



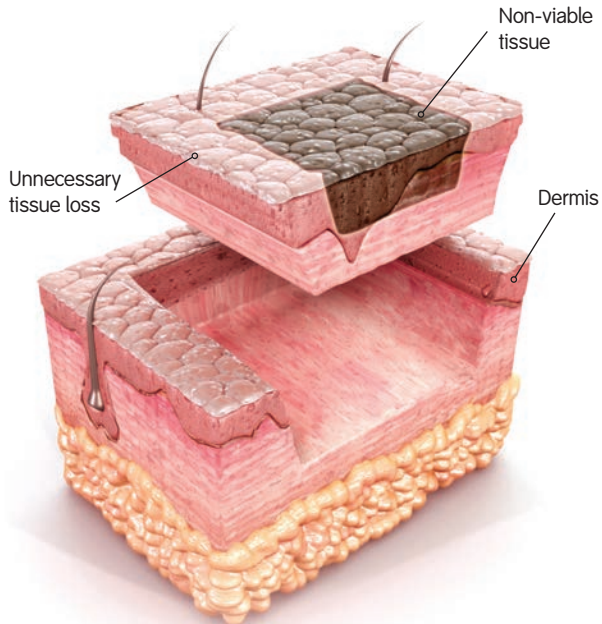
 **smith&nephew**
VERSAJET[®] II
Hydrosurgery System

Precise excision

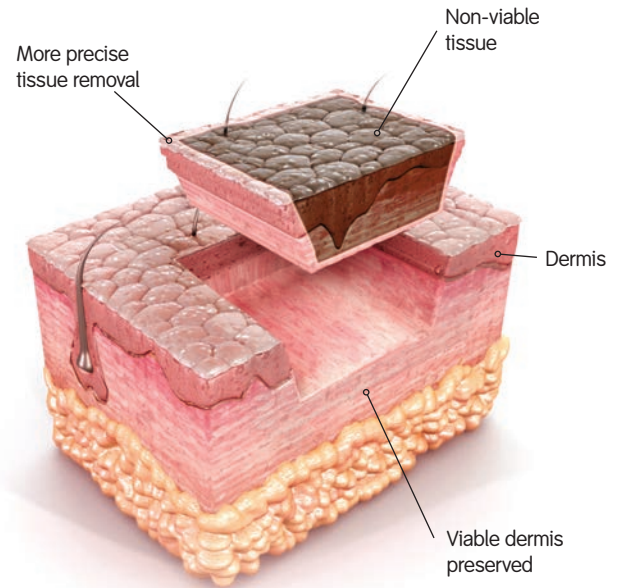
Preserve viable tissue and reduce time to closure^(1,2)

Precision to preserve

Conventional surgical excision

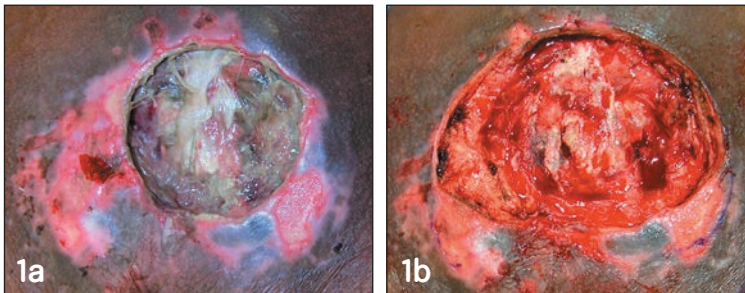


VERSAJET[®] II excision



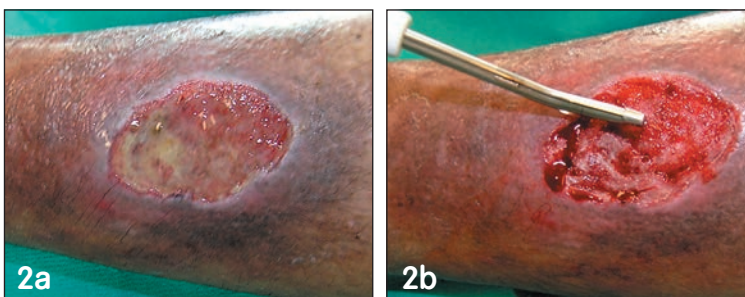
Adapted from Cubison TC, Pape SA, Jeffery SL. *Burns*. 2006;32:714-720.

Achieving maximum tissue preservation



Tissue loss

Centripetal debridement:
Stage IV sacral decubitus ulcer before (1a) and after (1b) conventional surgical excision⁽⁶⁾



Tissue preservation

Centrifugal debridement:
Chronic lower extremity ulcer before (2a) and after (2b) precise VERSAJET excision⁽⁶⁾

Adapted from Abernathie B, Granick MS. *J Wound Technol*. 2009;5:10-11.

Precisely control the depth of debridement⁽⁷⁾

Tangential excision (Goulian knife, 10 guard)	Excises at an average depth of 750 μ m ⁽⁷⁾
VERSAJET system	Enables precise excision at a minimum depth of 50 μ m ⁽⁷⁾

Precise excision

Optimize surgical debridement with the VERSAJET[®] II Hydrosurgery System

The VERSAJET II Hydrosurgery System enhances preservation of viable tissue during surgical debridement and reduces time to closure, while streamlining excision through procedural efficiency that delivers consistent clinical and economic value.

The VERSAJET II system enables a surgeon to precisely select, excise and evacuate nonviable tissue, bacteria and contaminants from wounds, burns and soft tissue injuries using a tissue-preserving technique.^(1,3)

Advanced hydrosurgery technology helps reduce time to closure, which may reduce overall treatment cost.^(1,3,4)



Precision and control

Experience the cutting edge of advanced hydrosurgery

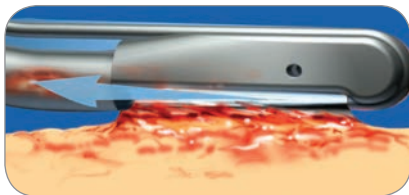
The VERSAJET II system uses a high-pressure stream of sterile saline to optimize surgical debridement.^(1,3,5) As the handpiece moves tangentially across the wound, the device's razor-thin saline jet rapidly removes necrotic tissue, bacteria and debris — sparing the surrounding viable tissue.⁽¹⁻⁵⁾

The VERSAJET II system quickly prepares a cleaner, more uniform wound bed, simultaneously addressing multiple barriers to healing.⁽²⁻⁴⁾

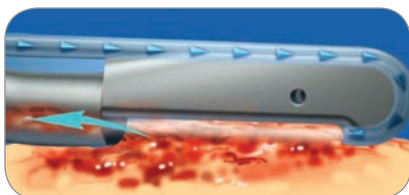
Tangential movement with a high-speed saline jet



Selects
Target necrotic tissue and debris using the localized vacuum^(1,3-5)



Excises
Ablate nonviable tissue with maximum precision^(1,3-5)



Evacuates
Remove debris and slough while preserving viable tissue^(1,3-5)

Precision and performance

Clinical efficacy

Helps reduce time to wound closure^(1,2)

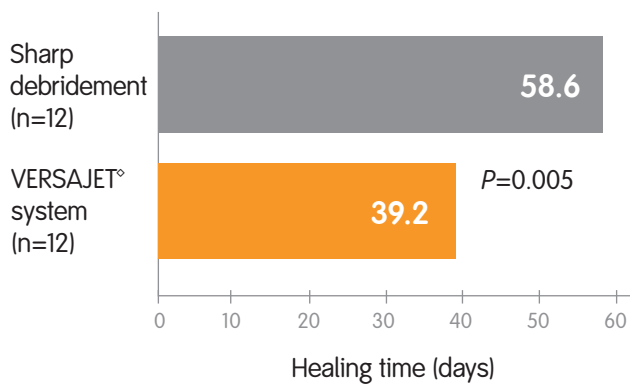
Creates a smooth wound bed for improved graft and synthetic dressing results⁽⁴⁾

Reduces bacterial burden, removes soft tissue biofilm and other inhibitory elements⁽¹⁻³⁾

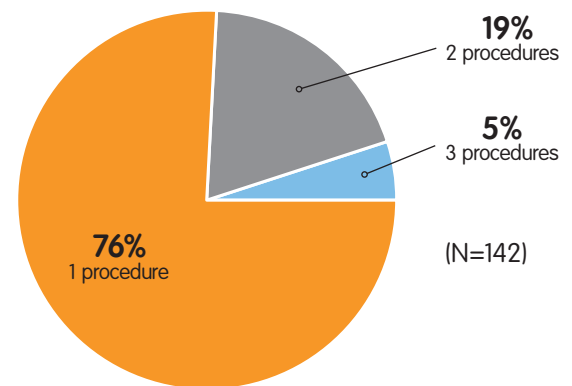
Removes unwanted tissue and contaminants, while preserving healthy tissue^(1,3,5)

Accesses difficult-to-reach and contoured areas with ease and control⁽⁵⁾

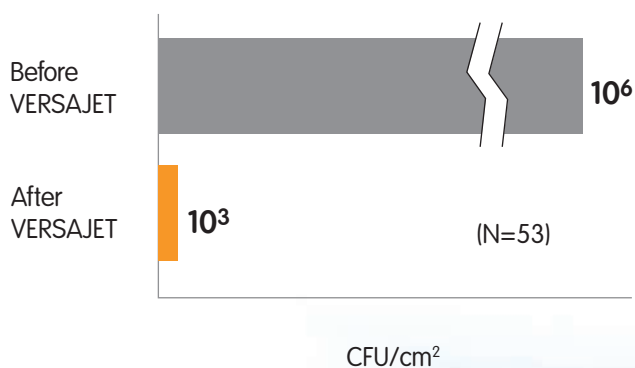
Reduced wound closure time by 33%⁽⁸⁾



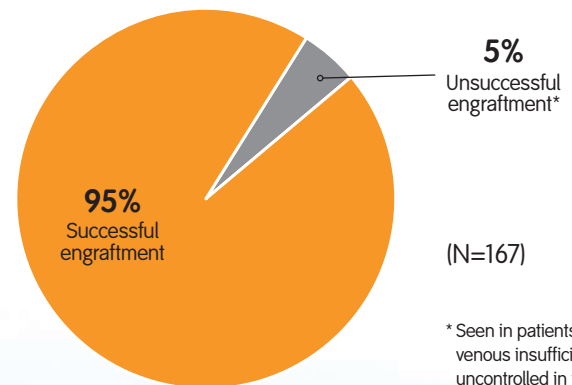
One operative procedure required in 76% of patients⁽²⁾



Reduced bacterial burden by log₁₀³⁽²⁾



Immediate coverage successful in 95% of graft procedures⁽⁴⁾



* Seen in patients with venous insufficiency left uncontrolled in the post-operative period.

The VERSAJET II system

Targets devitalized tissue

Preserves healthy tissue

Precision and value

Cost effectiveness

Requires fewer debridement procedures, which may improve profitability⁽¹⁾

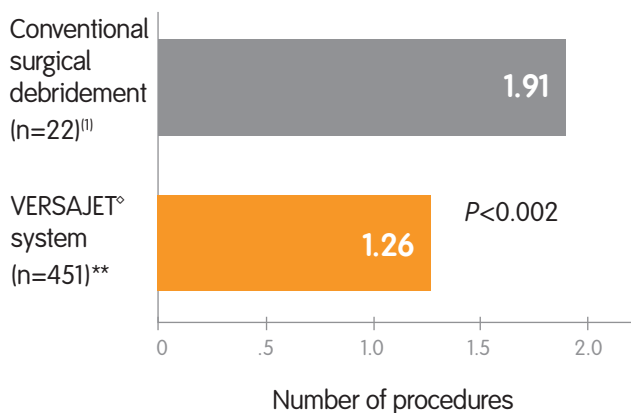
Helps reduce time to closure, which may shorten hospital stay^(1,2)

Removes bacteria to help reduce the risk of infection^(1,3)

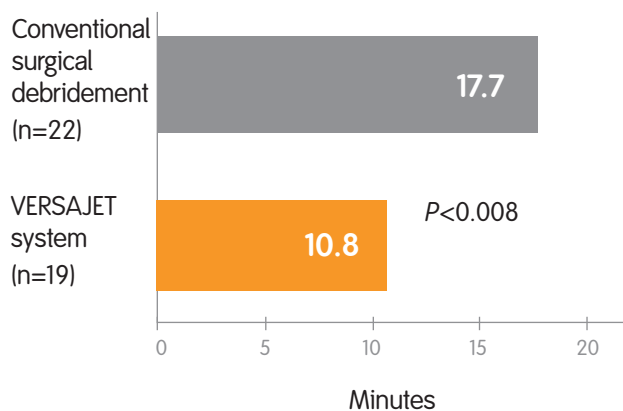
Minimizes procedure time, thereby increasing blockable OR time^(1,3,9)

Uses fewer instruments/supplies, potentially reducing cost per procedure⁽⁹⁾

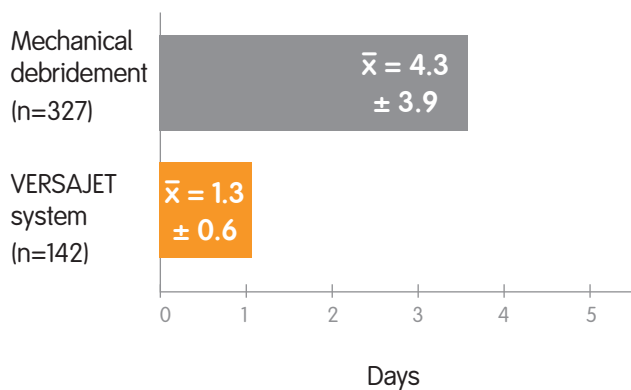
Savings of \$2200 per patient as a result of fewer procedures⁽¹⁾



Reduced debridement time by 39% per patient⁽⁹⁾



Reduced hospital length of stay by approximately 3 days⁽²⁾



“In a system, that relies on prospective payment based on diagnosis, any reduction in the number of surgical procedures directly impacts hospital profit margins.”⁽¹⁾

Reduces closure time

Lowers treatment cost

Improves outcomes



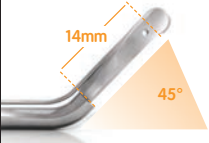
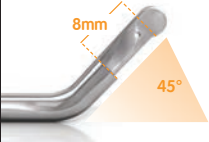
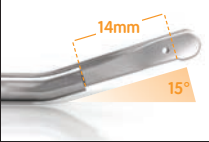



Ordering information

VERSAJET[®] II Hydrosurgery System

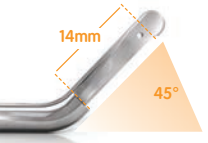
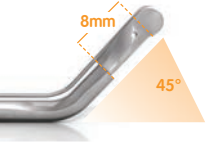
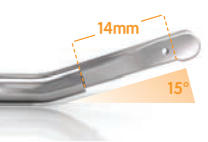


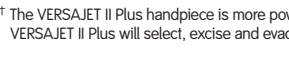
Order No	Description
66800039	Console (includes user manual, power cord, and multi-function footswitch)
66800979	Surgical cart
66800475	Replacement shelf (Retrofit to 50800)

Order No	Description
66800474	Console user manual
66800472	Replacement multi-function footswitch
66800193	Replacement power cord

VERSAJET II Exact Handsets for maximum dermal preservation

Order No	Description
 66800041	VERSAJET II Exact disposable handset (45°/14mm)
 66800042	VERSAJET II Exact disposable handset (45°/8mm)
 66800040	VERSAJET II Exact disposable handset (15°/14mm)
 0.11mm Nozzle orifice	
 Lower deck height	
 Narrower channel	

VERSAJET II Plus Handsets (US only) for maximum removal of non-viable tissue and contaminants[†]

Order No	Description
 66800044	VERSAJET II Plus disposable handset (45°/14mm)
 66800045	VERSAJET II Plus disposable handset (45°/8mm)
 66800043	VERSAJET II Plus disposable handset (15°/14mm)
 0.10mm Nozzle orifice	
 Higher deck height	
 Wider channel	

[†] The VERSAJET II Plus handpiece is more powerful than the VERSAJET II Exact. VERSAJET II Plus will select, excise and evacuate tissue faster and more aggressively.

References

- Granick MS, Posnett J, Jacoby M, Noruthun S, Ganchi PA, Datiashvili RO. Efficacy and cost-effectiveness of a high-powered parallel waterjet for wound debridement. *Wound Repair Regen.* 2006;14:394-397.
- Mosti G, Mattaliano V. The debridement of chronic leg ulcers by means of a new, fluidjet-based device. *Wounds.* 2006;18:227-237.
- Granick M, Boykin J, Gamelli R, Schultz G, Tenenhaus M. Toward a common language: surgical wound bed preparation and debridement. *Wound Repair Regen.* 2006;14:S1-S10.
- Cubison TC, Pape SA, Jeffery SL. Dermal preservation using the VERSAJET hydrosurgery system for debridement of paediatric burns. *Burns.* 2006;32:714-720.
- Vanwijk R, Kaba L, Boland S, Gonzales y Azero M, Delange A, Tourbach S. Immediate skin grafting of sub-acute and chronic wounds debrided by hydrosurgery. *J Plast Reconstr Aesthet Surg.* 2010;63:544-549.
- Abernathie B, Granick MS. Centrifugal debridement: tissue sparing surgical treatment of chronic wounds. *J Wound Technol.* 2009;5:10-11.
- Jeffery SLA. Device related tangential excision in burns. *Injury, Int J Care Injured.* 2007;38S:S35-S38.
- Paola LD, Brocco E, Senesi A, De Vido D, Merico M, Ninkovic S. The use of VERSAJET in the limb salvage following failure of minor amputation in diabetic foot. Data on file report 4649/5025.
- Caputo WJ, Beggs DJ, DeFede JL, Simm L, Dharma H. A prospective randomised controlled clinical trial comparing hydrosurgery debridement with conventional surgical debridement in lower extremity ulcers. *Int Wound J.* 2008;5:288-294.
- Gravante G, Delogu D, et al. VERSAJET hydrosurgery versus classic escharectomy for burn debridement; a prospective randomized trial. *J Burn Care Res* 2007;28(5):1-5 (data for VERSAJET & escharectomy combined)
- Gurunloughlu R. Experiences with waterjet hydrosurgery in wound debridement. *World J Emerg Surg* 2007 May 2;2:10

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**Weighted average of five studies involving 451 patients with mixed wounds (acute, chronic, burns)

Authors	Sample size VERSAJET debridement	Mean procedures per patient	Weight	Weighted average
Mosti & Mattaliano (2006)	142	1.24	0.31	0.39
Gravante (2007) ¹⁰	87	1.41	0.19	0.27
Gurunloughlu (2007) ¹¹	15	1.33	0.03	0.04
Vanwijk (2010)	167	1.20	0.37	0.44
Granwick (2006)	40	1.18	0.09	0.10
Total	451		1.00	1.26