

HCP Solutions Helps You Improve Quality of Care And Reduce Costs on a System-Wide Level

Our advisors augment your team and provide education, support, and products that help you implement evidence-based guidelines hospital-wide that improve quality of care and reduce costs on a system-wide level.

HCP Solutions provides a 6-12 month program designed to assist your hospital(s) in achieving success at every milestone. By combining our proven processes for sustaining compliance—our LEAN process—and evidence-based medicine, our advisors can help you improve the quality of care, improve patient outcomes, and reduce costs.

HCP Solutions Program Includes

Assessment:

- On-site visits
- Weekly to bimonthly conference calls
- Process review and LEAN process development

Implementation and compliance:

- Quarterly reviews (after implementation)
- Toolkit, forms, implementation guide
- Online resource center and project tracker
- 24/7 product technical support
- Product user training
- Clinical support

Please contact HCP Solutions to learn more about our clinical process improvement programs.

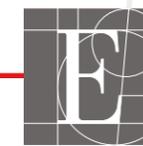
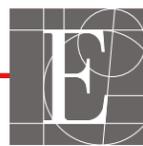
800.424.3278

References

1. Rhodes A, Cecconi M, Hamilton M, et al. Goal-directed therapy in high-risk surgical patients: a 15 year follow-up study. *Intensive Care Med.* 2010;36(8):1327-1332.
2. Rivers, EP, et al. Early goal-directed therapy in severe sepsis and septic shock: a contemporary review of the literature. *Curr Opin Anesthesiol.* 2008;21:128-140.
3. Shorr, AF, et al. Economic implications of an evidence-based sepsis protocol: Can we improve outcomes and lower costs? *Crit Care Med.* 2007;35(5):1257-1262.
4. Benes J, Chytra I, Altmann P, et al. Intraoperative fluid optimization using stroke volume variation in high risk surgical patients: results of prospective randomized study. *Critical Care.* 2010;14:1-15.
5. Cecconi M, Fasano N, Langiano N, Divella M, Costa M, Rhodes A, Della Rocca G. Goal directed haemodynamic therapy during elective total hip arthroplasty under regional anesthesia. *Crit Care.* 2011;15:R132.
6. Angus DC, Linde-Zwirble WT, Lidicker J, Clermont G, Carcillo J, Pinsky MR. Epidemiology of severe sepsis in the United States: analysis of incidence, outcome and associated costs of care. *Crit Care Med.* 2001 Jul;29(7):1303-10.
7. Bratzler DW, Hunt DR. The surgical infection prevention and surgical care improvement projects: national initiatives to improve outcomes for patients having surgery. *Clin Infect Dis.* 2006;43(3):322-330.
8. Zanotti Cavazzoni SL, Dellinger RP. Hemodynamic optimization of sepsis-induced tissue hypoperfusion. *Critical Care.* 2006;10(Suppl 3):S2.

Edwards, Edwards Lifesciences, and the stylized E logo are trademarks of Edwards Lifesciences Corporation. All other trademarks are the property of their respective owners.

© 2013 Edwards Lifesciences Corporation. All rights reserved. AR09056



Standardizing Care to Reduce Patient Complications is the Bottom Line

Expert Advisors in Clinical Process Improvement

A New Healthcare Landscape

Meeting the challenge to help improve the quality of your patient care and outcomes while reducing costs is critical. Edwards Lifesciences understands the need to achieve sustained quality and measure improvement in a world of decreasing reimbursements, aging population, increasing infection rates, staffing shortages, and high costs has never been greater.

Helping You Standardize the Care You Deliver

Healthcare Provider Solutions (HCP Solutions) provides the expertise to help you overcome your healthcare challenges with programs in sepsis management and post-surgical recovery. We help you standardize care and build scalable, repeatable processes with proven, evidence-based clinical protocols that have been shown to reduce preventable complications, reduce costs, provide improved patient outcomes, and sustain long-term compliance.¹⁻⁵

Improving the Quality of Care by Reducing Patient Complications

In the US alone, approximately 750,000 cases of sepsis occur each year,⁶ and post-surgical complications are greater than 30% for patients undergoing high-risk surgery.⁷

HCP Solutions provides you with the tools, expertise, and sustained processes to help you reduce hospital length of stay and mortality in sepsis patients,^{2,3} and to reduce post-surgical complications including pneumonia, urinary tract infection (UTI), surgical site infection (SSI), and acute kidney infection (AKI).^{1,4,5}

Helping You Implement Evidence-Based Medicine

The advisors of HCP Solutions have the expertise and clinical experience to help you integrate evidence-based protocols,² including Early Goal-Directed Therapy (EGDT) and Perioperative Goal-Directed Therapy (PGDT); that have been shown in clinical studies to enable optimal tissue perfusion and improve long-term patient outcomes.^{1,4,5}

Advisors Trained in LEAN Process Improvement

With 25 years of clinical experience in the critical care and surgical settings, and trained in LEAN process improvement, the HCP Solutions advisors engage your clinicians to align staff across departments, help you deliver effective metric tracking, and facilitate greater peer-to-peer level support.

With demonstrated success in clinical process improvement in multiple hospital sites nationwide, our advisors connect your teams at all levels with a number of processes that, taken together, help you achieve sustained compliance that continually impacts the quality of your patient care.

HCP Solutions Programs

The HCP Solutions clinical improvement process is tailored to the specific needs of your hospital. We continually build, align, apply, and measure to help your hospital improve patient care and reduce costs among some of the most expensive patient conditions in your hospital.

HCP Solutions has designed two separate, evidence-based process improvement programs. One is centered on sepsis management and the other on improving post-surgical recovery in moderate to high-risk surgery. (See process chart below.)

Sepsis Management Program

Early identification and treatment of sepsis has been shown to reduce sepsis-related mortality by 46%, and reduce hospital length-of-stay by 5 days.^{2,3} A sepsis program with EGDT enables you to identify and treat sepsis earlier.

HCP Solutions helps you:

- Reduce the incidence of sepsis
- Identify and manage tissue perfusion
- Implement Early Goal-Directed Therapy (EGDT) from your Emergency Department to ICU
- Achieve sustained compliance

In the US alone, approximately 750,000 cases of sepsis occur each year⁶

Post-surgical complications are greater than 30% for patients undergoing high-risk surgery⁷

Post-Surgical Recovery Program

Hemodynamic optimization through perioperative goal-directed therapy during high-risk surgery has been shown to reduce post-surgical complications including AKI, UTI, SSI, pneumonia, and major/minor GI complications.^{1,4,5}

In Benes et al, total complications in high-risk and moderate-risk patients undergoing major abdominal surgery were reduced by 54%,⁴ and in Cecconi et al, postoperative complications, in hip-replacement surgery measured by the number of hospital days, were reduced by 71%.⁵

HCP Solutions helps you:

- Improve post-surgical recovery time
- Reduce post-surgical complications, including infections
- Identify and manage intraoperative tissue perfusion
- Implement Perioperative Goal-Directed Therapy (PGDT) in specific moderate and high-risk surgery procedures
- Achieve sustained compliance

HCP solutions

Clinical Improvement Process

