



LifeFlow®

Improve resuscitation through earlier and controlled fluid delivery.

**SHOCK • SEPSIS • ANAPHYLAXIS • CARDIAC ARREST
HEMORRHAGE • RESPIRATORY FAILURE**

LifeFlow®

LifeFlow® is a hand-operated rapid infuser for critically ill patients who require urgent fluid delivery. Easy to use and intuitive, LifeFlow is intended to allow frontline providers to deliver fluid quickly and efficiently, improving patient care.

Earlier

Earlier fluid resuscitation improves outcome in patients with septic shock. LifeFlow delivers, on average, 500ml of fluid in less than 2.5 minutes through a 20G IV catheter. Average set-up time is less than 2 minutes.

Faster

LifeFlow provides rapid, controlled fluid challenges, allowing clinicians to quickly assess volume responsiveness and provide effective treatment.

Controlled

LifeFlow delivers fluid in 10ml increments with each complete handle compression. The syringe then automatically refills with handle release. Fluid will not flow freely without handle compression, ensuring that only the desired amount is delivered.

TREATING SEPSIS

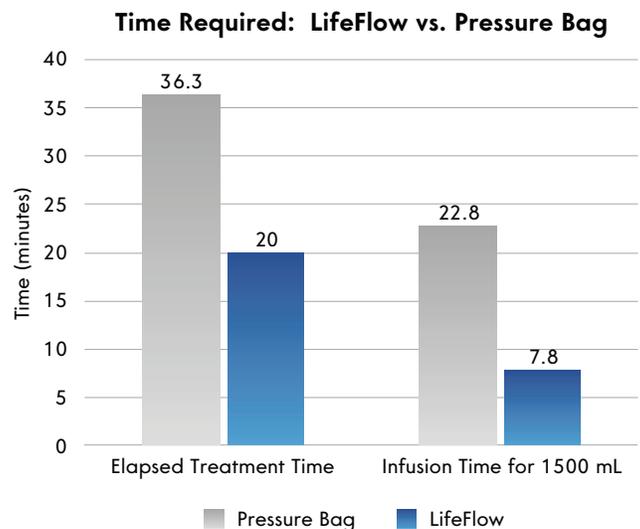
The CDC has declared sepsis a medical emergency and emphasizes that early recognition and aggressive treatment saves lives.^{1, 2, 3}

Evidence-based guidelines recommend early and aggressive fluid administration to reverse shock and restore tissue perfusion.^{3, 4, 5} Adherence to these guidelines improves outcomes and reduces mortality, yet fluid resuscitation is often delayed or inadequate.

LifeFlow Significantly Reduces Fluid Infusion Time and Scenario Completion Time

2017 Septic Shock Resuscitation Simulation Study:⁶

- Single provider required to complete multiple resuscitation tasks, including three 500ml NS boluses
- Measured time to complete fluid resuscitation and time to complete scenario
- Two groups: LifeFlow vs. pressure bag
- RN's and paramedics randomly assigned to each group



1. <https://www.cdc.gov/sepsis>

2. Leisman D, et al. Association of fluid resuscitation initiation within 30 minutes of severe sepsis and septic shock recognition with reduced mortality and length of stay. *Ann Emerg Med.* 2016 Sep;68(3):298-311

3. Seymour CW, Cooke CR, Heckbert SR, et al. Prehospital intravenous access and fluid resuscitation in severe sepsis: an observational cohort study. *Crit Care.* 2014;18:533

4. Brierley J, Carcillo JA, Choong K, et al. Clinical practice parameters for hemodynamic support of pediatric and neonatal septic shock. *Critical Care Medicine* 2009; 37:666-88

5. Dellinger RP, Levy MM, Rhodes A, et al. Surviving Sepsis Campaign: international guidelines for management of severe sepsis and septic shock: 2012. *Crit Care Med.* 2013;41(2):580-637

6. 383 A Novel Technique for Improving Fluid Resuscitation in Septic Shock Piehl, M. et al. *Annals of Emergency Medicine*, Volume 70, Issue 4, S150

Earlier. Faster. Controlled.

Deliver 500ml of fluid in less than 2.5 minutes with the LifeFlow Rapid Infuser.*

Clear canopy

Syringe is protected from contact during use

Up to 4X faster

A typical trained user is able to infuse fluids with LifeFlow at almost four times the rate of infusion with a pressure cuff

Automatic refill

LifeFlow automatically refills with fluid when trigger is released

Resource optimization

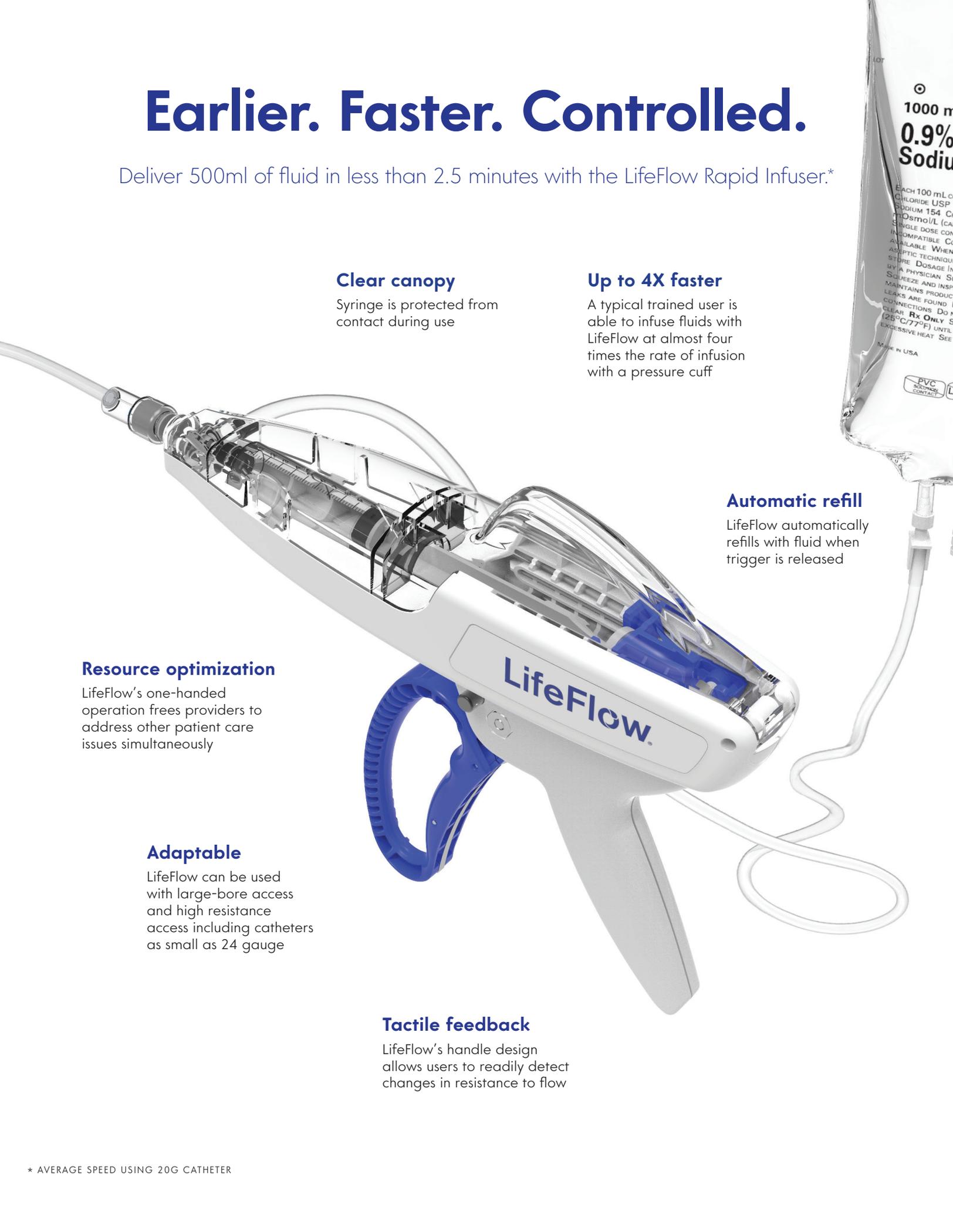
LifeFlow's one-handed operation frees providers to address other patient care issues simultaneously

Adaptable

LifeFlow can be used with large-bore access and high resistance access including catheters as small as 24 gauge

Tactile feedback

LifeFlow's handle design allows users to readily detect changes in resistance to flow



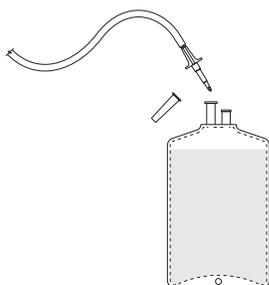
* AVERAGE SPEED USING 20G CATHETER

LifeFlow® Quick Guide

Six easy steps to set up and prime.

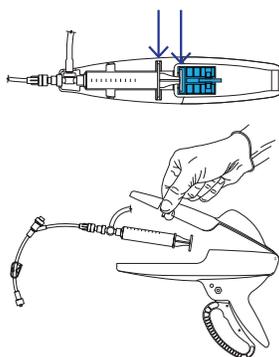
1

Spike IV bag.



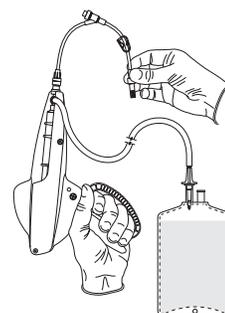
2

Place syringe plunger in blue shuttle and insert syringe with numbers up.



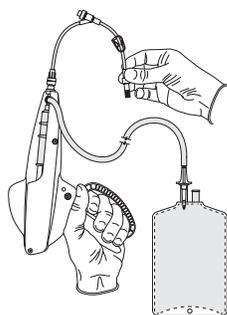
3

Purge all air from bag by cycling trigger.



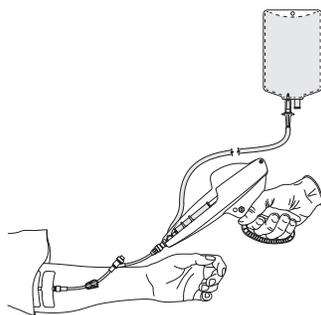
4

Point handle up and fully prime tubing and syringe.



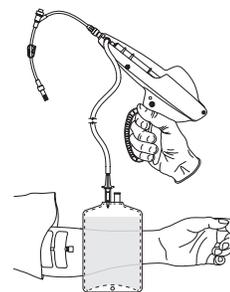
5

Infuse fluids by squeezing the trigger.



6

Prior to switching bags, disconnect from patient. Then repeat steps 3-5 with new bag.



! ENSURE COMPLETE REMOVAL OF AIR FROM THE SYSTEM PRIOR TO CONNECTING TO PATIENT.

PLEASE CONSULT THE INSTRUCTIONS FOR USE FOR CAUTIONS, WARNINGS, AND OTHER IMPORTANT INFORMATION.

CONTACT US TODAY TO SCHEDULE A DEMO

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