

QUESTIONS & ANSWERS

What are the advantages of using the Episure AutoDetect syringe for epidural placements?

Episure AutoDetect allows you to continuously keep both hands on the epidural needle during advancement resulting in enhanced control. Our syringe also provides an objective, visual indicator of loss of resistance (LOR) when the epidural space has been reached, rather than relying on the subjective “feel” for loss of resistance required with traditional LOR syringes.

Do I have to change the way I perform my epidurals?

No, that is what makes the Episure AutoDetect so easy to use. You perform the epidural placement in the same manner to which you are accustomed. The only difference is that you use the Episure AutoDetect syringe instead of your standard LOR syringe.

Will Episure AutoDetect prevent me from getting an accidental dural puncture?

Indigo Orb believes that the visual indication of loss of resistance when using Episure AutoDetect enhances the anesthesia provider's ability to identify the epidural space. However, just as with traditional LOR syringes, the anesthesia provider must stop advancing the needle once the epidural space has been identified.

I have placed lots of epidurals with standard LOR syringes, why should I use something different?

The Episure AutoDetect syringe provides enhanced control, even for experienced anesthesia providers. This is because both hands continuously remain on the needle during advancement.



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EPISURE AUTODETECT SYRINGE

The Episure AutoDetect is a spring loaded, automatic loss of resistance (LOR) syringe. It provides an objective, visual confirmation of loss of resistance, as opposed to the subjective "feel" required with standard LOR syringes. When the needle enters the epidural space, the plunger automatically releases.

The Episure AutoDetect allows the anesthesia provider to continuously advance the epidural needle with both hands resulting in enhanced control.

Ashraf Habib, MD, Assistant Professor of Anesthesiology at Duke University Medical Center believes that with Episure AutoDetect "one could perform the procedure quicker and you might have a lower incidence of inadvertent dural punctures, i.e. that it is a safer technique."



Available in single units and a variety of epidural trays. For more information, please contact Indigo Orb, Inc.

CLINICAL STUDIES

Stanford University

Brendan Carvalho, FRCA, and Edward Riley, MD, evaluated the Episure AutoDetect syringe in laboring women. All epidurals placed using the Episure AutoDetect syringe delivered successful analgesia, and there were no dural punctures or other complications. This study was published as an abstract at the ASA Conference 2005. Another study completed at Stanford University has been accepted by Anesthesia and Analgesia for their October 2007 issue.

Duke University

A study by Ashraf S. Habib, MBBCh, MSc, FRCA, found that Episure AutoDetect reliably and quickly identified the epidural space in laboring patients. The abstract of the study findings were presented at the SOAP Conference 2007.

Wayne State University

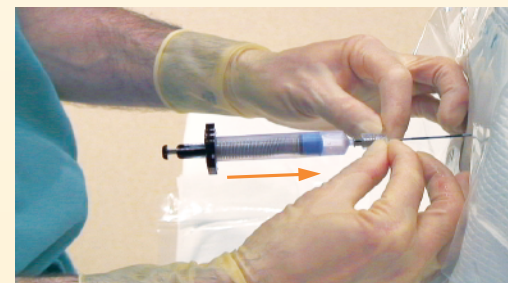
A study by Vitaly Soskin, MD, demonstrated that Episure AutoDetect identifies the epidural space accurately and objectively while providing stability and controlled movement. The abstract of the study findings were presented at the SOAP Conference 2007.

Additional clinical studies are currently being conducted at Brigham & Women's Hospital.

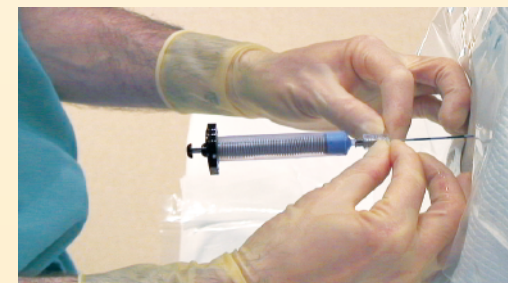
TECHNIQUE



The anesthesia provider is able to use both hands to advance the needle when using the Episure AutoDetect syringe.



The anesthesia provider continues to advance the needle towards the epidural space.



When the needle tip enters the epidural space, the plunger automatically releases providing a visual confirmation.