THORACIC SURGERY

CENTESE

THORAGUARD®

CONTINUOUS, DIGITAL CHEST TUBE MANAGEMENT RESULTS IN:

Improved air leak assessment¹⁻⁵

Shorter chest tube duration¹⁻⁷

Shorter hospital stays^{1-6,8}

Enhanced user satisfaction⁵



Legacy chest drains are inadequate for today's surgical practice

3

CEN

**

Traditional chest drain systems present a myriad of challenges when it comes to patient recovery after thoracic surgery.



(X) LEGACY DRAINS

Air leak severity based on subjective assessment

Objective air leak measurement enables superior clinical decisions



(×)

LEGACY DRAINS

Require external suction source, do not actively regulate suction at the chest, and limits ambulation

THORAGUARD

Integrated suction source regulates suction at the chest and facilitates rapid ambulation in any setting

LEGACY DRAINS

Require clinician to manually measure and track volume

THORAGUARD

Real-time fluid measurement and display with hourly trends

Superior battery life for longer mobile operation

THORAGUARD VS ANALOG SYSTEMS Enhanced clinical outcomes

Studies demonstrate that when compared to legacy systems, digital chest drains result in:



SHORTER POSTOPERATIVE LOS^{1-6,8}







REDUCED COMPLICATIONS⁶



LOWER COST OF CARE⁸



Data driven decision-making reduces LOS compared to analog systems 96% of Thoraguard users reported better display of clinically relevant information, including the rate of air leak⁵

	CENTESE THORAGUARD	LEGACY CHEST DRAIN SYSTEMS
PRECISION		
Air Leak Reading	Digital	Bubbles
Fluid Drainage Volume Reading	Digital	Manual
SAFETY		
Patient Safety Alarms	Automated	No
Intelligent Decision Support	SmartCheck™	No
FUNCTIONALITY		
Suction Source	Integrated	Wall
Water Seal at 0 cm H ₂ O	Yes	Yes
Drainage Line Clearance	Automated	No
Touchscreen Control	Yes	No
Chest Tube Clog Clearance Option	Yes	Νο
ERAS Guidelines: Thoracic / Cardiac ^{9,10}	Thoracic / Cardiac	Νο
Preferred by Clinicians ¹¹	Yes	No

thoraguard vs generation 1 digital drains Superior technology

Thoraguard's touchscreen display is designed for simple, seamless communication and visualization.



PLEURAL ASSESSMENT

• Real-time intrapleural pressure measurement



SMARTSEAL™ ZERO-SUCTION WATER SEAL

- Water seal at 0 cm H_2O
- Precision management of applied suction



PRECISION AIR LEAK MANAGEMENT

- No rounding features
- True zero-leak calibration and setup

SUPERIOR CAPABILITY ENABLES SUPERIOR OUTCOMES⁷

Using Thoraguard led to safe chest tube removal in under 12 hours following thoracic surgery:

- Improved patient comfort
- Accelerated discharge



	CENTESE THORAGUARD	GEN. 1 DIGITAL CHEST DRAIN SYSTEMS
PRECISION		
Water Seal at 0 cm H ₂ O	Yes	No
Low Air Leak Measurement (0–15 mL/min)	Yes	Rounding
SAFETY		
Patient Safety Alarms	Automated	Automated
Intelligent Decision Support	SmartCheck [™]	No
FUNCTIONALITY		
Air Leak Reading	Digital	Digital
Fluid Volume Reading	Digital	Digital
Suction Source	Integrated	Integrated
Real-time Pleural Assessment	Yes	No
Touchscreen Control	Yes	No
Chest Tube Clog Clearance Option	Yes	No
Maximum Chest Tubes per System	3	2
ERAS Guidelines: Thoracic / Cardiac ^{9,10}	Thoracic / Cardiac	Thoracic
Preferred by Clinicians ¹¹	Yes	No

THORAGUARD®

CONTINUOUS TRENDS MONITORING INFORMS CLINICAL DECISIONS

6-, 12-, and 24-hour air leak and fluid drainage trends

Objective air leak assessment is critical for removing variability in clinical decision-making, shortening chest tube duration, and decreasing length of stay (LOS).¹⁻⁴

ACTIVE SYSTEM MONITORING PROMOTES PATIENT SAFETY

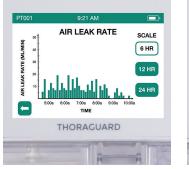
Safety monitoring alarms for device or system failures and malfunctions

Objective insights on detailed patient recovery metrics and trends enabled by detailed data collection drive improvement to patient safety and increase alignment on care decisions.

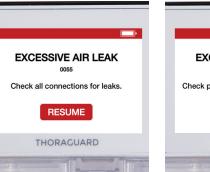
SMARTCHECK[™] DECISION SUPPORT STANDARIZES DRAIN PROTOCOLS

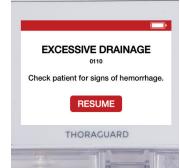
Real-time monitoring and alerts across the following criteria:

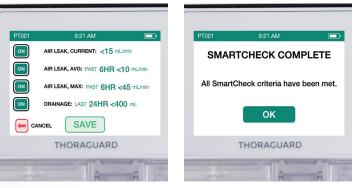
- Current Air Leak Rate
- Average Air Leak
- Air Leak Spikes
- Drainage Volume Level













Bring chest drainage into the modern era

Superior accuracy in air leak measurement

Improves decision-making Reduces chest tube duration and hospital LOS

REDUCE CHEST TUBE DURATION⁵

REDUCE HOSPITAL LOS⁵



By reducing LOS and the associated per-day costs, hospitals can save over **\$2,600 per acute care day.**⁸

THORAGUARD ORDERING INFORMATION



THORAGUARD CONTROL MODULE

Catalog #: TGCM1000 Qty: 1 unit Includes 1 TGPS0100 per unit



THORAGUARD POWER SUPPLY

Catalog #: TGPS0100 Qty: 1 unit

A

THORAGUARD DRAINAGE KIT

Catalog #: TGDK110012 Qty: 6 units per box Includes dual lumen drainage tube, 1,200 mL canister, and 2 Y-connectors per kit



THORAGUARD CHEST TUBE KIT

Catalog # (20 fr.): TGCT120020 Catalog #(28 fr.): TGCT120028 Qty: 10 units per box Includes silicone chest tube and SmartValve

Make the intelligent choice to optimize your thoracic surgery outcomes. orders@centese.com | 888.220.0040

Indications for use: The Thoraguard System is indicated for use in aspiration and removal of surgical fluids, tissue, gases, bodily fluids or infectious materials. The Thoraguard System is indicated for all situations where chest drains are applied; especially for thoracic drainage in the pleural and mediastinal cavity in situations such as pneumothorax, after cardiac or thoracic surgery (post-operative), thorax injury, pleural effusion, pleural empyema or other related conditions. The Thoraguard System is intended for use on patients in appropriate care settings.

References:

Geraci TC, Chang SH, Shah SK, Kent A, Cerfolio RJ. Postoperative air leaks after lung surgery: predictors, intraoperative techniques, and postoperative management. *Thorac Surg Clin*. 2021;31(2):161-169. doi:10.1016/j.thorsurg.2021.02.005 2. Pompili C, Detterbeck F, Papagiannopoulos K, et al. Multicenter international randomized comparison of objective and subjective outcomes between electronic and traditional chest drainage systems. *Ann Thorac Surg*. 2014;98(2):490-497. doi:10.1016/j.athoracsur.2014.03.043 3. Mayor JM, Lazarus DR, Casal RF, et al. Air leak management program with digital drainage reduces length of stay after lobectomy. *Ann Thorac Surg*. 2018;106(6):1647-1653. doi:10.1016/j.athoracsur.2018.07.029 4. Cerfolio RJ, Bryant AS. The benefits of continuous and digital air leak assessment after elective pulmonary resection: a prospective study. *Ann Thorac Surg*. 2008;86(2):396-401. 5. Geraci TC, Sorensen A, James L, et al. Use of a novel digital drainage system after pulmonary resection. *J Thorac Dis*. 2022;14(9):3145-3153. doi:10.1016/j.athoracsur.2016.03.089 7. McCormack AJ, El Zaeedi M, Geraci TC, Cerfolio RJ. The process and safety of removing chest tubes 4 to 12 hours after robotic pulmonary lobectomy and segmentectomy. *JTCVS Open*. 2023;16:909-915. doi:10.1016/j.sion.2023.09.028
Patel C, Ruppert SD, Cao H, Fraser C, Laury T, Vaporciyan A. Use of a digital air leak detection device to decrease chest tube duration. *Critical Care Nurse*. 2023;43(6):11-21. doi:10.4037/ccn2023951 9. Batchelor TJP, Rasburn NJ, Abdelnour-Berchtold E, et al. Guidelines for enhanced recovery after lung surgery: (ERAS[®]) Society and the European Society of Thoracic Surgeons (ESTS). *Eur J Cardiothorac Surg*. 2019;55(1):91-115. doi:10.1093/ejcts/ezy301 10. Engelman DT, Ben Ali W, Williams JB, et al. Guidelines for Perioperative Care in Cardiac Surgery: Enhanced Recovery After Surgery Society Recommendations. *JAMA Surg*. 2019;154(8):755-766. doi:10.1001/jamasurg.2019.1153 11. Data on file wi

Caution: Federal (US) law restricts Thoraguard to sale by or on the order of a physician. Thoraguard is not cleared for use outside of the US.

info@centese.com | 888.220.0040 | centese.com

Centese, Inc.

4156 S. 52nd St. Omaha, NE 68117 ©2024. All rights reserved.

