

+ One wand, many possibilities

Built for versatility

Smith+Nephew

LYNX[◇]
COBLATION[◇] Laryngeal Wand



Built on 20+ years of ENT COBLATION[®] Plasma Technology¹

With over 20 years of clinical use and more than 240 peer-reviewed publications, our patented ENT COBLATION Technology is clinically backed.¹ COBLATION Technology is a surgical method that precisely removes tissue^{1, 2} indicated for ablation, resection, and coagulation of soft tissue and hemostasis of blood vessels.



Less heat compared to other methods^{*3}

COBLATION ENT Technology operates at lower temperatures than CO₂ and KTP lasers^{*3} and reduces the risk of airway fire.^{†4-6} The WEREWOLF[®] System in combination with the LYNX[®] COBLATION[®] Wand allows for a less complex setup.^{‡7}

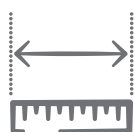
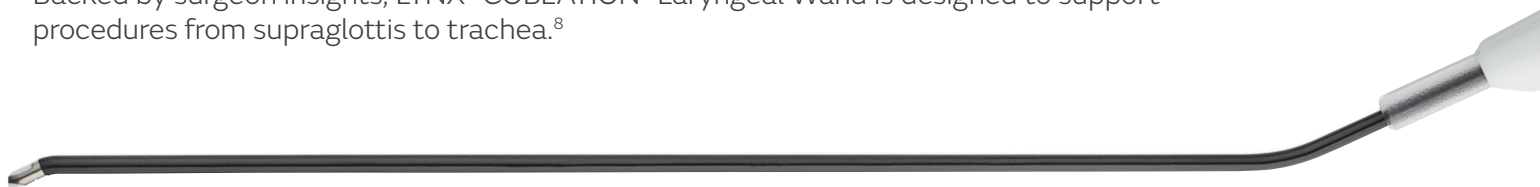
*As demonstrated ex vivo

†Compared to electrocautery or CO₂ laser

‡Compared to predicate wands and CO₂ laser

+ Treating laryngeal anatomy

Backed by surgeon insights, LYNX[®] COBLATION[®] Laryngeal Wand is designed to support procedures from supraglottis to trachea.⁸



Long working length
25cm length



Lower operating temperature^{†‡}



Malleable shaft



Self-clearing clog capabilities^{*9}



Fine dissection and mass debulking in one device^{10, 11}



Integrated hemostasis

+ Your case, your way



The LYNX COBLATION Laryngeal Wand is designed as a multi-purpose tool with mass debulking and fine dissection capabilities in one device.

The wand's shaft is designed to be malleable to support your anatomical needs, along with three ablation settings to adapt to your preference, so that you can:

Rapidly debulk tissue in laryngeal anatomy from larynx to trachea¹⁰

AND/OR

Make precise lesions with the distal tip of the electrode¹¹

*As demonstrated ex vivo

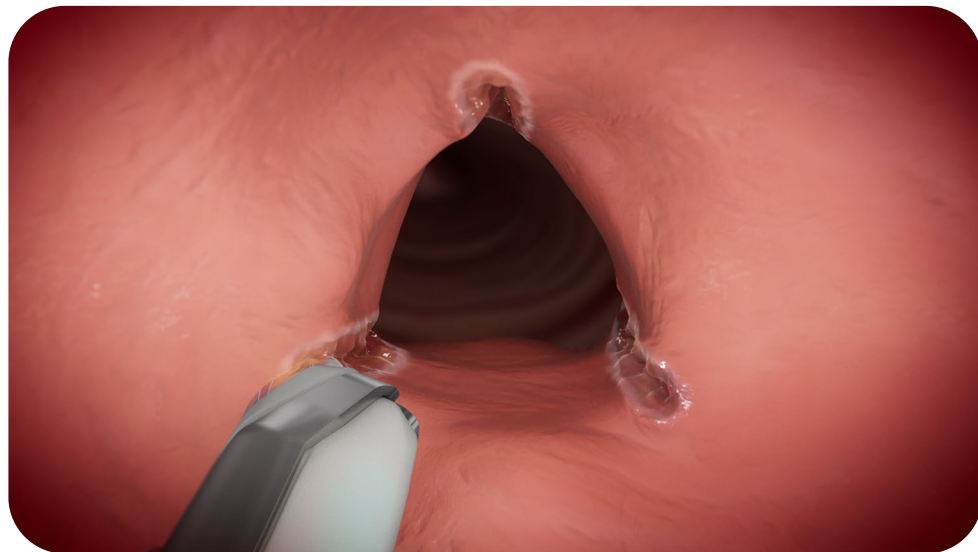
†Compared to electrocautery or CO₂ laser

‡Compared to predicate wands and CO₂ laser

One wand, many possibilities

+ 360° access*¹²

LYNX[®] COBLATION[®] Wand is designed with directed saline to the electrode, enabling consistent plasma formation and demonstrating the ability to effectively perform radial incisions on the target tissue in all 360°. ^{*12}



*As demonstrated in benchtop simulated laryngeal model



Ordering information

LYNX° COBLATION° Laryngeal Wand	
Reference	Description
72290254	LYNX COBLATION Laryngeal Wand
WEREWOLF° COBLATION° System	
Reference	Description
72290144	WEREWOLF Controller for ENT
72290007	WEREWOLF Foot Pedal
72290088	ENT WEREWOLF Power cord/manual, US ENG

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References

1. Magdy EA, et al. *J Laryngol Otol.* 2008;122(3):282-290. **2.** Roje Z, et al. *Coll Antropol.* 2009;33(1):293-298. **3.** Smith+Nephew 2010. Internal Report. P/N 86257 Rev. A. **4.** Roy S, et al. *Am J Otolaryngol.* 2010;31(5):356-359. **5.** Roy S, et al. *Am J Otolaryngol.* 2015;36(1):63-66. **6.** Matt BH, et al. *Am J Otolaryngol.* 2010;143(3):454-455. **7.** Smith+Nephew 2019.Internal Report. SPMENT-108003-01 Rev B. **8.** Smith+Nephew 2026. Technical Memo. P/N 10170589. **9.** Smith+Nephew 2026.Technical Report. P/N 10169096. **10.** Smith+Nephew 2026. Technical Report. P/N 10172410. **11.** Smith+Nephew 2026. Technical Report. P/N 10169366. **12.** Smith+Nephew 2026. Technical Report. P/N 10169186. Rev.A.