

YOU MAKE WINS HAPPEN

Introducing Restore2

An adjunct to your closed suction system.

“Although the internal lumen of an ETT decreases substantially after a few days of intubation due to formation of biofilm, suctioning should be performed only when clinically indicated in order to maintain the patency of the artificial airway.”





Source: AARC Clinical Guidelines, 2010¹

THE CHALLENGE:

Due to accumulated secretions, performance of an ETT can be equivalent to that of a new ET tube one to four sizes smaller. This may impact the tolerance of ventilator weaning.²

THE WIN:

Restore2. Single use. Multiple Benefits.⁵⁻⁸

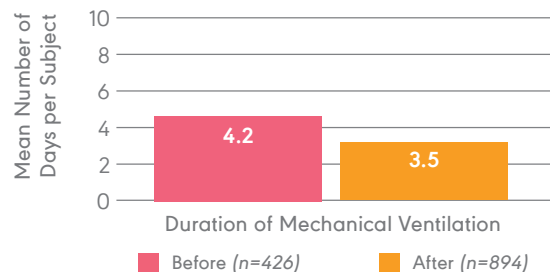
-  Unique wiping technology clears the ET tube of tenacious secretions and biofilm
-  Reduces airway resistance and work of breathing
-  Gives patient an improved opportunity to pass their SBT
-  Decreased costs associated with care of intubated patients, providing a return on investment



Unique radially-expanding wiper balloon clears the inside of the ET tube

Sterile, single-use device

Daily clearing of the ET tube results in a decrease in average vent days.³



Study objective: Evaluate the efficacy of cleaning the ETT daily with the Restore2 prior to the spontaneous breathing trial. Design: 1,320 patients in a five-year, retrospective, observational, single centered study Primary endpoints: Average duration of mechanical ventilation, average hospital length of stay, and average hospital direct cost per subject. **Results:** Decreased average time on the ventilator from 4.2 to 3.5 days (0.7±0.8, p<0.01).

Unique wiping technology clears the ET tube to help liberate your patients from the vent sooner³



Wiper balloon positioned for deployment



Wiper balloon deployed for cleaning



- Compatible with all current closed suction systems and all endotracheal tubes sizes 7.0-8.5
- After connection, wiping procedure can be performed while the patient is being ventilated
- Length-limited catheter avoids insertion more than 1-2 cm beyond the ETT tip on standard length tubes
- Soft, silicone catheter with atraumatic tip
- Protective sheath helps prevent exposure to secretions
- Depth markers on the catheter guide appropriate insertion

Also available as a 72-hour closed system, with versatile manifold, and closed suction catheter
Ask about our Liberator HCS, ET Tube Clearing System

| Item No. | Description | Case Qty. |
|----------------|--------------------------|-----------|
| 01-EC-350-0001 | Restore2, 7.0-8.5 mm ETT | 10 |

Win-win with Restore2. Visit AvanosETTclearing.com or call 1-844-4AVANOS.

References: 1. Endotracheal Suctioning of Mechanically Ventilated Patients with Artificial Airways 2010. *Respiratory Care June 2010*, 55 (6) 758-764. 2. Wilson et. al., Increases in Endotracheal Tube Resistance are Unpredictable Relative to Duration of Intubation, *Chest*, 2009 3. Wicker B., Schofield L., Salem G., A Five Year Study to Evaluate Cleaning Endotracheal Tube Prior to Weaning Trials, AARC Annual Meeting (Indianapolis, IN) October 4-7, 2017 4. Schofield L., et. al., Comparison of Two Endotracheal Tube Cleaning Devices in Reducing Airway Resistance for the Mechanically Ventilated Patient, Poster, AARC (Tampa, FL) November 9, 2015. 5. Mietto C. et. al., High-Resolution Computer Tomography in Assessing Endotracheal Tube Obstruction, Poster, SCCM Annual Meeting (San Juan, PR) January 19-23, 2013. 6. Schofield L., The endOclear® Liberator® Cleaning Device in Decreasing Airway Resistance, AARC Annual Meeting (Indianapolis, IN) October 4-7, 2017. 7. Schofield L., et. al., The Impact of Unique Airway Clearance System on Airway Mechanics in Ventilated Patients, Poster (McLaren Northern Michigan Hospital) 8. Schofield L., Saur G., The Use of the endOclear Catheter Device to Improve Ventilator Weaning, *Chest* 2013; 144:64A