OroCare™

The complete programme for oral hygiene



Targeting Ventilator Associated Pneumonia



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Quality, innovation and choice



Reduce VAP with Oral Care

Ventilator Associated Pneumonia (VAP) causes prolonged intubation and a prolonged stay in intensive care units (ICU) with the associated costs. It is also a serious cause of mortality in compromised patients.

A combination of oral care treatments (brushing and suctioning) in a proper oral care protocol means care providers can efficiently prevent oropharyngeal bacterial biofilm build-up. This in turn leads to a reduction of VAP and aspiration pneumonias and greatly reduces associated treatment costs.^{1.2.3.}



Four stages of plaque build up

Dental plaque is a biofilm made up from bacteria and their excretions, sitting mainly at the gum line and between teeth.



Biofilm

The biofilm will develop freshly after each intervention and will cover the complete tooth surface in only two hours. The biofilm protects pathogenic bacteria such as *MRSA* and *Klebsiella*, which are common problems in many intensive care units. Biofilm must be broken up prior to the application of antibacterial agents.



Aspiration

From the oropharynx saliva, mucus and biofilm build-up move to the ET tube cuff and may be aspirated into the lungs, as the cuff seal will never be 100%. When aspirated into the lungs, these bacteria may cause VAP and require treatment with antibiotics.



Supporting videos

For correct set-up and connection of the Intersurgical Oral Care products, please view the appropriate video.



www.intersurgical.com/products/critical-care/oral-care#videos



www.intersurgical.com/info/oralcare

1. R. GARCIA, L. JENDRESKY, L. COLBERT, A. BAILEY, M. ZAMAN et M. MAUMDER, Reducing Ventilator-Associated Pneumonia Through Advanced Oral-Dental Care: A 48-Month Study, AJCC, July 2009. 2. J. Rello, D. Ollendorf, G. Oster, M. Vera-Lionch, L. Bellm, R. Redman, M. Kollef: Epidemiology and outcomes of ventilator-associated-pneumonia in a large US database, Chest, December 2002. 3. L. Frampton: Preventig HCAI on the intensive care unit, The Clinal Services Journal, March 2014.



For the most efficient removal of plaque, a soft bristle toothbrush is recommended. Intersurgical offer a large range of medical toothbrushes with soft bristles and cleaning implements for both adult and paediatric patients in intensive care. These have been designed with small, patient friendly brush heads which allow the user to gently and effectively reach all areas of the oral cavities.

OroCare[™] Mini

Ideal for patients with a challenging oropharyngeal situation. The long slim neck of this brush assists the user in reaching all areas of the oral cavities.



OroCare[™] Select with 0.12% chlorhexidine

An ampoule containing 0.12% chlorhexidine is included to deliver the antibacterial fluid directly at the bristles. Suction may be conveniently controlled by the integrated thumb port.



OroCare™ Aspire suction toothbrush

With built in direct attachment for the suction line this toothbrush eliminates the need for an additional yankauer. The long slim neck of this brush helps to reach all areas of the oral cavity without interfering with ET tubes and other equipment.



OroCare™ Sensitive oral suction wand

This unique suction wand is used for cleaning delicate gums and tissues. The integral moulded soft head provides a safer solution to the commonly used foam swab. The wand allows application of antibacterial solutions whilst gently cleaning the teeth and soft pallet.

Code	Description	Box Qty.
3011000	OroCare Mini toothbrush	30
3016000	OroCare Aspire suction toothbrush	25
3012100	OroCare Select toothbrush with 0.12% chlorhexidine ampoule	50
3017000	OroCare Sensitive oral suction wand	15

Accessories

To complement the range of toothbrushes and suction wand Intersurgical has developed a range of accessories, to assist in an efficient oral care programme in busy intensive care areas.



OroCare[™] suction line splitter

Designed for the simultaneous use of two suction lines on a single suction canister. This may become necessary, when a closed suction system is already attached to the vacuum source.



OroCare[™] 0.12% chlorhexidine mouthwash ampoule

The ampoules contain an antibacterial 0.12% chlorhexidine mouthwash for use with OroCare Select.



OroClean tooth gel

Tooth gel available in single use sachets. This prevents cross contamination of tooth gel tubes and the associated potential for recontamination of patients.

Code	Description	Box Qty.
3022000	OroCare suction line splitter	25
3025000 NEW	OroCare™ 0.12% chlorhexidine mouthwash ampoule - 14ml for use with the OroCare Select toothbrush	70
3021000	OroClean tooth gel sachet, 2g	250

Make an enquiry



Daily protocol kits

In order to help in the introduction of an oral care protocol we have three basic day kits available for either four hour (q4) or eight hour (q8) interventions. There are also two complete kits including chlorhexidine disinfectant mouthwash for use every four (q4) or eight hours (q8), offering a simple to use single use solution straight from the pack.



Code	Description	Box Qty.
3014000	OroCare 24 hour day kit – q4 (four hour intervention kit)	10
3014001 NEW	OroCare 24 hour day kit - q4 (four hour intervention kit) without foam swabs	10
3014100	OroCare 24 hour day kit with chlorhexidine mouthwash - q4 (four hour intervention kit)	10
3015000	OroCare 24 hour day kit – q8 (eight hour intervention kit)	15
3015100	OroCare 24 hour day kit with chlorhexidine mouthwash – q8 (eight hour intervention kit)	15

Single use treatment packs

For situations, where full daily kits are not suitable, Intersurgical offer a variety of single use treatment packs. These contain a toothbrush, a choice of cleaning agents and in a selection of pack options, dispenser cups and sponges for lip moisturising.



3016100 NEW OroCare Aspire suction toothbrush with tooth gel

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