Dear Valued Customer,

Recently, SAGES in conjunction with EAES, came out with several surgical response recommendations to the COVID-19 pandemic. One of the recommendations was that surgical smoke be considered as a key plank of infection control and surgical patient safety.

When surgery is performed and an energy device is used, that energy device can create smoke regardless of whether the procedure is open or laparoscopic. Surgical smoke is comprised of 95% water or steam and 5%-10% cellular debris in the form of particulate matter, which is composed of chemicals, debris and tissue particles, viruses and bacteria in a fine mist. Studies have determined that live bacteria can exist in surgical smoke produced with a blended electrosurgical current, but not with CO2 laser or with monoatomic coagulation electrosurgery. The use of a smoke evacuation device may help to mitigate this risk. Aerobiological studies have effectively prevented using a commercially available smoke evacuation system.

In addition, to help minimize the production of smoke-electrodes with high efficiency filter have been identified as a feasible and potentially useful way for surgical smoke to be handled. Smoke evacuation can capture the smoke generated at the surgical site and remove it to an area where it can be destroyed. Smoke evacuation can capture the smoke generated at the surgical site and remove it to an area where it can be destroyed. Smoke evacuation can capture the smoke generated at the surgical site and remove it to an area where it can be destroyed.

The MEGADYNE™ Smoke Evacuator can remove 4 to 18 LPM in laparoscopic mode which should cover 4 LPM of surgical smoke. Smoke evacuation can capture and filter 99.999954% of particulates and microorganisms.

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During open surgery it is recommended that a suction device, such as the MEGADYNE™ ULTRA VAC™ Smoke Evacuation Pencil be kept within 5cm of the surgical site for efficient removal of aerosolized particles.

Currently there is no data that suggests that COVID-19 virus is released during laparoscopy, or open surgery. Given the potential risk with COVID-19, Ethicon supports the recommendation from SAGES to use a smoke evacuation system.

In order to ensure the safest environment for our patients, physicians, nurses and all hospital staff Ethicon supports SAGES position and recommends that a smoke evacuation system is performed prior to laparoscopic and open cases. In addition to the use of appropriate personal protective equipment.

Please refer to the attached MEGADYNE™ Mega Vac and Mini Vac™ systems brochure or contact your local Ethicon representative with any further questions.

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