CEREBRAL DESATURATION. COMMON. COSTLY. DEBILITATING.

COMMON
Patients experience CEREBRAL OXYGEN DESATURATION*

- During cardiac surgery 1
  25 – 37%
- During high-risk cardiac surgery 4
  69 – 75%

73.7% of patients who desaturate in the OR during high-risk cardiac surgery also desaturate in the ICU.

COSTLY
INCREASED LENGTH OF STAY

Cerebral desaturation costs approximately

$3,300 per day 2,4
$4,000 per day with mechanical ventilation 6

CABG patients who experience prolonged desaturation have 3x greater risk for hospital stays

>6 days 6

Low mean intraoperative cerebral saturation during CABG procedures correlates with hospital stays

>10 days 7

DEBILITATING
CABG surgery patients who experienced prolonged desaturation:

- Are 12x more likely to have postoperative cognitive decline 8
- Have 26% higher rates of major organ morbidity and mortality (MOMM) than patients without cerebral desaturation 7

THE RISKS ARE REAL
In clinical trials, cerebral desaturation during cardiac surgery is associated with:

- Postoperative MOMM 7
- Neurologic injury 6,9
- Increased time on mechanical ventilation 10
- Prolonged hospital stay 7

INVOS™ MONITORING GIVES INSIGHT
Cerebral oximetry helps you: 7,8

- Detect desaturation
- Intervene promptly
- Improve patient outcomes

THE CLINICAL STANDARD IN CEREBRAL OXIMETRY
INVOS™ monitoring

- Monitors cerebral/somatic oxygenation (rSO2) and perfusion status
- Lets you detect cerebral desaturation and triggers rapid intervention
- May lead to decreased costs by helping you reduce postoperative complications 1

Learn more
TrustINVOS.com

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