

Einstein Vision® 3.0 3D Camera System

A camera system for your COVID-19 Recovery Plan Equip your hospital to excel The Government has challenged trusts to increase levels of surgery by 20% compared to pre-COVID levels. To meet this challenge, every second counts in the theatre environment. The Einstein *Vision*® 3.0 3D camera system can help you improve your theatre's efficiency and meet your targets.

AESCULAP® CAMERA SYSTEMS PACS INTEGRATION

Included free of charge with Aesculap® Camera Systems on request*

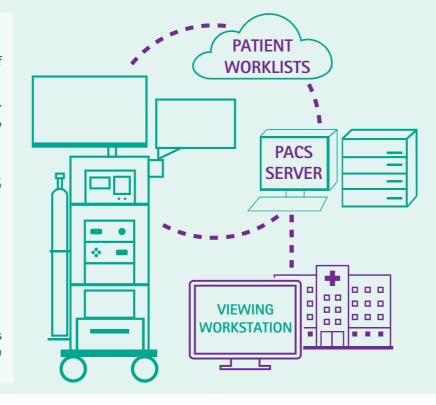
HELPS TO INCREASE THEATRE EFFICIENCY

- Helps to improve theatre efficiencies by simplifying documentation of surgery during the theatre episodes.
- Negates the need for printing images for inclusion in paper patient notes.
- Instant availability of theatre episode images and videos from any workstation connected to the PACS server.

HELPS TO IMPROVE ACCESS AND SECURITY OF PATIENT RECORDS

- Helps maximise security of patient data.
- Minimised patient data entry errors by utilising patient worklists.
- Inclusion of theatre episodes in Electronic Patient Records (EPR).
- Offers visibility of surgical images at MDT review.
- Enables seamless comparison of disease progression.

*The B. Braun Aesculap camera systems, with documentation, are PACS ready as standard and include DICOM connectivity. PACS connectivity with system installation is dependent on hospital IT infrastructure.



EINSTEIN*VISION* SCOPE WARMING SYSTEM AND STERILE SHEATH CONCEPT

Adopting the B. Braun Aesculap® Einstein Vision® 3D camera system offers potential to help improve theatre efficiency, reduce procedural costs and allow for increased activity and increased revenue.

The system offers an integrated heating element in the endoscope tip which effectively and permanently prevents fogging of optics. This means procedures can be carried out faster without interruption from scope fogging.

The Einstein Vision® technology also incorporates a unique sterile sheath concept, negating the need for reprocessing endoscopes, offering potential for additional savings from reprocessing and repair costs associated with endoscope repairs.





The efficiency savings created by using an Einstein *Vision** 3D Camera System in 1250 cases annually, can allow for 250 additional minor procedures to be carried out, generating additional income of £1,081,250 over 5 years¹.

B. BRAUN AESCULAP® INSUFFLATOR

Including closed system smoke evacuation for laparoscopic surgery

Smoke Plume is a known but often overlooked problem in Operating Theatres. On average, this smoke can have an impact to those inhaling it which is equivalent to 27-30 cigarettes per theatre per day². Smoke Plume typically contains Hydrocarbons, Nitriles, Amines, Aldehydes and intact viral DNA.

ALSGBI, SAGES & SAES recognise the possibility of viral contamination, including COVID-19 during laparoscopic surgery³.

They further recommend the use of closed smoke evacuation devices with a suction and filtration system to help filter released particles during laparoscopic procedures³.



SCAN THE QR CODE TO REQUEST FURTHER INFORMATION OR FOR A PRODUCT DEMONSTRATION



B. Braun Medical Ltd | Aesculap | Thorncliffe Park | Sheffield | S35 2PW Tel 0114 225 9000 | Fax 0114 225 9111 | www.bbraun.co.uk

XX-EVPB-08-21

References

- 1. Calculations based on current HRGs for minor endoscopic procedures over a 5 year period using an in-house calculator, accounting for the investment and running costs of the Einstein Vision® 3D camera system. Income generation is variable, bespoke calculations are available on request.
- 2. Hill, D. S., O'Neill, J. K., Powell, R. J., & Oliver, D. W. (2012). Surgical smoke—A health hazard in the operating theatre: A study to quantify exposure and a survey of the use of smoke extractor systems in UK plastic surgery units. Journal of Plastic, Reconstructive, & Aesthetic Surgery, 65, 911–916. doi:10.1016/j.bjps.2012.02.012
- 3. ALSGBI. 2021. Laparoscopy in The Covid-19 Environment ALSGBI Position Statement ALSGBI. [online] Available at: https://www.alsgbi.org/2020/04/22/laparoscopy-in-the-covid-19-environment-alsgbi-position-statement/ [Accessed 27 August 2021].