# Ten Great Reasons To Warm EVERY Surgical Patient

## RTD

Patients Undergoing General Anesthesia are Susceptible to Inadvertent Perioperative Hypothermia (IPH).

All surgical patients—regardless of age, weight or other factors—undergoing general anesthesia are susceptible to Redistribution Temperature Drop (RTD). Research shows that core body temperature drops up to 1.6°C in the first hour following the induction of general anesthesia, increasing the risk for inadvertent perioperative hypothermia and its associated complications, which include higher mortality rates, longer hospital stays and an increased rate of wound infection.

## Prevent!

Inadvertent Perioperative Hypothermia and Its Complications Can Be Easily Prevented.

Stop inadvertent perioperative hypothermia before it begins by prewarming your patients prior to surgery. Just 15 minutes of actively prewarming with forced-air warming can add to the body's total heat content and combat RTD. By preventing inadvertent hypothermia hypothermia, you could help your patients avoid the complications associated with it, including an increased rate of wound infection.<sup>4</sup> For additional information, visit <a href="https://www.preventhypothermia.org">www.preventhypothermia.org</a>.

# **Quality Improvement**

National Quality Improvement Initiatives Recommend Normothermia Maintenance to Reduce SSIs.

Institute for Healthcare Improvement and Surgical Care Improvement Project initiatives note the importance of maintaining normothermia to help reduce the incidence of surgical site infections in surgical patients. These initiatives also recommend the use of forced-air warming as an active warming measure to maintain normothermia. For more information, visit <a href="https://www.ihi.org">www.ihi.org</a> or <a href="https://www.ihi.org">www.qualitynet.org</a>.

#### SCIP 10 Measure

Normothermia for Improving Surgical Care.

An anesthesia quality measure adopted by the Centers for Medicare and Medicaid Services calls for normothermia to be achieved for a broad range of surgical patients. All patients undergoing general or neuraxial anesthesia for procedures 60 minutes or longer are to reach a target temperature of 36°C as measured in the operating room or PACU. If for some reason normothermia is not achieved, the measure also can be met by showing that proven active warming measures were used.

## Shivers!

Patients Remember Being Cold.

Patients probably won't remember the antibiotics administered to help prevent SSIs, but they will remember feeling cold before and after surgery. Using forced-air warming throughout the perioperative period can increase patient satisfaction, decrease patient anxiety and contribute to SSI reduction efforts.

**3M Infection Prevention Solutions** 





# Outcomes

### The Benefits of Maintaining Normothermia.

In general types of surgeries, studies suggest that maintaining normothermia decreases the following: wound infection, myocardial infarction, ICU time, length of stay, mortality rates, the use of blood products, likelihood of mechanical ventilation and the probability of needing a transfusion.5

# Proven

#### Forced-Air Warming: Over 25 Years of Safe, Effective Use.

Since we introduced forced-air warming over 25 years ago, it has been used to safely and effectively maintain patient normothermia in more than 165 million patients worldwide. This technology has been studied extensively, with more than 100 published papers documenting the clinical benefits of forced-air warming and maintaining normothermia.

# Easy

## Warming Patients is Easy.

Forced-air warming is used in more than 85% of U.S. hospitals and its presence is growing worldwide. Chances are you and your colleagues are familiar with how forced-air warming works and already have the equipment you need to warm all your surgical patients.

## Cost-effective

#### Warming Patients is Cost-effective.

Your patients can enjoy the benefits of maintaining normothermia with the cost-effective care offered by a 3M™ Bair Hugger™ blanket or the 3M™ Bair Paws™ patient adjustable warming gown. When comparing the cost of forced-air warming with the estimated \$2,500-\$7,000 per patient cost<sup>5</sup> of treating complications of hypothermia, warming just makes sense.

## 25+3+10

#### So Many Ways to Warm.

With 25 Bair Hugger blanket styles, including six underbody series blankets, three styles of Bair Paws warming gowns and ten different 3M™ Ranger™ blood and fluid warming sets for fluid warming needs from pediatric to high flow, we offer warming options for any surgical procedure.



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- 4. Tryba M, Leban J, et al. Does active warming of severely injured trauma patients influence perioperative morbidity? Anesthesiology. 1996: 85:
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