

Masimo SET®: Reduce Costs and Improve the Process of Care



“Implementation of surveillance with pulse oximetry was associated with a reduced need for patient rescue and intensive care unit transfer.”⁴

Andreas Taenzer, MD
Dartmouth-Hitchcock Medical
Center, United States

Published studies demonstrate efficiency gains with the implementation of Masimo SET® pulse oximetry across clinical settings

With Masimo SET® Pulse Oximetry

Includes reduction in sensor usage, arterial blood gas testing, oxygen requirements, and false alarms

34% Reduction in arterial blood draws in critically ill patients¹

40% Reduction in oxygen requirements in the ICU setting²

93% Reduction in false alarms with higher specificity³

With Masimo Patient SafetyNet™* Continuous Monitoring System

Based on a 36-Bed Orthopaedic Unit

65% Reduction in rapid-response rescues with implementation of patient surveillance monitoring system^{4,5}

48% Reduction in ICU transfers following piloting of Patient SafetyNet in the general ward^{4,5}

¹ Durbin C.G. Jr., Rostow S.K. More Reliable Oximetry Reduces the Frequency of Arterial Blood Gas Analyses and Hastens Oxygen Weaning after Cardiac Surgery: A Prospective, Randomized Trial of the Clinical Impact of a New Technology. *Crit Care Med.* 2002 Aug;30(8):1735-40. ² Patel D.S., Rezkalla R. Weaning protocol possible with pulse oximetry technology. *Advance for Resp Care Managers.* 2000; 9(9):86. ³ Shah N., Ragaswamy H.B., Govindugari K., Estanol L. Performance of Three New-Generation Pulse Oximeters During Motion and Low Perfusion in Volunteers. *J Clin Anesth.* 2012;24(5):385-91. ⁴ Taenzer A.H., Pyke J.B., McGrath S.P., Blike G.T. Impact of pulse oximetry surveillance on rescue events and intensive care unit transfers: a before-and-after concurrence study. *Anesthesiology.* 2010;112(2):282-287. ⁵ Taenzer A.H., Blike G.T. *APSF Newsletter* 2012. Available at: http://www.apsf.org/newsletters/html/2012/spring/01_postop.htm. Accessed June 14, 2012. ⁶ Dasta J.F., et al. Daily cost of an intensive care unit day: the contribution of mechanical ventilation. *Crit Care Med.* 2005 Jun;33(6):1266-71. ⁷ Wunsch H, et al. ICU Occupancy and mechanical ventilator use in the United States. *Crit Care Med.* 2013 Dec;41(12):2712-9. * The use of the trademark Patient SafetyNet is under license from University Health System Consortium.



Potential for Reduced Costs with Implementation of Continuous Patient Surveillance with Masimo SET[®]

Potential Annual Cost Savings with Masimo SET [®] Pulse Oximetry and Patient SafetyNet	
Reduction in Arterial Blood Gas Testing ¹ <i>(Masimo SET[®] compared to conventional pulse oximetry)</i>	\$77,520 [†]
Reduction in Ventilator Time ^{2,6,7} <i>(Masimo SET[®] compared to conventional pulse oximetry)</i>	\$266,450 [†]
False Alarm Distraction Productivity Savings ³ <i>(Masimo SET[®] compared to conventional pulse oximetry)</i>	\$180,180 [†]
Reductions in ICU Transfers in 36-Bed Step-down Unit Due To Continuous Surveillance Monitoring with Patient SafetyNet, Including SET [®] Pulse Oximetry ^{4,5}	\$1,479,012
Total Potential Annual Cost Savings	\$2,003,162

Masimo SET[®] + Patient SafetyNet: More than \$2 Million in Potential Annual Cost Savings

[†]Estimates based on a 250-bed hospital model

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Masimo U.S.
Tel: 1 877 4 Masimo
info-america@masimo.com

Masimo International
Tel: +41 32 720 1111
info-international@masimo.com

