

RESQCPR® SYSTEM BIBLIOGRAPHY

SELECTED STUDIES THAT INCLUDED USE OF AN IMPEDANCE THRESHOLD DEVICE (ITD)
DURING THE PERFORMANCE OF ACTIVE COMPRESSION DECOMPRESSION CPR (ACD CPR)

Clinical (Human) Studies

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- Aufderheide TP, Frascone RJ, Wayne MA, et al. Standard cardiopulmonary resuscitation versus active compression-decompression cardiopulmonary resuscitation with augmentation of negative intrathoracic pressure for out-of-hospital cardiac arrest: a randomized trial. *Lancet*. 2011;377:301-311.
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- 11. Debaty G, Aufderheide T, Swor R, et al. The paradoxical association between pulmonary edema and survival with favorable neurological function after cardiac arrest. *Circulation*. 2014;130:A248.
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- 13. Debaty G, Moore JC, Labarere J, et al. Defining the end of the circulatory phase in humans undergoing cardiopulmonary circulation. *Circulation*. 2017;136:A20385.
- 14. Debaty G, LaBarere J, Frascone RJ, et al. Long-term prognostic value of gasping during out-of-hospital cardiac arrest. *J Am Coll Cardiol*. 2017;70(12):1467-1476.



- 15. Moore JC, Grahl M, Marko T, et al. A before and after study of active compression decompression cardiopulmonary resuscitation with the impedance threshold device in a large, urban pre-hospital system. *Circulation*. 2018;138:A138.
- 16. Ma L, Xiong B. Effect of impedance threshold devices on cardiopulmonary resuscitation: an updated meta-analysis. *Crit Care Med.* 2018;46(1):118.

Pre-Clinical (Animal) Studies

- 1. Lurie KG, Coffeen P, Shultz J, et al. Improving active compression-decompression cardio-pulmonary resuscitation with an inspiratory impedance valve. *Circulation*. 1995;91(6):1629-1632.
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Human Cadaver Studies

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Manikin/Bench Studies

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Pre-clinical results are not necessarily representative of clinical outcomes. The studies Isited in this document are not intended to imply specific efficacy or safety claims not yet approved by the US FDA. The ResQCPR System is intended for use as a CPR adjunct to improve the likelihood of survival in adult patients with non-traumatic cardiac arrest. Improper use of the ResQCPR System could cause ineffective chest compressions and decompressions, leading to suboptimal circulation during CPR and possible serious injury to the patient. The ResQCPR System should only be used by personnel who have been trained in its use. The ResQPUMP should not be used in patients who have had a recent sternotomy as this may potentially cause serious injury. Improper positioning of the ResQPUMP suction cup may result in possible injury to the rib cage and/or internal organs, and may also result in suboptimal circulation during ACD-CPR.