



Hillrom™

Envella® Air Fluidized Therapy Bed

Accelerate Wound Healing
and Elevate Your Standard of Care



WHILE HE'S WORKING TOWARD RECOVERY, IS A PRESSURE INJURY WORKING AGAINST HIM?

Advanced pressure injuries and other complex skin conditions are major contributors to complications, length of stay and costs across inpatient care settings.

Pressure Injuries are Common

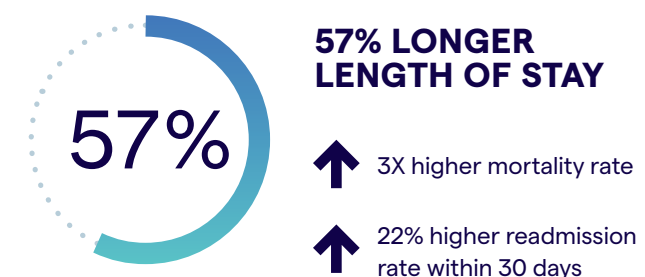
Without the right healing environment, pressure injuries and complex wounds are frequent occurrences.



■ Deep Tissue Injuries can quickly become stage 3-4 pressure injuries²

Pressure Injuries are Costly

Pressure injuries are a top expenditure for hospitals. Costs associated with hospital-acquired pressure injuries (HAPIs) can cost \$44,000 for stage 2 injuries — and \$90,000 for stage 4³. Pressure injuries are associated with:⁴



FOR BETTER HEALING, RETHINK YOUR SURFACE

Patients with pressure injuries and complex wounds need elevated care. We developed the **Envella® Air Fluidized Therapy Bed** — our most advanced wound care surface to date — to help them heal more quickly and comfortably.





WHAT IS AIR FLUIDIZED THERAPY?

AIR FLUIDIZED THERAPY (AFT) PUSHES AIR THROUGH A BED OF MILLIONS OF TINY BEADS. THIS UNIQUE, FLUID-LIKE ENVIRONMENT CREATES A SENSATION LIKE FLOATING ON WATER, AND IT HELPS TO:

- Maximize immersion and envelopment
- Minimize shear and pressure
- Control the skin's microclimate for an ideal healing environment

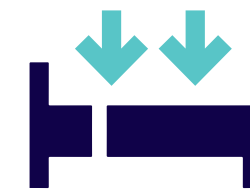


Proven Performance

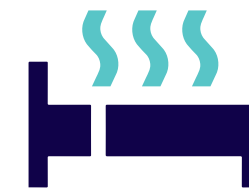
BASED ON TEST METHODS DEVELOPED BY THE NPIAP SUPPORT SURFACE STANDARDS INITIATIVE, THE ENVELLA BED PERFORMS BETTER THAN OTHER POWERED AIR SURFACES LIKE THE DOLPHIN FIS® MATTRESS. 6,7,8

ACCORDING TO WOCN^{®5}

If patients have:	Use the following surface type:	Hillrom Recommends:
Significant* mobility issues	Reactive/constant low pressure (CLP) or alternating pressure (AP) surface	AccuMax Quantum™ VPC Surface
Significant* moisture and mobility issues	Low air loss (LAL) surface	pro+ Surface
Wounds and limited turning surfaces	Powered air surface with low air loss (LAL)	Centrella® max Surface Envision® Surface P500 Surface
Wounds, limited turning surfaces, significant* moisture and mobility issues	Air fluidized therapy (AFT)	Envella® Air Fluidized Therapy Bed



45%
BETTER PRESSURE REDISTRIBUTION^{6*}



58X
GREATER EVAPORATIVE CAPACITY^{7*}



95%
BETTER SHEAR PERFORMANCE^{8*}

4 Braden score determines "at-risk" patients. Subscale scores identify surface needs.
*Significant defined as subscale score of 1 or 2.

5 NPUAP S3i standardized test guidelines provide objective means to evaluate and compare support surface characteristics.
*Based on mechanical performance only.

HELP PATIENTS HEAL MORE QUICKLY WITH THE ENVELLA[®] AIR FLUIDIZED THERAPY BED

Help your patients heal more quickly and comfortably with a bed designed specifically for wound care and prevention.



Elevate Comfort

- 1 Adjustable comfort zones provide weight-based pressure redistribution in the head section
- 2 Auto-leveling bead bath and reinforced side bolsters keep patients from bottoming out and maintain immersion
- 3 Adjustable firmness keeps patients in a comfortable position and improves lumbar support
- 4 Air flow, temperature and more are easy for patients to adjust

Elevate Safety

- 5 Bed exit alarm (with alert silence) helps protect patients at risk of falls
- 6 Side/surface transfer deflates the head-of-bed and side bolsters to help you move patients more easily and safely
- 7 Head-of-bed angle indicator and alert help you monitor pulmonary complications and protocol compliance
- 8 CPR quick-release handle gives you the access you need, when you need it

Elevate Ease of Use

- 9 Simple touchscreen controls are consistent with other Hillrom[™] beds
- 10 Self-standing siderails and cord wrap hooks help you work efficiently
- 11 Integrated scale lets you weigh patients any time without disrupting the wound site
- 12 Central brake and alert make it easy to maneuver

THE EVIDENCE IS CLEAR

AFT surfaces have been proven to create ideal healing environments for patients needing complex wound care.

High-Risk Pressure Injury Prevention

In a study of very-high-risk, post-op ICU patients, 25 were placed on a standard surface and 27 were placed on AFT.⁹

The 25 patients on standard surfaces developed:⁹

- 40 pressure injuries
- 60% of injuries were stage 3-4

The 27 patients on AFT surfaces developed:⁹

- 1 pressure injury
- 0% of injuries were stage 3-4



40 vs. 1

40 PRESSURE INJURIES DEVELOPED ON STANDARD SURFACES VS. 1 PRESSURE INJURY ON AFT SURFACES.⁹

On the AFT surfaces, 0% of injuries were stage 3-4.

Post-Op Flap and Graft Healing

In a post-op study, 16 flap patients were placed on AFT immediately after surgery.

94% of these patients developed no complications.¹⁰

Burn Treatment

A retrospective analysis of 110 severely burned patients found that survival rates for those placed on AFT were much higher than predicted by ABSI score.¹¹

20-40% vs. 73%

ABSI SURVIVAL PREDICTIONS VS. SURVIVAL RATES FOR AFT PATIENTS.

- Survival rates for patients on conventional surfaces were in line with predictions.¹¹
- Total burn surface area reduced by 50% for AFT patients, but only 30% for non-AFT patients.¹¹

Advanced Pressure Injury Healing

A case series followed 10 medically complex patients with 25 wounds.¹²



WHEN PLACED ON AFT, 88% OF ALL WOUNDS SHRANK¹²

- 59% average area reduction.¹²
- Five of the patients started on LAL surfaces, on which their wounds worsened — but improved when moved to AFT.¹²

Pain Management

A case series with 25 patients with advanced malignancy and bone metastases found that patients with bony metastases and fractures were more comfortable and required less narcotic pain medication on AFT than on the previous standard of care.¹³

HELP YOUR PATIENTS HEAL FASTER

WHEN YOUR PATIENTS HEAL FASTER, YOU CAN SPEND LESS — WITH A LOWER OVERALL COST OF TREATING PRESSURE INJURIES COMPARED TO OTHER SURFACE THERAPIES AND BETTER OUTCOMES FOR YOUR PATIENTS.

In the Hospital

In a case study of 17 acute care patients with Stage 2-4 pressure injuries, patients on AFT surfaces had shorter stays and lower costs of care compared to patients using conventional therapies.¹⁴

↓ 30 DAYS SHORTER LENGTH OF STAY¹⁴

↓ 30% LOWER COST OF CARE PER PATIENT¹⁴

In Long-Term Care

A model indicates AFT could result in 77% less healing time and 66% lower total average cost when compared to alternating pressure surfaces for treating Stage 3-4 pressure injuries.^{15,16}

↑ 4.4X FASTER HEALING RATE^{15,16}

↓ 77% LESS HEALING TIME^{15,16}

↓ 66% LOWER TOTAL COST OF CARE^{15,16}

Helping You Provide The Right Wound Care For Each Patient

Wound care can be challenging — so we're here to support you. Through the Hillrom™ Safe Skin® Program, our clinical experts will share their knowledge and evidence-based tools to help your care teams prevent and treat pressure injuries for improved clinical and financial outcomes.

DID YOU KNOW?

Our partnership with the WOCN® Society led to the first evidence- and consensus-based support surface algorithm, which is the core of our program.



Dependable Rental Service — How and When You Need It

When you need advanced technology to provide exceptional care for your exceptional cases, we deliver.

Our large service network and flexible delivery options ensure your equipment arrives quickly, fully functional and ready for patients.

[Learn more at hillrom.ca](https://www.hillrom.ca)



Better Healing With Elevated Care

Elevate your standard of care today. We can help. Get started by calling 1-800-267-2337 or reach out to your local Hillrom sales representative.

ABOUT HILLROM

Hillrom is a global medical technology leader whose 10,000 employees have a single purpose: enhancing outcomes for patients and their caregivers by advancing connected care. Around the world, our innovations touch over 7 million patients each day. They help enable earlier diagnosis and treatment, optimize surgical efficiency and accelerate patient recovery while simplifying clinical communication and shifting care closer to home. We make these outcomes possible through connected smart beds, patient lifts, patient assessment and monitoring technologies, caregiver collaboration tools, respiratory care devices, advanced operating room equipment and more, delivering actionable, real-time insights at the point of care. Learn more at hillrom.ca.

References

- ¹ Hillrom International Pressure Ulcer/Injury Prevalence (IPUP) Survey 2010-2020 Trending.
- ² Wake W. Pressure Ulcers: What Clinicians Need to Know. The Permanent Journal 2010.
- ³ Chan, B, et al. "Net costs of hospital-acquired and pre-admission PUs among older people hospitalised in Ontario." Journal of Wound Care (2013).
- ⁴ Braden B. "Costs of Pressure Ulcer Prevention. Is it really cheaper than treatment?" NPUAP.
- ⁵ McNichol L, Watts C, Mackey D, Beitz JM, Gray M. Identifying the Right Surface for the Right Patient at the Right Time: Generation and Content Validation of an Algorithm for Support Surface Selection. Wound Ostomy Continence Nurs. 2015;42(1):19-37.
- ⁶ Hillrom Study. Peak Sacral Pressure. LR0001446. 2017.
- ⁷ Hillrom Study. Microclimate Management. LR0001446, LR0003673. 2017.
- ⁸ Hillrom Study. Horizontal Stiffness. LR0001817, 2016. LR0003675. 2017.
- ⁹ Jackson M, McKenney T, Drumm J, et al. Pressure Ulcer Prevention in High Risk Cardiovascular Patients. Critical Care Nurse. 2012;31(4):44-53.
- ¹⁰ Dolezai R, Cohen M, Schultz R. The Use of Clinatron Therapy Unit in the Immediate Postoperative Care of Pressure Ulcers. Annals of Plastic Surgery. 1985;14(1):33-36.
- ¹¹ Nickl S, Fochtmann-Frana, A, Nedomankys, J, et al. Air-fluidized therapy in the treatment of severe burns: A retrospective study from a burn intensive care unit in Austria. Journal of the Int Society for Burn Injuries. 2019;46:136-142.
- ¹² Arnold M, Yanez C, Yanez B. Wound Healing in the Long-Term Acute Care Setting Using an Air Fluidized Therapy/Continuous Low-Pressure Therapeutic Bed. J Wound Ostomy Continence Nurs. 2020;47(3):284-290.
- ¹³ Walsh M, Brescia FJ. Clinatron therapy and pain management in advanced cancer patients. J Pain Symptom Management. 1990;5(1):46-50.
- ¹⁴ Greer, et al. Cost-effectiveness and Efficacy of Air-Fluidized Therapy in the Treatment of Pressure Ulcers. Journal of Enterostomal Therapy. 1988.
- ¹⁵ Ochs RF, Horn SD, van Rijswijk L, et al. Comparison of Air-Fluidized Therapy with Other Support Surfaces Used to Treat Pressure Ulcers in Nursing Home Residents. Ostomy Wound Management. 2005;51(2):38-68.
- ¹⁶ Cuddigan, JE, Ayello EA. Treating Severe Pressure Ulcers in the Home Setting: Faster Healing and Lower Cost with Air Fluidized Therapy. Remington Report. 2004.

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