

RADIOMETER R



PeriFlux 6000 tcpO₂ stand-alone transcutaneous monitor

Reveal the wound healing capacity with transcutaneous oxygen monitoring

Assessing wound healing potential and vascular disease

Patients with chronic wounds undergoing oxygen treatment may heal more rapidly and effectively as wounds heal faster in an oxygen-rich environment. [1, 2]

Identifying an effective method to predict if wounds will heal is valuable. It's also important to determine the amputation level for wounds that won't. [3]

POTENTIAL OF WOUND HEALING CAPACITY AND DETERMINING **AMPUTATION LEVEL**

Transcutaneous monitoring can be used to indicate the likelihood of wound healing. For patients undergoing amputation, transcutaneous monitoring can provide supplementary information in the decision of appropriate amputation level. [8, 9, 10]

Transcutaneous oxygen measurement, otherwise known as TCOM, is widely used in hyperbaric oxygen (HBO) therapy of wounds. It has gained importance as a tool for predicting potential candidates for HBO. [6]

tcpO, MONITORING REFERENCE VALUES

$tcpO_2 < 30 \text{ mmHg}$	Insufficient for wound healing [7]
30 mmHg < tc <i>p</i> O ₂ < 40 mmHg	Indicative of hypoxia [7]
tcpO ₂ > 50 mmHg	Average tc <i>p</i> O ₂ in healthy subjects [7]

Note: The range from 40 to 50 mmHg is considered a gray zone, where patients without comorbidities are likely to heal, whereas patients with comorbidities, such as diabetes and renal failure, are less likely to heal. [7]



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PeriFlux 6000 tcpO₂ stand-alone transcutaneous monitor can support you in assessing patients with lower extremity wounds. You can measure and assess the microcirculation of the patient's limbs with transcutaneous tissue oxygen measurement.

YOUR BENEFITS:



Several different test protocols ensure reproducibility of measurement during treatment and across teams.

Automatic generation

An automatically generated report can include field entries of your choice, such as patient information, TCOM values and a picture of the sensors' positions around the wound.



Up to eight sensors of tcpO₂ allow you to accelerate the measurement, getting a more accurate map of the extremity.



Personalize the report by including your hospital's logo.

- Barnikol W et al. A novel, non-invasive diagnostic clinical procedure for the determination of an oxygenation status of chronic lower leg ulcers using peri-ulceral transcutaneous
- oxygen partial pressure measurements: results of its application in chronic venous insufficiency. German Medical Science 2012; 10: 1-22. Padberg F *et al.* Transcutaneous oxygen (tcpO₂) estimates probability of healing in the ischemic extremity. Journal of Surgical Research 1996; 60, 59: 365-369

- Sheffield PJ. Measuring tissue oxygen tension: a review. Undersea Hyperbaric Medical Society 1998; 25,3: 179-188. Fife CE *et al.* Transcutaneous oximetry in clinical practice: consensus statements from an expert panel based on evidence. University of Texas Health Science Center 2007; 36,1: 43-53.
- Hingorani A, LaMuraglia GM, Henke P *et al.* The management of diabetic foot: A clinical practice guideline by the Society for Vascular Surgery in collaboration with the American Podiatric Medical Association and the Society for Vascular Medicine. J Vasc Surg. 2016 Feb;63(2 Suppl):35-215.
- 10. Conte MS, Bradbury AW, Kolh P et al. Global vascular guidelines on the management of chronic limbthreatening ischemia. J Vasc Surg. 2019 Jun;69(65):3S-125S.e40





Instructions displayed on the touch screen interface guide you along each step, from patient preparation to the different steps of measurement.



The report can include a picture of the sensors' positions around the wound area. The $tcpO_2$ values and this picture provide you with a more holistic report for a solid interpretation of the results.



A password-protected, encrypted hard drive, and an audit trail can help you better protect sensitive patient information.

Lo T et al. Prediction of Wound Healing Outcome Using Skin Perfusion Pressure and Transcutaneous Oximetry: a single-center experience in 100 patients. The Wound Treatment Center and Hyperbaric Medicine Service 2009; 21,11: 310-316.

Bunt TJ *et al.* tcpO₂ as an accurate predictor of therapy in limb salvage. Maricopa Medical Center 1996; 10, 3: 224-27.
Kaur S *et al.* Evaluation of the efficacy of hyperbaric oxygen therapy in the management of chronic nonhealing ulcer and role of periwound transcutaneous oximetry as a predictor of wound healing response: a randomized prospective controlled trial 2012; 28,1: 70-75.

Hinchliffe RJ, Brownrigg JR, Apelqvist J et al. International Working Group on the Diabetic Foot. IWGDF guidance on the diagnosis, prognosis and management of peripheral artery disease in patients with foot ulcers in diabetes. Diabetes Metab Res Rev. 2016 Jan;32 Suppl 1:37-44.





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Radiometer products and solutions are used in hospitals, clinics, and laboratories in over 130 countries, providing information on critical parameters in acute care diagnostics. Through connected solutions, expert knowledge, and trusted partnership, we help health care professionals make diagnostic decisions to improve patient care.



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