



PrevisEA™

A Vital Sign For Postoperative Digestive Health

**More than
a gut feeling**

Precision Medicine and Postoperative Ileus

PrevisEA™ is a wearable medical device placed on the patient's abdomen after surgery. It detects and quantifies a clinically validated acoustic biomarker within 12 hours after surgery to determine the presence of gastrointestinal impairment (GII) due to impending postoperative ileus or other causes.

The GII Problem

- GII, commonly caused by (POI), is characterized by vomiting, the need to reverse the diet or NG tube placement > 24 hours postop, and may lead to dehydration, acute kidney injury, and the need for readmission.¹
- In ERAS care pathways, 25% of patients may immediately appear to tolerate oral refeeding, only to develop GII later leading to readmission rates exceeding 20%.^{2,3}
- Non-ERAS care pathways avoid the risk of POI developing post-discharge at the expense of much longer length of stay.



Up to
32%
of intestinal resection
patients experience POI⁴

POI has consistently been a leading cause of post-operative readmissions in the United States, responsible for up to 25% readmissions.^{2,3}

Why PrevisEA?

- **Determines individual patient risk for postoperative GI**
- Which may—
 - Assist in determining if early oral refeeding and early discharge are appropriate
 - Optimize length of stay based individual patient risk of GI
 - Reduce readmissions, improve outcomes and lower cost of care
- Noninvasive, easy to use

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Sound Medicine

PrevisEA analyzes intestinal sounds for a validated acoustic biomarker of digestive health which is displayed as the Previs™ Index. This biomarker reflects whether the patient is at risk for postoperative GI. This assists in optimizing length of stay and may avoid unnecessary readmissions, improve patient outcomes and lower the cost of care.



The Previs™ Index

Low Risk:

Digestive health supports early oral refeeding and earlier discharge

High Risk:

Digestive health **DOES NOT** support early oral refeeding and earlier discharge



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Precision Medicine and Postoperative Ileus
Optimizing Length of Stay and Reducing Readmissions

Easy to use



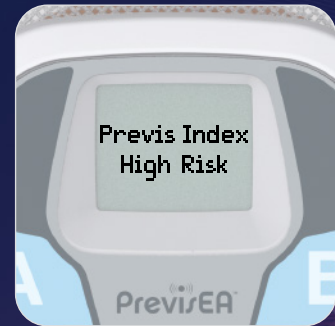
1. Place Device

PrevisEA™ is applied to any quadrant of the abdomen immediately following surgery



2. Power On

Once activated, PrevisEA listens for a validated acoustic biomarker



3. Results In 12hrs

The Previs™ Index determines if digestive health is sufficient to support early oral refeeding and early discharge or is at risk for postoperative GI.

For more information visit www.entacmedical.com or call 845-773-8473.

References

- 1 Merkow, R. P. et al. (2015). Underlying reasons associated with hospital readmission following surgery in the United States. *JAMA: The Journal of the American Medical Association*, 313(5), 483–495.
- 2 Nazzani, S. et al. (2019). Postoperative paralytic ileus after major oncological procedures in the enhanced recovery after surgery era: A population based analysis. *Surgical Oncology*, 28, 201–207.
- 3 Grass, F., Sliker, J., Jurt, J., Kummer, A., Solà, J., Hahnloser, D., Demartines, N., & Hübner, M. (2017). Postoperative ileus in an enhanced recovery pathway—a retrospective cohort study. *International Journal of Colorectal Disease* (Vol. 32, Issue 5, pp. 675–681).
- 4 Vather, R., Trivedi, S. & Bissett, I. Defining Postoperative Ileus: Results of a Systematic Review and Global Survey. *J Gastrointest Surg* 17, 962–972 (2013).



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