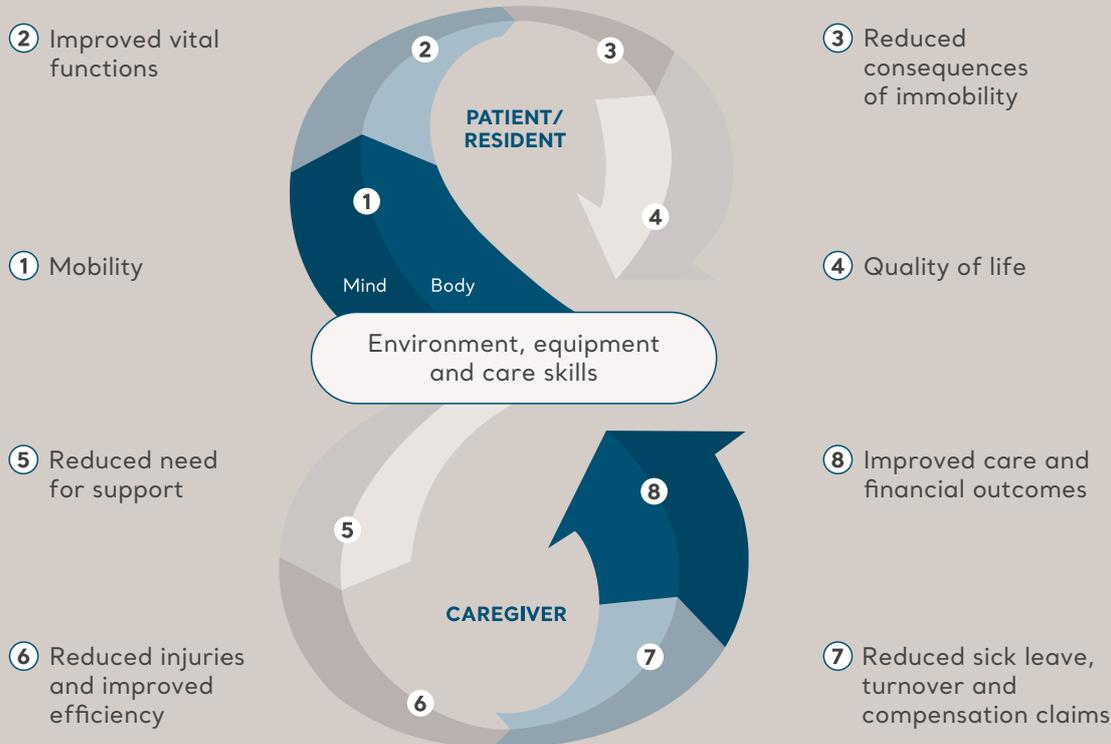




MULTIFUNCTIONAL POSITIONING AID FOR EARLY
MOBILISATION AND ICU REHABILITATION

Sara® Combilizer



The right **environment, equipment and care skills** need to be in place to allow the benefits of the Positive Eight to flow

Importance of mobilisation

A structured rehabilitation programme counteracts the adverse effects of immobility and enhances the function of body systems. It can also help to¹⁻³:

- Increase the rate of recovery
- Shorten hospital stays
- Create positive momentum for the rest of the rehabilitation plan
- Enhance long-term outcomes after discharge

An increasing body of research highlights the positive outcomes of mobilisation.

Benefits of mobility

With over 60 years experience, Arjo is dedicated to creating safe and efficient care environments. The mobilisation of residents and patients has always been a key factor in achieving our aim.

Arjo solutions are designed to promote mobility our patient handling systems are optimized to activate a patient's specific level of functional mobility.

Our mobility philosophy - The Positive Eight outlines how providing the right conditions for promoting mobility generates benefits for the health and wellbeing of residents, patients and caregivers, as well as the financial health of care facilities.

Muscle strength decreases by 20% after one week of bed rest

Early mobilisation improves the recovery process

Promoting mobility is beneficial in all care settings – from the long-term care of the elderly to acute care settings such as intensive care units.

Early patient mobilisation can start in the Intensive Care Unit (ICU) by using a standing or sitting position and is increasingly recognized as a way to achieve a range of benefits ¹⁻³. The aim is to:

- Improve respiratory function
- Enhance cardiovascular function
- Slow down muscle atrophy
- Increase levels of consciousness
- Increase functional independence
- Improve psychological well-being
- Reduce risk of pressure ulcers
- Increase proprioceptive or kinesthetic input

"The use of Sara Combilizer allows earlier mobilisation of ICU patients, which leads to higher level of mobility within ICU, resulting in reductions in ICU and hospital length of stay."⁴



MY PERFORMANCE

Mobilisation can start earlier with less strain for me. It means I can work more safely and concentrate on the patients good quality care at an early stage.



MY RECOVERY

I want to get back on my feet as soon as possible after intensive care. I need to know that everything is being done to avoid complications and speed my recovery.



MY BUDGET

More mobile patients means shorter hospital stay for patients and less risk for caregiver injuries, which all helps to cut our facility' scosts.



LATERAL TILTING

The lateral tilt function can be used in all positions to turn the support surface left or right up to 20 degrees. Tilting enables redistribution of a patient's weight and can also be used in rehabilitation exercises.



TRENDELENBURG POSITION

When required, the Sara Combilizer can be rapidly adjusted to take the patient from the supine position to the Trendelenburg position.

A positioning and mobilising aid for critical care

Sara Combilizer is a multifunction patient positioning and mobilising aid for use in critical care environments such as Intensive Care Units (ICU).

Sara Combilizer enables the early mobilisation of critically ill patients as part of a structured rehabilitation plan for treating the whole person.

The patient can be easily repositioned into a standing, supine or sitting position, as this versatile aid combines the functions of a tilt table, stretcher and chair.



My performance

Earlier mobilisation - Sara Combilizer enables mechanically ventilated ICU patients to be mobilized in different standing or sitting positions for several hours per day.

Patient Safety - There's a manual "quick-down" function that allows the caregivers to take the patient down to a lying position if complications occur.

Easy and efficient to use - Sara Combilizer feedback has shown a high acceptance amongst nursing staff, physicians and relatives. It is easy to integrate in the daily workflow due to its' unique properties: size, mobility, reliability and multiple features.

"Sara Combilizer has given completely new possibilities for the mobilisation of patients. You can for instance raise patients who are on both ventilation and continuous venovenous."⁵



SITTING POSITION

In a sitting position, patients can be raised to a level that provides good eye contact and enhanced personal interaction – an important factor for patient wellbeing.



STANDING POSITION

Sedated patients on mechanical ventilation can be raised securely to a standing position. Upright positioning can improve cardiovascular and respiratory function.



My recovery

Improved respiratory function – An upright position can improve respiratory and cardiovascular function.

Safe and secure – A secure strap system ensures the patient feels stable and comfortable in all positions. Availability of Sara Combilizer maneuvering control is threefold: hand control, control panel on the handle and an emergency control box in the chassis. The high degree of adjustability allows for an ergonomically correct working position.

Improving rehabilitation – This versatile aid provides the positioning options to contribute to individual rehabilitation programs.



Evidence underlines early mobilisation benefits

A growing body of evidence supports the effectiveness of early mobilization. When utilised, early mobility is associated with reduced ICU and hospital length of stay and improved functional outcomes².

Sara Combilizer may allow⁴ earlier mobilisation of ventilated patients previously deemed high risk, or inappropriate to mobilise, such as patients with low attention and level of consciousness, poor trunk stability and hemofiltration lines in the groin.

A review article on early mobilisation in the ICU concluded: "A new approach for managing mechanically ventilated patients includes reducing deep sedation and increasing rehabilitation therapy and mobilisation soon after admission to the ICU. Research provides preliminary evidence supporting the safety, feasibility and potential benefits of early mobilisation in critical care medicine."³

"An observational trial following the introduction of the Sara Combilizer within a large UK ICU appeared to correlate with a significant reduction in time taken to mobilise (7.6 vs. 10.6 days, $p < 0.05$). This was associated with a higher level of mobility at ICU discharge, as well as reduction in hospital lengths of stay."⁴



A versatile tool for early mobilisation

A standing or sitting position can deliver benefits that are vitally important in an optimized recovery process for a critically ill patient.

Sara Combilizer enables sedated or mechanically ventilated patients to be mobilized in different standing or sitting positions for several hours per day.

The innovative design of Sara Combilizer provides a safe and secure platform so that patients can remain standing for the period required to maximize early mobilisation benefits.

Sara Combilizer provides this benefit in combination with a full range of patient positioning options, making it a comprehensive solution as part of an ICU early mobilisation and rehabilitation program.



MY BUDGET

Intensive care, especially initial care using mechanical ventilation, involves high costs. Early mobilisation can help to reduce the length of an ICU stay and the duration of mechanical ventilation, cutting costs and improving financial outcomes for ICU management.

Product specifications

MOBILITY GALLERY

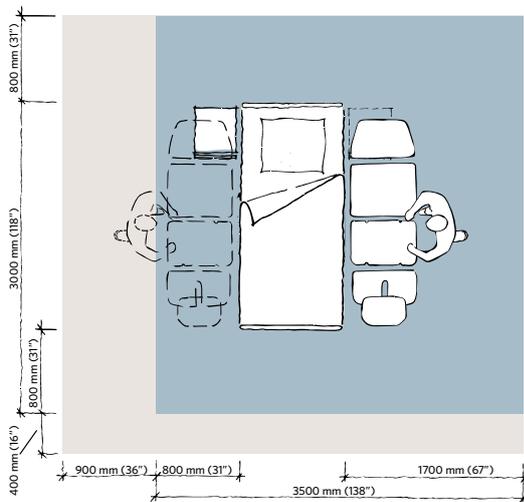
Suitable for Carl, Doris and Emma



- C.** Carl, who sits in a wheelchair and has little capacity to support himself.
D. Doris, who has no capacity to support herself.
E. Emma, who is almost completely bedridden and totally dependant.

Please contact Arjo for further information on the Mobility Gallery™.

SPACE REQUIREMENTS



Grey area shows the minimum working area required for the staff to be able to use the mechanical aids in an ergonomic way from one side.

Blue area shows required extension of working area to facilitate activities from either side to provide adequate access for the resident, mechanical aid and assisting carer.

PRODUCT INFORMATION

Length, seated position	1580 mm (62 1/4")
Max length, stretcher	2045 mm (80 1/2")
Width	720 mm (29 1/2")
Weight	115 kg (265 lbs)
Width of seat	510 mm (20 1/8")
Depth of seat	460 mm (18")
Minimum lifting height	588 mm (23 1/4")
Maximum lifting height	984 mm (38 3/4")
Backwards tilt of seat	-25° - 0°
Longitudinal tilt of stretcher	-25° - +75°
Sideways tilt of seat/stretcher, left and right	0° - 20°
Need for space at storage	915 x 714 mm (36 x 28 1/4")
Safe Working Load	200 kg (440lbs)
Four fixation belts: head, trunk, hip, knee level.	
Electrically powered actuators	24 V
Battery	24 V
Emergency stop	
Low friction castors (4, all of them with brakes)	

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Only Arjo designed parts, which are designed specifically for the purpose, should be used on the equipment and products supplied by Arjo.

As our policy is one of continuous development we reserve the right to modify designs and specifications without prior notice. © Arjo, Sara Combilizer Nov 2018

At Arjo, we are committed to improving the everyday lives of people affected by reduced mobility and age-related health challenges. With products and solutions that ensure ergonomic patient handling, personal hygiene, disinfection, diagnostics, and the effective prevention of pressure injury and venous thromboembolism, we help professionals across care environments to continually raise the standard of safe and dignified care. Everything we do, we do with people in mind.

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