

# ***The First System Approach to Patient Mobility***

The **PACE** is a simple and effective bedside solution that increases patient mobility. PACE units are unique because they only require **one setup** before staying with the patient throughout their stay consolidating all equipment and gasses. The system creates an environment that promotes safer, more frequent mobility while simultaneously reducing the staff needed to manage the patient's multiple devices. This evidence-based approach yields significant clinical and financial outcomes on any high-acuity floor.

- **Reduce Length of Stay on high-acuity floors by 25%** ■
- **Improve patient safety and reduce fall rates** ■
- **Reduce the number of staff needed for each ambulation event** ■
- **Increase patient satisfaction and nurse retention** ■
- **Stand out from other hospitals in a competitive environment** ■

**ICU, PCU, CVICU**



**Post-Surgical**



**Cardiac  
Transplant**



# How Much is Your Staff's Time Worth?



No time spent preparing equipment



Previously needed staff can spend face time with other patients



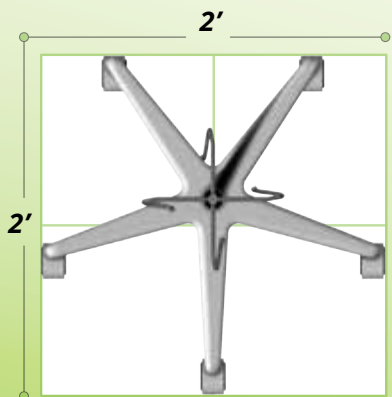
Caregiver attention can remain focused on the patient and safety



Cords and lines are neatly consolidated



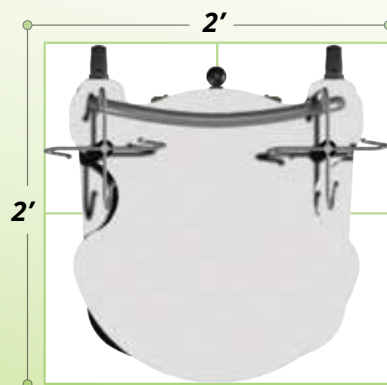
Reduce the number of staff needed for each ambulation event



IV Pole



The same footprint as a large IV Pole



PACE

# How it Works

## Patented Transmission

3 modes give the patient full control during ambulation.



## Adjustable IV poles by Provita

## Height Adjustable Mobility Handles

6 settings allow for ergonomically correct use by the majority of patients.



## Electrical Box and Transformer

8 outlet medical grade power strip for cord consolidation (UL and Joint Commission approved).



## 5th Wheel

The transmission allows patients to ambulate in a controlled straight path.





# Wheelchair Attachment

- Designed with patient safety in mind
- Wheelchair is automatically pulled behind patient
- Reduce patient falls by having a seat readily available
- Reduce number of staff members needed to mobilize



*Attaches to PACE at two points of contact*



*Easy patient transport*



*Quick Release*



*Stow Position*

# Empower Your Patients to Mobilize

Mrs. Anderson was born with Cystic Fibrosis (CF), and for 52 years she had remained active despite all the deterrents associated with her illness. She underwent a lung transplant in 2007 and was doing quite well until her transplant began to falter in March of 2014.

As a result, she was admitted to the ICU at UHS hospital in San Antonio. She was intubated and spent the next 2.5 weeks in bed. At the time the hospital staff was not in the practice of ambulating intubated patients. Obviously, this physical setback also took a toll on Mrs. Anderson's emotional well-being. Fortunately, UHS had been researching early mobility and adopted the LIVENG00D PACE as a solution for consolidating their patients' equipment and for making mobility more frequent in the ICU.

The LIVENG00D Clinical Specialists arrived at UHS and worked together with the staff to elect a ventilated patient. The goal was to demonstrate how much easier ambulation can be with the right tools. This would be a first! They all agreed that getting Mrs. Anderson out of bed would be good for her, both physically and mentally. She was the perfect candidate.

They explained to her that she was about to make history. She would be the first patient at UHS San Antonio to ambulate on the vent and also the first patient in Texas to use the LIVENG00D PACE. Mrs. Anderson was unable to speak so she used her cell phone to type notes to the staff. She typed, "Why me?" on her phone and smiled from ear to ear! She was thrilled at the prospect of getting out of bed and being mobile. After the staff transferred her equipment to the PACE, she eagerly got up to walk...and it wasn't just a few steps - she actually walked out of her ICU room and continued 60 feet down the corridor. She was ecstatic and naturally the staff celebrated with her as it was a success for all! The next morning she was smiling and sitting up in a chair. She typed, "That was the best sleep I've had since I got here!"

She quickly progressed by walking 80 feet the next day and 120 feet on the third day. She was able to leave the hospital on the fourth day to begin the next phase of her rehab at a local LTAC.



"We are so excited that the PACE helped us ambulate our very first vented patient."

**Esther Vandermeulen, R.N.**

University Health System - San Antonio, TX