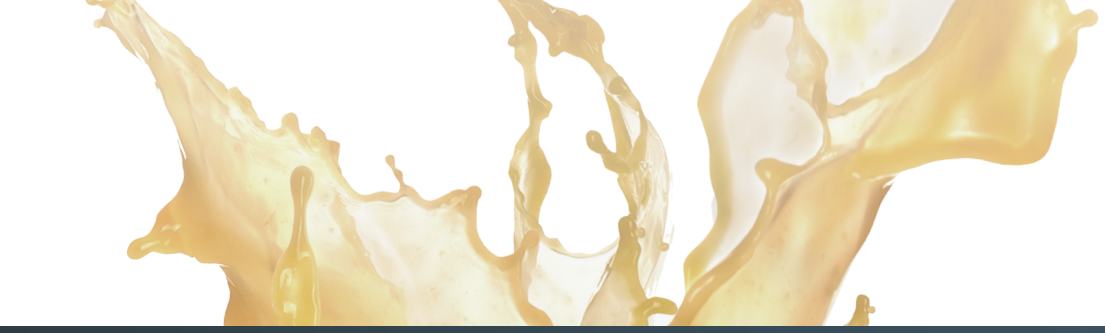

Standards redefined
Level up with Neptune® S

Neptune S compared to wall suction/canisters

Optimizing procedures is dependent on many things but, above all, safety and efficiency.

Neptune S elevates protection with features that help you from potential dangers that range from biohazardous splashes to digging for lost polyps. Constantly closed during use, transport and docking, Neptune S not only reduces physical touchpoints but aids in productivity and turnover time to help your procedure operate efficiently.

Feature	Neptune S system	Wall suction/canisters
Reduces physical touchpoints and potential exposure to biohazards with a constantly closed system	✓	—
Eliminates need for solidifiers	✓	—
Reduces red bag waste and associated disposal costs[1]	✓	—
Features illuminated specimen collection	✓	—
Integrates illuminated worksurface	✓	—
Ensures zero polyps (2mm or larger) are lost with backup basket	✓	—
Allows for back-to-back cases without dumping	✓	—
Removes need to stop suction while collecting specimen	✓	—
Provides automated, hands-free canister emptying and cleaning	✓	—
Displays digital measurement of fluid waste collected	✓	—
Notifies early warning when nearing full capacity	✓	—

With the Neptune S system, **we've got your back**

Beyond the clinical need, considerations include staff and patient safety, workflow efficiencies and cost control. The Neptune system has been tried and tested for over two decades and Neptune S continues that legacy. Here's what various studies say about how the constantly closed design of the Neptune system helps fulfill these needs compared to open systems (canisters).

- **12,000 lbs. (6.6%) reduction** in red bag waste over 10 months at one hospital system, generating an $8,490 cost savings[3]
- **0 splashing, spilling or exposure** observed when the constantly system was in use[2]
- **90% overall staff satisfaction** compared to 60% among canister users[1]
- **Up to 3.5 times more efficient** in room setup, handling and maintenance when compared to an open system[1]

Suction canisters can account for up to 40% of surgical room waste and 25% of all hospital regulated medical waste.[4,5]

1. Horn, Martlie et al. "Traditional canister based open waste management system versus closed system: hazardous exposure prevention and operating theatre staff satisfaction." Journal of Perioperative Nursing in Australia. 28:1 (Autumn 2015):18-22.
2. North Suburban Medical Center. "Fluid Management in the OR." Practice Greenhealth. (2011):1-4. Print.
3. Berthiaume, Dawn et al. "Environmental Excellence Award Nomination for Reduction in Biohazardous Waste Generation." Department of Veterans Affairs, VA San Diego Healthcare System. (2007).
4. Minnesota Technical Assistance Program (MNTAP). Suction Canister Waste Reduction. 2011.
5. Safe Options for Suction Canister Waste. OR Manager. Vol 20. No. 4. April 2004. Accessed on March 7, 2011. Available at www.ormanager.com/issues.

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