CPS, LLC | 4508 Garrison Blvd. Ste. 200 Baltimore, MD 21215 | https://cps2k.com/
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CPS
CardioPulmonary Services

presents,

a new option for blood management programs

Because managing your patient's blood impacts lives

HEMAsavR™

How can we help you **reduce allogeneic blood transfusions** and **improve patient care?**

- Nearly 14 million allogeneic red cell units transfused per year[1]
- Billions in cost to Hospitals
- Increased demand, shrinking donor pools
- Transfusion related mortality and morbidity
- Managing blood supply to optimize usage and minimize waste is daunting

A **new option**

for blood management programs

The **HEMAsavR**™ device is a sterile, economical blood capture and transfer device that supports efforts to collect and salvage blood in most surgical procedures and respond quickly to unanticipated blood loss. The **HEMAsavR**™ decreases the upfront cost of collecting shed blood and creates options to improve outcomes and avoid allogeneic transfusions.

Collect More

- Shed blood is a significant source of RBCs
- Leverage existing protocols and workflow for blood salvage
- Closed, sterile system compatible with surgical suction & autotransfusion systems

Save More

- Designed to reduce allogeneic transfusions which are among the costliest contributors to healthcare expenditures
- Seamless integration. Collection does not require specialized resources

Improved Outcomes

- By avoiding allogeneic tranfusion-related adverse events:[2]
  - Decrease patient mortality
  - Lower incidence of nosocomial infections
  - Reduce risk of multi-organ failures
  - Decrease length of hospital and ICU stays

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More focus. More Opportunities

HEMAsavR™ enables economical viable blood collection (sterile and anti-coagulated) for evaluation for cell salvage processing and return to the patient.

Optimize Blood Salvage

Immediate savings vs. reservoirs where Blood Salvage is currently used. Hospitals that perform the following procedures would benefit the most from Blood Salvage programs: Cardiac, Vascular, Orthopedic, Organ Transplant, Trauma, OB/GYN, Thoracic, General, Neurosurgery and Urology.[3]

AABB Guideline

1. Anticipated blood loss of 20% or more of the patient's estimated blood
2. Procedures where more than 10% of patients undergoing the procedure typically require RBC transfusion

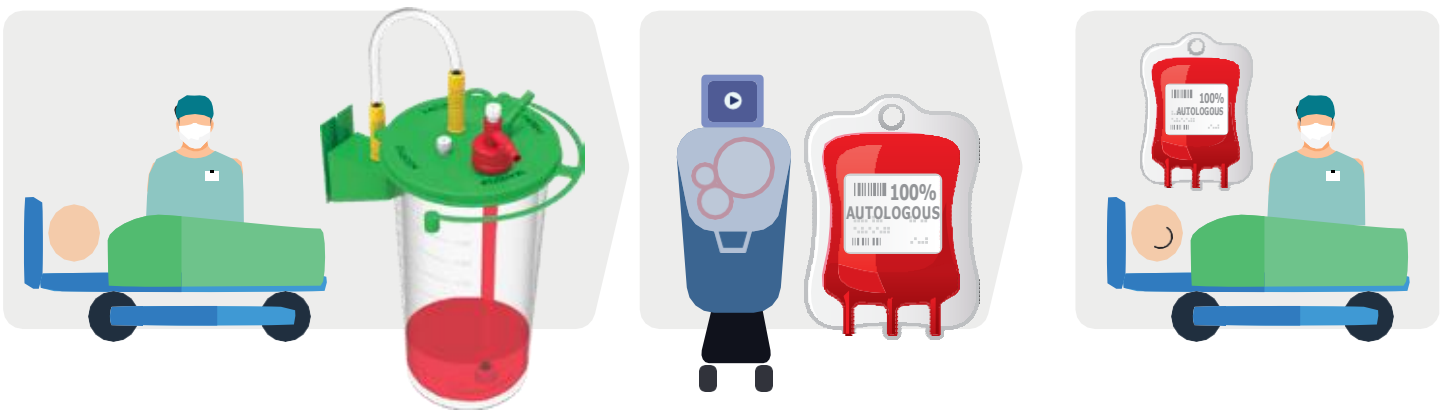
Expand Collection

Unanticipated Bleeding in Non-Cardiac Procedures

- Utilize **HEMAsavR**™ to respond quickly to unanticipated blood loss
- Cases where remaining 10% bleed
- Post surgical collection
- Don't wait to collect viable shed blood

Seamless integration with current protocols

HEMAsavR™ is universally compatible with surgical suction and ATS systems. The result is fast set up, ease of use, and an effective solution for increased blood recovery for potential processing and return to patient.



COLLECT PROCESS REINFUSE

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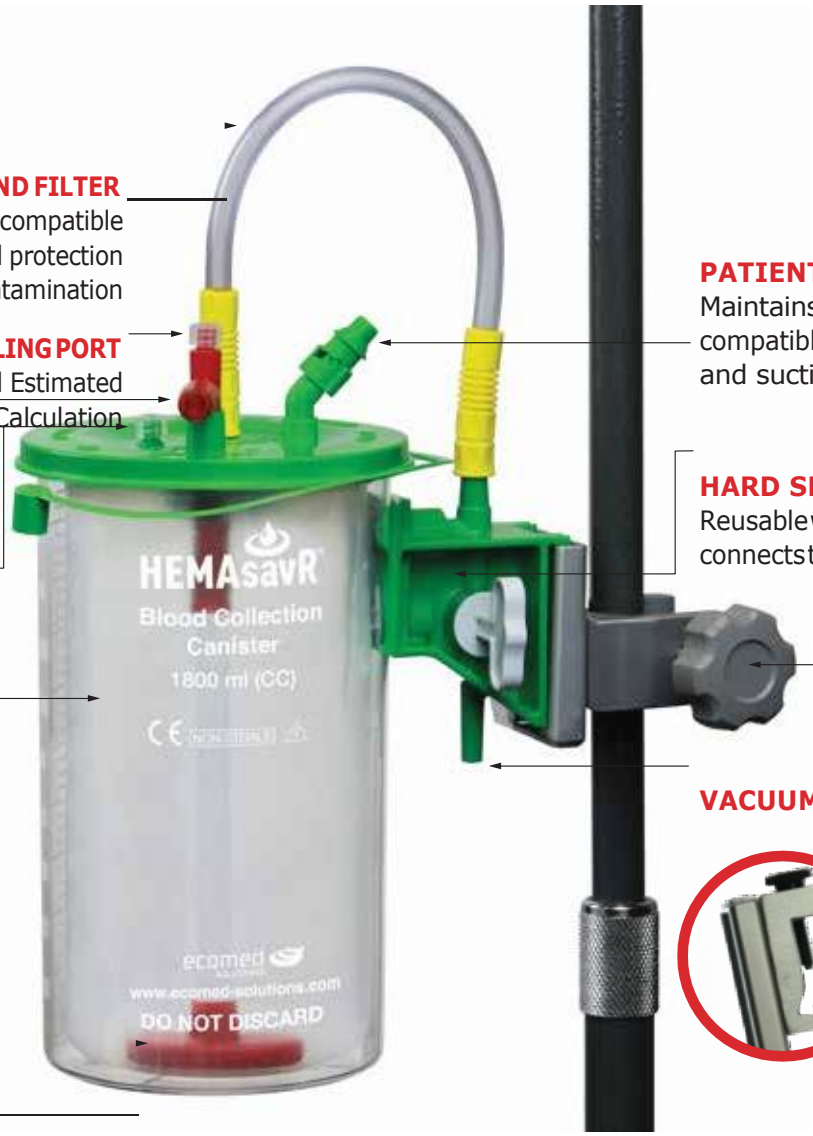

STERILE VACUUM LINE AND FILTER
Integrated, universally compatible suction port; added protection against contamination

SAMPLING PORT
Quality Control and Estimated Blood Loss Calculation

UNIVERSAL TRANSFER PORT
Compatible with leading ATS transfer sets

ADDITIVE PORT
For drug administration

1.8 LITER STERILE LINER
High capacity liner; less waste than reservoirs; allows visualization and track of blood loss

BI-DIRECTIONAL DIP TUBE AND FILTER
Quality filtration and high flow transfer

PATIENT PORT AND CAP
Maintains sterility; compatible with AAL and suction tubing

HARD SHELL CANISTER
Reusable with on/off valve; connects to vacuum source

POLE MOUNTED LARGE SLIDE BRACKET

VACUUM SOURCE PORT

CHANNEL CLAMP RAIL MOUNT

HEMAsavR™ product range references

	Description	Reference	Quantity
HEMAsavR™ 1.8 L, Sterile Pack	1800 mL sterile soft liner with transfer tube and filter	ECO168004	8 Units
Reusable Hard Shell Canister	Reusable with on/off valve; graduation marks for visualization of blood loss	ECO168820	20 Units per case*
Pole Mounted Large Slide Bracket	For mounting hard shell canister to IV pole (2" dia. poles)	ECO179902-2	1 Unit
Channel Clamp Rail Mount	For mounting hard shell canister to a rail system	ECO179778	1 Unit

*Also sold as individual units

References: 1. AABB. Patient Blood Management Facts & Figures 2017. http://www.aabb.org/PBM. Accessed September 2017. **2.** Shander A, Hofmann A, Gombotz H, et al. Estimating the cost of blood: past, present, and future directions. *Best Practice & Research Clinical Anaesthesiology*. 2007; Vol 21. No. 2: 271-289. **3.** Waters JH, Dyga RM, Waters, JFR, Yazer MH. The volume of returned red blood cells in a large blood salvage program: Where does it all go? *Transfusion*. 2011; Vol 51: 2126-2132.

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