

# Healing Wounds...Saving Lives®



## Real Solutions for Wound Healing

Closed Pulse Irrigation® (CPI®) is the first step in wound healing, used in the initial debridement and cleansing of chronic or acute open wounds. It is particularly advantageous when there is a significant amount of necrotic material or bacterial BIOFILM contamination. CPI® serves as an alternative to multiple operating room debridements, which can be costly and painful.

Daily treatments are the key to removing and preventing the formation of BIOFILM, thus maintaining a healthy wound environment.

CPI® uses low pressure irrigation (8–15 psi) with volumes of 1500cc to 3000cc of saline.

The following wound types are well suited for CPI®:

- 1) Pressure Ulcers
- 2) Diabetic Foot Ulcers
- 3) Venous Stasis Ulcers
- 4) Tunneling Wounds
- 5) Surgical Site Infections (SSI's)
- 6) Contaminated Traumatic Wounds
- 7) MRSA/Other Resistant Bacterial Infections and Wound Colonizations

## History of CPI®

CPI® is a relatively new concept, however, the technique of pulse irrigation has actually been around for many years.

CPI® emerged as a safer protocol for wound irrigation in response to safety concerns over the spread of infectious materials during open pulse irrigation treatments performed without a reliable containment system. CPI® adds the critical element of TOTAL CONTAINMENT and SAFETY proven with LEVEL I CLINICAL EVIDENCE<sup>1</sup>. CPI® can lower the cost of daily wound care and eliminate the need for multiple operating room debridements. CPI® removes wound Bacterial Colonization without using antibiotics.

<sup>1</sup>Angobaldo J., Sanger C., Wounds 2008

<sup>2</sup>Granick M., Tenehaus M., OWM 2007

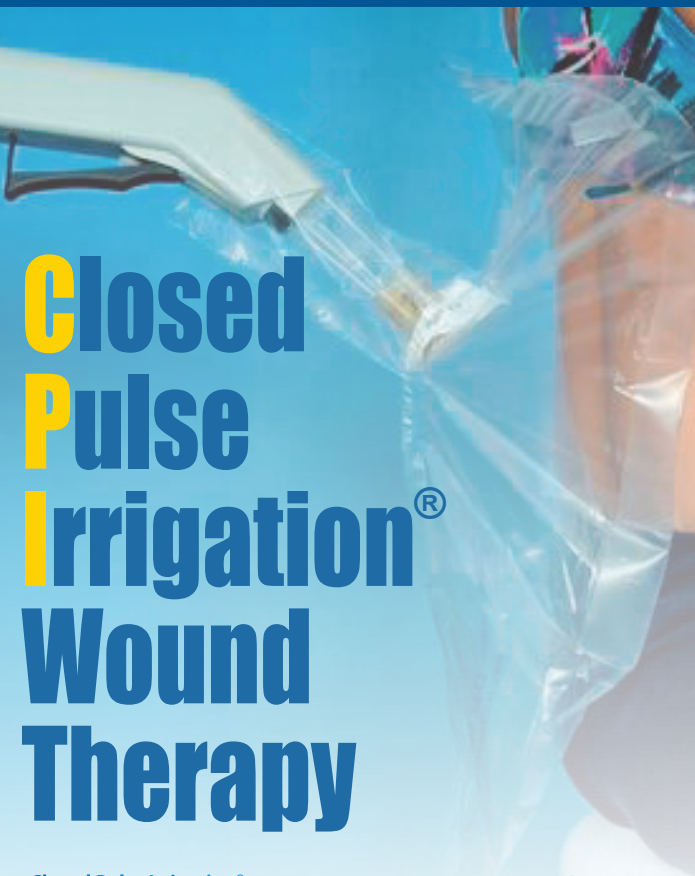


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The healing power of  
**pulse irrigation** through



## Closed Pulse Irrigation® Wound Therapy

Closed Pulse Irrigation®



**BIOFILM Based Wound Care**

for the bedside with safety and effective outcomes.



# Introducing the Latest Advance in Wound Care

There are more than 17 million chronic wounds in the United States. The cost of providing care to these patients is a burden to health care systems in the United States and around the world. Chronic wounds are currently being treated with surgical procedures, negative pressure devices and many topical agents, however, many times patients do not respond to traditional treatments.

## Introducing Closed Pulse Irrigation® (CPI®)

The CPI® Wound Therapy can cost effectively remove one of the most harmful impediments to wound healing, "Bacterial BIOFILM." Patients no longer need to suffer the harmful consequences of untreated "BIOFILM" on the surfaces of chronic wounds. The CPI® System safely and effectively removes "BIOFILM" from the surface of open and tunneled wounds. CPI® eliminates any need for operating rooms, anesthesia, or specialized treatment rooms when performing Pulse Irrigation by virtue of total bedside containment¹.



## Advantages



**SAFE TOTAL CONTAINMENT**



**RELIABLE OUTCOMES**



**LOWER COSTS**



**EFFICIENCY**

- Reduces BIOFILM and bacterial bioburden by 86.9% with each treatment².
- Uses HYDRO-MECHANICAL force to eliminate BIOFILM (MRSA, Ps, STAPH) without harming normal wound bed tissues.
- Portable/Bedside – Used in Hospitals, Clinics, Skilled Nursing Facilities, Homecare without hazardous contamination.
- Safely eliminates hazardous "Aerosolization" and "Splash Back", effectively eliminating cost and time of operating room debridements.
- Also can be used in conjunction with other modalities including Negative Pressure Wound Therapy (NPWT), Hyperbaric Oxygen Treatments, and E STIM.
- Decreases Wound Bed inflammation.
- Well tolerated with minimal pain and discomfort using a no touch no suction technique.

## Innovation of CPI®

### Results

- HYDRO-MECHANICAL removal of Necrotic Tissue using direct, localized hydrotherapy.
- HYDRO-MECHANICAL removal of BIOFILM without using antibiotics.
- HYDRO-MECHANICAL BIOSTIMULATION of normal tissues to enhance healing rates.

### CASE 1 (MRSA Wound)



**Day 1**



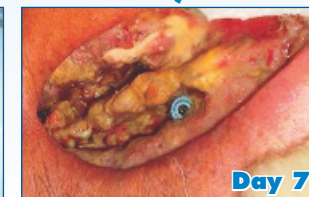
**Day 25**

**Healed**

### CASE 2 (MRSA Wound)



**Day 1**



**Day 7**



**Day 14**



**Day 28**

**Ready for flap closure**

