

How can you prepare for surgery?

To help you make an informed decision, consider bringing questions like these to your surgeon or doctor visit:

- What medical therapy and surgical options are available to me?
- Which is best for my situation?
- Will I need to undergo more than one type of medical therapy?
- Can I undergo surgery for my cancer?
- What happens if I don't get surgery?
- Can I have less invasive surgery?
- Should I get a second opinion?
- What is the difference between the surgical options?
- What are the side effects or complications of the different therapy and surgical options?
- Where will I have scars?
- When will I go home?
- What can I expect post-surgery?

What is colorectal cancer?

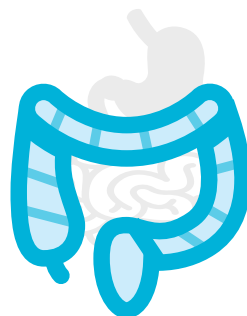
Colorectal cancer often begins as a small abnormal growth (called a polyp) within the rectum and/or the colon, parts of the large intestine.

Most polyps are harmless, but over time some may become cancerous.

If you develop colorectal cancer, it's very important to get medical attention as soon as possible.

There are different ways to manage colorectal cancer, including surgery, chemotherapy, immunotherapy, and radiation.

If you and your doctor decide that surgery is right for you, be sure to ask your doctor about all of your options.



Your surgeon may recommend:

Robotic-assisted surgery with the da Vinci® Surgical System.

Laparoscopic surgery

Open surgery

References

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11. The robotic approach significantly reduces length of stay after colectomy: a propensity score-matched analysis. <https://www.ncbi.nlm.nih.gov/pubmed/28685223>
12. Reference: See summary Table 1b; references 4 – 11 suggest lower conversion rate, reference 9 suggests a comparable conversion rate. https://www.accessdata.fda.gov/cdrh_docs/pdf17/K171632.pdf

Important Safety Information

Surgical Risks - Bowel Resection and Other Colorectal Procedures (removal of all/part of the intestine): leaking and/or narrowing at the spot where two sections of bowel were reconnected, colorectal or anal dysfunction (cannot empty bowel, frequent bowel movements, leakage or constipation).

Patients should talk to their doctor to decide if da Vinci Surgery is right for them. Patients and doctors should review all available information on non-surgical and surgical options and associated risks in order to make an informed decision.

Serious complications may occur in any surgery, including da Vinci® Surgery, up

to and including death. Serious risks include, but are not limited to, injury to tissues and organs and conversion to other surgical techniques which could result in a longer operative time and/or increased complications. For Important Safety Information, including surgical risks, indications, and considerations and contraindications for use, please also refer to www.davincisurgery.com/safety and www.intuitivesurgical.com/safety.

Individual surgical results may vary.

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There's more than hope

when you know the facts.

Understand your colorectal cancer surgery options.

da Vinci® Surgery





You are not alone.

There are more than **one million colorectal cancer survivors** in the U.S. today.¹

The **death rate has been dropping** for several decades.¹

When caught early, there is a **90% 5-year survival** rate for colorectal cancer patients.²

With a diagnosis of colorectal cancer, you may feel shocked, upset, or concerned about your future.

But when you understand the options available to you, you'll see that there is more than just hope.

What will your surgeon do?

If you and your surgeon decide robotic-assisted surgery is right for you:



Your surgeon will use a 3D high-definition camera for a crystal-clear and magnified view inside your body.



ACTUAL
INCISION SIZE

He or she will sit at a console next to you and operate through a few small incisions using tiny instruments, including a camera.



Your surgeon fully controls all instruments. Every hand movement is translated by the da Vinci System in real-time to bend and rotate the instruments so he or she can precisely remove your cancerous tissue.

What happens during surgery?

During your procedure, your surgeon may remove a portion of your colon and/or rectum. The main types of colorectal cancer surgery include:

- colectomy
- low anterior resection (LAR)

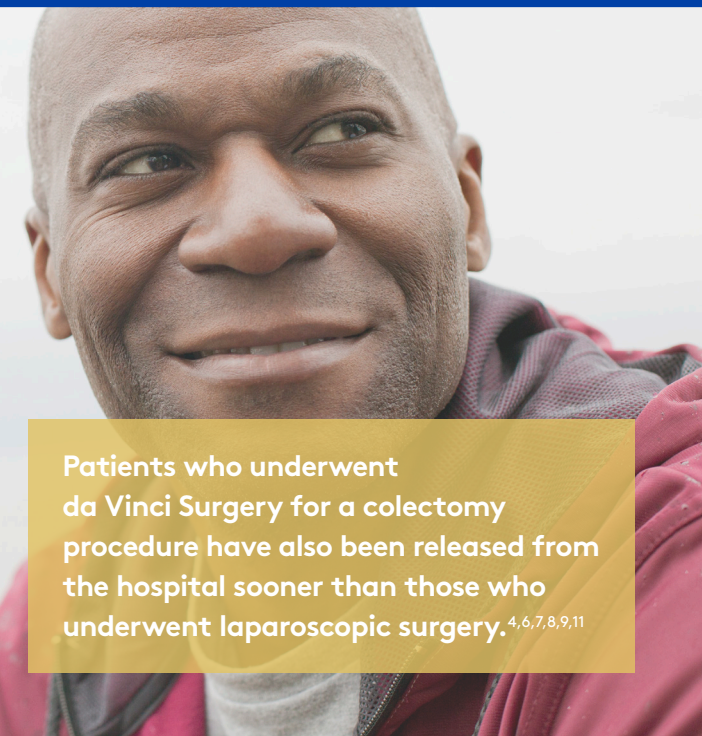
Every surgical approach has some risk. When a problem occurs during or after surgery, it is known as a "complication".

There are **fewer complications** following a colectomy procedure when comparing da Vinci Surgery to open^{4,5} and laparoscopic^{6,7,9,10} surgery.

7 out of 8 reviewed studies, which include 12,384 patients, suggest surgeons **are less likely to have to change to an open procedure** when doing da Vinci LAR Surgery, compared to laparoscopic surgery.¹²

When might you feel better?

Everyone is different, but in general, patients have been released from the hospital sooner following da Vinci Surgery for colectomy and LAR procedures than they would have been after open surgery.^{3,4,12}



Patients who underwent da Vinci Surgery for a colectomy procedure have also been released from the hospital sooner than those who underwent laparoscopic surgery.^{4,6,7,8,9,11}