

# THE FALLSAVER™ SYSTEM

FallSaver is a diagnostic device that has been shown in clinical trials to be effective in:

- reliably identifying who is at high risk of falling by serving as an accurate fall assessment tool
- reducing falls and associated injuries by allowing staff adequate time to intervene in a high-fall-risk situation<sup>1</sup>
- monitoring likely patient activity in the bed, bathroom, wheelchair, and throughout the facility

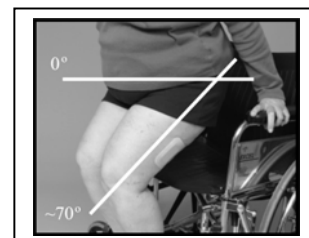
It is a wireless device about the size of a band-aid attached to the patient's thigh. When the patient begins to stand, it sends a signal to an in-room receiver that both alerts the patient to sit down and also lets the caregiver know the patient is in need of assistance. Besides its effectiveness in significantly reducing falls, it has the following advantages:

- its lack of false alarms (it does not send an alarm unless the patient is trying to stand);
- it is small and unobtrusive (and thus maintains patient dignity and acceptance); and
- its relatively low cost (about \$2 per patient per day) is actually a negative cost once cost savings from reduced falls are considered.

## System Description and Key Features

- Wireless, patented, FDA 510(k) Class I Exempt device for use in hospitals, rehab units, SNFs, assisted living residences, adult family homes, and home use
- Intended for those who should not ambulate without assistance
- Reduces costs of fall-related injuries and staff time responding to false alarms
- The only device in the published literature that has been proven to reduce falls
- Assists compliance with new JCAHO requirements for fall assessment and bed alarms
- Results in improved facility QI ratings and other measures of patient care
- Provides for potential reductions in CGL insurance premiums
- A discrete, unobtrusive non-restraint device that enjoys high patient and staff acceptance and compliance

There are two key parts to the FallSaver system: the transmitter "patch" and the receiver "alarm."



## Transmitter Patch

- Battery-operated printed circuit board surrounded by hospital adhesive foam approx 2" x 3"
- Attached to patient's thigh wherever comfortable for patient (generally posterior)
- No adverse skin reaction in 87% of elderly patients after 21 days continuous application
- Activated when patient's leg becomes weight-bearing
- Wirelessly transmits signal that patient is in need of assistance
- Alarm shuts off when patient sits down again
- No false alarms as demonstrated in clinical trials
- Approved for 29 days continuous application; generally replaced at 7-10 days
- Waterproof, shockproof; worn while showering or bathing
- Can be used in MRI, CT Scan, and X-ray machines
- Useful for dementia patients (respond well to alarm, no picking behavior)
- Staff-activated battery allows extended shelf life
- Used patches returned to manufacturer for parts recovery; no special handling required



## Receiver Alarm

- In-room receiver emits alarm reminding patient not to get up unassisted
- Compatible with most existing nurse call systems (NCS)
- Optional pager system for facilities without NCS or pagers
- "Snooze" button deactivates alarm when staff is assisting patient with standing
- Manual or automatic reactivation of snooze button
- Rechargeable battery allows receiver to be attached to wheelchair and follow patient
- Low battery light warns when receiver needs to be replaced
- Adjustable alarm volume



Receiver

## Contact Us

All clinical prototype units have been sold; POs are being accepted for shipment summer 2006. Questions or comments may be directed to NOC-watch International, Crystal Bay, Nevada, 877-614-5616 or 775-544-5023, [kek@fallsaver.net](mailto:kek@fallsaver.net).

<sup>1</sup> Evaluation of a Non-Intrusive Monitor to Reduce Falls in Nursing Home Patients, K.E. Kelly et al, J Am Med Dir Assoc 2002;3:377-382.