

When seconds count, you need the most effective and reliable pelvic fracture treatment available as supported by clinical evidence.

The answer is a Pelvic Stabilization Device specifically designed to provide stabilizing symmetrical and circumferential compression:

- Recent clinical evidence indicates that Pelvic Stabilization Devices improve pelvic fracture outcomes.
- T-PODCombat is easy to apply by a single combat medic in the field, provides symmetrical, circumferential compression, and does not need to be removed for MRI, X-Ray or CT scans.



Unique Pulley System Design

- One person can easily apply in the field
- Symmetrical, circumferential compression
- Complete control of the tightening process

Clinical Evidence Supports the Use of Pelivc Stabilization Devices

- DeAngelis, Nicola A., et al: Although both a circumferential sheet and T-POD were consistently able to decrease the symphyseal diastasis, only T-POD showed a statistically significant improvement in the diastasis when compared with injury measurements. In 75% of the cadaveric specimens (9 of 12), the T-POD was able to return the symphysis to normal (<10 mm of diastasis)." (1)
- Malekzadeh, Steve, et al: When applying a protocol based on stabilization with a pelvic binder, before protocol implementation, 32 of 65 patients (49%) in shock on arrival or within the first 24 hours of hospital stay died, whereas 18 of 80 (23%) in shock died after protocol implementation, a 53% and statistically significant drop in mortality (p<0.001). (2)
- Tan, Edward, et al: Separation of the pubic bones (symphyseal diastasis) was reduced by 60% when using pelvic stabilization.... (and) mean arterial pressure increased from 65.3 to 81.2 (about 25%), and heart rate beneficially declined from 107 bpm to 94 bpm. (3)

The quotes above are taken from three of the four important studies reviewed in the Clinical Review Paper by Dr. Alan Moloff . To download the full paper and access references (1), (2), and (3), visit go.pyng.com/pelvic

Download the Clinical Review Paper go.pyng.com/pelvic

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Small & Lightweight Design - Featuring a 3-4mm thickness compared to the 7-8mm thickness of the previous T-POD design, T-PODCombat is now smaller and more compact than ever to better fit into your emergency bag.



One Person Application - The unique easy-to-tighten pulley system means that T-PODCombat can be easily applied by just one person in the field.



One Size Fits All - No carrying around different sizes. You can quickly and easily trim T-PODCombat to customize the fit for most people. For morbidly obese patients, you can easily combine two T-PODCombat devices together. For children, you may have to adjust the actual placement of the T-PODCombat depending on the child's size, and ensure you have a 6"-8" gap on small children.



100% Radiolucent - You do not have to remove and then reapply T-PODCombat for radiological procedures. Designed using no metallic parts, T-PODCombat can stay on and keep your patient's pelvic region stable during MRI, X-Ray and CT scans.



Symmetrical, Circumferential Compression - Designed using a unique pulley system spanning nearly the width of the belt, T-PODCombat offers compression that is evenly distributed on both sides of the pulley system and across the width of the binder.



Modulated Compression - Unlike a buckle system where compression can only be adjusted at certain settings, the T-PODCombat pulley system means that infinite adjustments can be made.



Over-tightening Prevention - T-PODCombat's pulley system features a 6-8" gap that is designed specifically to prevent over-tightening.



Improved Material - The new T-PODCombat uses new 100% polyurethane material that is thinner, breathable, latex-free, durable and contains moisture wicking capabilities. Better yet, the new material will not fray even when cut to size.

The T-PODCombat Clinical Advantage:

- Effective and easy-to-use device to stabilize the pelvic ring in patients that have suspected pelvic fractures and possible internal bleeding. 1
- · Can substantially reduce transfusion requirements, length of hospital stay, as well as reduce mortality in patients with unstable pelvic fractures.²
- Can provide better stabilization of a globally unstable pelvic fracture than an external fixator.



For more information please contact:

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- Tan EC, van Stigt SF, van Vugt AB. Effect of a new pelvic stabilizer (T-POD') on reduction of pelvic volume and haemodynamic stability in unstable pelvic fractures. Injury. 2010 Dec;41(12):1239-43. PubMed: PM21374905
- 2. Croce MA, Magnotti LJ, Savage SA, Wood GW, Fabian TC. Emergent pelvic fixation in patients with exsanguinating pelvic fractures. J Am Coll Surg. 2007 May;204(5):935-9. PubMed: PM17481514
 3. Prasarn ML, Horodyski M, Conrad B, Rubery PT, Dubose D, Small J, Rechtine GR.. Comparison of external fixation versus the trauma pelvic orthotic device on unstable pelvic injuries: a cadaveric study of stability. J Trauma Acute Care Surg. 2012 Jun; 72(6):1671-5.