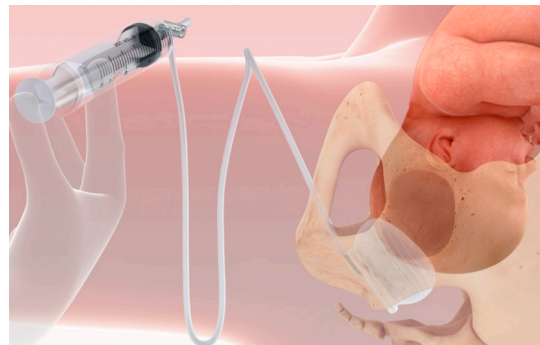


Fetal Pillow®

Reduce costs while improving outcomes with Fetal Pillow

The patented Fetal Pillow® is a sterile single-use balloon cephalic elevation device for use in Cesarean sections performed during the second stage of labor. It can elevate the fetal head to facilitate delivery of the fetus in women requiring a C-section at full dilation, or those requiring a C-section after a failed instrumental vaginal delivery and it can help reduce both fetal and maternal morbidity.¹

“When the Fetal Pillow is readily available in the labor ward and is used during CDFD (Cesarean Delivery at Full Dilation), this has benefits for women in this emergency, for doctors who have to manage them, and for hospitals that have to cope with the emergency”¹



Can reduce complications and may save up to \$1,200 per patient^{1,2,3,4,5}



Reduces length of stay¹

- Each additional day in the hospital can be costly
- The average cost for an extra day stay in a hospital is approximately \$400²



Results in fewer blood transfusions¹

- The total costs for blood products per transfusion may be greater than \$1,400, which includes acquisition, testing and storage³
- Fetal Pillow resulted in 15 fewer transfusions per 100 patients treated¹



Reduces operating room time¹

- Fetal Pillow resulted in 20 minutes reduction in operating time

Ordering Information

| NUMBER | DESCRIPTION |
|--------|----------------------|
| FP-010 | Fetal Pillow (6/Box) |

1. Seal, S.L., Dey, A., Barman, S.C., Kamilya, G., Mukherji, J., Onwude, J.L. Randomized controlled trial of elevation of the fetal head with a fetal pillow during cesarean delivery at full cervical dilatation. *International Journal of Gynecology and Obstetrics*. 2016;133: 178–182.
2. Taheri Paul A., MD, MBA, FACS; Butz, David A., PhD; Greenfield, Lazar J., MD, FACS. Length of Stay Has Minimal Impact on the Cost of Hospital Admission. *J Am Coll Sur Vol*. 191, No. 2, August 2000.
3. Toner, Richard W.; Pizzi, Laura, Leas; Brian, Ballas; Samir K.; Quigley, Alyson; Goldfarb, Neil I. Costs to Hospitals of Acquiring and Processing Blood in the US. A Survey of Hospital-Based Blood Banks and Transfusion Services. *Jefferson School of Population Health, Thomas Jefferson University, Philadelphia, Pennsylvania. USA Appl Health Econ Health Policy* 2011; 9 (1): 29-37.
4. Dexter, Franklin, MD, PhD; Ledolter, Johannes, PhD; Wachtel, Ruth E., PhD, MBA. Tactical Decision Making for Selective Expansion of Operating Room Resources Incorporating Financial Criteria and Uncertainty in Subspecialties' Future Workloads. *Anesth Analg* 2005;100:1425–32.
5. Blood Transfusion and Cesarean Delivery, *Obstetrics & Gynecology*. Rouse, Dwight J. MD, MSPH, et al. October 2006 - Volume 108 - Issue 4 - p 891-897 doi:10.1097/01.AOG.0000236547.35234.8c.

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