



# Introducing enFlow™ from Vyaire

A SIMPLE TO USE, FAST FLUID WARMER



BEGIN

**Maintaining  
normothermia is  
vitally important to  
patient outcomes  
throughout the  
care continuum**

## Today's challenges



Patient temperatures can fall fast<sup>1</sup>



With each drop in degree, patient care can be compromised<sup>2-7</sup>



Transport between perioperative settings





enFlow™ helps you achieve and maintain normothermia  
**SIMPLY, QUICKLY, AND SAFELY**



INSIGHT

**OVERVIEW**

SIMPLICITY

SPEED

SAFETY

SUMMARY



# Simplicity



## Effortlessly fits into current workflow

- Designed for use by soldiers in extreme conditions, enFlow<sup>™</sup> is very simple to operate.
- Easily insert the cartridge to begin warming



## Simple control

- Easy to read, self-orienting display
- Effective warming from KVO to 200mL/min



## Use in perioperative care environments

- Cartridge can remain in-line during transport
- Accompanies patients throughout the care continuum

enFlow<sup>™</sup> is the **SIMPLE WAY** to warm fluids, delivering ease and comfort for hospital teams and their patients.





# Speed

Deliver warmed fluids fast with enFlow™



## Fast warm-up time (<18 seconds)

- Rapidly warms blood and fluids
- Minimizes prep and wait times
- Helps you achieve results quickly



## Low priming volume (4mL)

- Reduces the amount of fluid needed to prime the line
- Allows the warming process to start quickly



## Close to the patient

- Placement within centimeters of your patient's IV site
- Prevents rapid fluid heat loss<sup>8,9</sup>



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# 3 Safety



## Ensures safe delivery of warm fluids to patients

- Parylene coated
- Cartridge has been extensively tested
- Each cartridge is radiation sterilized, non-pyrogenic, DEHP free, and made with no natural rubber latex

From cartridge design to temperature set point, patient safety is our foremost concern



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# Achieve comfortable control with enFlow™ IV fluid and blood warming system



## SIMPLIFIES

**the care experience**  
delivering all-around ease  
and comfort for patients  
and hospital teams



## SPEEDS UP

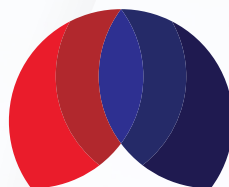
**IV fluid and blood warming**  
helping to accelerate  
patient recovery times and  
reduce hospital costs<sup>1,2</sup>



## SAFELY

**delivers warm fluids  
to patients** to maintain  
normothermia throughout  
the care continuum





#### GLOBAL HEADQUARTERS

Vyaire Medical, Inc.  
26125 North Riverwoods Blvd  
Mettawa, IL 60045  
USA



#### MANUFACTURED FOR

Vyaire Medical, Inc.  
26125 North Riverwoods Blvd  
Mettawa, IL 60045  
USA



#### EMERGO EUROPE

Prinsessegracht 20  
2514 AP The Hague  
The Netherlands



#### AUSTRALIAN SPONSOR

Vyaire Medical Pty Ltd  
Suite 5.03, Building C  
11 Talavera Road  
Macquarie Park, NSW 2113  
Australia

**VYAIRE.COM**

**REFERENCES:** **1.** Sessler DI. Perioperative heat balance. *Anesthesiology*. 2000 Feb;92(2):578-96. doi: 10.1097/00000542-200002000-00042. **2.** Yokoyama K, Suzuki M, Shimada Y, Matsushima T, Bito H, Sakamoto A. Effect of administration of pre-warmed intravenous fluids on the frequency of hypothermia following spinal anesthesia for Cesarean delivery. *J Clin Anesth*. 2009 Jun;21(4): 242-8. doi: 10.1016/j.jclinane.2008.12.010. **3.** Kurz A, Sessler DI, Lenhardt R. Perioperative normothermia to reduce the incidence of surgical-wound infection & shorten hospitalization. *N Engl J Med*. 1996 May 9;334(19):1209-15. doi: 10.1056/NEJM199605093341901. **4.** Frank SM, Fleisher LA, Breslow MJ, et al. Perioperative maintenance of normothermia reduces the incidence of morbid cardiac events. *JAMA* 1997;277(14):1127-34. **5.** Wick EC, Hirose K, Shore AD, et al. Surgical site infections and cost in obese patients undergoing colorectal surgery. *Arch Surg*. 2011;146(9):1068-1072. doi: 10.1001/archsurg.2011.117. **6.** Heier T, Caldwell JE, Sessler DI, Miller RD. Mild intraoperative hypothermia increases duration of action and spontaneous recovery of vecuronium blockade during nitrous oxide-isoflurane anesthesia in humans. *Anesthesiology*. 1991;74(5):815-9. doi: 10.1097/00000542-199105000-00003. **7.** Rajagopalan S, Mascha E, Na J, Sessler DI. The effects of mild perioperative hypothermia on blood loss and transfusion requirement, *Anesthesiology*. 2008;108(1):71-7. doi: 10.1097/01.anes.0000296719.73450.52. **8.** Smith C, Wagner K. Principles of fluid and blood warming in trauma. *International TraumaCare*. 2008;18(1). **9.** Bissonnette B, Paut O. Active warming of saline or blood is ineffective when standard infusion tubing is used: an experimental study. *Can J Anesth*. 2002;49(1):270-275.

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VYR-GBL-2200001 1.0