

VeinViewer[®] by Christie Data Trial:

SSM Cardinal Glennon Childrens Medical Center				
	THE HIGHLIGHTS:			IN SUMMARY:
 Introduction Vascular access is frequently required in hospitalized children and infants for a number of different clinical indications. Obtaining vascular access in pediatric patients can be a major challenge to clinicians. Multiple attempts and subsequent delays in treatment are common when attempting to gain venous access in these patients 				Obtaining peripheral venous access difficult, time consuming, and a fru practitioners. Venipuncture in chill as a great source of pain and a in children. As a result, the add with pediatric patients can make to frustrating for both the patient and to Today, there are technologic impre-
	 Purpose of The Data Tr To compare the av first stick success r obtain venous acc satisfaction ratings and VeinViewer as venous access in c 	rial verage number ate, average tim ess, and the ave s in both the tra sisted method of hildren.	significantly facilitated successful the various options for acquiring an innovative near-infrared techn "road-map" directly on a patient's in gaining peripheral venous acce Childrens Medical Center data trial effectiveness of VeinViewer in ass	
	Outcome Measures Number of attemp success rate, time satisfaction. 	me Measures umber of attempts, first attempt uccess rate, time to access and patient atisfaction.		The data trial was a prospective requiring vascular access throug results of the data trial were truly sig
	Cardinal Glennon Data Trial	Traditional Method	VeinViewer Assisted Method	The traditional method for obtaining a 31% 1st attempt success rate attempts per IV of 2.08 The av
	n =	48	40	For the VeinViewer method, the
	Mean Number of Attempts Per I.V.	2.08	1.18	83% with an average number of average time to successful vence method was 6.60 minutes. The p based on a scale of 1-5.* The tra average patient satisfaction score method resulted in an average score
	1st Attempt Success Rate	31%	83%	
	Mean Time Per I.V. (minutes)	17.06	6.60	
	Patient Satisfaction Score*	1.85	4.07	VeinViewer very clearly demonstra number of attempts, average tir
	Conclusion • VeinViewer demon • A 50% decrease • A more than 10 success.	nstrated: e attempts per l ¹ 0% increase in 7	and 1st attempt success rates. seem to have led to the increas SSM Cardinal Glennon Children has demonstrated once again th beneficial tool in healthcare today.	

- A greater than 50% reduction in time to start an IV.
- A greater than two-fold increase in patient satisfaction scores.



s in children can be extremely strating endeavor for healthcare ldren has often been described inxiety for patients, specifically ed difficulty often experienced the procedure that much more the practitioner.

ovements in equipment design, naging techniques that have venous access and enhanced vascular access. VeinViewer is ology that provides a vascular skin to help guide the clinician ss. The SSM Cardinal Glennon was performed to evaluate the isting the process of obtaining the traditional method.

analysis of pediatric patients hout the entire facility. The nificant.

ng venous access demonstrated and an average number of erage time required to obtain nal method was 17.06 minutes. 1st attempt success rate was attempts per IV of 1.18. The ous access via the VeinViewer patient satisfaction scores were ditional method resulted in an of 1.85, while the VeinViewer e of 4.07.

ated enhancements in average ne needed for venous access Moreover, these improvements e in patient satisfaction. The ns Medical Center data trial at VeinViewer is an extremely

*1 - very unsatisfied; 2 - unsatisfied; 3 - neutral; 4 - satisfied; 5 - very satisfied

Christie Clinical Operations *References provided upon request