COVID-19 Insufflation Recommendations

STANDARD INSUFFLATION

Step 1:
Use a suction assisted filtered smoke evacuator connected to a conventional trocar throughout the procedure to reduce risk of gas leakage through trocars.

Step 2:
Ensure all stopcocks are closed prior to and after insertion. Ensure skin incisions are as small as possible to minimize leakage.

Step 3:
During desufflation, slowly reduce the set pressure to lowest possible setting (5mmHg) and press “STOP”.

Step 4:
During MIS hysterectomy, care should be taken to minimize gas escape during colpotomy with a vaginal occluder or filtered smoke evacuation devices.

Step 5:
During desufflation, use of a suction/irrigation system with inline filtration or a suction-assisted smoke evacuation device.

Step 6:
If specimen removal is indicated, delay specimen removal until desufflation is complete. Use of a locking grasper or specimen bag may limit fluid release during extraction.

SMOKE EVACUATION MODE (CLOSED LOOP)

Step 1:
Ensure all stopcocks are closed prior to and after the insertion. Ensure skin incisions are as small as possible to minimize leakage.

Step 2:
During desufflation, slowly reduce the set pressure to lowest possible setting (5mmHg) and press “STOP”.

Step 3:
During desufflation, use of a suction/irrigation system with inline filtration or a suction-assisted smoke evacuation device is recommended to remove remaining cavity gas.

AIRSEAL® MODE

Step 1:
Use a suction assisted smoke evacuator connected to a conventional trocar during and at the end of the procedure to filter surgical smoke and abdominal gas. Not recommended for pediatric patients.

Step 2:
During desufflation, place the obturator back into AirSeal® Access Port or place a gloved thumb over the top of the Access Port.

Step 3:
Slowly reduce the set pressure to lowest possible setting (5mmHg) and press “STOP”.

Step 4:
Use of a suction/irrigation system with in-line filtration or a suction-assisted smoke evacuation device is recommended to remove remaining cavity gas.

1. If AirSeal Mode is indicated for patients, we recommend augmenting AirSeal Mode with a suction-assisted smoke evacuation system. This should reduce the likelihood of cavity gas escape during colpotomy with a vaginal occluder or filtered smoke evacuation devices.

This material provides information regarding how to use CONMED medical devices and instruments in surgical procedures. It is not medical advice and each surgeon should use their own professional judgment before using to treat a particular patient. Surgeons should be trained in the use of such devices before surgery and should always refer to the product labeling including the instructions for use before using any medical device.