

BENEFIT	NPWT	HBOT	EPIFLO
TOTAL PATIENT MOBILITY DURING TREATMENT			X
COMPACT SIZE ALLOWS TREATMENT ANYWHERE			X
NO INTERRUPTION IN PATIENT'S WORK/SOCIAL LIFESTYLE			X
SIMPLE APPLICATION — MINIMAL TRAINING			X
24/7 OXYGEN TREATMENT OF THE WOUND			X
DISCRETELY WORN UNDER STREET CLOTHES			X
FDA APPROVED FOR VENOUS STASIS			X
FDA APPROVED FOR DECUBITUS		X	X
FDA APPROVED FOR DIABETIC FOOT	X	X	X
CLINICIAN'S CHOICE OF DRESSING		X	X
INPATIENT, OUTPATIENT OR HOME TREATMENT	X		X
AVAILABLE ON FSS SCHEDULE	X	X	X



A custom made fabric carrying case with an adjustable velcro strap gives users the ability to position the EPIFLO® device nearest the wound —on the belt, around the arm, around the thigh or calf —wherever it is the most comfortable and unobtrusive, allowing normal daily activity to continue without inconvenience while the wound is healing.

**Now available on Federal Supply Schedule
VA/GSA contract # V797P- 4214B – company name: NEOGENIX**



a unique
device
that heals
chronic
wounds
faster



ACTUAL SIZE



24 / 7
oxygen
delivery
from a
3 ounce
device



A New and Better Way to Treat Wounds

EPIFLO® is the first and only FDA approved therapy which delivers pure Oxygen to your patient's wound 24/7. While other advanced treatments for chronic wounds exist, the benefits of EPIFLO® make it the clear choice. EPIFLO® avoids repetitive, time consuming trips by your patients and they no longer need be tethered to heavy and cumbersome Negative Pressure Wound Therapy (NPWT) vacuum pumps for months on end. Other therapies are akin to stifling a patient's freedom during the treatment, and too often the wound does not heal, resulting in amputation.

The EPIFLO® unit weighs just 3 ounces and sits in a pocket or attaches to a waistband. During the treatment, patients often go for up to 15 days between office visits. During the first week, increased drainage is commonly seen. This is a typical observation which indicates that the wound has begun healing.

EPIFLO® is disposable and is replaced with a new unit every 15 days. Recent clinical evidence shows that the average chronic wound (90 days and older) heals in 6 – 8 weeks. Many wounds in our database that have been successfully treated with EPIFLO® have previously failed Negative Pressure Wound Therapy (NPWT).

How it Works

EPIFLO® uses a patented, state-of-the-art fuel cell technology to extract atmospheric oxygen and deliver it via a thin cannula directly to the wound. Oxygen provided by EPIFLO® energizes ischemic cells and triggers a response which initiates the natural healing process. The end of the cannula is simply placed over the wound and covered with an absorbent and semi occlusive dressing of the doctor's choice. The oxygen is delivered at a low flow rate and the wound does not dry out.

Diabetic Toe Ulcerations

60 year old female. History of diabetes (Type II). Previous history of delayed complicated healing (surgical wounds). EPIFLO® applied upon presentation due to history. Early healing (2 weeks) of distal wound along with significant progress to healing on proximal wound. Final healing (7 weeks) of proximal wound with significant improvement in health of tissues on toe. Patient very pleased with EPIFLO® therapy and ability to carry on normal daily activities / work (had previous experience with NPWT).



Week 0 : Pre-EPIFLO® treatment



Week 7: Wound healed with re-epithelialization

IDDM Leg Ulcer – Trauma

65 year old male. History of diabetes (IDDM). Previous history of delayed healing . Patient in renal dialysis for past 1.5 years. Tape easily damages periwound area. Applied with foam and Silver. Painful wound reduced 2 days after EPIFLO® treatment.



Week 0 : Pre-EPIFLO® treatment



Week 7: Wound healed with full re-epithelialization

Neuropathic Heel Pressure Ulcer

59 year old male. Type 1 Diabetes, neuropathy, previous failed vascular graft on left leg with neuropathic left heel pressure ulcer. 3.0 cm x 3.0 cm x 11 mm depth – wound bed filled with tenacious spongy slough (removed with water jet debridement). Inpatient 1 week NPWT; Outpatient 12 weeks NPWT; ABPI Left 0.49; severe circulatory impairment; NPWT after 13 weeks with initial reduction in size but wound became 'stuck' at 10 weeks and would not improve. Full wound closure after 5 weeks on EPIFLO®.



Week 0 - Versajet debridement prior to NPWT application



5 Weeks EPIFLO®; fully remodeled / epithelialized

Traumatic Foot Injury – Associated Deep Tissue Infection

55 year old male. Smoker; no comorbidities; originated from left foot being broken by a logging accident. On NPWT as inpatient 9 days then outpatient for 2 weeks to reduce size of wound. Patient on anticoagulant with NPWT suction line showing presence of fresh blood - Switched to EPIFLO®. Continuous antibiotics (Cipro/Clindamycin to control deep tissue infection). Complete re-pithelialization after 4 weeks on EPIFLO®.



Post-NPWT [3 weeks] slow reduction of surface area by NPWT / 3.3 x 2.6 cm



4 Weeks of EPIFLO®; complete re-epithelialization / 0 mm depth