General Information for OR set up of the Osada Pedo 30W drill

The Osada Pedo 30W drill is fairly simple to set up and maintain. Components:

1. White power control / foot lever with electrical plug in which sets on the floor.

Minimally invasive foot surgery techniques tend to have minimal bleeding, but some debris does get on the pedal which is situated directly below the surgeon so he can manipulate the foot switch control. Many surgery centers choose to use a generic disposable plastic gallon storage bag cover for easier cleaning later. A hole is cut at the end of the bag to put the foot pedal through and then the bag is slipped over the white box power control. Many facilities, however, just choose to wipe it clean with a germicidal solution after each surgery and don't bother with the bag.

The controls on the power control are simple and the surgeon, tech, or circulator can press the on / off button for use. The surgeon usually presses the Reverse direction button with his foot when that function is needed.

2. **Black motor / cord** which attaches to the white power control. The cord has an easy connection to the box and many surgery centers leave the motor/cord attached to the box the majority of the time. Sometimes the white power control is placed on the base of an IV pole and then the the cord is looped on the hook when not in use. That is an arbitrary convenience, however, and many facilities just keep it in a drawer and set it up at the time of surgery. The **motor / cord is not autoclavable** and like the power control, is also cleaned by wiping with a germicidal solution.

For set up in the OR, a pre sterilized nylon film tubing is often already attached to the handpiece which is discussed more under the handpiece component section.

3. **Silver Handpiece** which attaches to motor. The handpiece has a red dot which needs to be **firmly** snapped in place, matching the red dot to the motor. If the handpiece is slightly loose, it will still work but the burr won't grip and spin correctly. The connection must be firm or over time the function will fail.

A precut strip of nylon film tubing is often attached to the base of the handpiece with autoclave tape, fan folded and then steam autoclaved for sterilization. Once opened, the surgeon or tech drops the end of the sterile tubing for the circulator to pick up the edge and feed the motor through her or his end of the tubing, and then the surgeon or tech continues to feed the motor up to the handpiece and attach at the red dots.

Cleaning of the handpiece is very important. The handpiece is not immersible but the outside can be cleaned with hydrogen peroxide or germicidal solution. The handpiece should be sprayed as soon as possible after surgery to prevent blood / debris from drying inside. Many times the surgery staff who clean the handpiece do not spray the handpiece thoroughly which eventually causes the bearings to freeze. The handpiece should be sprayed until clear with the spray oil and then again with a chuck or burr in place and the handpiece lever closed, forcing the spray up in to the handpiece. Instructions on cleaning the handpiece are described in the drill manual.

Small white silicone discs are included with the drill. These are reusable. One disc should be placed inside the removable nose cone of the handpiece after cleaning and before autoclaving. It is also advised that a disc be placed at the base of the burr before sterilizing to further impede debris from entering the handpiece.