- Adopt a lower IJV or subclavian approach
- Secure with SecurAcath
- Utilize the shoulder as a splint to stabilise the hub and dressing

- SecurAcath secures the line at the catheter skin junction
- Ensure the dressing covers the suture hub to increase stability
- Consider adding an additional fixation dressing to the suture hub to maximize stability

- Stability increases dressing wear time
- No unnecessary skin punctures
- Improved ability to clean insertion site may reduce infections
- Maximises patient comfort
- Eliminates suture needle stick risk
- Standardizes practice

Optimal CICC Placement and Securement



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Please refer to instructions for use for indications,

contraindications, hazards, warnings, cautions and

SecurAcath[®] provides improved catheter securement for the life of the line

Significantly Reduces Risk of CLABSI

- University of Arkansas for Medical Sciences (UAMS) analyzed 7,779 patients over four years of Central Line Associated Bloodstream Infection (CLABSI) data¹
- Analysis compared outcomes of patients whose PICCs were secured with a the SecurAcath to those secured with an adhesive device
- Study found a substantial difference in relative risk among securement devices
- Adhesive device had a 288% increase in risk of CLABSI compared to SecurAcath

Dramatically Decreases Catheter Dislodgement

- Catheter dislodgement defined as accidental removal or movement that resulted in
- loss of function • SecurAcath clinical data publications show very low dislodgement rates of 0-1.6%²⁻⁷
- Adhesive securement devices have published dislodgement rates of 7-12%8-11
- Many accidental dislodgements occur during dressing changes when catheter is not secured
- Catheter replacement cost is approximately \$500 at bedside, \$1,000 in IR¹², \$1,200 in pediatrics: these are decreased with SecurAcath

Prevents Catheter Movement

- Catheter movement at the insertion site can introduce bacteria beneath the skin¹³
- Improved stability may promote healing at insertion site which acts as a natural barrier to infection
- May reduce phlebitis. thrombosis and infection

Improves Efficiency

- One SecurAcath secures for the life of the line
- Catheter remains secure during dressing changes
- Saves time during routine dressing changes
- Dressing change can be done 41% faster¹⁴
- Allows for easy catheter repositioning if catheter tip must be pulled back

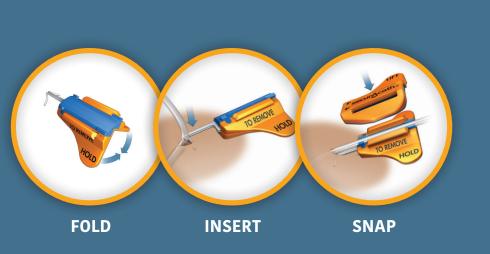
Allows 360 Degree Site **Cleaning While Secured**



- Excellent cleaning access around the entire insertion site
- Catheter remains stable and secure during cleaning
- Improved stability and cleaning may help reduce infections

SecurAcath work?

- Small, blunt, nitinol securement feet are placed just beneath skin right at the catheter insertion site
- Cover is snapped onto base to affix to catheter shaft
- No sutures or additional skin punctures are needed
- No adhesives needed for securement
- Remains in place for life of catheter
- Works with venous access and general/abscess drainage catheters



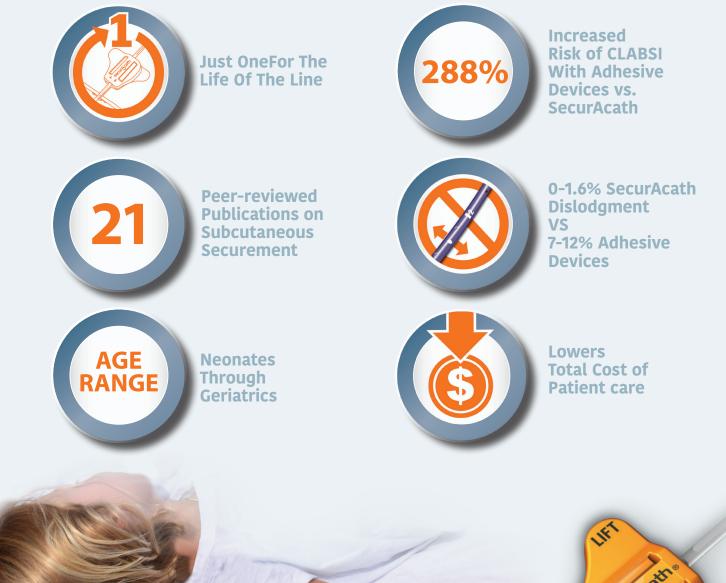
The current standard practices around venous access device securement include the use of sutures or adhesives, both challenged with complications. Sutures are designed and indicated for wound closure and not device securement. Orientation of sutured lines leads to compromised dressings, and displaced catheters because of the tensions and weight of the lumens, patients' hair, skin folds and moisture. The impetus for infection is obvious. Adhesive securement are challenged by many of the variables coupled by the weight and tensions exposing dislodgment and migration risk with every dressing change.

SecurAcath offers a single application solution that stabilizes the catheter beneath the insertion site, throughout the entire catheter dwell time. This offers clinician confidence, ease and success for the needed care for your venous access catheters. With a suite of clinical support resources, we will support your practicioners every step of the way.

Eliminates Costly Suture Needle Stick Risk

- 385.000 sharps injuries to healthcare workers in the U.S. annually, over 2 million globally ¹⁵
- 22% are caused by suture needles ¹⁶
- Average cost to hospital of up to \$3766 per exposure ¹⁷
- Serious cases involving bloodborne pathogen transmission far exceed average cost
- Lifetime HIV-related medical costs up to \$490.045 ¹⁸
- Chronic Hepatitis C lifetime cost \$64,490¹⁹
- Fear, anxiety, emotional distress and productivity loss of healthcare workers create additional unnecessary burden
- Violation of limiting employee's sharps exposure with engineered controls if available, CFR 1941.1030 = \$7,000

P LEMMA





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