

The impact of the two most common procedures: IV access and blood draws^{1,2}

Current methods of IV access and blood draws may negatively impact patient and clinician satisfaction, which can hinder operational efficiency and costs.^{3,4}



The patient point of view

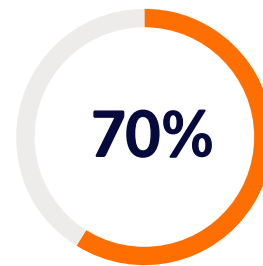


When **60-70% of clinical decisions are informed by blood collections**,⁵ they become a necessary and frequent occurrence during hospital stays.⁶

Almost every patient experiences IV access and blood draws.^{1,2}



Up to **90%** of hospitalized patients in the U.S. require an IV catheter⁴



Up to **70%** of all blood draws require venipuncture⁷

Complications may arise during these common procedures

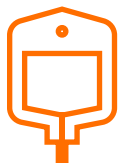


Blood draws

Up to **1 in 3** patients are difficult sticks⁸

Multiple sticks contribute to venous depletion which may compromise access for blood sampling and treatment³

Sample errors are **75%** of lab errors; **26%** may have detrimental effects on patient care⁵



IV access

35-50% IV failure rate⁴

Patients average **1.7** IVs during a 3.5 day period due to IV failure⁴

Complications may include extravasation, thrombophlebitis, and bloodstream infections⁴

The clinician perspective



Staff safety may impact job satisfaction,⁴ and use of needles or sharps presents a risk for needlestick injuries.³



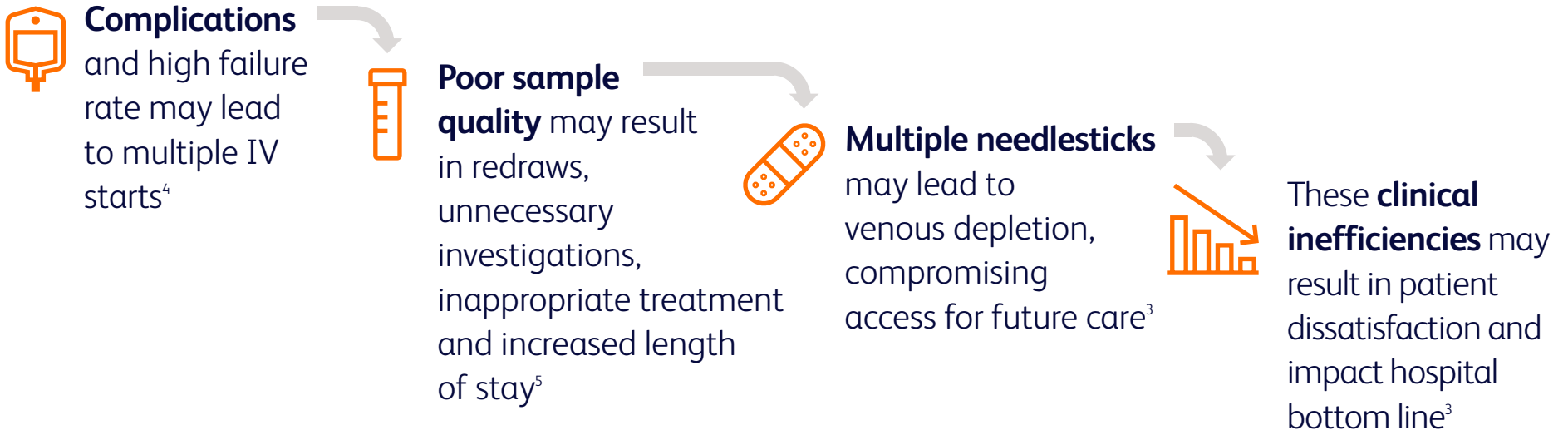
385,000 needlestick and sharp injuries occur annually in the US, and injuries may be underreported¹⁰



Risk of HBV, HCV, HIV, and more increase from exposure to contaminated needlesticks and sharp injuries¹¹

Trickle down effect of clinical inefficiencies

IV restarts and redraws due to preanalytical errors may cause clinical workflow inefficiencies, decrease clinical quality and increase dissatisfaction.^{4,5}



Operational and economic implications



Creating environments that foster a safe, comfortable patient experience is not only imperative for clinical outcomes and satisfaction, but also for your hospital's bottom line.¹²


Drawing the line at excellent


Patient satisfaction scores are tied to hospital reimbursement. In fact, **profit margins are 62% lower for hospitals with “low” patient satisfaction scores** compared to those with “excellent” patient satisfaction scores.¹²

The cost of status quo in blood draws and IV access

 **\$747**
The median of direct and indirect costs for accidental needlestick injuries¹³

 **Up to \$4,838**
Post blood exposure management costs per reported exposure¹⁴

 **\$980,000**
The cost of avoidable IV complications in an average 200 bed hospital^{*#4}

 **\$2.4 million**
The potential cost of preanalytical specimen errors for a hospital with \$200M operating expense^{**5}

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*Costs are estimated for a 200-bed U.S. hospital

#Annual estimate for 100,000 catheters, with a 35% failure rate and a conservative \$28 average cost per IV insertion

**Math: \$200M operating expense x 1.2% = \$2.4M

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