

## INTENDED USE

**HemaShock®** is indicated for patients with blood pressure of less than 80 mmHg (systolic).

It is intended for use during CPR, in circulatory arrest, and in patients in severe shock.

*NOTE: If the patient is conscious, **HemaShock®** is not needed.*

## CONTRAINDICATIONS

Do not use **HemaShock®** on patients presenting active Deep Vein Thrombosis (DVT).

## SAFETY

Do not leave on for more than two hours.

## DIRECTIONS FOR USE

### MANAGING CIRCULATORY ARREST

When applied during CPR, the **HemaShock®** is immediately placed on both legs while chest compression and other treatments (e.g. defibrillation) are provided. When **Return Of Spontaneous Circulation (ROSC)** is observed, and only in a medically controlled environment, the **HemaShock®** is gradually removed.

### MANAGING SEVERE SHOCK

When a patient in severe shock is treated (i.e. systolic pressure less than 80 mmHg), first one **HemaShock®** is placed. A second **HemaShock®** is only used if systolic pressure is still below 80 mmHg (or has crept down). Once the patient is receiving definitive care in a medically controlled environment, the **HemaShock®** is gradually removed.



**ORDER NOW from [Orders@HemaShock.com](mailto:Orders@HemaShock.com)**

Product	Cat#	Units/Case*
HemaShock® EMS Adult	PRHS-EM-01A	5
HemaShock® EMS Upper Extremity	PRHS-UE-01A	5

*\*HemaShock® is sold per case*



## USA

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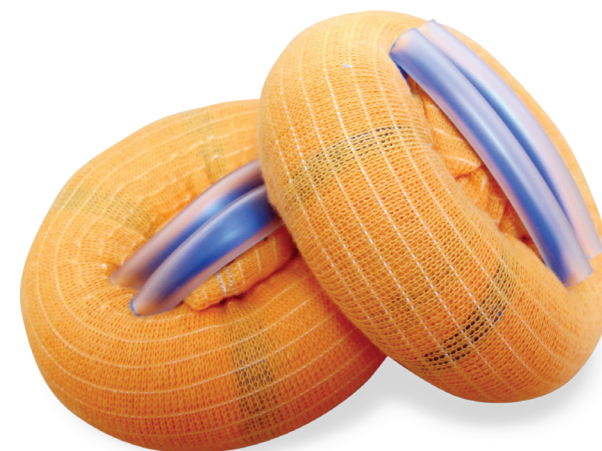
**[info@hemashock.com](mailto:info@hemashock.com) | [www.HemaShock.com](http://www.HemaShock.com)**

HemaShock® is Protected by US and International Patents  
HemaShock® is CE Marked | FDA Pending



# AUTO-TRANSFUSION Tourniquet

**Safe · Easy to Use · Fast**



**HemaShock®** is a revolutionary innovation for emergency medicine.

**HemaShock®** provides a **solution for systemic hypoperfusion** – an insufficient blood supply to the essential organs during severe shock and circulatory arrest.

## PHYSIOLOGICAL PRINCIPALS

### Exsanguination – Tourniquet

When applied, **HemaShock®** shifts blood from the limbs into the central circulation and blocks the blood flow into the limbs.

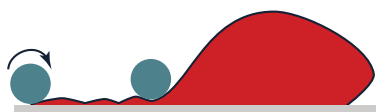
### A SIMPLE MODEL OF THE HemaShock® EFFECT



**Normal blood volume:** When blood volume and vascular volume are matched and the pump is functional, blood pressure is normal.



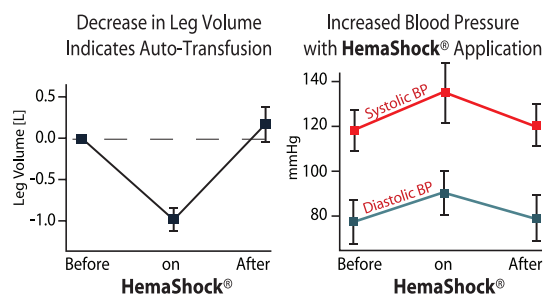
**Reduced blood volume:** When blood volume is down (hypovolemic shock) or when vascular volume is pathologically increased (distributive shock) blood pressure and tissue perfusion fall.



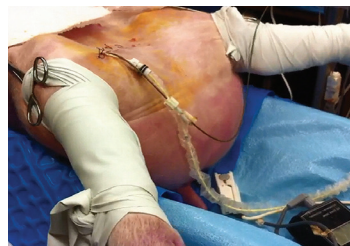
**Squeezing the blood from periphery to center**, while blocking the re-entry, increases venous return to the heart and directs blood flow to the essential organs.

**HemaShock®** results in:

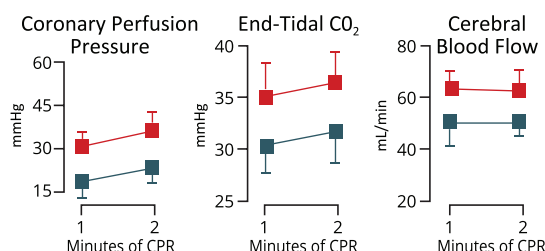
- Increased systolic and diastolic blood pressure
- Auto transfusion of 1000 ml of fresh blood



**Research shows:** Tourniquet-assisted CPR increases coronary perfusion pressure, cerebral blood flow and end-tidal CO<sub>2</sub> during resuscitation.<sup>1</sup>



	T-CPR	CPR
Systolic BP (mm Hg)	75	61
Diasystolic BP (mm Hg)	34	20



Porcine Study: Significantly increased perfusion of the heart, brain, and tissue

■ Tourniquet CPR (T-CPR) ■ Non-tourniquet CPR

<sup>1</sup>Yang, Z. et al. Resuscitation 86, 49–53 (2015)

## APPLICATION



Assess status



Remove shoes



Place **HemaShock®** on toes



Roll device up the limb



**HemaShock®** is on both legs

## REMOVAL

Only remove where definitive care can be given, stepwise and while monitoring hemodynamic parameters.



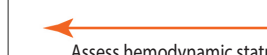
Roll **HemaShock®** to knee level



Assess hemodynamic status



Roll **HemaShock®** to mid calf



Assess hemodynamic status



Roll **HemaShock®** to ankle and remove carefully

### Auto-transfusion assures supply of fresh blood:

- Right Temperature
- Matching type
- Rich with all clotting factors
- Excellent oxygen-carrying capacity
- Increase venous return
- Filled peripheral veins ease IV insertion