

Maquet Yuno II Mobile Operating Table Pave the way for high-class techniques







Easy handling ensures that Maquet Yuno II will simplify positioning for even the most complex techniques to help. you focus on what's most important: your patients.

Pelvic

Tibia



Improve outcomes with advanced surgical workflows

Maquet Yuno II provides the extensive, precise, and simple configurability needed for sophisticated surgical techniques in orthopedics, traumatology, and neurology.

Developed in line with surgeons' requirements, Maquet Yuno II ensures the positioning and access needed to achieve optimum results in open or minimally invasive interventions. The table can be configured for any discipline, increasing your options and maximizing the functionality of your OR.

Easy handling ensures that Maquet Yuno II will simplify positioning for even the most complex techniques to help you focus on what's most important: your patients.

Find out more (III)

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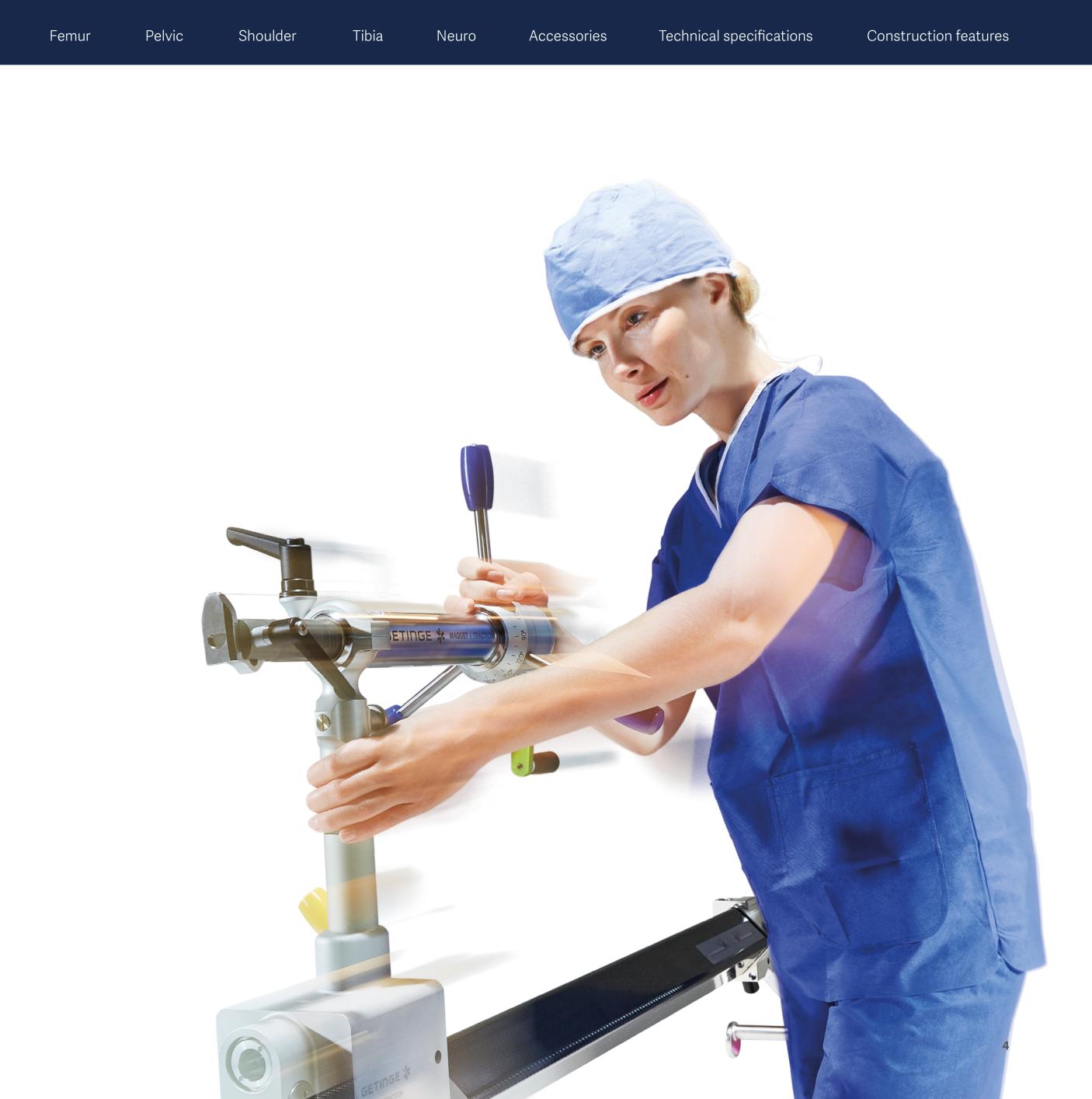
Maquet Yuno II Your foundation for the future

An operating table is the foundation of the OR. Growing cost pressures require investments in safe and flexible operating tables that can be universally used in conventional or minimally invasive procedures.

The increasing prevalence of minimally invasive techniques in orthopedics and neurology requires a strong, versatile table that effectively accommodates complex positioning and supports intraoperative imaging. Additionally, hospitals need a table that is easy and flexible to set up and handle in unpredictable trauma cases, guaranteeing fast help for the patient, day or night.

The right choice for minimally invasive techniques

Minimally invasive surgery (MIS) can improve patient outcomes and save costs. Smaller incisions are less traumatic for the patient, reducing blood loss and minimizing the risk of infection, leading to faster recovery and shorter hospital stays. As MIS becomes the standard of care, modern tables need to offer the correct positioning angles for a wide variety of procedures, from hip arthroscopy to tibia nailing.



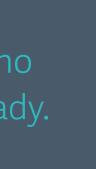
The versatile components of Maquet Yuno II enable surgical teams and their patients to benefit from MIS by supporting a variety of positions for patients of various sizes. Some MIS procedures require complex intraoperative patient movement, such as the direct anterior approach to hip replacements. Maquet Yuno II features a well-designed series of accessories that slide and rotate smoothly as needed during the procedure, and lock securely to prevent patient injury.

The traction bar with ball joint mimics the natural motion of the hip, giving surgeons the full range of motion needed for optimal site access. Radiolucent carbon-fiber accessories improve intraoperative diagnostics that are critical to verifying the correct repositioning of the skeletal structure, and reviewing the result of the procedure to keep the patient safe.

Tibia

Ready when you are: When trauma patients arrive in your emergency department, there's no time to lose. Night or day, your OR must be ready.

With the flexible Maquet Yuno II Operating Table, it's easy to quickly configure the table to meet the needs of the procedure and surgeon, even with limited staff on call.





Maquet Yuno II – Pave the way for high-class techniques

DAA Overview



Femur

Pelvic

Shoulder

Neuro

Tibia

Accessories

Technical specifications

Construction features

A cost-effective resource

All hospitals are facing the cost pressure of doing more, doing it better, and doing it safely. That's why Maquet Yuno II is designed for universal compatibility with our existing accessories.

The wide range of positioning options and radiolucent accessories make the Maquet Yuno II Table an excellent choice for the precise disciplines of orthopedics, traumatology, and neurosurgery. But the table is also flexible enough to be used as a universal table, extending the functionality of your OR.

Compatibility with our existing surgical accessories maximizes your existing investment, reduces your upfront costs, and minimizes the need for training.







Femur

Pelvic

DAA



Simplifying DAA to total hip replacement

The minimally invasive direct anterior approach (DAA) to total hip replacement reduces muscular trauma and minimizes pain. Because patients can begin rehabilitation faster, they spend less time in the hospital and are able to resume their normal lives.

There are different approaches to hip joint replacement. Besides the conventional lateral and posterior approaches, the direct anterior approach is a minimally invasive technique that does not require detaching or cutting the patient's muscles to access the joint. Keeping the muscular structure intact minimizes the risk of hip dislocation and can reduce the recovery and rehabilitation time. This may lead to shorter hospital stays and cost-saving potentials for the hospital.

However, the direct anterior approach requires a complex course of leg movements throughout the procedure. Maquet Yuno II was designed to provide smooth combinations of leg rotation, abduction, adduction, and height adjustments to secure surgical site access while minimizing ergonomic strain for the surgical team. The traction bar with ball joint mimics the smooth multidirectional movement of the hip itself. It is easy to operate, flexible to position, and securely locked to prevent overextension and keep the patient safe.

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Tibia

Shoulder

Neuro

Accessories



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Technical specifications

DAA

Simplifying DAA to total hip replacement



Simple set-up so you can focus on the patient

Surgeons can spend less time adjusting the table and more time focusing on the patient with Maquet Yuno II. The screw tension device with slider and hand gear makes it easy to safely adjust traction levels. Larger adjustments can be made by sliding the device to the end of the bar, while the green handle allows fine tuning for precise and secure patient positioning.



Precise leg rotations can prevent injuries The star-shaped handle allows the leg to

be easily rotated into the correct position at any time during the procedure. A degree indicator identifies the exact position of the limb to ensure accuracy. The handle automatically locks into place to prevent injury from human error.

The traction boot shown on this page has been replaced by traction boot model No. 1003.75A0 as presented on page 7. More information available on our online accessories catalog.

Femur	Pelvic	Shoulder	Tibia	Neuro	Accessories	Technical specifications	Construction feat



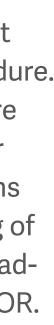
Smart design improves workflows

Control units are located at the end of the traction bars, allowing full control even after the table is fully draped. Positioning the control units away from the surgical site prevents overcrowding near the surgeon, streamlining workflows. An automatic lock function engages when the traction bar with ball joint is released, preventing injury caused by dropping the extension device.



Quality imaging improves outcomes

Intraoperative imaging plays a significant role in the success and safety of a procedure. As the traction bars of Maquet Yuno II are made of carbon fiber, they allow for clear imaging with a C-arm. This gives surgeons the opportunity to check the positioning of the prosthesis and make any necessary adjustments while the patient is still in the OR.



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tures



Maximizing traction for hip arthroscopy

Hip arthroscopy (hip scope) is a minimally invasive technique that has the potential to improve patient outcomes by minimizing pain, reducing the risk of infection, and accelerating the rehabilitation timeline.

Hip scope procedures repair damage of the labrum, articular cartilage, or soft tissues surrounding the joint, postponing arthritis or delaying the need for a full hip replacement. In order to gain proper access to the tissue, the femoral head must be pulled out of the acetabulum under maximum traction. Maquet Yuno II is designed to enable a strong traction of up to 80 kg in the most comfortable way for the surgical team. It offers the flexibility needed to handle a patient population of diverse sizes, preventing manual strain on the scrub nurse.

Ventral capsule relief increases patient safety: The long vertical adjustment allows clinical staff to lift the patient's leg to an angle that relieves the ventral capsule during the maximal traction of hip scope procedures.

Simplified workflow: Using the slider, the scrub nurse can ease traction in one smooth motion simply by supporting the patient's knee and pushing the screw tension device towards the table.

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Long vertical adjustment offers ventral capsule relief



Sliding function simplifies workflow



Improving ergonomics for femur fracture repair

The longest and strongest bone in the body, the femur, requires a tremendous amount of force to set fractures. Ergonomic positioning for the surgeon and accessibility of intraoperative imaging are of equal importance for a successful patient outcome.

With Maquet Yuno II, surgical teams can easily position the table in the ideal configuration for both surgeon and patient. The smart design of the carbon fiber traction bars reduces the complexity of femur setups and improves the surgical workflow.

Highest table setting improves ergonomic conditions: With the highest table position on the market, surgeons can place the table at a comfortable height to eliminate back spasms and prevent fatigue from bending and twisting.

Imaging quality: Carbon fiber traction bars give surgeons the flexibility to check results immediately using a C-arm. This saves time and money by eliminating the need for separate follow-up imaging, and allows surgeons to make necessary adjustments without delay.

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Tibia



Higher table settings improve ergonomics for the surgeon



Carbon fiber bars improve intraoperative imaging



-emu

Pelvic



Improving imaging access for pelvic fractures

Traumatic pelvic fractures often cause extensive bleeding and organ injuries that require urgent treatment and clear intraoperative imaging.

With Maquet Yuno II, the radiolucent elements can be quickly set up to reduce the time to treatment, a critical factor in survival rates for traumatic pelvic injuries.

Better image quality improves safety: With a carbon fiber sacral rest, a fully radiolucent pelvic area, and carbon fiber traction bars, there is nothing to interfere with the quality of intraoperative imaging. Surgeons can quickly assess the patient's condition and immediately begin treatment – delivering better outcomes, all in the same room.

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Tibia

Shoulde

Neuro

Accessories

Flexible positioning in supine or prone position



Technical specifications

Hip



Enhancing imaging possibilities for shoulder surgery

When it comes to the complex demands of shoulder surgery, a large imaging window is essential.

Maquet Yuno II contours perfectly to the patient's body to comfortably accommodate the full range of shoulder and upper arm procedures. An accessible and radiolucent design enhances intraoperative imaging to improve patient safety.

Better images for better outcomes: Clear images help surgeons assess the proper positioning of bones, particularly in the treatment of clavicular or humero-radial joint head fractures.

Femur	Pelvic	Shoulder	Tibia	Neuro	Accessories	Technical specifications	Construction feat



Maquet Yuno II with radiolucent back plate 1433.34 AC



Femu

Pelvic

Providing excellent access for tibia nailing

Good access and optimal patient positioning are crucial for the outcome of tibia nailing procedures. Tibia nailings enter the tibia from just beneath the patella.

Positioning the tibia at an angle of 90° or less separates the patella from the tibia and improves the access for the tibia nailing. Our existing extension accessories can be used to enable improved angles for tibia access.

Maximizing the value of your investment: Maquet Yuno II is compatible with our existing extension accessories, minimizing implementation costs and maximizing the ROI of your existing equipment.



Shoulder

Tibia

Neuro

Accessories

Maquet Yuno II with tibia adapter and joint supporting arm



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Technical specifications

Hip



Enhancing imaging possibilities for neurosurgery

Neurosurgeons require the utmost stability as they work with delicate nerve structures. Maquet Yuno II incorporates several important safety features to prevent accidental table movements.

Stable three-point stand: The cast iron stand provides excellent stability, preventing all movement if the table is bumped.

Secure lock functions: Lock functions eliminate accidental table movements, even when pushing the hand control buttons.

Femur	Pelvic	Shoulder	Tibia	Neuro	Accessories	Technical specifications	Construction feat



Maquet Yuno II with carbon-fiber insertable plate and radiolucent skull clamp 1433.45BC





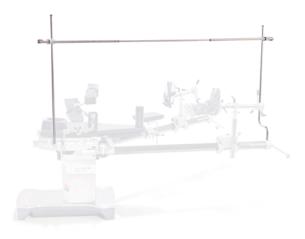
Maquet Yuno II accessories

Maquet Yuno II a	accessories		
1433.66AC	Extension plate with 3 holes	1007.45A0/B0	Support
1433.66BC	Extension plate with 1 hole	1007.46A0	Trolley fo
1433.41XC	Adapter plate for extension	1007.47A0	Accesso
1433.42A0	Femur hook	1007.48A0	Frame fo
1433.67A0	Tibia adapter	1007.49A0	Extensio
1007.40A0	Traction bar with ball joint including slider	1007.50AC	Adapter
1007.41A0	Traction bar including slider	1007.51A0	Vertical
1007.42AC	Leg plates pair	1007.51B0	Vertical
1007.43A0	Screw tension device	1007.52A0	Bar exte
1007.44X0	Sliding clamp	1433.45 AC/BC	Carbon-
1433.34AC	Shoulder plate		



Femur	Pelvic	Shoulder	Tibia	Neuro	Accessories	Technical specifications	Construction feat

- rt plate
- for traction bars
- sory trolley
- for sterile drape
- ion frame for prone and lateral position
- er clamp for countertraction post for femur
- l adjustment for hip scopes long
- l adjustment short
- tension
- n-fiber insertable plate



Frame for sterile drape



Trolley for traction bars



Tibia adapter



Accessory trolley



Hip Overview DAA

Maquet Yuno II Technical specifications

Technical information		Manual movements
Max. overall load	454 kg/1,000 lbs	Traction bars – Leg a
Operating table weight	400 kg	Traction bars – Leg a
Complies with CE requirements as per 93/	/42 EU Medical Device	Traction bars (up)
Directive, UL approved		Traction bars (down)
Adjustment options using corded or IR re	"Lock"/"Unlock" sett	
Height without padding	670–1,270 mm ± 30 mm	
Trendelenburg/ Reverse Trendelenburg	43° ± 2°	
Lateral tilt	23° ± 2°	
Lateral tilt with attached extension bars	15° ± 2°	
Lower back plate	+90°/-90°	
Leg plates (individually or synchronously adjustable)	+90°/-90°	

0-position (horizontal position possible for entire table top or for leg plates only)

abducti

adducti

ettings (prevent/enable movement of table)

Femur	Pelvic	Shoulder	Tibia	Neuro	Accessories	Technical specifications	Construction feat

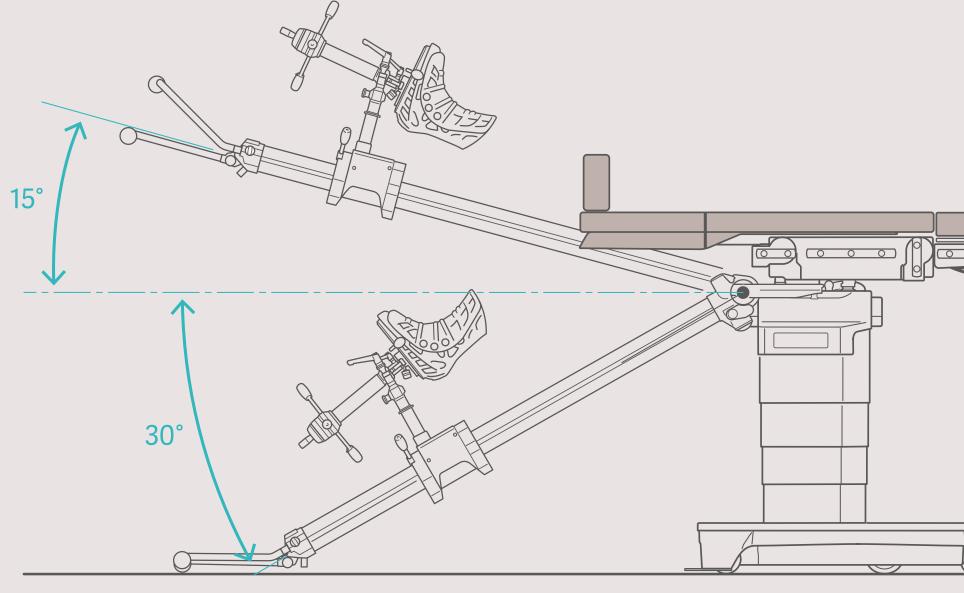
tion (outside)	45°
ion (inside)	45°
	15°
	30°

Versions of Maquet Yuno II	
1433.02B0	EU version
1433.02F0	US version
Optional control elements	
1433.90A0	Corded hand control
1433.91A0	IR hand control
1009.70A0	Mobile charging station for IR hand control
1009.71A0/B0	Stationary charging station for IR hand control



Overview DAA Hip

Maquet Yuno II Technical specifications



Femur	Pelvic	Shoulder	Tibia	Neuro	Accessories	Technical specifications	Construction feat
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Maquet Yuno II Construction features

Construction features

- Rechargeable battery and mains operation (see electrical specifications)
- Stable base construction with four double swivel castors for easy movement and maneuvering (base can be locked via control units to prevent movement)
- Base cover made of stainless steel
- Cover for the override panel made of GFR composite plastic, resistant to impact, breakage and disinfectants
- Column casing made of chrome-nickel steel
- Identical interfaces on normal and on reverse side
- Autodrive function
- Sensor Drive compatible

Electrical specifications

DAA

Overview

- Electronic charge monitoring, with visual and accoustic indicators
- (adjustable), 50–60 Hz, over mains cable
- for CF conditions as per EN 60601-1

• Specially designed rechargeable batteries, with a single charge lasting about one week in the operating room

• Batteries recharged from the mains supply, 100–240 V AC

• Safety class II, Type B; the enclosure leakage current meets the requirements of the patient leakage current



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