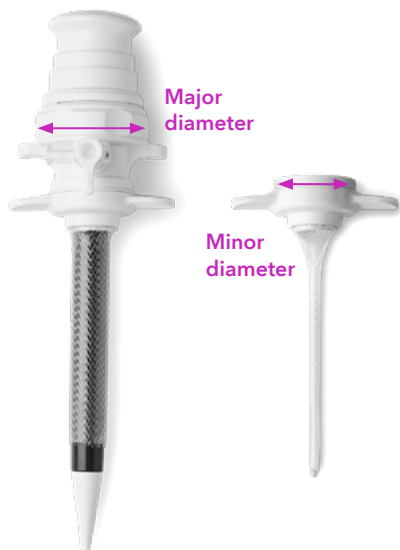
Product code#	Description	Length	Expandable sleeve length (mm/in)	Cannula inner diameter (mm/in)	Hub major diameter (mm/in)	Sleeve minor diameter (mm/in)	Instrument seal system (mm/in)
MS100703	Mini Step™ short 2/3 mm cannula and dilator with radially expandable sleeve	Short	74 mm / 2.9 in	3.7 mm / 0.146 in	33 mm / 1.3 in	30 mm / 1.2 in	2/3 mm / 0.079/0.118 in
MS100705	Mini Step™ short 5 mm cannula and dilator with radially expandable sleeve and 5 - 2/3 mm reducer	Short	74 mm / 2.9 in	5.7 mm / 0.225 in	33 mm / 1.3 in	30 mm / 1.2 in	5 mm w/ 2/3 mm reducer 0.197 in w/ 0.079/0.118 in reducer
MS100708	Mini Step™ short 7/8 mm cannula and dilator with radially expandable sleeve and 7/8 - 5 mm reducer	Short	74 mm / 2.9 in	8.6 mm / 0.340 in	33 mm / 1.3 in	30 mm / 1.2 in	7/8 mm w/ 5 mm reducer 0.276/0.315 in w/ 0.197 in reducer
MS101003	Mini Step™ standard 2/3 mm cannula and dilator with radially expandable sleeve	Standard	102 mm / 4.0 in	3.7 mm / 0.146 in	33 mm / 1.3 in	30 mm / 1.2 in	2/3 mm / 0.079/0.118 in
MS101005	Mini Step™ standard 5 mm cannula and dilator with radially expandable sleeve and 5 - 2/3 mm reducer	Standard	102 mm / 4.0 in	5.7 mm / 0.225 in	33 mm / 1.3 in	30 mm / 1.2 in	5 mm w/ 2/3 mm reducer 0.197 in w/ 0.079/0.118 in reducer
MS101008	Mini Step™ standard 7/8 mm cannula and dilator with radially expandable sleeve and 7/8 - 5 mm reducer	Standard	102 mm / 4.0 in	8.6 mm / 0.340 in	33 mm / 1.3 in	30 mm / 1.2 in	7/8 mm w/ 5 mm reducer 0.276/0.315 in w/ 0.197 in reducer



Ordering information

VersaStep™ portfolio measurements (mm/in)

Product code#	Description	Length	Expandable sleeve length (mm/in)	Cannula inner diameter (mm/in)	Hub major diameter (mm/in)	Sleeve minor diameter (mm/in)	Instrument seal system (mm/in)
VS100700	VersaStep™ short radially expandable sleeve	Short	43 mm / 1.7 in	N/A	N/A	33 mm / 1.3 in	N/A
VS100705	VersaStep™ short 5 mm cannula and dilator with radially expandable sleeve	Short	43 mm / 1.7 in	5.6 mm / 0.222 in	37 mm / 1.45 in	33 mm / 1.3 in	5 mm / 0.197 in
VS100712P	VersaStep™ plus short 12 mm cannula and dilator with radially expandable sleeve	Short	43 mm / 1.7 in	12.4 mm / 0.488 in	46 mm / 1.8 in	33 mm / 1.3 in	5-12 mm self-adjusting 0.197-0.472 in self-adjusting
VS101012P	VersaStep™ plus standard 12 mm cannula and dilator with radially expandable sleeve	Standard	104 mm / 4.1 in	12.5 mm / 0.493	46 mm / 1.8 in	33 mm / 1.3 in	5-12 mm self-adjusting 0.197-0.472 in self-adjusting
VS101000	VersaStep™ radially expandable sleeve	Standard	104 mm / 4.1 in	N/A	N/A	33 mm / 1.3 in	N/A
VS101005	VersaStep™ standard 5 mm cannula and dilator with radially expandable sleeve	Standard	104 mm / 4.1 in	5.6 mm / 0.222 in	37 mm / 1.45 in	33 mm / 1.3 in	5 mm / 0.197 in
VS101011P	VersaStep™ plus standard 11 mm cannula and dilator with radially expandable sleeve	Standard	104 mm / 4.1 in	11.5 mm / 0.451 in	46 mm / 1.8 in	33 mm / 1.3 in	5-11 mm seal adjusting 0.197-0.433 in seal adjusting
VS101015P	VersaStep™ plus standard 15 mm cannula and dilator with radially expandable sleeve	Standard	104 mm / 4.1 in	15.4 mm / 0.608 in	46 mm / 1.8 in	33 mm / 1.3 in	5-12 mm self-adjusting (0.197-0.472 in self-adjusting) and 10-15 mm self-adjusting with 5 mm reducer (0.394-0.591 in with 0.197 in reducer)



Ready for the next step?



Discover our portfolio of trocars for all your surgical needs.

[Order now](#)

VersaStep Warnings and Precautions: Warnings and precautions

Endoscopic procedures should be performed only by physicians having adequate training and familiarity with endoscopic techniques. A thorough understanding of the operating principles, risks versus benefits, and the hazards involved in utilizing an endoscopic approach is necessary to avoid possible injury to the user and/or patient. Verify mechanical and electrical compatibility of devices from different manufacturers prior to using them together in a procedure. Proper technique for the insertion of the VersaStep™ device, as with any endoscopic access device, must be used. Exercise caution during insertion/dilation to avoid damage to internal organs. Consult the literature for information regarding safe techniques. Greater resistance will be felt at the point where the radially expandable sleeve meets the tissues as compared with a bare insufflation/access needle. Insert the dilator/cannula straight through the center of the radially expandable sleeve. Inserting the dilator/cannula at an angle can cause damage to the sleeve by tearing through the side of the sleeve. If the sleeve becomes torn or damaged, obtain a new radially expandable sleeve and insert the dilator/cannula as described above. If removing the cannula/radially expandable sleeve from the abdominal cavity, desufflate the abdomen first by opening the stopcock on the side of the cannula. Leave the laparoscope in place in the cannula. Remove the cannula and radially expandable sleeve leaving the laparoscope in the remaining defect. This allows complete visualization of intact abdominal contents. Failure to follow the above steps may result in exteriorization of abdominal contents through the radially expandable sleeve. The VersaStep™ single-use components can only be used together and with the VersaStep™ expandable sleeve. Products that resemble VersaStep™ components manufactured by other manufacturers cannot be used with the VersaStep™ single-use components. To do so would compromise the performance of the product and create a patient safety hazard. This device is provided sterile and is intended for use in a single procedure only. Discard after use. Do not resterilize.

This material should not be considered the exclusive source of information, it does not replace or supersede information contained in the device manual(s). Please note that the intended use of a product may vary depending on geographical approvals. See the device manual(s) for detailed information regarding the intended use, the (implant) procedure, indications, contraindications, warnings, precautions, and potential adverse events. For a MRI compatible device(s), consult the MRI information in the device manual(s) before performing a MRI. If a device is eligible for eIFU usage, instructions for use can be found at Medtronic's website manuals. medtronic.com. Manuals can be viewed using a current version of any major internet browser. For best results, use Adobe Acrobat® Reader with the browser. Medtronic products placed on European markets bear the CE mark and the UKCA mark (if applicable). For any further information, contact your local Medtronic representative and/or consult Medtronic's websites.

1. Shafer DM et al. Comparison of Five Different Abdominal Access Trocar Systems: Analysis of Insertion Force, Removal Force, and Defect Size. *Surgical Innovation*, Vol. 13, No. 3, September 2006.
2. Johnson, WH et al. VersaStep™ Trocar Hernia Rate in Unclosed Fascial Defects in Bariatric Patients. *Surg Endosc* (2006) 20: 1584-1586.

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