Алматы (7273)495-231 Ангарск (3955)60-70-56 Архангельск (8182)63-90-72 Астрахань (8512)99-46-04 Барнаул (3852)73-04-60 Белгород (4722)40-23-64 **Благовещенск** (4162)22-76-07 Брянск (4832)59-03-52 Владивосток (423)249-28-31 Владикавказ (8672)28-90-48 Владимир (4922)49-43-18 Волгоград (844)278-03-48 Вологда (8172)26-41-59 Воронеж (473)204-51-73 Екатеринбург (343)384-55-89

Иваново (4932)77-34-06 Ижевск (3412)26-03-58 Иркутск (395)279-98-46 Казань (843)206-01-48 Калининград (4012)72-03-81 Калуга (4842)92-23-67 Кемерово (3842)65-04-62 Киров (8332)68-02-04 Коломна (4966)23-41-49 Кострома (4942)77-07-48 Краснодар (861)203-40-90 Красноярск (391)204-63-61 Курск (4712)77-13-04 Курган (3522)50-90-47 Липецк (4742)52-20-81

Россия +7(495)268-04-70

Мурманск (8152)59-64-93 Набережные Челны (8552)20-53-41 Нижний Новгород (831)429-08-12 Новокузнецк (3843)20-46-81 Ноябрьск (3496)41-32-12 Новосибирск (383)227-86-73 Омск (3812)21-46-40 Орел (4862)44-53-42 Оренбург (3532)37-68-04 Пенза (8412)22-31-16

Магнитогорск (3519)55-03-13

Москва (495)268-04-70

Пермь (342)205-81-47 Казахстан +7(7172)727-132

Псков (8112)59-10-37

Ростов-на-Дону (863)308-18-15 Рязань (4912)46-61-64 Самара (846)206-03-16 Санкт-Петербург (812)309-46-40 Саратов (845)249-38-78 Севастополь (8692)22-31-93 Саранск (8342)22-96-24 Симферополь (3652)67-13-56 Смоленск (4812)29-41-54 Сочи (862)225-72-31 Ставрополь (8652)20-65-13 Сургут (3462)77-98-35 Сыктывкар (8212)25-95-17 Тамбов (4752)50-40-97 Тверь (4822)63-31-35

Тольятти (8482)63-91-07 Томск (3822)98-41-53 Тула (4872)33-79-87 Тюмень (3452)66-21-18 Ульяновск (8422)24-23-59 Улан-Удэ (3012)59-97-51 **Уфа** (347)229-48-12 Хабаровск (4212)92-98-04 Чебоксары (8352)28-53-07 Челябинск (351)202-03-61 Череповец (8202)49-02-64 **Чита** (3022)38-34-83 Якутск (4112)23-90-97 Ярославль (4852)69-52-93

Петрозаводск (8142)55-98-37

Киргизия +996(312)96-26-47

https://emed.nt-rt.ru || edj@nt-rt.ru

# **ENDO** gastroenterology in mind



## ENDO precision in endoscopic procedures



When designing electrosurgical unit ENDO, we focused on the specific requirements of endoscopic procedures performed in the gastrointestinal tract that pose a challenge to electrosurgery.

Our aim was to design an electrosurgical unit that enables efficient work during endoscopic procedures and at the same time is very easy to use.

The result of our work is ENDO. It is a compact electrosurgical unit that offers functionality which so far was available only in large, complicated electrosurgical equipment.

**ENDO** gastroenterology in mind

- advanced endoscopic cutting modes for polypectomy, sphincterectomy, mucosectomy
- special monopolar coagulation modes for endoscopic procedures
- argon plasma coagulation in standard and pulse mode
- automatic regulation of working parameters on the basis of real-time measurements
- instantaneous and average power monitor that enables the operator to control the unit's working parameters
- colour touch screen and system for recognition of connected instruments, SDS
- control system for the neutral electrode, NEM, and the EMED SAFE electrode that guarantee safety of the procedure
- three-pedal footswitch to activate cutting, coagulation and argon plasma modes
- dedicated trolley with case for argon cylinder and handy basket for accessories and cables ensure comfort and ergonomic conditions in the surgery theatre.



## **SDS** - Smart Device System

ENDO is ready for work immediately after surgical instruments are connected.

The unit detects and recognises all connected instruments. It automatically adjusts the appropriate working mode and output parameters for the instrument, thereby increasing user comfort during work. The surgeon does not need to think about which mode or setting to use for the selected instrument.

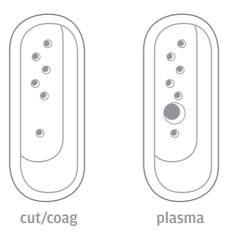
Sockets of ENDO electrosurgical unit feature Smart Device System (SDS) - technology that recognizes connected instrument.

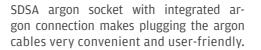
CUT/COAG socket is designed for endoscopic.

CUT/COAG socket is designed for endoscopic instruments.

PLASMA socket is designed for argon instruments and the argon connection is integrated to it.

Connect the instrument and start work.







## **ENDO** automatic adjustment



## WORK AUTOMATIC ADJUSTMENT

ENDO is based on automatic adjustment of working parameters. The user does not have to correct or select settings. The unit selects working parameters for the connected instrument. ENDO recognises the instrument and automatically selects the appropriate working mode and electrical parameters.

Using the SpectrumResult technology, ENDO monitors all working parameters in real time: actual power, current intensity and voltage applied. Thanks to continuous monitoring of all parameters, the user always obtains the best result regardless of the working conditions during the procedure.

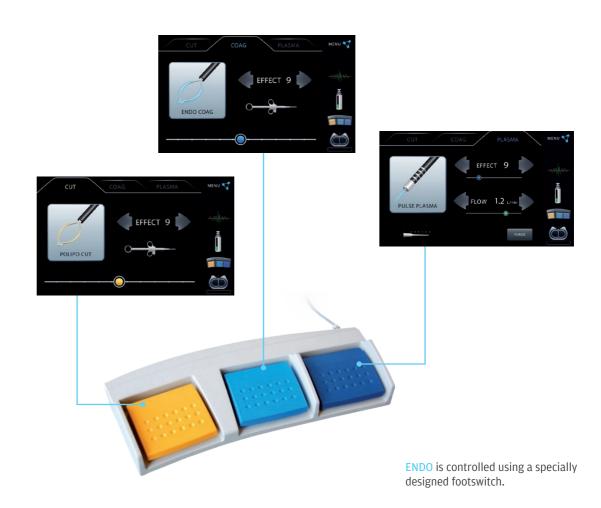
ENDO is equipped with a power monitoring system which shows the diagram of instantaneous output power and the average power value after the cutting or coagulation process is completed.

## **ENDO** ergonomics and comfort

A three-pedal footswitch was designed especially for ENDO. The three independent pedals enable immediate activation of the cutting, coagulation or argon plasma modes without changing the footswitch option.

The ENDO three-pedal footswitch is also available in wireless version. This innovative solution eliminatestheadditionalcablesfromtheoperating theatre or procedure room. The ENDO footswitch communicates with the unit using wireless data transfer. The state-of-the-art technology used in the wireless module guarantees data transfer without undue delay and without interference in functions of other equipment in the operating theatre.

The footswitch is equipped with a long-life battery. The footswitch does not require any complicated configuration to be used with the ENDO unit. All the user must do is connect the wireless unit to the device and start work.



## **ENDO** applications

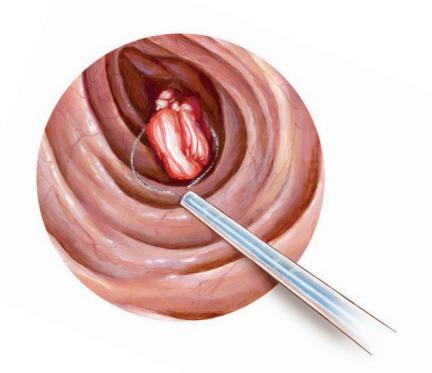
## **WORKING MODE:**



## **ENDOSCOPIC CUTTING**

POLIPO CUT Monopolar cutting for endoscopic procedures. Necessary for polyp removal. Alternating cutting and coagulation ensures optimum coagulation and reduces the risk of bleeding. Instruments: standard endoscopic loops, e.g. from Olympus or Pentax.

ENDO is equipped with an automatic power adjustment system. It supplies the required power in the initial phase to begin cutting without undue delay or coagulation. It then automatically adjusts the power depending on the conditions of the surgery. The power is adjusted on the basis of continuous measurements of tissue impedance. ENDO adjusts power to obtain a continued and repeatable tissue effect.



## **Indications:**

- polyp resection
- resection of elevated flat lesions

### **WORKING MODE:**



PAPILLO CUT Monopolar cutting for endoscopic procedures. Used for cutting Vater's papilla during a papillotomy procedure. It ensures safe cutting with the optimum hemostatic effect. Instrument: papillotome, e.g. from Olympus or Pentax.

PAPILLO CUT limits the risk of uncontrolled cutting of Oddi's sphincter, which may cause intense bleeding. This is avoided by delivering the power for cutting and coagulation in short impulses.

The device operator is able to adjust the intensity of the cutting process depending on the current requirements. Regulation of the cutting intensity provides greater control over theentire incision process. The output power is selected automatically on the basis of realtime measurements. Current parameters are adjusted to provide optimal coagulation during sectioning of tissue.

The PAPILLO CUT mode can also be used to make incisions on, for example, the gallbladder to remove the stones.



## **Indications:**

incision of Oddi's sphincter (sphincterotomy)

MUCO CUT Monopolar cutting for mucosectomy procedures. A specialized endoscopic cutting mode for mucosectomy procedures. Pulsed cutting current and precise pulse duration enable safe and fast cutting in endoscopic submucosal dissection (ESD) and endoscopic mucosal resection (EMR) procedures.

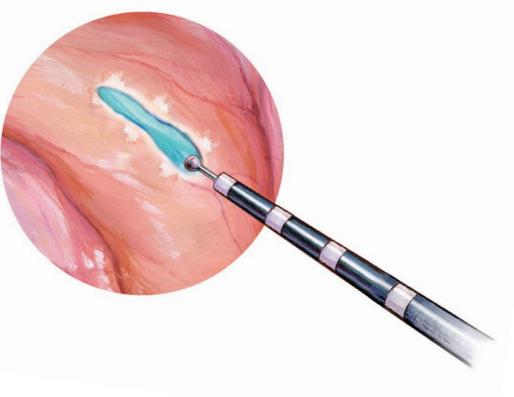
Instruments: endoscopic knife or needle, e.g. from Fujifilm.

In the MUCO CUT mode, the cutting current is supplied as impulses. A nine-degree scale makes it possible to adjust the cutting process to the lesion and user's working method. MUCO CUT ensures high-precision in terms of cutting depth and direction. In the MUCO CUT mode, the power is selected automatically on the basis of real-time measurements.

This mode was designed with ESD and EMR procedures in mind. A marked and elevated lesion can thus be safely removed using the MUCO CUT current. A specialist knife for mucosectomy or a endoscopic loop is recommended for these types of procedures.

### **WORKING MODE:**





## **Indications:**

- endoscopic mucosal resection (EMR)
- endoscopic submucosal dissection (ESD)

## Safe and effective contact coagulation and contactless in gastroenterological procedures.

ENDO COAG Monopolar endoscopic coagulation. endoscopic loops, e.g. from Olympus or Pentax.

It is used for quick haemostasis of local haemorrhages. Instruments: standard endoscopic loops, e.g. from Olympus or Pentax.

## **WORKING MODE:**





## **ENDOSCOPIC COAGULATION**

It is used for additional haemostasis in polypectomy and marking the lesions. Instruments: standard

ENDO SPRAY Monopolar endoscopic coagulation.

## **Indications:**

- hemostasis of surface haemorrhage
- · marking lesions for resection

ENDO BI-COAG Bipolar coagulation for endoscopic procedures. Soft hemostasis without carbonisation of the tissue.

Instrument: a bipolar probe and a SDS adaptor for bipolar endoscopic hemostasis probe REF 281-60S.

ENDO BI-COAG is a gentle, bipolar coagulation mode. It is designed for specialist bipolar endoscopic probes, also with the irrigation function. In this mode, the bipolar current flows between two poles located on the working tip of the bi-polar probe. Haemostasis is achieved by heating the tissue in direct contact with the bipolar probe tip. Irrigation using saline solution facilitates the flow of the bipolar current, which in turn enhances the electrosurgical effect. This also reduces tissue adhesion on the probe tip. In the ENDO BI-COAG mode, the user can select from nine various haemostatic effects. In this mode, power is adjusted automatically in order to obtain the desired effect regardless of the surgical conditions. The bipolar probe is connected to the device using a special SDS plug. When the bipolar instrument is connected using the SDS plug, the device will switch to bipolar mode and display the suggested work settings.



**WORKING MODE:** 

## **Indications:**

· hemostasis of small haemorrhage along the entire gastrointestinal tract

## ENODOSCOPIC ARGON PLASMA

ENDO is equipped with an internal module that enables efficient coagulation using argon plasma. The absence of any external devices greatly facilitates preparation for the procedure as well as the course of the surgery. The argon plasma technology is especially recommended in areas and sites with high risk of perforation.

## Advantages of argon plasma coagulation:

- immediate hemostasis helps to efficiently and quickly coagulate large areas of bleeding surface
- constant coagulation depth limited to 3 mm minimises the risk of perforation
- no smoke ensures good visibility of operated
- no contact between the applicator and tissue means no tissue adhesion
- Precise application of coagulation

PLASMA is a gentle argon coagulation mode designed for endoscopic procedures. The application of argon plasma enables highly effective coagulation at lower power settings. In the argon plasma mode, tissue carbonisation is greatly reduced. PLASMA always ensures great visibility of the surgical site as it minimises smoke during coagulation.



### **WORKING MODE:**





PULSE PLASMA is designed for sites where there is a serious risk of perforation. Current is delivered in short impulses, which lowers the amount of energy delivered to the tissue. Coagulation using PULSE PLASMA is shallower in comparison with continuous coagulation in the PLASMA mode. The impulse delivery also facilitates a more precise application.

#### Indications:

- bleeding from angiodysplastic lesions
- bleeding post polypectomy
- residual tissue removal after polypectomy
- bleeding from cancerous lesions in the stomach and colon
- erosion, oozing ulcers
- devitalisation of tumours obstructing intestinal lumen

## **WORKING MODE:**



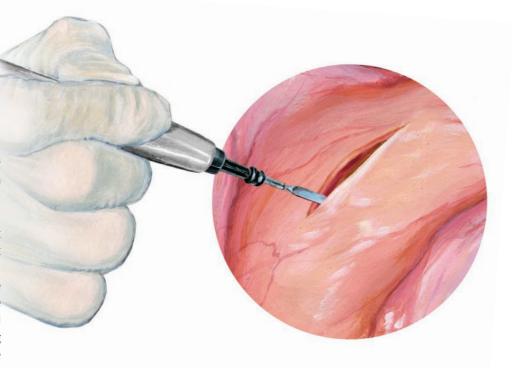
**ENDO** makes it possible to use standard, monopolar cutting with varying degree of hemostasis and forced monopolar coagulation.

## STANDARD MONOPOLAR MODES

Standard monopolar modes are available after the monopolar handle compatible with the ENDO electrosurgical unit is connected.

MONO CUT Monopolar cutting with different hemostasis effects. Effect 1 is used to cut the tissues when additional bleeding control is not needed. This cutting mode causes the least damage to tissues. Other effects include enhanced haemostasis levels. They are used when there is a need for more intensive bleeding control already in the course of cutting. The higher hemostasis levels control bleeding better, but exert a stronger thermal impact on the tissues.

Instruments: monopolar electrodes, e.g. knife, loop or needle.

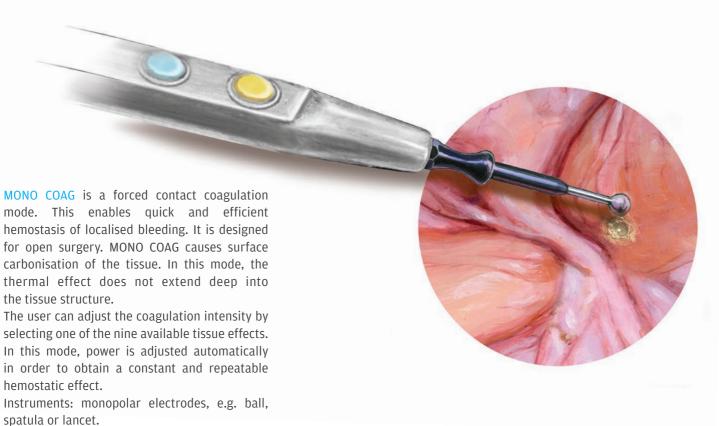


## **Indications:**

· cutting of tissue with simultaneous hemostasis

## **WORKING MODE:**





## **Indications:**

· contact coagulation of localised bleeding

## **ENDO** safety and ergonomics at work

### **AUTOTEST**

Each time the power is switched on, the system conducts an internal test of all the unit components and any instruments and auxiliary devices that may be connected. The result of the AUTOTEST is displayed on the screen as a message.

### MFNU

ENDO provides additional adjustment options of such parameters as: activation signal volume, screen brightness and language selection.

## **FOOTSWITCH**

ENDO automatically identifies the type of footswitch connected to the unit.



## SUPPLEMENTAL DEVICES

Connected endoscopic irrigation pump.

## **POWER MONITOR**

ENDO unit automatically adjusts the output power to achieve desired effect on tissue, analyzing conditions of operating area. Power monitor shows current power output during cutting.

### ARGON RATE

Shows the status of argony argon cylinder.

### NEM SYSTEM

The ENDO electrosurgical unit is equipped with the NEM system which controls the adhesion quality of the neutral divided EMED SAFE electrode. Application of the electrode is monitored throughout the whole procedure. In combination with the EMED SAFE electrodes, the NEM system maximises safety during the procedure.

## **ENDO** technical specification

## **TECHNICAL DATA**

Voltage 220-240 [V] ±10% or optionally 110-120 [V] ±10%

Rated power consumption 1350 [VA]

real-time monitoring of output parameters Measurements

automatic output parameters adjustment. max 400W Power output

## **WORKING MODES**

Monopolar cutting, coagulation

Bipolar coagulation

argon module integrated Argon

## **SAFETY CONDITIONS**

Electric shock protection:

Class / Grade I / CF

Protection class IP2X

Low frequency leakage current as per EN 60601-1

High frequency leakage current as per EN 60601-2-2

Generator frequency 333 [kHz]

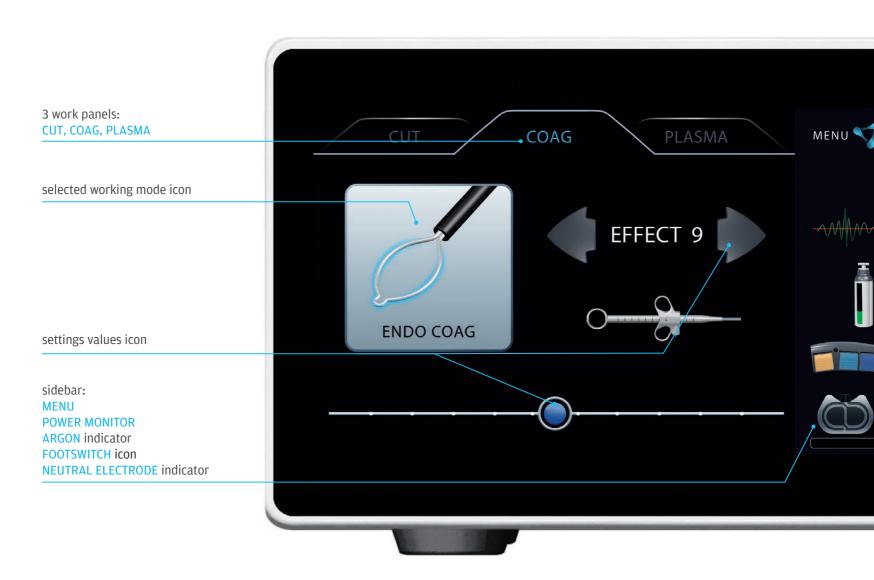
Defibrillation impulse resistance as per EN 60601-1

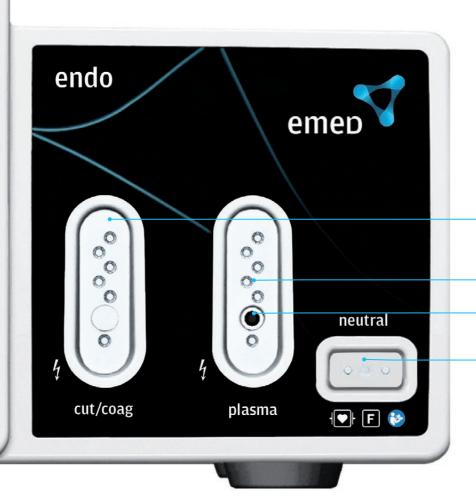
## **DIMENSIONS AND WEIGHT**

Length 385 [mm] 141 [mm] Height Width 305 [mm] 7 [kg] Weight



## ENDO easy use





**CUT/COAG** connection

- detecting monopolar and bipolar instruments

PLASMA connection

- detecting instruments for the argon plasma modes

**ARGON** connection

**NEUTRAL ELECTRODE** connection

ENDO 1:1 scale

## WATERFALL

## endoscopic irrigation pump

Good visibility and clean operating site are of prime importance in all types of surgery.



In endoscopic procedures, the operation site may be contaminated with chime or blood residue in the gastrointestinal tract.

The possibility of irrigating the operating site is a very important element of any endoscopic procedure. The WATERFALL endoscopic irrigation pump was designed to ensure full comfort and safety during surgeries.

The pump makes it possible to quickly rinse the gastrointestinal tract using physiological saline or sterile water directly through the endoscope's rinsing opening or by using endoscopic instruments.

## Advantages of the WATERFALL endoscopic irrigation pump:

- good visibility and clean operating site
- quick and easy fluid flow adjustment from the pump control panel
- possibility of activation using the footswitch or from the control panel
- low-noise, does not cause nuisance in the procedure room
- small size and possibility of mounting of the unit on the ENDO trolley, which gives access to the pump during the procedure



# accessories for electrosurgical unit ENDO

	Ref. No.	
THEORET S AND THE STATE OF THE	100-600	Electrosurgical unit ENDO
Comp   - 100	020-100	WATERFALL endoscopic irrigation pump
((p))	100-336	Three-pedal footswitch, MultiSwitch, wireless
	100-316	Three-pedal footswitch, cable 5m, 6-pin plug
P-300 ARGON	5501640	Argon regulator P300-P40EMED, DIN 477/6 (Europe)
	5501565	Argon regulator P300-P40EMED, DIN 477/6, with pressure sensor
ı Å	100-051	Argon Cylinder 5L (empty housing - with no gas)
	100-151	Argon Cylinder 10L (empty housing - with no gas)



080-060

TinyLine trolley with argon cylinder case for electrosurgical units

	Ref. No.	
	932-148	Flexible argon probe, reusable, TBS, dia. 1.5mm, length 1.5m
	932-149	Flexible argon probe, reusable, GIT, dia. 2.3mm, length 2.2m
	932-150	Flexible argon probe, reusable, GIT, dia. 3,2mm, length 2,2m
	932-151	Flexible argon probe, reusable, TBS, dia. 1,5mm, length 3m
	932-152	Flexible argon probe, reusable, GIT, dia. 2.3mm, length 3m
	432-46A	Monopolar cable for argon flexible electrode, flat connector, L: 3.5m, SDSA plug
THE TOTAL PROPERTY OF THE PROP	281-035	Monopolar endoscopic cable, 3 m length, 3mm female, SDS plug
Adapter 806-81P Venno 281-408	281-605	SDS adaptor for bipolar endoscopic hemostasis probe, for ENDO unit
	380-030	Disposable neutral electrode cable, L: 3m, flat plug
	380-050	Disposable neutral electrode cable, L: 5m, flat plug
	812-80H	Disposable neutral electrode EMED SAFE, hydrogel, split, for adults and children, 176x122mm, 110cm2

Алматы (7273)495-231 Ангарск (3955)60-70-56 Архангельск (8182)63-90-72 Астрахань (8512)99-46-04 Барнаул (3852)73-04-60 Белгород (4722)40-23-64 Благовещенск (4162)22-76-07 Брянск (4832)59-03-52 Владивосток (423)249-28-31 Владикавказ (8672)28-90-48 Владимир (4922)49-43-18 Волгоград (844)278-03-48 Вологда (8172)26-41-59 Воронеж (473)204-51-73 Екатеринбург (343)384-55-89 Иваново (4932)77-34-06 Ижевск (3412)26-03-58 Иркутск (395)279-98-46 Казань (843)206-01-48 Калининград (4012)72-03-81 Капута (4842)92-23-67 Кемерово (3842)65-04-62 Киров (8332)68-02-04 Копомна (4942)77-07-48 Краснодар (861)203-40-90 Красноярск (391)204-63-61 Курск (4712)77-13-04 Курган (3522)50-90-47 Липецк (4742)52-20-81 Магнитогорск (3519)55-03-13 Москва (495)268-04-70 Мурманск (8152)59-64-93 Набережные Челны (8552)20-53-41 Нижний Новгород (831)429-08-12 Новокузнецк (3843)20-46-81 Новбосибирск (3843)20-46-81 Новосибирск (383)227-86-73 Омск (33812)21-46-40 Орел (4862)44-53-42 Оренбург (3532)37-68-04 Пенза (8412)22-31-16 Пегрозаводск (8142)55-98-37 Псков (8112)59-10-37 Пермы (342)205-81-47

Рязань (4912)46-61-64 Самара (846)206-03-16 Санкт-Петербург (812)309-46-40 Саратов (845)249-38-78 Севастополь (8692)22-31-93 Саранск (8342)22-96-24 Симферополь (3652)67-13-56 Смоленск (4812)29-41-54 Сочи (862)225-72-31 Ставрополь (8652)20-65-13 Сургут (3462)77-98-35 Сыктывкар (8212)25-95-17 Тамбов (4752)50-40-97 Тверь (4822)63-31-35

Ростов-на-Дону (863)308-18-15

Тольятти (8482)63-91-07 Томск (3822)98-41-53 Тула (4872)33-79-87 Тюмень (3452)66-21-18 Ульяновск (8422)24-23-59 Улан-Удэ (3012)59-97-51 Уфа (347)229-48-12 Хабаровск (4212)92-98-04 Чебоксары (8352)28-53-07 Челябинск (351)202-03-61 Череповец (8202)49-02-64 Чита (3022)38-34-83 Якутск (4112)23-90-97 Ярославль (4852)69-52-93

Россия +7(495)268-04-70

Казахстан +7(7172)727-132

Киргизия +996(312)96-26-47

https://emed.nt-rt.ru || edj@nt-rt.ru