

 DABIR®

Patient Care *Plus*™ System



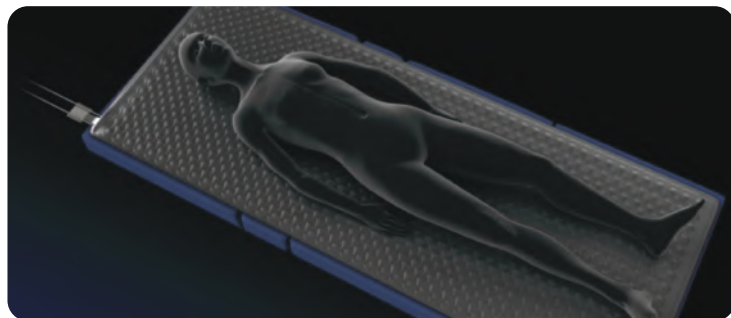
DABIR

Pressure Injury Prevention For the Continuum of Care



PATIENT CARE

When hospital acquired pressure injuries (HAPIs) occur in the patient care setting they can negatively impact patient outcomes. Risk factors for HAPIs in patients include limited mobility, sensory impairment, nutritional status, other co-morbidities or mechanical forces. Patients with one or more of these risk factors and who are exposed to the cumulative effects of high pressure are at risk for developing pressure injuries.



INNOVATION IN PRESSURE INJURY PREVENTION

The Dabir Patient Care **Plus** System is an innovative solution to pressure injury prevention for the patient care setting. The system provides whole body skin protection for patients receiving care outside the perioperative setting. This system has been clinically shown to mitigate the effects of tissue deformation and skin shear to prevent pressure injuries.

HOW IT WORKS

The Patient Care **Plus** System's low-profile surface is comprised of rows of geometric air-filled nodes that alternately inflate and deflate to reduce tissue deformation, provide pressure offloading and enhance tissue perfusion to prevent pressure injuries. The surface fully inflates to less than 1 inch thereby maintaining patient stability when Dabir therapy is applied. The low-noise controller automatically repositions the patient and provides clinicians with useful information such as display automatic brightness adjuster and remaining surface life.





Burden to the Healthcare System

In the United States

~**2.5M** hospital acquired pressure injuries

occur annually with treatment costs ranging from

\$ 750 MILLION
to **1.5 BILLION**¹

A single late stage pressure injury can cost a hospital **\$43,180** to treat with multiple adding more.²

The Centers for Medicare and Medicaid Services (CMS) classified HAPIs as a medical “*never event*” in 2008, and hospitals can no longer claim reimbursement for associated treatment costs when they occur. Standard prevention methods also provide limited benefit and expose patients and hospitals to unnecessary risk. Comparatively, Dabir has been used successfully in thousands of critical care setting cases for prevention.

¹ Beckrich K, Aronovitch SA: Hospital-acquired pressure ulcers: A comparison of costs in medical vs. surgical patients. *Nurs Econ* 1999; 17:263-271.

² Centers for Medicare and Medicaid Services (CMS), HHS. Fed Regist. 2008 Aug 19; 73(161): 48433-9084

Seamless Integration into Clinical Workflows



SIMPLE TO USE:

Whether the patient is in Critical Care, Med-Surg, or Emergency Department, the Dabir Patient Care **Plus** System provides a streamlined setup for clinicians. The surfaces are multi-patient use and cleans simply by using common disinfecting solutions.



COMPACT:

The Dabir Patient Care **Plus** Controller can be positioned in many ways. Weighing only 4 pounds, it is maneuverable and minimizes the foot print in care settings.



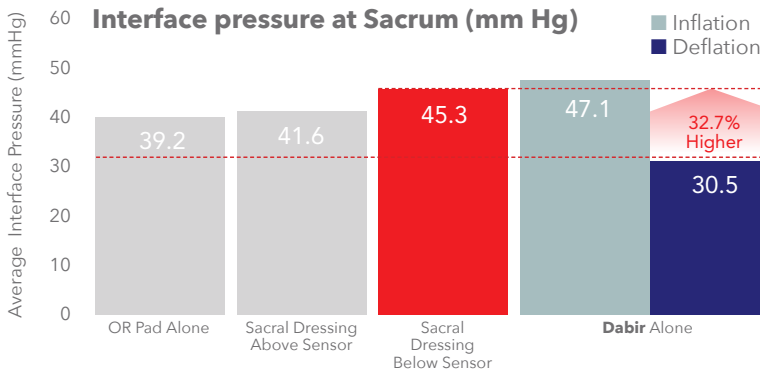
MAINTAINS PATIENT STABILITY

Dabir surfaces maintain patient stability and are customizable to the patient's conditions and needs. The surface matches up to bed sizes and is covered by standard linen setup. Surfaces fully inflate to less than 1 inch maintaining patient stability and optimizing tissue reperfusion.

Emergency Department

In a recent study of **119 PATIENTS** in a level 1 quaternary health system

with time on surface ranging from **2 to 28 hours**, no new skin breakdown was observed for patients placed on the Dabir Surface.³



Higher Interface Pressure with Sacral Dressing Alone



Sacrococcygeal, Stage III pressure injury Image courtesy of NPUAP

Average interface pressure (IP) under the sacrum during the deflated cycles of the **Dabir** surface was significantly less (<32 mmHg) than the continuous IP observed for the OR pad alone and sacral dressings (above and below). The IP values at the skin/sacral dressing inner layer interface were higher compared to the sacral dressing outer layer/OR pad interface. Red dotted line indicates IP of 32 mmHg.⁴





ENHANCED TISSUE PERFUSION

The Dabir Patient Care **Plus** System provides complete body skin protection for patients receiving care outside the perioperative setting. In test settings during the deflation cycles, the low-profile surface had lower interface pressures (<32mmHg) compared to using sacral dressings alone. Average interface pressure values lower than 32mmHg are recommended to increase skin blood flow and enhance tissue perfusion to prevent hospital acquired pressure injury.

³ Improving Patient Comfort and Satisfaction in Emergency Departments with a Micropressure Overlay: Presented at Fall SAWC, Las Vegas, NV, October 7-9, 2016. Poster Number: CS -020

⁴ Interface Pressure Evaluation of Sacral Dressings Versus Alternating Pressure Surface, Dabir Innovations Lab., Chicago, IL, April 2019.



CONTINUUM OF CARE

Dabir surfaces are customizable to the specific needs of the patient. In care settings such as emergency departments, electrophysiology, step-down units and intensive care units patients can be exposed to periods of prolonged cumulative pressure. The Dabir Patient Care **Plus** System is designed to reduce HAPIs and improve patient outcomes.

- Easy Power On/Off
- Auto-Start with System Pause
- Variable Cycle Speeds
- Smart Interconnect System



Improving Patient Outcomes

CUTTING EDGE INNOVATION

The Dabir Patient Care **Plus** System takes pressure injury prevention to the next level. Current prevention methods such as static sacral dressings actually increase the likelihood of pressure injury formation as compared to the dynamic, perfusion enhancing offloading of Dabir. The Patient Care **Plus** surface provides continuous alternating pressure and relief that limits the duration of blood vessel occlusion when patients are immobile.

INCREASES SKIN BLOOD FLOW

Lengthy hospital stays without pressure injury prevention often expose bony prominences to tissue deformation, the cumulative effects of ischemia, friction, and shear. These high risk factors contribute significantly to pressure injury formation and can be very harmful to patients. The Dabir alternating pressure surface has been shown to increase skin blood flow (SBF) and reduces a patient's risk for pressure injuries.

MORE BED-SIDE INFORMATION

The Patient Care **Plus** System provides clinicians bed-side information such as surface life, cycle speed and a micropressure animation.

Critical Care

Mean sacral skin blood flow (SBF)

was **40% GREATER**
than the OR pad alone
during the full loading session⁵

Med-Surg

Medical-surgical patients at high risk for PIs include those with:



- limited mobility
- malnutrition
- numerous co-morbidities



⁵ Karga, P. et al, Sacral Skin Blood Flow Response to Alternating Pressure Operating Room Overlay, J of Tissue Viability, Vol. 28, Issue 2, May 2019.

About Dabir Surfaces Inc.

Patients who are immobile for prolonged periods of time are at risk for pressure injury. Immobilization can be the result of many factors including surgery, the recovery process, during mechanical ventilation or with paralysis related injury. As a preventative solution, the Dabir surface can preserve arterial, venous and lymphatic blood flow for these patients and help maintain healthy tissue perfusion. Rows of geometric nodes provide dynamic alternating pressure relief and reduce the effects of skin shear. This innovative surface was designed by Dabir to take the guesswork out of pressure injury prevention.

References

1. Beckrich K, Aronovitch SA: Hospital-acquired pressure ulcers: A comparison of costs in medical vs. surgical patients. *Nurs Econ* 1999; 17:263-271.
2. Centers for Medicare and Medicaid Services (CMS), HHS. *Fed Regist.* 2008 Aug 19; 73(161): 48433-9084
- 3 Improving Patient Comfort and Satisfaction in Emergency Departments with a Micropressure Overlay: Presented at Fall SAWC, Las Vegas, NV, October 7-9, 2016. Poster Number: CS -020.
- 4 Interface Pressure Evaluation of Sacral Dressings Versus Alternating Pressure Surface, Dabir Innovations Lab., Chicago, IL, April 2019.
- 5 Karga, P. et al, Sacral Skin Blood Flow Response to Alternating Pressure Operating Room Overlay, *J of Tissue Viability*, Vol. 28, Issue 2, May 2019.

For more information on the **Dabir Patient Care Plus™ System**, contact your local sales representative or visit **dabir-surfaces.com**

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