

Minimally Invasive Thoracic and Lumbar Spinal Surgery with VITOM® Spine

ROSENTHAL Recommended Sets



VISUALIZATION
ERGONOMICS
TRAINING/EDUCATION
DOCUMENTATION

Introduction

Minimally invasive surgery is playing an ever greater role in spinal surgery interventions. In cooperation with Dr. Rosenthal (Bad Homburg, Germany), KARL STORZ has now developed new recommended set configurations for lumbar and thoracic spinal surgery, which are described below. Dr. Rosenthal uses the innovative VITOM® Spine for visualization.

Retractor Systems

The following retractor systems are offered in the new ROSENTHAL instrument sets for the creation and maintenance of the minimally invasive approach:

- The **thoracic retractor system** consists of retractor blades, which are available in different lengths and can each be fixed to a holding arm. The retractor blades of Dr. Rosenthal's thoracic system are universally applicable. They have been specially developed for use in small, open approaches for the retraction of soft tissue. The freely adjustable angle of the retractor blades, which can be changed without opening the holding arm, allows the optimal preparation and visualization of deep-seated areas. The retractor blades are suitable for both dorsal and ventral approaches.
- The **lumbar, tubular retractor system** consists of trocars, which are available in different diameters and can also each be fixed to a holding arm. These trocars offer the possibility of operating on different disc levels via a single approach. The approach to the spine is created using a sequential dilation system, which opens the musculature gently without transecting it.

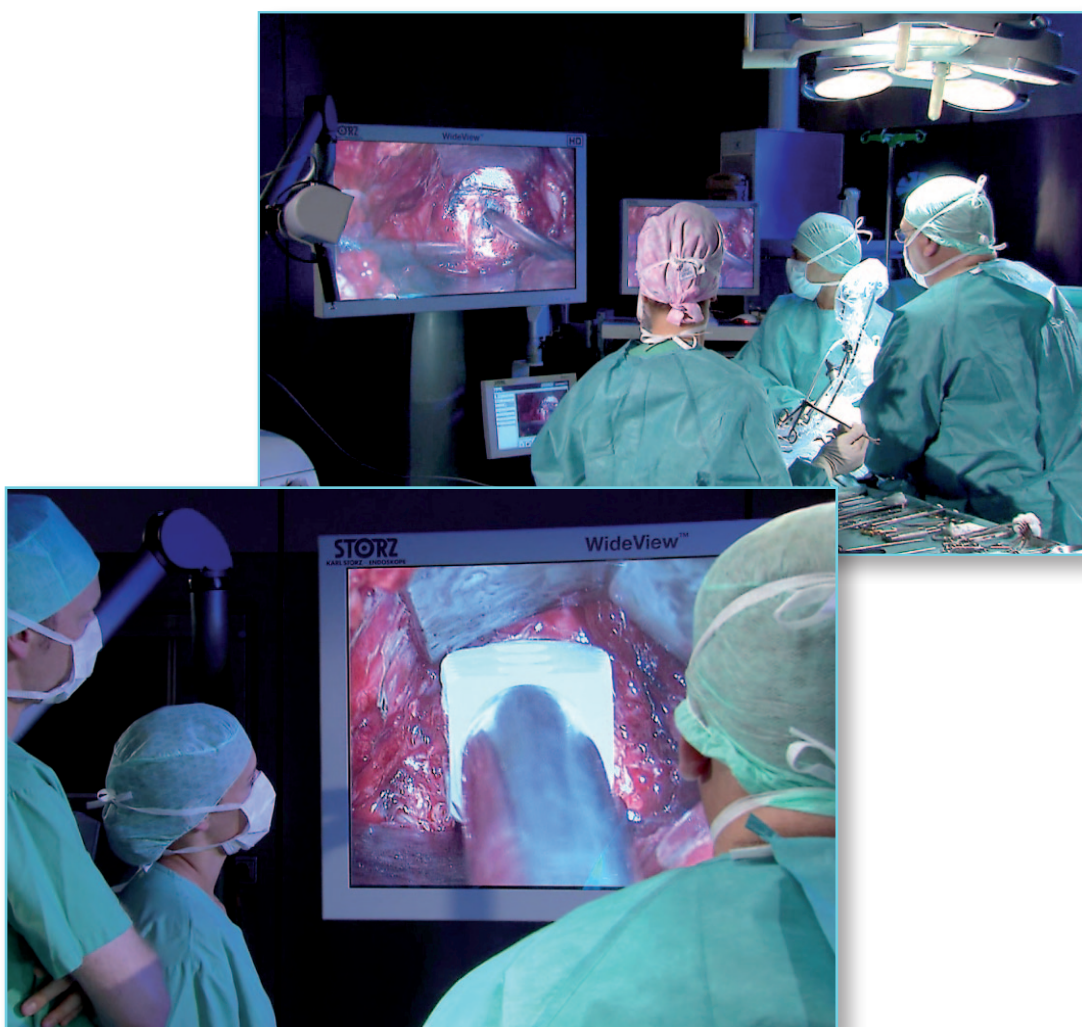
Both retractor systems can be combined perfectly with the VITOM® Spine telescope.

Visualization with VITOM® Spine

The VITOM® Spine system represents an innovative way of displaying surgical procedures in a comfortable and high quality manner. The VITOM® Spine is based on the globally recognized **HOPKINSII**® rod lens system from KARL STORZ.

The VITOM® Spine can be used on the cervical, thoracic, and lumbar spine with any available instrument and offers outstanding depth of field, magnification, contrast, and color reproduction, which are the prerequisites for good FULL HD visualization and documentation. In addition, a FULL HD monitor can be used to display the excellent, magnified image conveniently for the surgeon, assistants, and the whole OR team. The VITOM® Spine is thus also ideal for training and education. Moreover, it is also possible to improve both the workflow in the OR and the coordination of the OR team.

Furthermore, the VITOM® Spine features integrated illumination, which can be intensified using the optionally available illuminator. The combination of VITOM® Spine with the FULL HD imaging solutions from KARL STORZ offers optimal efficiency.

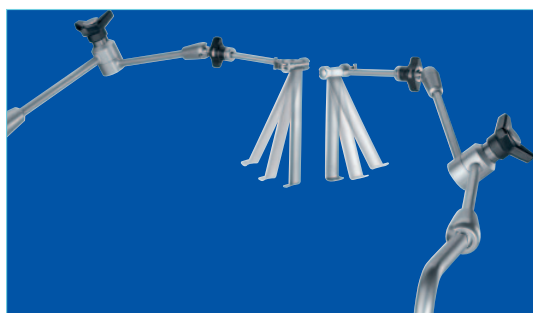


The VITOM® Spine is positioned at a distance of 25-60 cm above the surgical field with the use of a holding arm. This provides the surgeon with plenty of working space. Due to the slim and compact design of VITOM® Spine, the surgical field is not blocked and even long instruments can be used with ease.

Overview: ROSENTHAL Recommended Sets

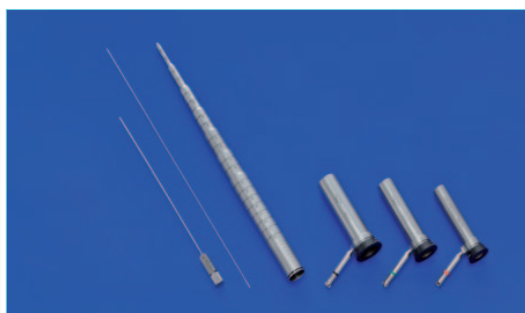
VISUALIZATION
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A: Thoracic

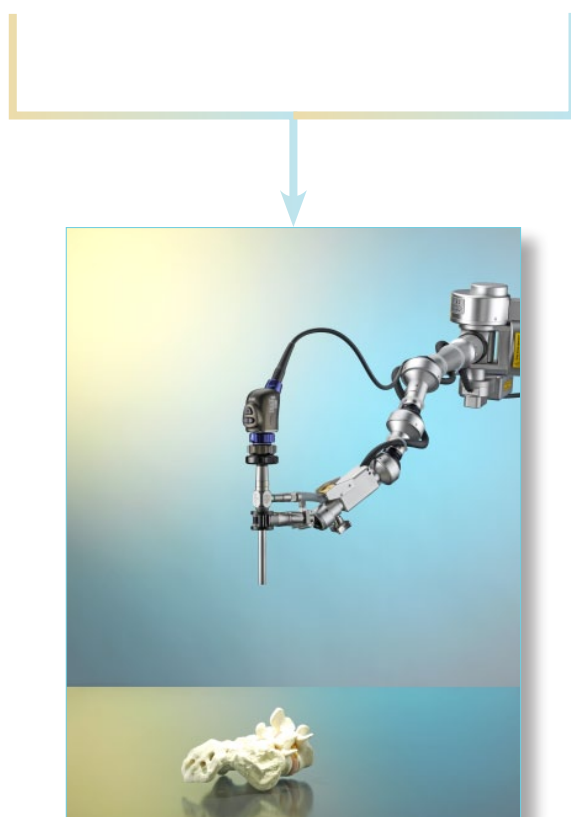


The ROSENTHAL thoracic retractor system 28163 VR, which is included in the **ROSENTHAL recommended set for thoracic spinal surgery with the VITOM® Spine**.

B: Lumbar



The lumbar, tubular retractor system, which is included in the **ROSENTHAL recommended set for lumbar spinal surgery with the VITOM® Spine**.



VITOM® Spine

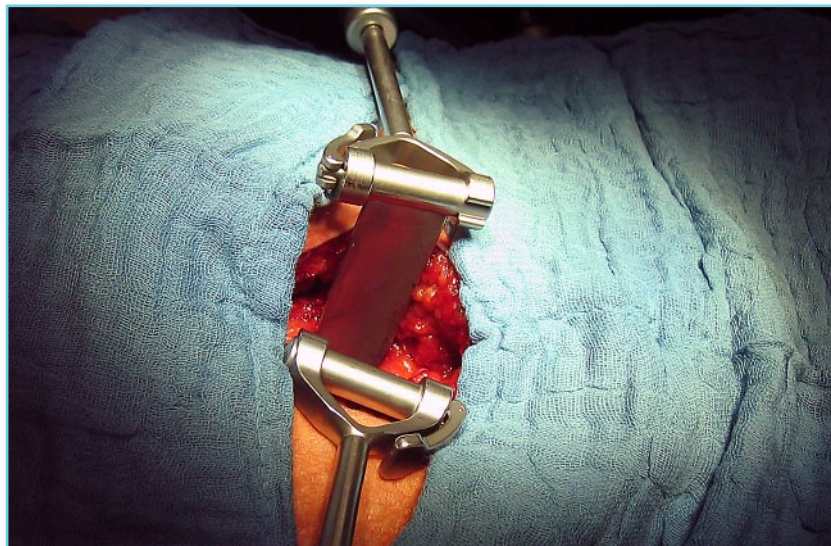
A: Thoracic Spinal Surgery with the VITOM® Spine

VISUALIZATION
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The thoracic VITOM® Spine instrument set, which was developed in cooperation with Dr. Rosenthal, is used for typical indications of open or minimally invasive thoracotomies, such as scoliosis, kyphosis, fractured vertebral bodies, and thoracic disc herniations.

The patient is positioned on the side for thoracic interventions. Angulation of the table in the section between the thorax and the abdomen expands the intercostal spaces.

Following the initial incision and preparation of the tissue, the specially developed ROSENTHAL thoracic spinal retractor represents an optimal aid for the surgeon when exposing the operating field. This new retractor system is used for maintaining the access for ventral and lateral approaches.



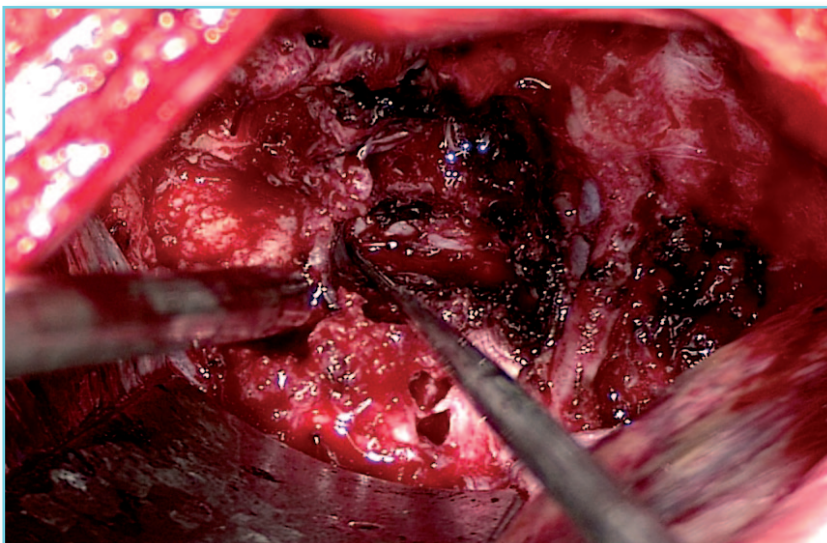
The retractor is assembled using articulated stands; one articulated stand is required for every retractor blade, which is fixed to the stand by using the KSLOCK. Typically, at least two retractor blades are utilized for a thoracic intervention. However, the configuration can be customized, i.e., you can also use three retractor blades or more (as well as the corresponding number of articulated stands).

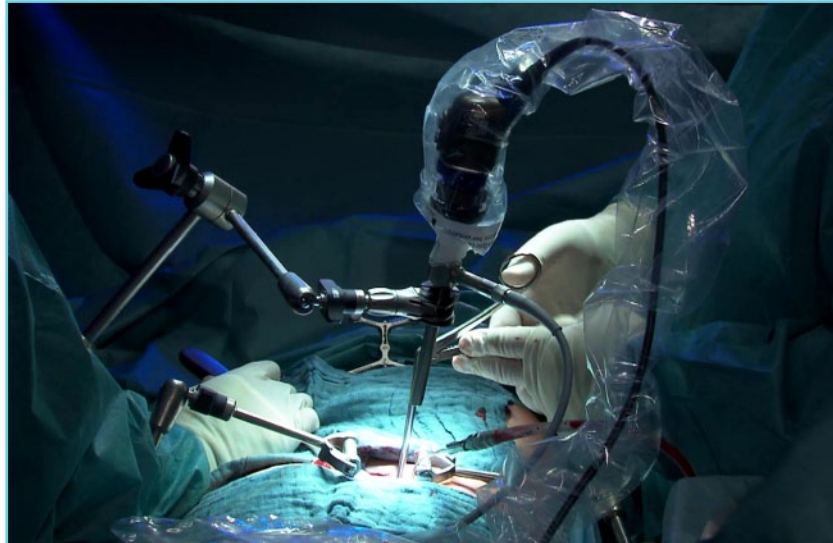
The retractor blades are available in three lengths (12 cm, 14 cm, and 18 cm), and are distinguished by the deflection capacity of the individual blades. Distally, the blades are rounded in order to avoid trauma or tissue damage.



The retractor blades can be used with a mechanical holding arm or the ENDOCRANE™ piezoelectric holding system. On both holding systems, the respective retractor blade can be fixed in place using the KSLOCK.

The surgeon may use his preferred system for the visualization, e.g., the operating microscope or the VITOM® Spine. The retractor system can be used optimally with the VITOM® telescope and forms the complete set when used in combination with the corresponding instrument set.





Advantages of Thoracic Spinal Surgery with the VITOM® Spine

- Efficient system with simple handling
- Short learning curve as no need to learn new surgical techniques
- Minimally invasive approach with low tissue trauma
- Excellent intraoperative illumination and visualization for the entire OR team including the scrub nurse and anesthetist
- Suitable for access to the thoracolumbar and cervicothoracic areas
- Flexibility and optimal approach thanks to the range of different retractor blade lengths available and the simple fixation to holding arms – this no longer requires an additional assistant
- Atraumatic rounded blades avoid tissue damage
- Surgeon can work comfortably as, thanks to the distance of the VITOM® telescope (25–60 cm), the work area is not restricted
- Reduced costs thanks to atraumatic approach and low personnel requirements

VITOM® SPINE
for the Thoracic Spine
Basic equipment



VITOM® SPINE and accessories

- ① 28095 VA **VITOM® SPINE Straight forward optic** 0°, HOPKINS® II, working distance 25-60 cm, diameter 10 mm, length 11 cm, autoclavable, fiber optic light transmission incorporated, color code: green
- ② 20918020 **VITOM® 25 Distance Rod**, length 25 cm
- ②⑧ 495 NCS **Fiber Optic Light Cable**, with straight connector, extremely heat-resistant, diameter 4.8 mm, length 250 cm (not pictured)
- ②⑨ 28272 RGB **Holding System, autoclavable**, with quick release coupling KSLOCK
- ③ 28272 C **Clamping Cylinder**, 10 mm, for flexible mounting of 10 mm telescopes to telescope sheath, **autoclavable**. The clamping cylinder allows vertical movement and rotation of the telescope.

Thoracic, modular retractor system

- ④ 28163 VR ROSENTHAL **Angled Retractor**, with movable retractor blades, in three lengths, can be clamped to the holding arm with the KSLOCK

Recommended instruments

- ⑤ 33321 ML **CLICKlinē KELLY Dissecting and Grasping Forceps**, rotating, dismantling, insulated, with connector pin for unipolar coagulation, LUER-Lock connector for cleaning, double action jaws, long, size 5 mm, length 36 cm
- ⑥ 33321 UL **CLICKlinē REDDICK-OLSEN Dissecting and Grasping Forceps**, rotating, dismantling, insulated, with connector pin for unipolar coagulation, with irrigation connector for cleaning, double action jaws, robust, size 5 mm, length 36 cm
- ⑦ 33321 R **CLICKlinē Dissecting and Grasping Forceps**, rotating, dismantling, insulated, with connector pin for unipolar coagulation, double action jaws, right angled, size 5 mm, length 36 cm
- ⑧ 34321 MS **CLICKlinē METZENBAUM Scissors**, rotating, dismantling, insulated, with connector pin for unipolar coagulation, double action jaws, curved, length of blades 12 mm, size 5 mm, length 36 cm
- ⑨ 28163 BSN **TAKE-APART® Bipolar Coagulating Suction Tube**, with stopcock, size 5 mm, length 30 cm
- ⑩ 26276 HK **TAKE-APART® SCHNEIDER Bipolar Grasping Forceps**, with connector pin for bipolar coagulation, with movable inner sheath and non-retracting jaws, powerful jaws, size 5 mm, length 33 cm
- ⑪ 26276 HD **TAKE-APART® MANHES Bipolar Coagulating Forceps**, width of jaws 3 mm, size 5 mm, length 33 cm
- ⑫ 28163 PKG KERRISON **Bone Punch**, 90° upbiting, not through-cutting, 3 mm, round sheath diameter 10 mm, working length 30 cm
- ⑬ 28163 PGG KERRISON **Bone Punch**, 90° upbiting, not through-cutting, 5 mm, round sheath diameter 10 mm, working length 30 cm
- ⑭ 28163 PKS KERRISON **Bone Punch**, 40° upbiting, not through-cutting, 3 mm, round sheath diameter 10 mm, working length 30 cm
- ⑮ 28163 RGG **Rongeur**, jaw 8 mm, round sheath diameter 10 mm, working length 30 cm
- ⑯ 28163 RKG **Rongeur**, jaw 5 mm, round sheath diameter 10 mm, working length 30 cm
- ⑰ 28163 UK **Spoon Forceps**, round, single action jaws, diameter 2.5 mm, working length 30 cm
- ⑱ 28162 ZE **Biopsy Forceps**, single action jaws, diameter 2.7 mm, working length 30 cm
- ⑲ 28163 UM **Spoon Forceps**, oval, single action jaws, diameter 2 mm, working length 30 cm
- ⑳ 28163 MS **Tappet**, blunt, grooved, for positioning the bone implant, size 10 mm, working length 30 cm
- ㉑ 28163 MF **Raspatory**, for dissection, size 7 mm, working length 30 cm
- ㉒ 28163 WC **Curette**, sharp, spoon-shaped, oval, 3.5 x 5 mm, working length 30 cm
- ㉓ 28163 GH **Palpation Hook**, hook angled 90°, blunt, diameter 5 mm, working length 36 cm
- ㉔ 28163 GI **Spoon Curette**, sharp, 4 x 6 mm, diameter 5 mm, working length 36 cm
- ㉕ 28163 GK **Spoon Curette**, sharp, 3 x 4 mm, diameter 5 mm, working length 36 cm
- ㉖ 28163 GL **Spoon Curette**, sharp, 3 x 4 mm, spoon angled 45°, diameter 5 mm, working length 36 cm
- ㉗ 28163 RR **Raspatory**, diameter 5 mm, working length 36 cm

B: Lumbar Spinal Surgery with the VITOM® Spine

VISUALIZATION
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The tubular VITOM® Spine instrument set can be used for all types of lumbar disc herniations, from medial to lateral spinal canal and foraminal stenoses as well as cervical disc herniations and stenoses. For this system we recommend a posterior approach, whereby the VITOM® Spine can of course also be used for anterior approaches.

The ROSENTHAL lumbar, tubular retractor system is used to create and maintain the approach during minimally invasive interventions of the lumbar spine through a posterior approach. Following the initial incision, which varies depending on the size of the trocar, the sequential dilation set is used to place the approach atraumatically, without damaging the musculature.

The approach is performed via the respective dilation sleeves and the trocar, which is fixed to the holding arm using the KSLOCK. However, the configuration is very flexible as further dilation for the larger trocars is possible at any time.

The trocars are available in diameters of 15 mm, 19 mm, and 23 mm. To prevent reflections, we recommend the use of the corresponding glare shields on the proximal end of the trocar. The VITOM® Spine is positioned over the site using the holding system, which guarantees optimal vision.

The corresponding microinstrument set complements the set, with which all operations on the lumbar spine are possible.

As in the thoracic set, it is also possible to use the mechanical holding arm or the ENDOCRANE™ piezoelectric holding system to fix the trocars to the KSLOCK.

Just as in the thoracic approach, the surgeon can also continue to use his preferred system for visualization, e.g., the operating microscope or the VITOM® Spine.



Advantages of Lumbar Spinal Surgery with the VITOM® Spine

For surgeons:

- Easy and safe procedure with a standard bimanual microsurgical technique
- Short learning curve as operating technique is very similar to microsurgery
- Optimal vision thanks to the VITOM® Spine telescope, particularly in combination with the Full HD technology
- Optimal differentiation of the anatomic structures and thus gentle treatment of the nerve structures
- The lumbar, tubular system can be employed for practically all degenerative indications of the lumbar spine. The size of the trocar can be selected to suit the indication
- Use of a high-speed drill possible
- Sequential dilation system reduces muscle trauma
- Decompression of two levels with one approach possible
- Bilateral decompression via a unilateral approach
- Low complication rate

VITOM® SPINE
for the Lumbar Spine
Basic equipment



VITOM® SPINE and accessories

- ① 28095 VA **VITOM® SPINE Straight Forward Telescope** 0°, HOPKINS® II, working distance 25-60 cm, diameter 10 mm, length 11 cm, autoclavable, fiber optic light transmission incorporated, color code: green
- ② 20918020 **VITOM® 25 Distance Rod**, length 25 cm
- 495 NCS **Fiber Optic Light Cable**, with straight connector, extremely heat-resistant, diameter 4.8 mm, length 250 cm (not pictured)
- ② 28272 RGB **Holding System, autoclavable**, with quick release coupling KSLOCK
- 28272 C **Clamping Cylinder**, 10 mm, for flexible mounting of 10 mm telescopes to telescope sheath, autoclavable. The clamping cylinder allows vertical movement and rotation of the telescope (not pictured)

Lumbar, tubular retractor system

- ③ 28163 PL **Puncture Needle**, diameter 1.7 mm, working length 18 cm, with 1.4 mm opening for guide wire
- ④ 28163 KD **Guide Wire**, unsterile, diameter 1.2 mm, length 31 mm, package of 10
- ⑤ 28163 CNS **Dilation Sleeve**, graduated, O.D. 5.2 mm, I.D. 1.5 mm, length 23 cm, color code: white
- ⑤ 28163 COS **Same**, graduated, O.D. 8.9 mm, I.D. 5.3 mm, length 21 cm, color code: yellow
- ⑤ 28163 CPS **Same**, graduated, O.D. 8.9 mm, I.D. 5.3 mm, length 21 cm, color code: yellow
- ⑤ 28163 CQS **Same**, graduated, O.D. 14.9 mm, I.D. 12.9 mm, length 17 cm, color code: red
- ⑤ 28163 CRS **Same**, graduated, O.D. 16.9 mm, I.D. 15.1 mm, length 15 cm, color code: green
- ⑤ 28163 CSS **Same**, graduated, O.D. 18.9 mm, I.D. 17.1 mm, length 14 cm, color code: blue
- ⑤ 28163 CTS **Same**, graduated, O.D. 20.9 mm, I.D. 19 mm, length 13 cm, color code: black
- ⑥ 28163 GTG **EasyGO!® Trocar**, diameter 23 mm, working length 76 mm, for use with EasyGO!® Attachment 28163 GAG and Telescope 28095 BAK or EasyGO!® Attachment 28163 GGL and Telescope 28095 BAL
- ⑦ 28163 GTK **EasyGO!® Trocar**, diameter 19 mm, working length 74 mm, for use with EasyGO!® Attachment 28163 GAK and Telescope 28095 BAK or EasyGO!® Attachment 28163 GKL and Telescope 28095 BAL
- ⑧ 28163 GTM **EasyGO!® Trocar**, diameter 15 mm, working length 70 mm, for use with EasyGO!® inserts and according telescope
- ⑥ 28163 VBG **Glare shield**, diameter 23 mm, for use with EasyGO!® trocar 28163 GTG
- ⑦ 28163 VBK **Glare shield**, diameter 19 mm, for use with EasyGO!® trocar 28163 GTK
- ⑧ 28163 VBM **Glare shield**, diameter 15 mm, for use with EasyGO!® trocar 28163 GTM
- 28272 HB **Articulated Stand**, reinforced version, L-shaped (not pictured)
- 28272 HR **Socket** (not pictured)

Recommended instruments

- ⑨ 28163 BXB **Suction Tube**, O.D. 5.0 mm, working length 23 cm, angled distally beaded
- ⑩ 28163 BXS **Same**, O.D. 2.5 mm
- ⑪ 28164 MRA **Ring Curette**, bayonet-shaped, 45° curved upwards, sharp, diameter 2.5 mm, with round handle, working length 16 cm
- ⑫ 28164 MRB **Same**, diameter 5 mm
- ⑬ 28164 MRC **Same**, diameter 7 mm
- ⑭ 28164 MDB **MORTINI Dissector**, “dead hand”, bayonet shaped, 3 mm, curved upwards, with round handle, working length 16 cm
- ⑮ 28163 GBH **Palpation hook**, distally 90° angled with ball and working length 20 cm, bayonet shaped
- ⑯ 28163 NBB **Nerve Hook**, distal 5 mm, bayonet-shaped, working length 15 cm
- ⑰ 28164 BPA **Bipolar Coagulating Forceps**, insulated, bayonet-shaped, blunt, tip 0.7 mm, working length 12 cm, total length 23 cm
- ⑱ 28164 BPC **Same**, tip 0.3 mm
- ⑲ 28164 BPB **Same**, tip 0.7 mm, working length 14 cm, total length 25 cm
- ⑳ 26184 HCS **TAKE-APART® MANHES Bipolar Coagulating Forceps**, width of jaws 1 mm, size 3 mm, working length 20 cm
- ㉑ 30321 MWS **CLICK!line Scissors**, rotating, dismantling, with connector pin for unipolar coagulation, with LUER-Lock connection for cleaning, double action jaws, serrated, curved, conical, size 3 mm, length 20 cm
- ㉒ 28163 CC **Spoon Forceps**, robust, oval, single action jaws, spoon size 3 x 10 mm, working length 20 cm
- ㉓ 28163 BKD **KERRISON Punch**, bayonet-shaped, downbiting 40° forward, 2 mm, working length 17 cm
- ㉔ 28163 BKU **Same**, upbiting 40° forward
- ㉕ 28163 CFB **KERRISON Bone Punch**, 40° upbiting, not through-cutting, 4 mm, working length 24 cm
- ㉖ 28163 DF **Bone Punch**, upbiting 45° forward, not through-cutting, 3 mm, working length 18 cm

Holding Systems

A mechanical holding system, the POINT SETTER® pneumatic holding system or the ENDOCRANE™ piezoelectric holding system are provided for the fixation of the VITOM® Spine above the site.



- 28272 RGB **Holding System, autoclavable**, with KSLOCK quick release coupling, consisting of:
- Rotation Socket**, to clamp to the OR table, for European and US standard rails, with lateral clamp for height and angle adjustment of the articulated stand
 - Articulated Stand**, reinforced version, L-shaped, with one central clamp for all five joint functions, height 48 cm, swivel range 52 cm, with KSLOCK quick release coupling (female)
 - Clamping Jaw**, metal, for use with all square-headed KARL STORZ HOPKINS® telescopes, clamping range 16.5 to 23 mm, with KSLOCK quick release coupling (male)



- 28163 WS **POINT SETTER®**, pneumatic holding arm, set, including:
- POINT SETTER® arm with OR table connecting adaptor
 - Universal Adaptor 10-15 mm
 - Universal Adaptor 5-10 mm
 - Universal Adaptor 10-15 mm, pediatric
 - Connecting Tube 6 m
 - Case for POINT SETTER® Arm
 - Drape for POINT SETTER®, sterile, package of 10



- 28272 EH **ENDOCRANE™**, Piezoregulated Holding Arm, including stand, including:
- Socket**, to clamp to the OR table
 - Control Unit**
 - Cover**, sterile, package of 25
 - Spring Balance**
 - Mains Cord**



40 7117 01-1 KARL STORZ UNIDRIVE® NEURO,
Motor system with colored display, touch screen operation, two engine exits, with integrated irrigation pump and integrated SCB-module. power supply 100–240 VAC, 50/60 Hz



20 7110 32 High Performance EC Micro Motor,
for use with KARL STORZ motor systems UNIDRIVE® NEURO and Connecting Cable **20 7110 72**



20 7110 72 Connecting Cable to connect UNIDRIVE® NEURO control unit to High Performance EC Motor **20 7110 32**



252479 INTRA-Handle, angled, extra long, shape, 18 cm, for use with straight shaft burs, length 12.5 cm, transmission: 1:1 (40,000 rpm)



649731 EL Diamond Straight Shaft Burr,
length 16.5 cm, size 031, 3.1 mm Ø

649745 EL Diamond Straight Shaft Burr,
length 16.5 cm, size 045, 4.5 mm Ø

- Maximum resolution and the consistent use of the 16:9 aspect ratio guarantee **FULL HD**
- Endoscopic camera systems have to be equipped with three-CCD chips that support the 16:9 input format as well as capturing images with a resolution of 1920 x 1080 pixels

The benefits of High Definition Technology (HD) for medical applications are

- Up to 6 times higher input resolution of the camera delivers more detail and depth of focus
- Using 16:9 format during image acquisition enlarges the field of vision and supports ergonomic viewing
- The brilliance of color enables optimal diagnosis
- Lateral view is enhanced by 32% when the endoscope is withdrawn slightly, providing the same image enhancement as a standard system. Any vertical information loss is restored and the lens remains clean



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22201011U102 **IMAGE 1 HUB™ HD Camera Control Unit (CCU) with SDI Module**

for use with IMAGE 1 HD and standard one- and three-chip camera heads, max. resolution 1920 x 1080 pixels, with integrated KARL STORZ SCB and integrated digital Image Processing Module, color systems PAL/NTSC, power supply 100 – 240 VAC, 50/60 Hz including:

Mains Cord

3x **BNC/BNC Video Cable**, length 180 cm

S-Video (Y/C) Connecting Cable, length 180 cm

Special RGB Connecting Cable

2x **Connecting Cable**, for controlling peripheral units, length 180 cm

DVI Connecting Cable, length 180 cm

SCB Connecting Cable, length 100 cm

Keyboard, with English character set

Specifications:

Signal-to-noise ratio	AGC	Video output			Input
IMAGE 1 HUB™ HD Three-chip camera systems ≥ 60 dB	Micro-processor-controlled	<ul style="list-style-type: none">- Composite signal to BNC socket- S-Video signal to 4-pin Mini DIN socket (2x)- RGBS signal to D-Sub socket- SDI signal to BNC socket (only IMAGE 1 HUB™ HD with SDI module) (2x)- HDTV signal to DVI-D socket (2x)			Keyboard for title generator, 5-pin DIN socket

Control output /input	Dimensions w x h x d (mm)	Weight (kg)	Power supply	Certified to:
<ul style="list-style-type: none">- KARL STORZ-SCB at 6-pin Mini DIN socket (2x)- 3.5 mm stereo jack plug (ACC 1, ACC 2),- Serial port at RJ-11- USB port (only IMAGE 1 HUB™ HD with ICM) (2x)	305 x 89 x 335	2.95	100 - 240 VAC, 50/60 Hz	IEC 601-1, 601-2-18, CSA 22.2 No. 601, UL 2601-1 and CE acc. to MDD, protection class 1/CF

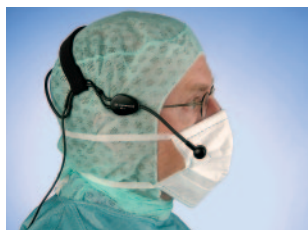
SDI: Serial Digital Interface: optimized to display medical images on flat screens, routing with OR1™ and digital recording with AIDA-DVD-M

ICM: USB-connector for recording video streams and stills on USB storage media or for connection of USB printers for direct printing of the recorded stills

Data Management and Documentation

KARL STORZ AIDA® compact NEO (HD/SD) – Brilliance in Documentation Continues!

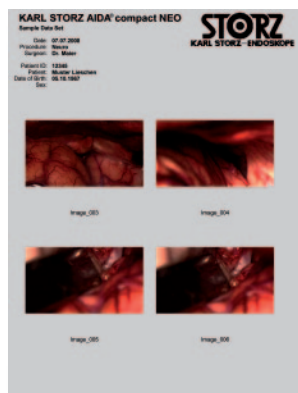
AIDA compact NEO from KARL STORZ combines all the required functions for integrated and precise documentation of endoscopic procedures and open surgeries in a single system.



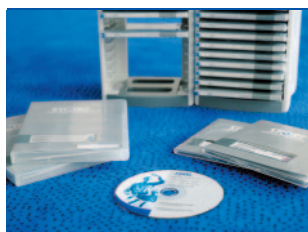
AIDA compact NEO:
Voice control



AIDA compact NEO:
Review screen



AIDA compact NEO: Automatic
creation of standard reports



AIDA compact NEO:
Efficient archiving

Data acquisition

Still images, video sequences and audio comments can be recorded easily during an examination or intervention on command by either pressing the on-screen button, voice control, foot switch or pressing the camera head button. All captured images will be displayed on the right hand side as a “thumbnail” preview to ensure the still image has been generated.

The patient data can be entered by the on-screen keyboard or by a standard keyboard.

Flexible post editing and data storage

Captured still images or video files can be previewed before final storage or can be edited and deleted easily in the edit screen.

Reliable storage of data

- Digital saving of all image, video and audio files on DVD, CD-ROM, USB stick, external/internal hard-drive or to the central hospital storage possibilities over DICOM/HL7
- Buffering ensures data backup if saving is temporarily not possible
- Continuous availability of created image, video and sound material for procedure documentation and for research and teaching purposes.

Efficient data archiving

After a procedure has been completed, KARL STORZ AIDA® compact HD/SD saves all captured data efficiently on DVD, CD-ROM, USB stick, external hard-drive, internal hard-drive and/or the respective network on the FTP server. Furthermore the possibility exists to store the data directly on the PACS respective HIS server, over the interface package AIDA communication HL7/DICOM.

Data that could not be archived successfully remains in a special buffered procedure until it is finally saved. A two-line report header and a logo can be used by the user to meet their needs.

Multi-session and Multi-patient

Efficient data archiving is assured as several treatments can be saved on a DVD, CD-ROM or a USB stick.

Features and Benefits

- Digital storage of still images with a resolution of 1920 x 1080 pixels, video sequences in 720p and audio files with AIDA compact NEO HD
- Optional interface package DICOM/HL7
- Sterile, ergonomic operation via touch screen, voice control, camera head buttons and/or foot switches
- Auto detection of the connected camera system on HD-SDI/SD-SDI input
- Efficient archiving on DVD, CD-ROM or USB stick, multi-session and multi-patient
- Network saving
- Automatic generation of standard reports
- Approved use of computers and monitors in the OR environment as per EN 60601-1
- Compatibility with the KARL STORZ Communication Bus (SCB) and with the KARL STORZ OR1™ AV NEO
- KARL STORZ AIDA® compact NEO HD/SD is an attractive, digital alternative to video printers, video recorders and dictaphones.



- 20 0409 10 **KARL STORZ AIDA® compact NEO SD Communication**, documentation system for digital storage of still images, video sequences and audio files, power supply 115/230 VAC, 50/60 Hz
- 20 0409 11 **KARL STORZ AIDA® compact NEO HD Communication**, documentation system for digital storage of still images, video sequences and audio files, power supply 115/230 VAC, 50/60 Hz
- 20 0406 10 **KARL STORZ AIDA® compact NEO SD**, documentation system for digital storage of still images, video sequences and audio files, power supply 115/230 VAC, 50/60 Hz
- 20 0406 11 **KARL STORZ AIDA® compact NEO HD**, documentation system for digital storage of still images, video sequences and audio files, power supply 115/230 VAC, 50/60 Hz

Specifications:

Video Systems	- PAL - NTSC
Signal Inputs	- S-Video (Y/C) - Composite - RGBS - SDI - HD-SDI - DVI
Image Formats	- JPG - BMP

Video Formats	- MPEG2
Audio Formats	- WAV
Storage Media	- DVD+R - DVD+RW - DVD-R - DVD-RW - CD-R - CD-RW - USB stick



ENDOWORLD®

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