

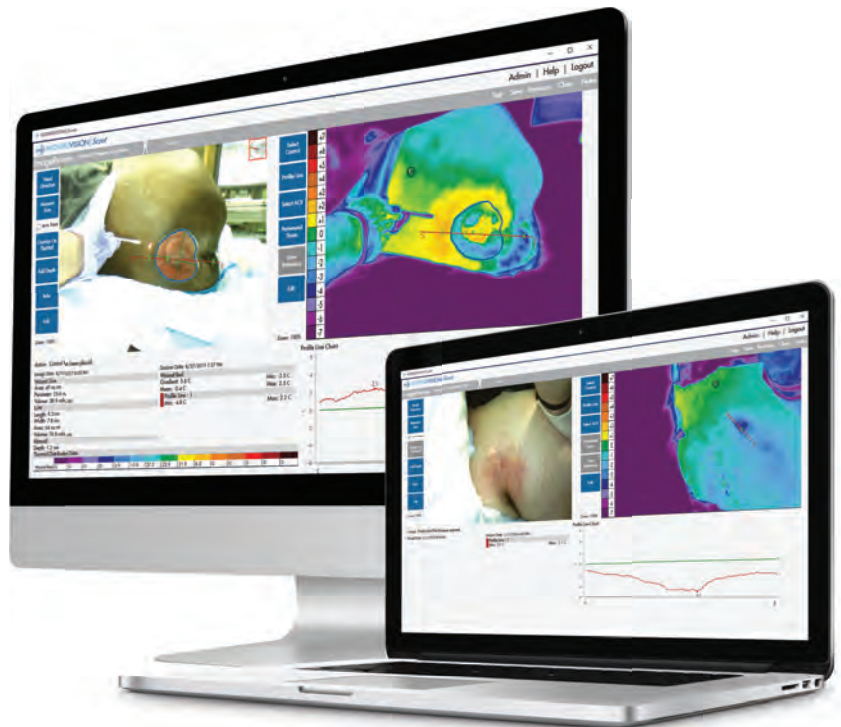
A FULL-SERVICE WOUND IMAGING AND DOCUMENTATION SOLUTION

WOUNDVISION® OFFERS A FULL SUITE OF DIGITAL WOUND MANAGEMENT SOLUTIONS THAT HELP TO MINIMIZE VARIATION IN CARE, COST & OUTCOMES, STANDARDIZE WOUND ASSESSMENT AND STREAMLINE EMR WORKFLOWS.



Scout Imaging Device

Photographic + Thermographic
Imaging Technology



Scout Software

Cloud-based + EMR Integration



Physiological Documentation

Objective and quantitative measurements of skin temperature change.



Present On Admission (POA)

Quantify and visualize skin temperature change for improved documentation.



Revenue Preservation

Advanced documentation can lead to cost savings for patients later diagnosed with wounds.



Scalable Standardization

Seamlessly standardize all facets of the wound assessment with objective and quantitative data.



EMR Integration

Easily integrate into existing workflows with all major EMRs.



Wound Size Measurement

Standardize measurement and eliminate paper rulers.

THE ENTERPRISE STANDARD ADVANCED IMAGING AND DOCUMENTATION



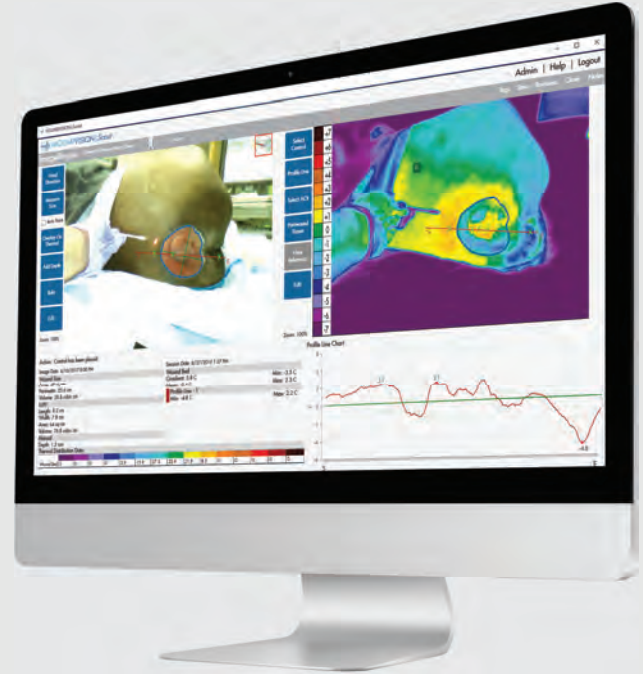
Precise wound size measurement with 96% accuracy^{1,2}



According to the definition of DTPI, pain and temperature change can precede skin color change³



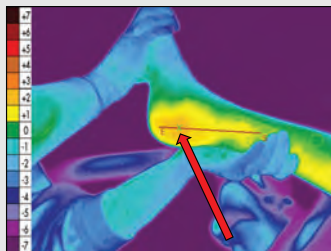
- Assess the temperature of skin and soft tissue.
- When assessing darkly pigmented skin, consider assessment of skin temperature...
- NPIAP Clinical Practice Guideline, 2019³



STREAMLINE PATIENT CARE WITH ADVANCED DOCUMENTATION.

CLINICAL AND FINANCIAL SUCCESS⁴

ON ADMISSION



Temperature change
of intact skin
documented POA

3 DAYS LATER

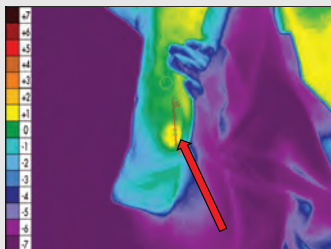


Photo and temperature
documentation at time
of DTPI diagnosis

-Prospective observational study (n=114) to determine the cost-savings related to admitted ICU patients over 60-day period using prevention protocol utilizing skin temperature assessment

-Cost analysis based on historical monthly revenue loss of \$97,430 from hospital acquired pressure injuries and legal events



\$1.1 Million

Potential cost savings from integrating a thermographic imaging protocol into the skin assessment on-admission³

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FOR MORE INFORMATION
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References: 1. Langemo D, Spahn J, Spahn T, Pinnamaneni VC. Comparison of standardized clinical evaluation of wounds using ruler length by width and Scout length by width measure and Scout perimeter trace. *Adv Skin Wound Care*. 2015 Jul;28(7):116-21. 2. Langemo D, Spahn J, Snodgrass L. Accuracy and Reproducibility of the Wound Shape Measuring and Monitoring System. *Adv Skin Wound Care*. 2015 Jul;28(7):317-23. 3. European Pressure Ulcer Advisory Panel, National Pressure Injury Advisory Panel and Pan Pacific Pressure Injury Alliance. Prevention and Treatment of Pressure Ulcers/Injuries: Clinical Practice Guideline. The International Guideline. Emily Haesler (Ed.). EPUAP/NPIAP/PPPIA: 2019. 4. Koerner S, Adams D, Harper SL, Black JM, Langemo DK. Use of Thermal Imaging to Identify Deep-Tissue Pressure Injury on Admission Reduces Clinical and Financial Burdens of Hospital-Acquired Pressure Injuries. *Adv Skin Wound Care*. 2019 Jul;32(7):312-320.

Scout is FDA 510(k) Cleared (K131596). For detailed product information, including indications for use, directions, contraindications, precautions, warnings, and/or important safety information, refer to labeling and IFU prior to use. The Scout does not provide a diagnosis or therapy.

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