If you Need Further Information about the Equipments, please feel free to call us

ISO 9001 : 2015 Certified

dermaindia®

Subashree Industrial Park

MEGASURG GOLD

MULTIPURPOSE HIGH FREQUENCY RADIO SURGERY UNIT

USER MANUAL

ISO 9001 : 2015 Certified

dermaindia®

DEAR PROUD DERMATOLOGIST

Congratulations! You are one among the thousands of prestigious owner of MEGA SURG gold (Multipurpose High Frequency Radio Surgery Unit). We also feel proud to supply the equipment to you.

This product is manufactured by dermaindia with advanced technology and to ensure that it does not fail, each and every unit is perfectly calibrated with the help of OSCILLOSCOPE thereby ensuring exact radio frequency output.Dermaindia welcomes your valuable suggestions for the improvement of the equipment and we have a separate R & D wing which works continuously to implement your suggestions.

Thanking you and assuring you of our best services

- Management

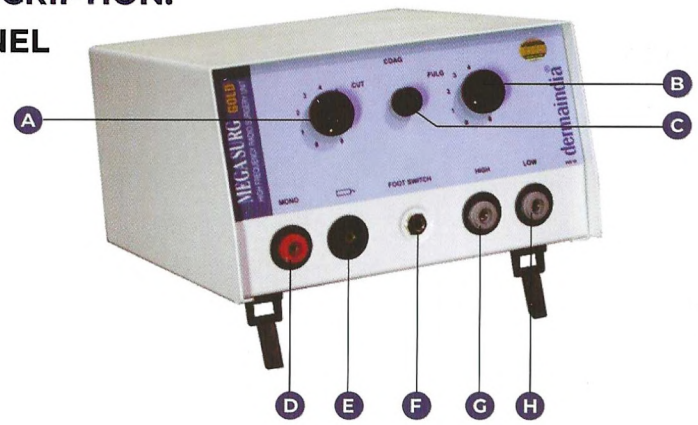
DO'S & DON'T'S

- ✓ Should check Electrical Input Voltage (210V-230V) and proper Earth connection.
- ✓ Should connect all the cables to the machine in OFF mode only.
  - Main's cable
  - RF Active Handle
  - RF Patient Plate
  - Foot switch
  - Fulguration Active Handle (If required)
- ✓ RF Patient Plate should be in contact with patient skin during the procedure.
- ✓ Loupe sets should be cleaned properly.
- ✓ Ensure that the skin is wet during the procedure.
- ✓ In coagulation mode use ball loupe and Intensity or Energy level should be high.
- ✗ Don't use patient plate while operation in a fulguration mode.
- ✗ Don't interchange RF & Fulguration active handles.

ISO 9001 : 2015 Certified
dermaindia®

PANEL DESCRIPTION:

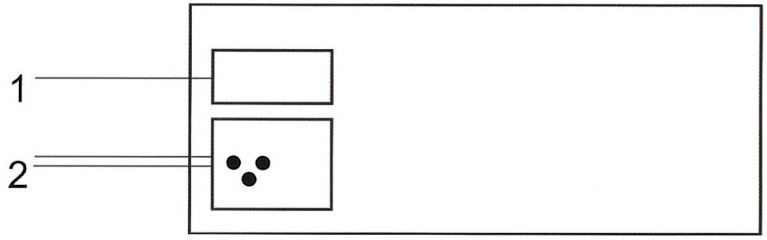
FRONT PANEL



- (A) Radio Cautery (RFC) Intensity Controller
- (B) Electro Cautery (Byfrector) Intensity Controller
- (C) RFC (Radio Cautery Cut/coagulation Mode)/Byfrector (electro Cautery Fulguration Mode Change Over Rotator Switch.
- (D) RFC (Radio Cautery) Active Handle Connector
- (E) Patient Plate Connector
- (F) Foots Switch Connector
- (G) Electro Cautery (Byfrector) Active Handle Connector (high Output)
- (H) Electro Cautery (Byfrector) Active Handle Connector (low Output)

BACK PANEL

CONNECTIONS



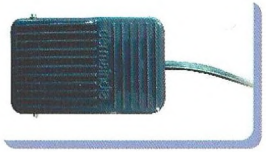
1.Main switch for switching the equipment ON

2.Connect the mains cable at this point.

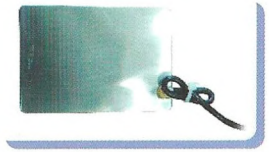
ACCESSORIES

Electro Cautery Active Handle

RF Active Handle



Foot Switch



Patient Plate

Types of Needles

Set of 25

Also Available Set of 11

Electrodes

Also Available in Sterile Pack

INTRODUCTION

We have designed a simplified and affordable Multipurpose High Frequency Radio Surgery Unit consisting of Monoterminal cutting, Coagulation and fulguration to treat wide variety of skin disorders with excellent results. Radio surgery is a type of electrosurgery used to destruct the tissue for desired effect like cutting, coagulation by passing ultra high frequency radio waves. In addition to fulguration and desiccation which makes the equipment highly versatile.

The Equipment consists of

- The main unit
- Main's cable
- Foot switch
- Patient Plate with cable
- Active handle
- Electrodes with various sizes and shapes which can be fitted on to the active handle.

STARTING THE PROCEDURE

- Connect the mains cable at the back panel and switch on the mains switch.
- Red LED will glow in the front panel to indicate that the unit is 'ON'.
- Connect the Active Handle (slot no: D) Patient plate (slot no: E) and Foot switch (slot no: F) & cautery active handle (slot no: G).
- Select cut mode or coagulation mode as per your requirement using the change over switch (slot No.C).
- Select RF output by pressing change over switch (slot no: C).
- To increase or decrease the intensity of RF output use intensity controller (slot no: A).
- Incase, you want to use cautery output press change over switch (no: C).
- To increase or decrease the intensity of cautery output use intensity controller (slot no: B).
- Always keep the patient plate in content with patient while using RF (while using cautery patient plate is not required).
- The operating site of the patient must always be wet while using RF output. Clean the Rf loupe frequently.

PROBLEM	TROUBLE SHOOTING
1. Unit switched ON Red LED NOT GLOWING	A) Check whether the mains cable is connected properly b) Check whether the FUSE provided in the unit is alright
2. Red LED glowing but R.F. not generated	a)Defective foot switch or active handle (if found please send it to the manufacturer for replacement) b)Loop not cleaned properly c)Patient plate not connected Check whether the switch (No.C) is in RF mode

Note : Kindly wear hand gloves while doing the procedure

**** IF THE SUGGESTED TROUBLE SHOOTING DOES NOT SOLVE YOUR PROBLEM PLEASE CONTACT THE MANUFACTURER IMMEDIATELY.**

TYPES OF TISSUE DESTRUCTION

Three types of surgery can be performed by this equipment

1. Electrosection (Cutting and Coagulation)
2. Electrocoagulation
3. Fulguration

ISO 9001 : 2015 Certified dermaindia®

ELECTROSECTION

It consists of fully rectified wave form (50% cutting and 50% coagulation) it provides instant hemostasis along with cutting. It provides bloodless surgical field and is most often used waveform for electrosectioning.

ELECTROCOAGULATION

It consists of partially rectified waveform (90% coagulation and 0% cutting) provides instant hemostat with more tissue destruction (touch the bleeder holded artery forceps by loup electrode for coagulation).

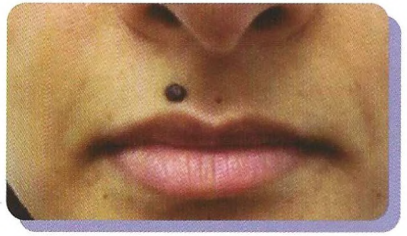
ELECTROCOAGULATION

Superficial tissue destruction

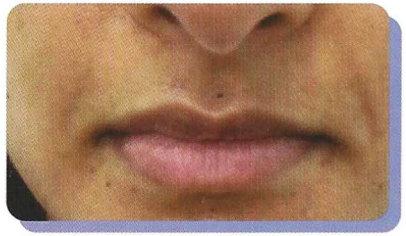
LESIONS TREATED BY MEGASURG GOLD

- Acrochordons
- Moles & Freckles
- For skin incisions
- Excisions of cysts
- Seborrhoeic Keratosis
- Xanthelasma Palpebram
- Granuloma Pyogenicum
- Acne Keliodalis nuchae
- Dermatofibroma
- Mucocele
- Verruca
- *Anginomas*
- *Molluscum contagiosum*
- *Epidermal verrucous naevi (Combination with dermabrasion)*
- *Pitted scares (Combination with subcision and dermabrasion)*
- *Rhinophyma*
- *Small malignant leision etc.,*
- *Epilation*

SOME OF THE PROCEDURES DONE USING MEGASURG GOLD



Mole on Upper Lip



Excised Mole-Healing by Secondary Intention

Mole on Cheek

Excised Mole by Using Loop Electrodes - Cutting Mode Immediate Post Operative

Pyogenic Granuloma

Excised Lesion with Resultant Wound