

BILF150

ALL DAY IN-LINE FILTER FOR WALL-SUCTION SYSTEMS

- Connects to 1/4" or 3/8" hospital tubing
- Prevents contamination of wall-suction units
- Multi-use, cost-effective
- May be used between wall filtration and suction canister for increased effectiveness
- May be used with Buffalo Filter's laparoscopic tubing
- 99.9995% efficient ULPA media @ 0.1 micron
- Clear top allows for visualization of usage



Part # BILF150 (10/box)

Replaces Stackhouse ILF150 and 24264

Replaces Surgimedics® 901054 and 901051



Control of Smoke From Laser/Electric Surgical Procedures

DHHS (NIOSH) Publication No. 96-128

Recommended ventilation techniques include a combination of general room and local exhaust ventilation (LEV). General room ventilation is not by itself sufficient to capture contaminants generated at the source. The two major LEV approaches used to reduce surgical smoke levels for health care personnel are portable smoke evacuators and room suction systems.

Room suction systems can pull at a much lower rate and were designed primarily to capture liquids rather than particulate or gases. If these systems are used to capture generated smoke, users must install appropriate filters in the line, insure that the line is cleared, and that filters are disposed properly. Generally speaking, the use of smoke evacuators are more effective than room suction systems to control the generated smoke from nonendoscopic laser/electric surgical procedures.

Excerpt taken from CDC/NIOSH Hazard Controls.