

When seconds count, you need a pelvic stabilization device that is easy to apply by one person in the field and does not have to be removed for MRI, X-Ray and CT scans.

T-PODResponder™ is the newest pelvic stabilization device from Pyng Medical. Developed for first responders, T-PODResponder is specifically designed to be quickly applied in the field by one person using an easy-to-tighten pulley system. With a highly flexible design, T-PODResponder is small and compact, is one-size-fits-all, and can remain on through MRI, X-Ray and CT scans.

# 6 Reasons to Choose T-PODResponder:

- 1. One person can apply. Designed with an easy-to-tighten pulley system, T-PODResponder can be applied by one person in the field.
- 2. One size fits all . You can customize the fit of T-PODResponder for nearly any size person over 50 lbs.
- 3. 100% radiolucent. T-PODResponder is designed without the use of metal so it does not have to be removed for MRI, X-Ray and CT scans.
- 4. Compact and lightweight design to better fit into your emergency bag.
- 5. Using a unique mechanical advantage pulley system, T-PODResponder ensures simultaneous, symmetrical compression, where and when needed—placing control of the tightening process in the hands of providers.
- Early pre-hospital pelvic immobilization using T-PODResponder reduces morbidity, mortality, blood loss, the need for blood transfusions and hospital length of stay.



#### Unique Pulley System Design

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



#### No Metal Used

- MRI, X-Ray and CT scan compatible
- Belt can stay on and provide pelvic support through scan procedures
- Improved & consistent pelvic support with no removal or reapplication needed

PM-155

## Reliable Pelvic Stabilization. Compact, Portable Package.



**Small & Lightweight Design** – Featuring a 3-4mm thickness compared to the 7-8mm thickness of the previous T-POD design, T-PODResponder is now smaller and more compact than ever to better fit into your emergency bag. (Photo on the left shows the new T-PODResponder compared to the old T-POD on the right.)



One Person Application - The unique easy-to-tighten pulley system means that T-PODResponder 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-PODResponder to customize the fit for any size person over 50 lbs. For morbidly obese patients, you can easily combine two T-PODResponder devices together.



**100% Radiolucent** - You do not have to remove and then reapply T-PODResponder for radiological procedures. Designed using no metallic parts, T-PODResponder 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-PODResponder 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-PODResponder pulley system means that infinite adjustments can be made.



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



**Improved Material** - The new T-PODResponder 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-PODResponder 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.
- Can provide better stabilization of a globally unstable pelvic fracture than an external fixator. 3



## For more information please contact:

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#### References:

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- 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.