

Clinical Facts

Effectiveness of the endotracheal tube cuff on the trachea: physical and mechanical aspects are regarded as ideal to prevent the ischemia of the trachea mucosa are not able to completely seal the trachea against aspiration of oropharyngeal secretions, which may pose risks to patients intubated or under general anesthesia in lengthy surgeries

Better by design

Better by Prevention

Better Today



INDICATIONS

The NeVap ASSET is indicated for oral/tracheal intubation for anesthesia , airway management and removal of accumulated subglottic secretions. It is indicated for single-patient, single-use only.

CONTRAINDICATIONS

The NeVap ASSET is contraindicated for cases involving the use of active electrosurgical electrodes or LASER beam(s) in the immediate area of the device. In the presence of flammable (e.g., oxygen enriched) mixtures, the use of LASER Beam or active electrodes may result in rapid combustion and the emission of corrosive and toxic products. The NeVap ASSET is contraindicated for any reprocessing or reuse.

CONTACT US

+1 (800) 206-9147
info@practicalhs.com
www.practicalhs.com



NEVAP

NEXT GENERATION VAP PREVENTION SOLUTIONS



Your Exclusive Guide
NeVap Aspire
Subglottic Suction
Endotracheal Tube

Ventilator Associated Events

Device Key Features

Clinical Facts




The NeVAP ASSET is here to protect your most important asset.

Ventilator-associated pneumonia is the most costly infection in modern hospitals. Have you tried the NeVAP solution?

Learn why NeVAP solution will work for your hospital. www.nevap.com

Practical HOSPITAL SERVICES

NEVAP
continuous subglottic suction



Ventilator Associate Events

- Never Events
- Cost \$43,000/case
- Increased Mortality
- Key Quality Indicator
- Monetary Penalties

Of all mechanically ventilated patients in the US

US VAP INCIDENCE IS

9-27%



Suction Appendage

- Allows for efficient secretion removal right above the cuff balloon

Radial Multi-port Design

- Blockage Resistant Design
- Facilitates suctioning in n positioning
- Distal suction port handle high volume suctioning
- Facilitates high pressure suctioning

Hospital Compliant

- No additional capital equipment
- No additional training
- Same or less respiratory care needed
- VAP Bundle Compliant

Continuous Subglottic Suctioning for the Prevention of Ventilator Associated Pneumonia has been shown to produce significant cost savings.

The Impact of supra-cuff Suction on Ventilator Associate Pneumonia Prevention shows decrease in the volume of oropharyngeal secretions decreases inoculum size and delays progression of late onset pneumonia and reduces early-onset pneumonia.

Investigating the failure to Aspirate Subglottic Secretions with the EVAC Endotracheal Tube showed prolapse of trachea mucosa into the subglottic suction port and exposes the patient to a high risk trachea injury.

Evaluation of Continuous Aspiration of Subglottic secretions in an in vivo study single suction port Endotracheal tubes impacted severe macroscopic & microscopic injury to the tracheal mucosa/submucosa in all subjects undergoing continuous aspirations of subglottic secretions.

Tapered off ET Tube Does Not Prevent Post operative Pneumonia Compared with Spherical-Cuff ET Tube after Major Vascular Surgery