

HEMOBAG®

Global Blood Resources (GBR)

Hemobag = OFF-Line Modified Ultrafiltration
MUF = STS/SCA Guidelines: Class I-A Evidence

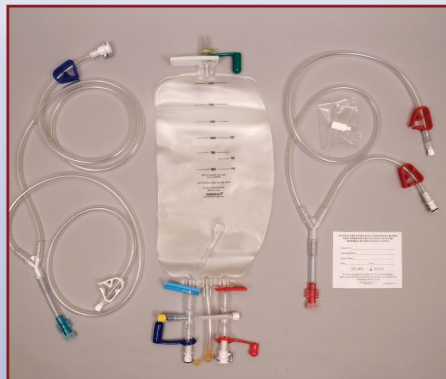


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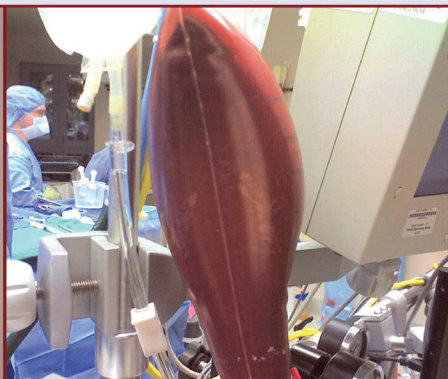
Hemobag® versus Traditional Post-Bypass Blood Salvage Methods

Clinical Studies Indicate:

- Complete CPB circuit salvage and processing (No cells left behind)
- Hematocrit is high: routinely at 50%
- High Albumin and Total Protein (COP)
- PT / PTT are restored to baseline levels
- Platelet count is significantly higher
- Fibrinogen significantly increased (Very high levels)
- INR is restored to baseline normal levels



The Hemobag® and TS3 Tubing Set Circuit Components



The Hemobag® Filled with CPB Whole Blood



Finished Product Concentrated in 8 - 10 Minutes

Clinical and Economic Advantages:

- Improved coagulation profile and enhanced fluid volume management
- Helps avoid post-bypass exposure to "Allogeneic" donor blood products
- Currently used by surgeons, anesthesiologists and perfusionists globally
- Tool for cost benefit analysis designed to objectively assess economic savings
- CPB circuit remains fully primed (Bubble Free) and ready for any emergency



1-800-942-9243

The Ideal End Product Given Back to the Patient



"Concentrated Whole Blood"

- High HCT
- High Albumin
- High Total Protein
- High Platelets (*functional*)
- Normal Electrolytes
- Very High Fibrinogen
- 8-10 Minute Procedure
- Keeps the CPB Circuit **Safely primed for Security**
- All Autologous Cells are returned to the patient!

Post CPB Circuit Blood Volume Processing

1 + 1 = 2X Better!

Red Cells
Necessary
Component

Plasma
Necessary
Component

For the
Patient