FOX CHASE CANCER CENTER
TEMPLE HEALTH

# TANDACT Trocar

FUJIFILM
Value from Innovation

# One Hand – Complete Control

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## I. Background

Current Hurdles moving towards Reduced Port Surgical Techniques:

1) Congestion of Surgical Fields as we move towards Reduced Port Surgical Approaches
2) Choice of primary surgeon to use second hand to operate or control camera

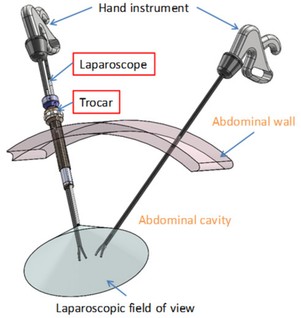
**Improved Clinical Work Flow**

**"Surgeon Complete Control"**





**Solution:**
The FUJIFILM TANDACT Trocar is designed for the tandem use of laparoscope and hand instruments through a single port site in the abdominal cavity. This also expands the surgeon's control to two 5 mm operating instruments and total visual control (ie – camera operation of a Hi Def ultra-slim 3.8mm laparoscope.)




## II. Product

### A Paradigm Shift in Minimally Invasive Surgical Endoscopy
### The FUJIFILM TANDACT Trocar

**One hand. Improved Workflow. Complete control.**

A true paradigm shift in minimally invasive surgical endoscopy, FUJIFILM's TANDACT Trocar is a novel tandem motion visualization device providing surgeons the ability to simultaneously manipullate a laparoscope and a hand instrument with one incision, with one hand to perform surgical procedures in the abdomen.

The TANDACT Trocar is compatible with FUJIFILM's 3.8mm Ultra-Slim HD video laparoscope that is designed to deliver unsurpassed accuracy in details, excellent color fidelity, and sharp display quality.

**Procedure Intuitiveness**

- Tandem visualization control found in the TANDACT Trocar is designed to help improve camera and device workflow, requiring just one hand to operate both the high quality visualization camera and a device
- TANDACT Trocar's lens cleaning function aids visualization and can mean less need for scope withdrawal during an operation
- TANDACT Trocar is compatible with most common devices up to 5mm outer diameter

**Less invasive**

- May reduce the number of the site entries fro camera and hand instrument
- Provides the potential to reduce the number of post-surgical scars

**Economic advantage**
Allows for the potential to reduce the number of scope operators needed for a procedure




**EL-R740S Video Laparoscope**

"Chip on the tip" technology with HD quality

- A revolutionary pixel design that delivers the attending surgeon accuracy in details, maximized color fidelity, and sharp display quality.
- Autofocus: free range 3mm – 120mm
- Auto white balance
- Less fogging with optimal illumination

Low Profiles Superior usability with one touch connection

- Low profile ergonomic handle design increases user comfort and maneuverability.
- "All in One" single smart design enable "Plug and Play" to avoid extra preparation work
- Autoclavable with reliable hygiene properties




## III. Results

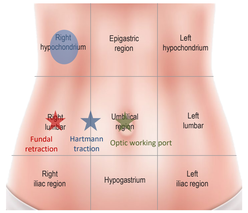
- A total of 9 cases including Cholecystectomy, Appendectomy, Bilateral salpingo-oophorectomy and Right salpingo-oophorectomy were completed using the TANDACT trocar.
- No adverse event or complications were reported.

| Case | # of Cases | Procedure Time [min] | # of Ports |
|---|---|---|---|
| Cholecystectomy | 3 | 90-125 | 2 |
| Bilateral salpingo-oophorectomy | 4 | 70-158 | 2 |
| Right salpingo-oophorectomy | 1 | 148 | 2 |
| Appendictomy | 1 | 65 | 2 |

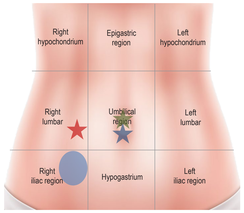
**Port positioning**

- Target Organ
- TANDACT Trocar w/ Ultraslim Laparoscope
- Secondary Port
- Third Port

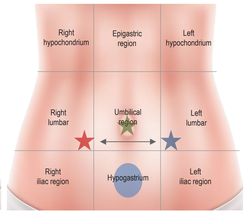
**Cholecystectomy**
(Reduced site approach)




**Appendectomy**
(Reduced site approach)




**Oophorectomy**




## IV. Conclusions

- This study was an initial feasibility evaluation at a single surgical center
- As a proof of concept the FUJIFILM TANDACT Trocar was found to be safe and feasible for high volume laparoscopic surgical procedures (Cholecystectomy, Appendectomy and Oophorectomy)
- Larger studies are needed to quantify the potential improvement in procedure time, alternative workflow approaches, and cost.

### Clinical Assessment Summary

- Evaluated Applicable Specialty / Procedures
  - **General Surgery**
    - Cholecystectomy
    - Appendectomy
  - **Gynecology**
    - Oophorectomy
- Identified potential patient population restrictions
  - Lower BMI
  - Low VISCERAL FAT
  - Less Adhesion and Fibrosis
  - No prior surgeries
  - Patient Height
- Initial learning curve may be anticipated with reduced port placement and the surgical scope and hand instrument interaction

NEVER STOP