

Techniques of use

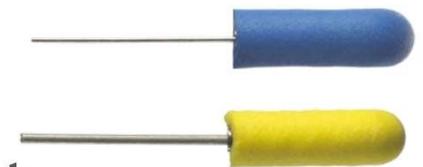


- The Servotome allows independent activation of incision and coagulation from 1 to 10.
2 potentiometers (incision ▲ ; coagulation ■■■)



Incision

- Control of cutting power from 1 to 10 (Max 30W / 600Ω)
- The incision depends on:
 - the power chosen,
 - the strength applied,
 - the tissue,
 - the speed of the surgical movement,
 - the patient's size,
 - the size of the electrode (the smaller it is, the more the power is concentrated).



Coagulation



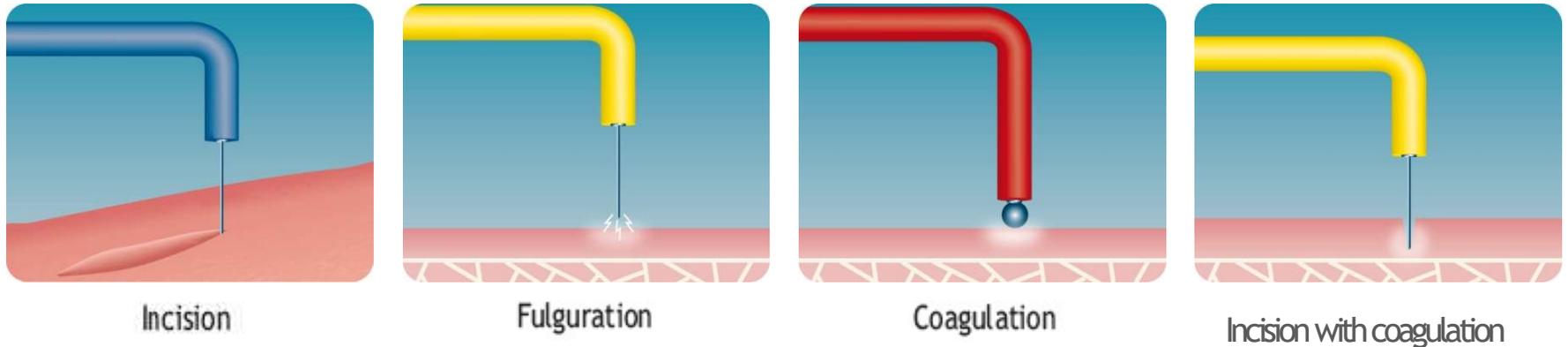
Control of coagulation from 1 to 10 with progressive increase of the temperature without damage to underlying tissues.



Coagulation

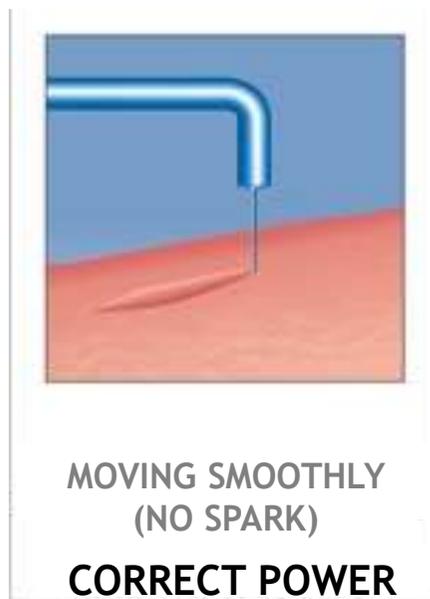
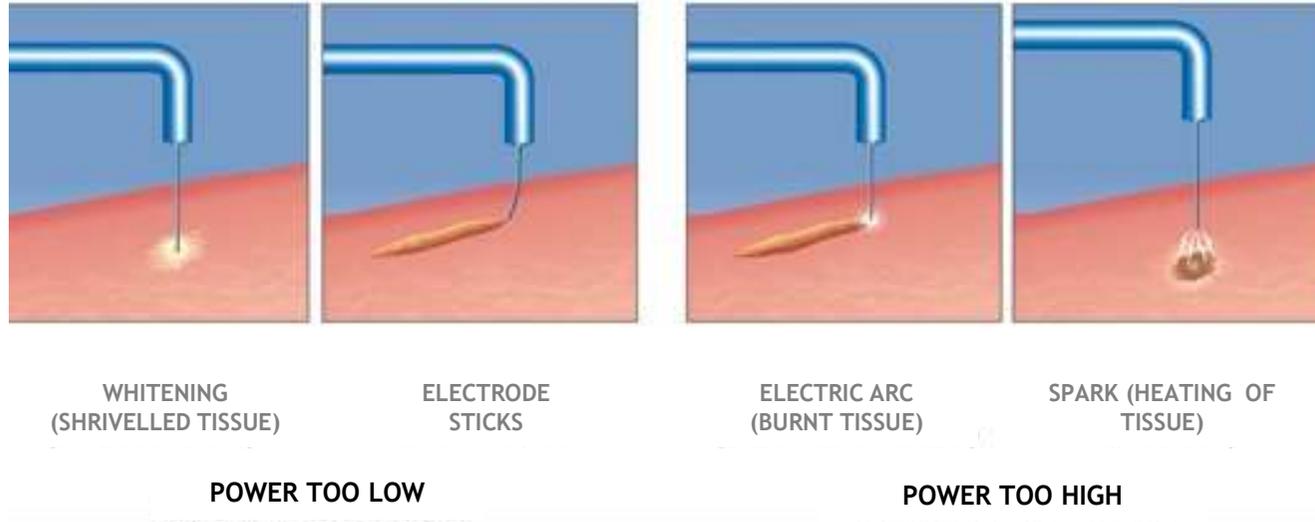


Effects of electrosurgery



- **Incision:** for a clean and smooth cut
- **Fulguration:** for heating the superficial tissue
- **Coagulation:** for a deep hemostatic effect
- **Cutting with coagulation:** for an incision with better visibility, accompanied by deep and immediate coagulation.

Cutting advice



- Check and/or protect if the patient for any conductive element on him.
- Place the bracelet.
- Insert an electrode on the electrode holder.
- Avoid excess saliva.
- Adjust the potentiometers according to the clinical act, the electrode chosen, the patient size, etc.
- Exert an easy and smooth movement.

Recommendations for use

- Aspiration of excess saliva for optimal efficiency.
- Metal surfaces such as:
 - implants,
 - amalgams,
 - inlay, onlay,
 - brackets.

Should be insulated using [plastic mylar](#).

Electrodes



I40S I40CA
INCISION
Ø 0.40 mm (RODS)



I22S I22CA
INCISION
Ø 0.22 mm (NEEDLES)

Abscess incision, exposure of impacted tooth, cutting of peri-coronary sac, hemostasis, exposure of crown lengthening, gingivoplasty, gingivectomy, frenectomy, tissue ablation before impression, stripping, etc.



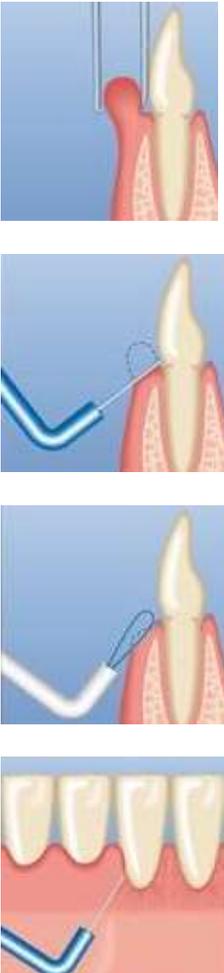
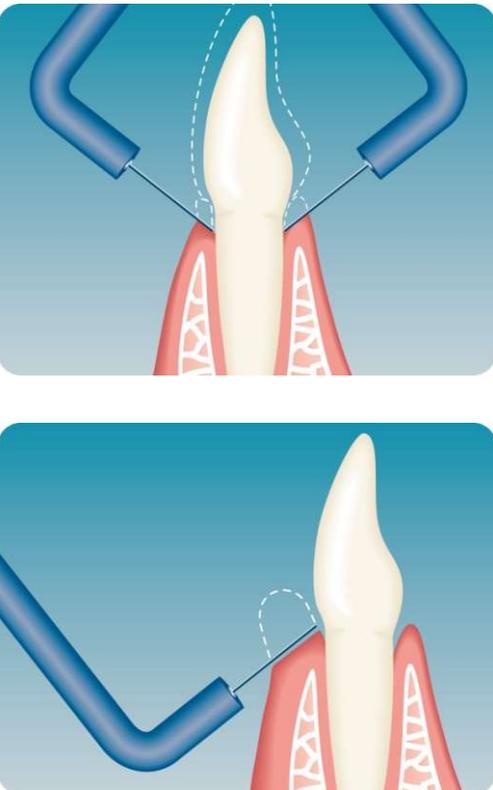
TR22R TR22L TR22T
EXCISION
Ø 0.22 mm (LOOPS)



FC10N FC25B FC32B
INCISION/
FULGURATION
Ø 1 mm CONICAL)
FULGURATION/COAGULATION
Ø 2.5 mm - Ø 3.2 mm
(SPHERICAL)

Clinical cases

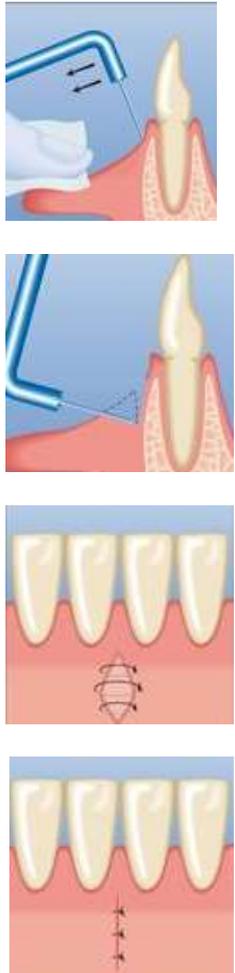
Gingival evulsion & gingivectomy



Plasty

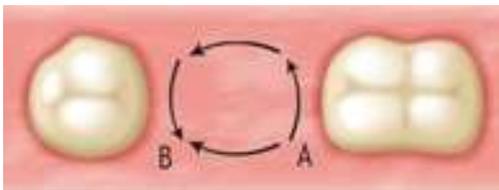
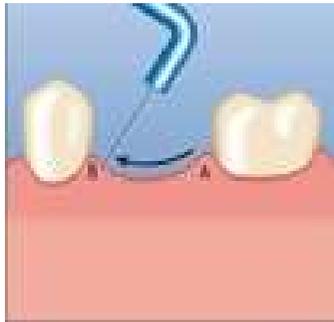
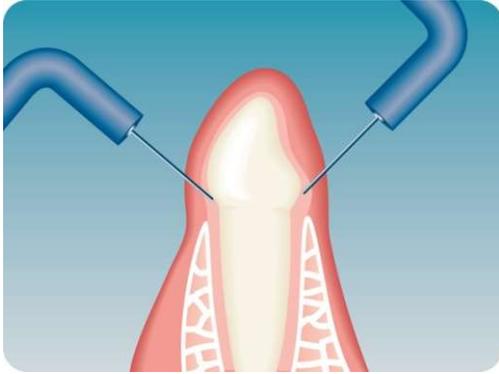


Frenectomy

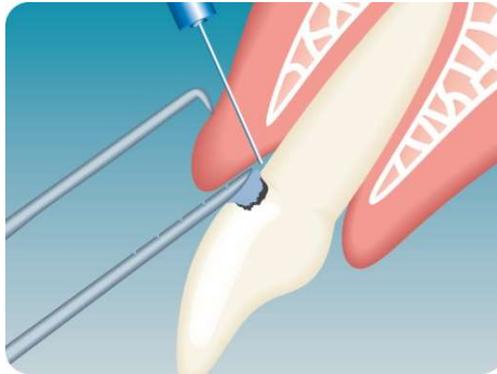


Clinical cases

Exposure of impacted tooth:
circular incision for a clean
and successful exposure



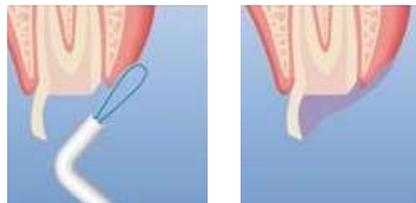
Dental neck exposure



Abscess incision
& drainage



Exposure of fractured tooth





Gingivectomy



Crest plasty



Gingival evulsion



Soft tissue evulsion

Accessories

- Electrode-holder is lightweight and handy.



- A broad choice of electrodes which are all insulated (only the active part touches the soft tissue).
- A fast and safe assembly of electrodes on the electrode-holder.



Accessories

- An orange light and an audible alarm (conform to the norm 60601-2-2) indicate when the HF is activated.



- Controlled by means of a footswitch. Hand button activation can create a lack of precision.



Table settings

- The settings depends on:
 - the clinical act,
 - the electrode chosen,
 - the patient's size,
 - etc.

Recommended settings:

- Incision electrodes:
 - Incision button: 6-8
 - Coagulation button: 3-4
- Coagulation electrodes:
 - Incision button: 5-6
 - Coagulation button: 1-2

Sterilization

- Clean with disinfectant wipes:
 - the device,
 - the electrode-holder,
 - the cord.
- Brush the electrodes with sandpaper or metallic brush
- Place the electrodes in an ultrasonic tank
- Place the electrodes and electrode-holder in the autoclave

Note: for your information, even if the electrosurgery allows an instant sterilization of the electrodes thanks to HF current, you should sterilize them prior utilization.



SUM UP

Compliant with new standards and dental environment constraints

Main objective:
Decrease leakage currents for more safety

What's new?

- A bracelet is replacing the capacity coupler
- Electronics modifications
- Decreased Wattage (30 watts) for better efficiency.

Safer with better performance!

SERVOTOME

New impulse in Electrosurgery

