CEREBRAL DESATURATION. COMMON. COSTLY. DEBILITATING.

The clinical standard in cerebral oximetry monitoring.

COMMON
- Patients experience cerebral oxygen desaturation*.
  - During cardiac surgery: 25 – 37%
  - During high-risk cardiac surgery: 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 day²,4 $4,000 per day with mechanical ventilation⁶.
  - CABG patients who experience prolonged desaturation have 3x greater risk for hospital stays >6 days⁶.
  - Low mean intraoperative cerebral saturation during CABG procedures correlates with hospital stays >10 days⁷.

DEBILITATING
- CABG surgery patients who experienced prolonged desaturation:
  - Are 12x more likely to have postoperative cognitive decline⁸.
  - Have 26% higher rates of major organ morbidity and mortality (MOMM) than patients without cerebral desaturation⁷.

THE RISKS ARE REAL
In clinical trials, cerebral desaturation during cardiac surgery is associated with:
- Postoperative MOMM⁷
- Neurologic injury⁸,⁹
- Increased time on mechanical ventilation¹⁰
- Prolonged hospital stay⁶,⁷

INVOS™ MONITORING GIVES INSIGHT
Cerebral oximetry helps you:⁷,⁷**
- Detect desaturation
- Intervene promptly
- Improve patient outcomes

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 complications¹
- Improves patient outcomes⁷,⁸

Learn more TrustINVOS.com