



# GreenEgg™ Fluorescent Manipulator

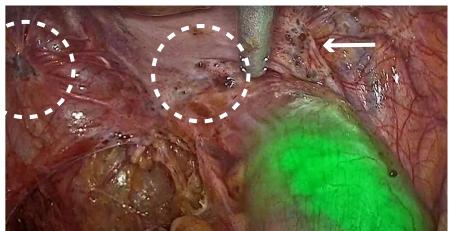
ENDO GLOW



The GreenEgg™ fluorescent surgical manipulator is used during minimally invasive gynecologic surgeries. By providing fluorescent transillumination, the GreenEgg™ enhances surgical visualization to highlight tissue depth, tissue quality and subsurface pathology.

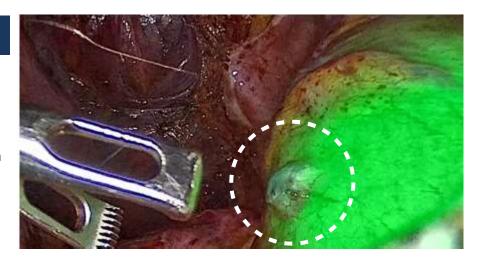
# Figure 1: Endometriosis

- This patient has severe endometriosis.
- The surgeon can see superficial endometriosis on the bowel.
- The GreenEgg<sup>™</sup> is in the rectum and provides fluorescence to assist the surgeon in evaluating for deep infiltrating endometriosis.
- None is seen.



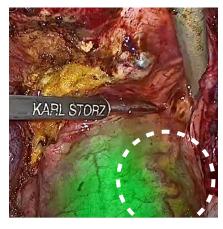
# **Figure 2: Rectal Endometriosis**

- The GreenEgg™ is in the rectum.
- The rectum is being evaluated for deep infiltrating endometriosis using NIR and the GreenEgg.
- A superficial nodule of endometriosis is seen and resected (picture at right).
- The NIR will be used to evaluate for bowel perforation and the potential need of repair.



## Figure 3: Vaginal Nodule

- The GreenEgg™ is in the vagina.
- Vaginal vasculature is highlighted along the right side of the vagina (picture on left).
- Vaginal endometriosis / nodule is identified (rightmost picture).
- After the vaginal endometriosis is removed, the GreenEgg™ and NIR are used to evaluate for residual endometriosis or an incidental vaginotomy.
- Neither are seen.



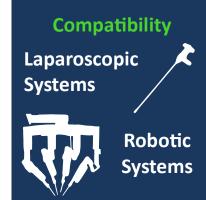




The GreenEgg™ fluoresces under near infrared imaging during minimally invasive surgery.

#### Use:

The GreenEgg™ can function as a standard vaginal or rectal manipulator during pelvic surgeries. Fluorescence is viewed on robotic and laparoscopic systems that have Near Infrared Imaging (NIR).



That have Near Infrared Imaging (NIR) option installed.

### **GreenEgg™ Features**



#### **Transillumination**

Fluorescent transillumination enhances tissue visualization: revealing sub-surface pathology, anatomical borders, tissue thickness and more.



### **Individually Sterilized**

The GreenEgg<sup>™</sup> is individually packaged and sterilized, making the GreenEgg<sup>™</sup> available with maximum repeatable fluorescence every time.



### **Fluorescence Without Time Limits**

GreenEgg™ fluorescence is available throughout the entire surgery.



### **Compatible Fluorescence**

The GreenEgg™ can be used in conjunction with intravenous ICG and other systemic dyes.



#### **Dye-Free Embedded Fluorescence**

The GreenEgg™ provides dye-free localized fluorescence that does not require injections.



#### Power Free Fluorescence

The GreenEgg™ provides fluorescence without batteries or external power.

Procedure	Issue	Solution	Impact
Endometriosis Resection	Standard imaging does not provide enough visualization regarding depth of resection.	GreenEgg™ fluorescence transilluminates tissue to give more visual information, including depth.	<ul> <li>Superior identification and removal of endometriosis.</li> <li>Better patient outcomes.</li> <li>Superior visualization allows the surgeon to make better decisions.</li> </ul>
Endometriosis Resection	Standard imaging does not provide enough visualization to evaluate for residual endometriosis.	The GreenEgg™ transilluminates tissue to highlight subsurface pathology.	<ul> <li>Visual confirmation of complete endometriosis resection.</li> <li>More complete removal of endometriosis reduces pelvic pain in patients.</li> </ul>
Resection of Infiltrating Endometriosis	Deep infiltrating rectal endometriosis can be missed without the use of a proctoscope or advanced imaging.	GreenEgg™ fluorescence transilluminates the tissue to reveal infiltrating endometriosis.	<ul> <li>Superior identification and removal of endometriosis without the use of a proctoscope.</li> <li>Decreased operative time and sterilization costs.</li> </ul>

Gomez-Rosado, J. C., et al. (2018). "Economic Cost Analysis Related to Complications in General and Digestive Surgery." Cir Esp 96(5): 292-299.4. Katz, R., et al. (2003). "Operative management of rectal injuries during laparoscopic radical prostatectomy." Urology 62(2): 310-313. Sheikh, L., et al. (2019). "Counting the costs of complications in colorectal surgery." N Z Med J 132(1497): 32-36. https://www.mdsave.com/procedures/sigmoidoscopy-proctosigmoidoscopy/d783f9c4; accessed 6/24/2019.











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