

Frequently Asked Questions Celon Elite

1. What is the difference between fine and pure RFITT? When is for example fine RFITT mode to prefer?

Pure RFITT is the standard RFITT mode that you already know from the CelonLabENT. Fine RFITT is especially developed for turbinate reduction. It is supposed to be even more gentle and prevents crusting. At the moment we only have a positive "feeling" from surgeons, but so far we do not have any proof. A hospital in Munich is currently doing a case study to show the clinical difference of the two modes. The Fine RFITT in general stops a little earlier. A more precise explanation of the technical difference between the two modes will be provided shortly.

2. Is it true that the auto stop RCAP is working only when you use fine or strong RFITT? Not when using pure RFITT? Why not in all RFITT modes? I found this info on page 64 in the manual.

RCAP and strong RFITT are not relevant at this stage because we do not have any applicators to be used with these modes. RCAP is used in combination with a pump and especially for tumors, where you need to heat up bigger size of lesions compared to the Celon procedures we promote in ENT so far. For our Celon procedures RCAP is not needed.

3. Are the new ProBreath and ProSleepPlus probes compatible with ESG400? If a customer already has ESG400 in their OR, can they use it with these probes? What modes are available for the probes then? RFITT too?

Yes, they can use it with RF Coagulation in the ESG-400. Please note that the ESG-400 does not have the instrument recognition. With the Celon Elite only our applicators can be connected, with the ESG-400 also standard applicators might be able to be connected. This means that we cannot protect our Celon technology.

4. Should we always use the auto start setup?

Auto start is used in combination with bipolar forceps to stop bleeding. There are doctors that like it, others prefer a foot switch. I would set up the mode with the foot switch and then ask the surgeon if he wants to try auto start and then change it. Or ask him upfront, so you can set it up accordingly.

5. How easily do the modern mobile phones actually disturb Celon Elite when it is working?

So far, there is no information on this. I wouldn't use a Samsung Galaxy though. There is no difference to all other devices in the OR.

6. What about strong RFITT? In the manual it is about tumors, are we going to get new probes for that purpose later? Or can the doctors already use this mode too? When is it applicable and with which probe?

Strong RFITT and RCAP are only to be used for tumors and thyroid nodules. So far no development is planned, but I am still trying to convince OSTE.

7.) Is the use of the new ProBreath and ProSleep Plus applicator limited? And how many times can the applicator be used until the 1st/2nd warning comes up?

Yes, the use of the applicators is limited to a certain number of activations. One activation means one time pressing the foot pedal.

ProBreath:

Level 1 warning: 120 activations or 6000 Joule

Level 2 warning: 180 activations or 9000 Joule

ProSleep plus:

Level 1 warning: 80 activations or 8000 Joule

Level 2 warning: 120 activations oder 12000 Joule

8.) Where can I find information regarding reprocessing/ sterilization of the ProCut System?

All information regarding reprocessing/ sterilization can be found in the IFU document, which can be found and downloaded in the "My sales app"