

Omni's patented non-invasive, sensor-driven technology actively pulls urine away from the body, keeping the user dry, providing advanced bladder and wound care management

1 Reduces hospitalization costs associated with adverse events

"Costs of UI total \$27.9 billion per year, which includes \$14 billion in non-medical costs (pads, laundry, and care taking) and \$13 billion in medical costs. Of these medical costs, only 8% is spent on evaluation, while 92% is related to UI sequelae such as falls, UTI, skin breakdown, prolonged acute care stays, and increased SNF admissions."

(Orthopedic & Sports P.T. Association, OSPTA pt connection, Volume 5: Issue 21 Spring 2002)



2 Reduces the risk of urinary tract infections

"UTI was the second most frequently reported complication in chronic SCI with an annual incidence of 20%."

(Whiteneck 1992)

A retrospective study of geriatric patients comparing condom catheters to a control group not using a catheter found a 63% condom catheter-associated UTI rate.

(Johnson, Edwin T., "The Condom Catheter: Urinary Tract Infection and Other Complications". Southern Medical Journal. 1983 May;76(5):579-82)

"Unresolved nosocomial UTI's may account for as many as 56,000 deaths per year."

(Cox, Claire E., MD. "Nosocomial Urinary Tract Infections." Urology. 32 (September 1988) 3: 210-214)

"The estimated annual cost of treating nosocomial UTI in the U.S. is \$558 to \$593 million; cases of sepsis add significant additional cost."

(Jarvis WR. "Selected aspects of the socioeconomic impact of nosocomial infections: morbidity, cost, and prevention". Infection Control Hospital Epidemiology. 1996; 17:552-557)



3 Decreases skin macerations and decubitus ulcers

"Patients with urinary or fecal incontinence are at risk of incontinence-associated dermatitis (IAD), which can result in the development of pressure ulcers (PUs) and secondary skin infection."

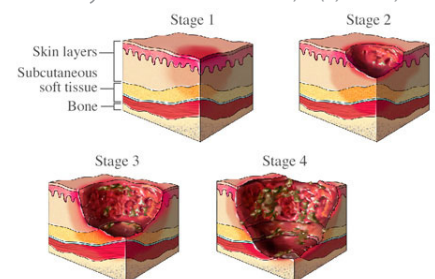
(Junkin J, Selekof JL. Prevalence of incontinence and associated skin injury in the acute care inpatient. J Wound Ostomy Continence Nurs. 2007;34(3):260-269. Gray M, Bliss DZ, Doughty DB, Ermer-Seltun J, Kennedy-Evans KL, Palmer MH. Incontinence-associated dermatitis: a consensus. J Wound Ostomy Continence Nurs. 2007;34(1):45-54)

"The patient risk of developing a decubitus ulcer (pressure ulcer) in an acute care hospital can be as high as 38%."

(Lyder, Courtney H. "Pressure Ulcer Prevention and Management". JAMA. Vol. 289, No. 2. January 8m, 2003)

"Each case of pressure ulcer as a secondary diagnosis in an acute care hospital costs an average of \$43,180."

(Centers for Medicare & Medicaid Services. Proposed Fiscal Year 2009 Payment, Policy Changes for Inpatient Stays in General Acute Care Hospitals. Available at: <http://www.cms.hhs.gov/apps/media/press/factsheet.aspx?Counter=3045&intNu...> Accessed: May 13, 2008).



4 Reduces the risk of falls due to urinary incontinence

"A meta-analysis of nine studies investigating falls and urinary incontinence in community dwelling of older people showed the odds of falling were increased in the presence of urgency incontinence and mixed incontinence."

(J Am Geriatr Soc., 2000)

"Urinary incontinence and both urge and stress incontinence were positively related to falls. The larger the volume of urine lost, the greater the risk of falls. Falls were associated with the presence of urinary symptoms, physical limitations and having a poorer quality of life in respondents with urinary incontinence."

(Age Ageing (2012) 41 (1): 35-40. doi: 10.1093/ageing/afr125. Association between the Geriatric Giants of urinary incontinence and falls in older people using data from the Leicestershire MRC Incontinence Study)

