



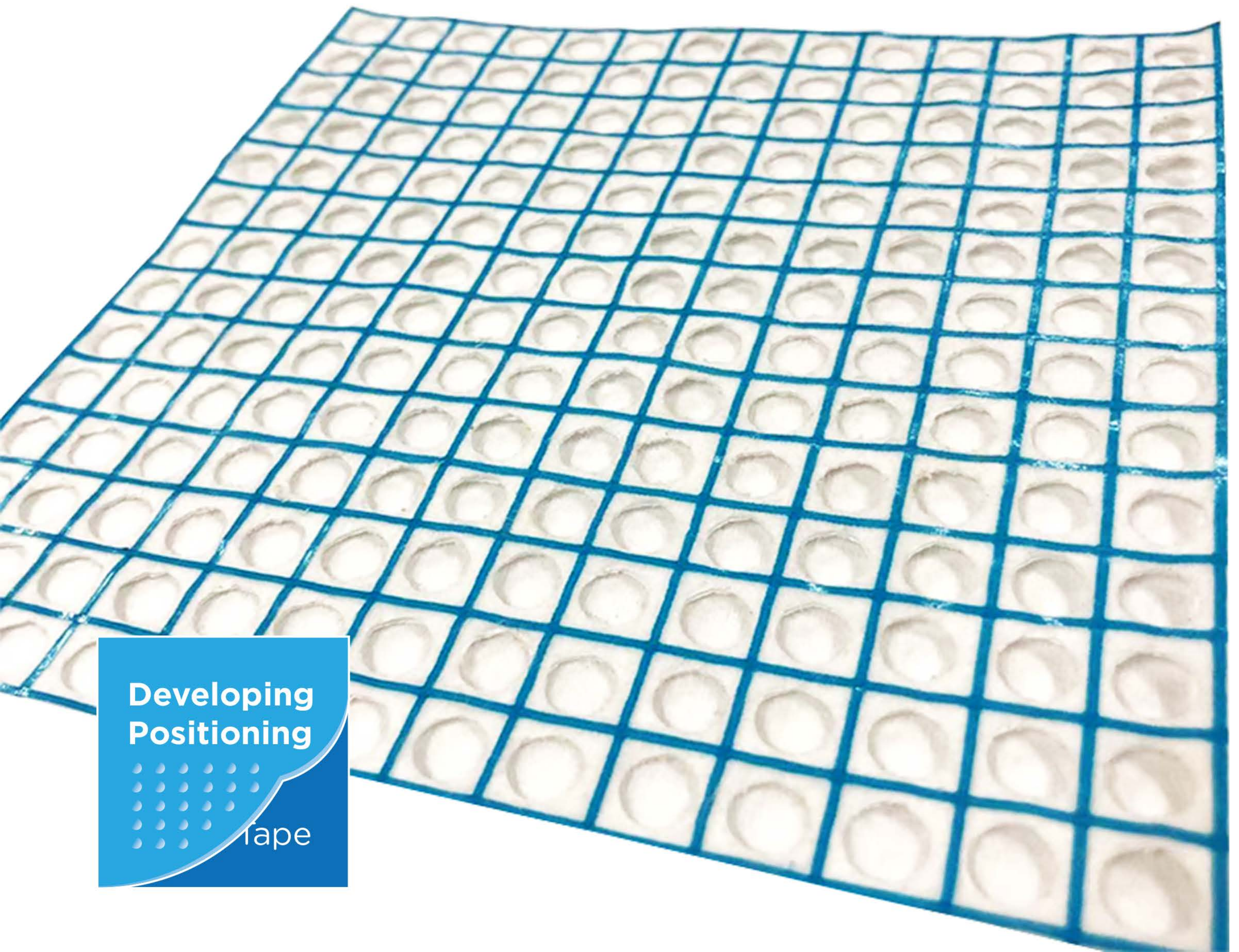
PURNOTE

# Developing Positioning Tape

Spinal surgeons are the most likely to perform a wrong-site surgery. And 55% of spinal surgeons have operated on the wrong level. Because reporting these events to the Joint Commission is voluntary, it could be that only 10% of actual cases are reported. Positioning Tape can increase accuracy and reduce risks.

	OR Cost	OR Time
Normal Surgery	\$585	12 minutes
<b>With Tape</b>	<b>\$65</b>	<b>3 minutes</b>

A more effective and less radiation solution for Spine Surgery Marking



Developing  
Positioning

Tape

Surgeons have found **Positioning Tape** especially useful for localization in thoracic and upper lumbar regions.

Spine guidance **POSITIONING TAPE** allows for fast, easy and accurate incisions.

## Spinal Procedure

*Lumbar multi-site with OR X-ray*

### 1. Use a larger, single plain X-ray

Positioning Tape can easily be used with a large plain X-ray, which is simpler and faster to view landmarks and targets, as well as multiple sites, and the larger X-ray view can correlate more clearly to the prep MRI/CT to confirm the site.

### 2. Decrease incision sizes by 50%

Conventional lumbar incisions can be 5 to 10 cm long. Studies have shown that using a developing guide for a surface site correlation can reduce the incision sizes to 1 cm.

### 3. Mitigate cancer risks

Reducing radiation, reduces unnecessary risk to patients and medical staff. Positioning Tape needs only a single X-ray image, compared to the repeated iterations of the current fluoro/needle method.

### 4. Atypical anatomy may be present in 38% of cases

Fluoro's more limited view makes catching anomalies more difficult. Atypical anatomy can lead to inaccurate correlation with landmarks. Positioning Tape allows for faster and easier checks with multiple landmarks as redundancy. Localizing is faster with a grid compared to a needle

### 5. Eliminate palpation dependency

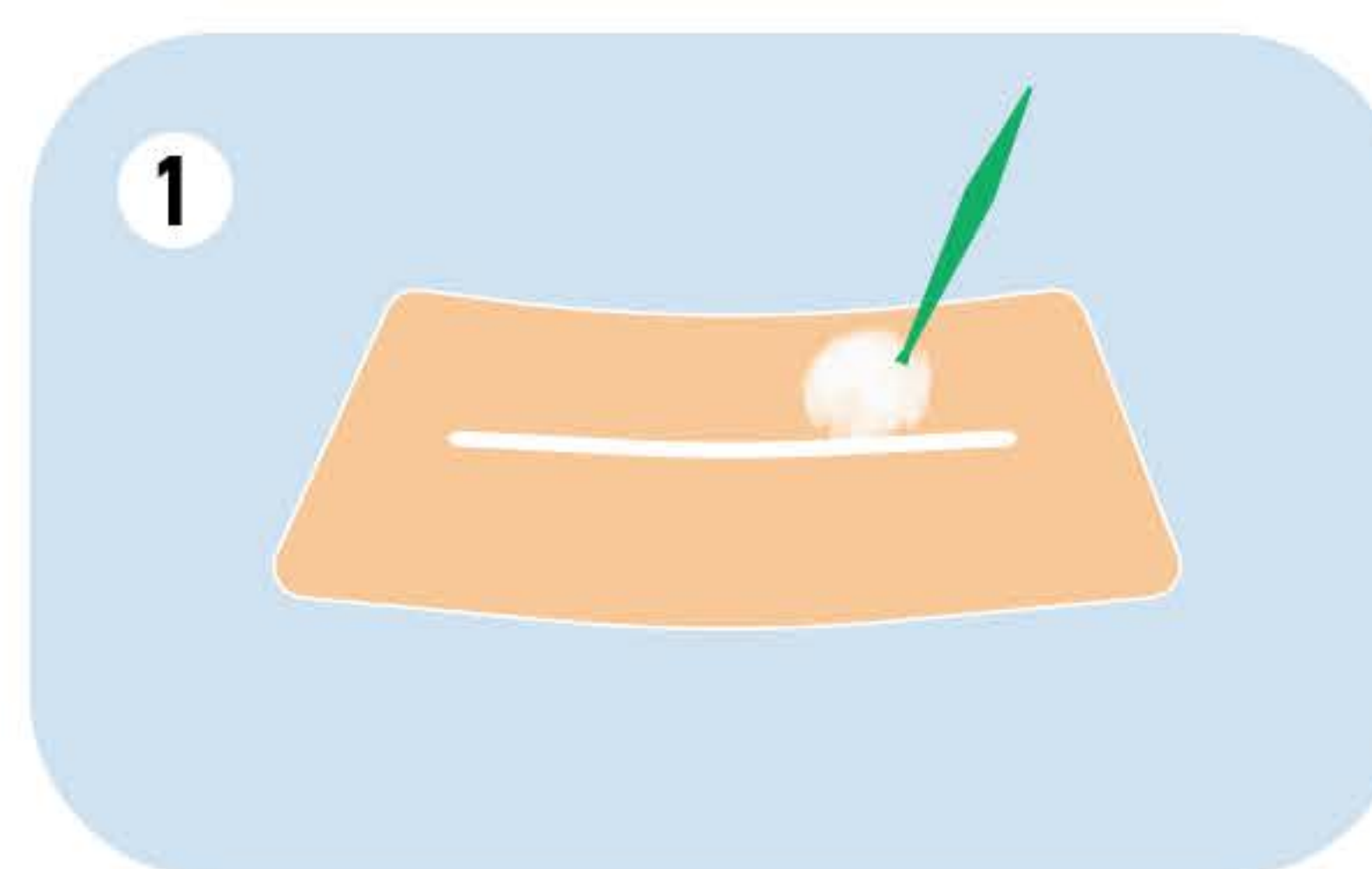
Needles used with fluoro localization are dependent upon palpation for placement.

Inaccuracies may lead to repeated punctures, extra X-rays, larger incisions or even wrong-site surgery.

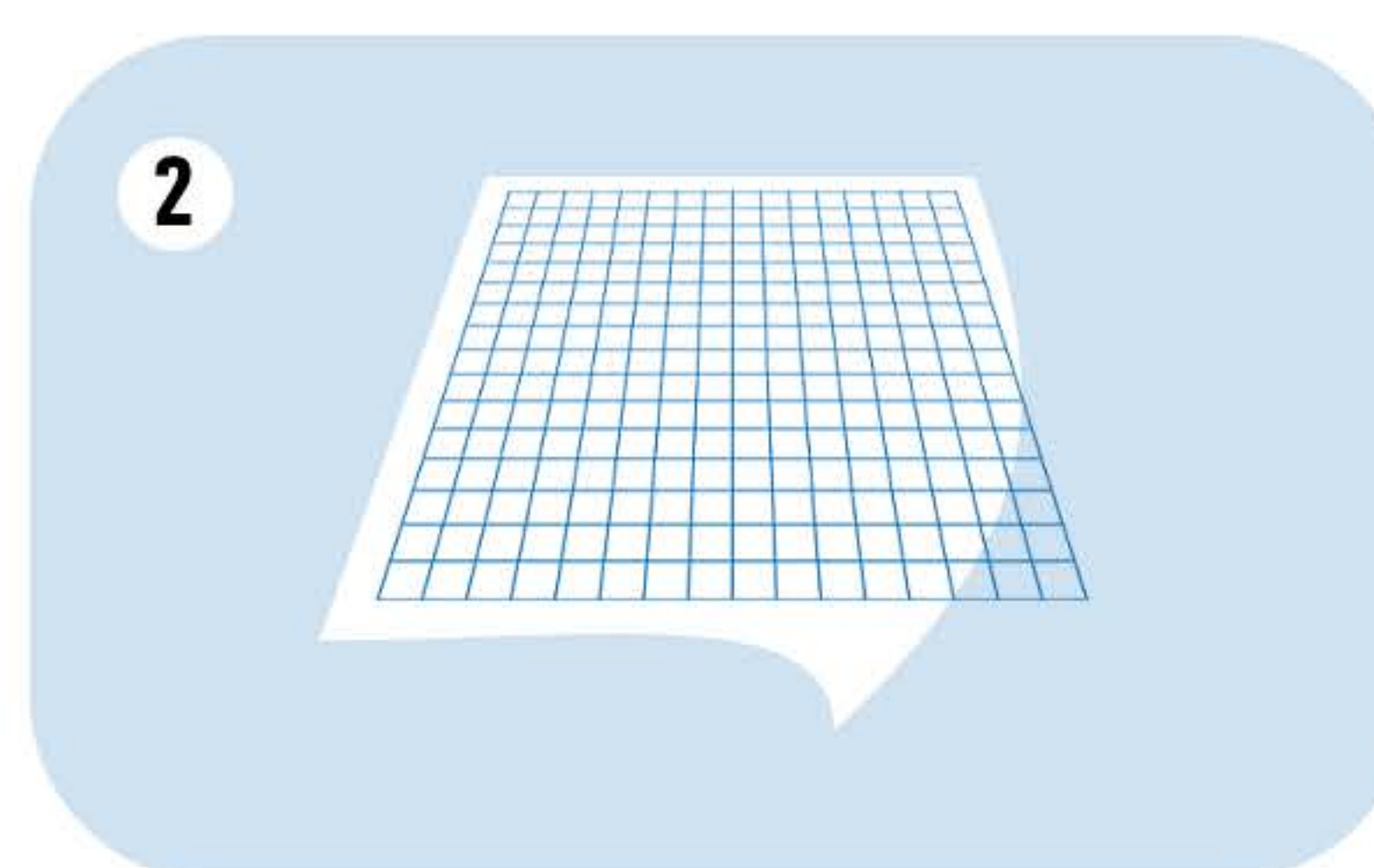
### 6. Localize using more detailed preoperative X-ray images

Positioning Tape may be used in Radiology to save time and reduce X-rays in the OR as well as the burden to OR X-ray technicians.

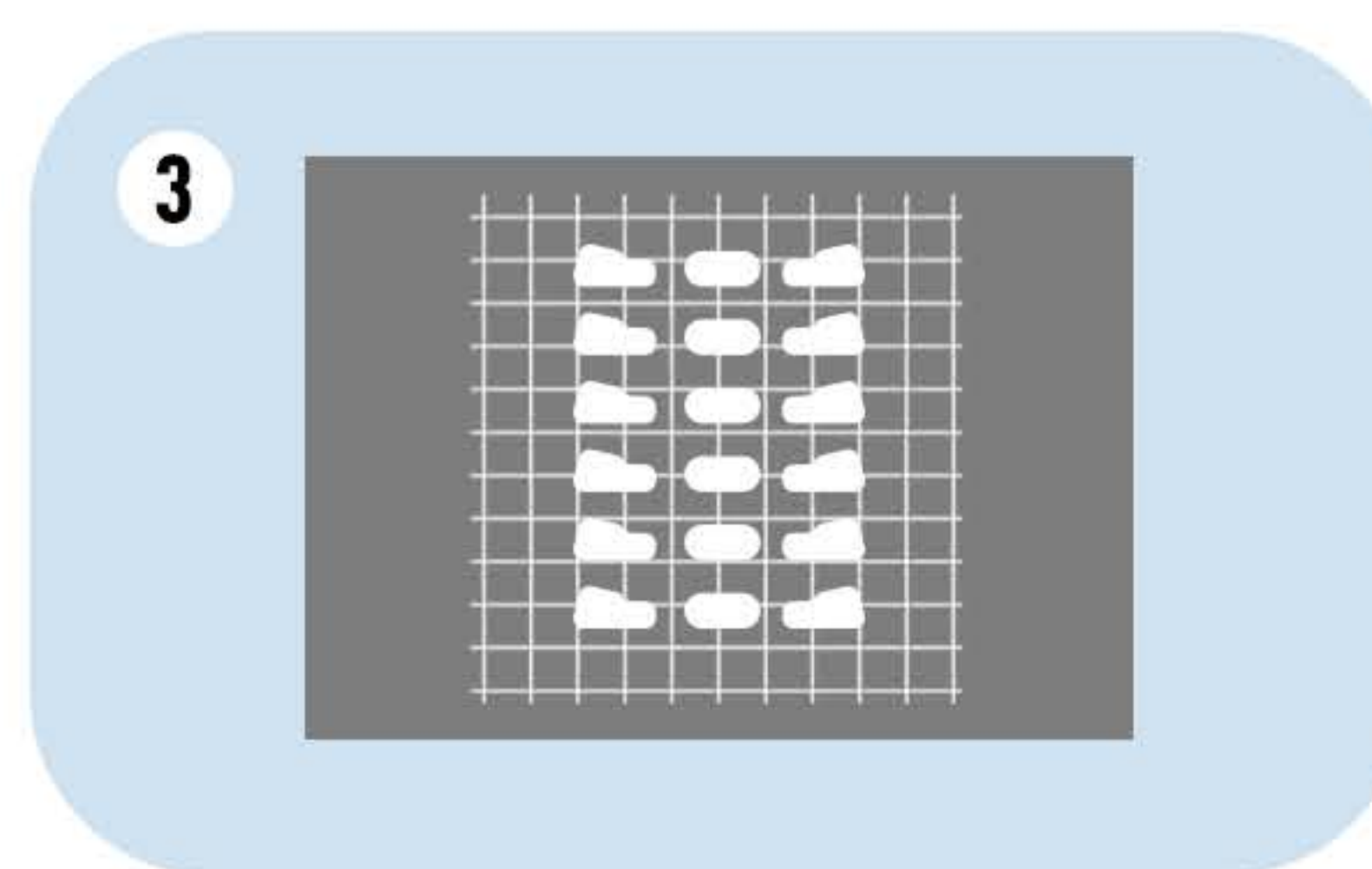
Using Positioning Tape on a preop CT could allow for direct and clear correlation with the target. Once the bone is exposed, a lateral intraop radiograph can be used as a final confirmation, minimizing risks even further.



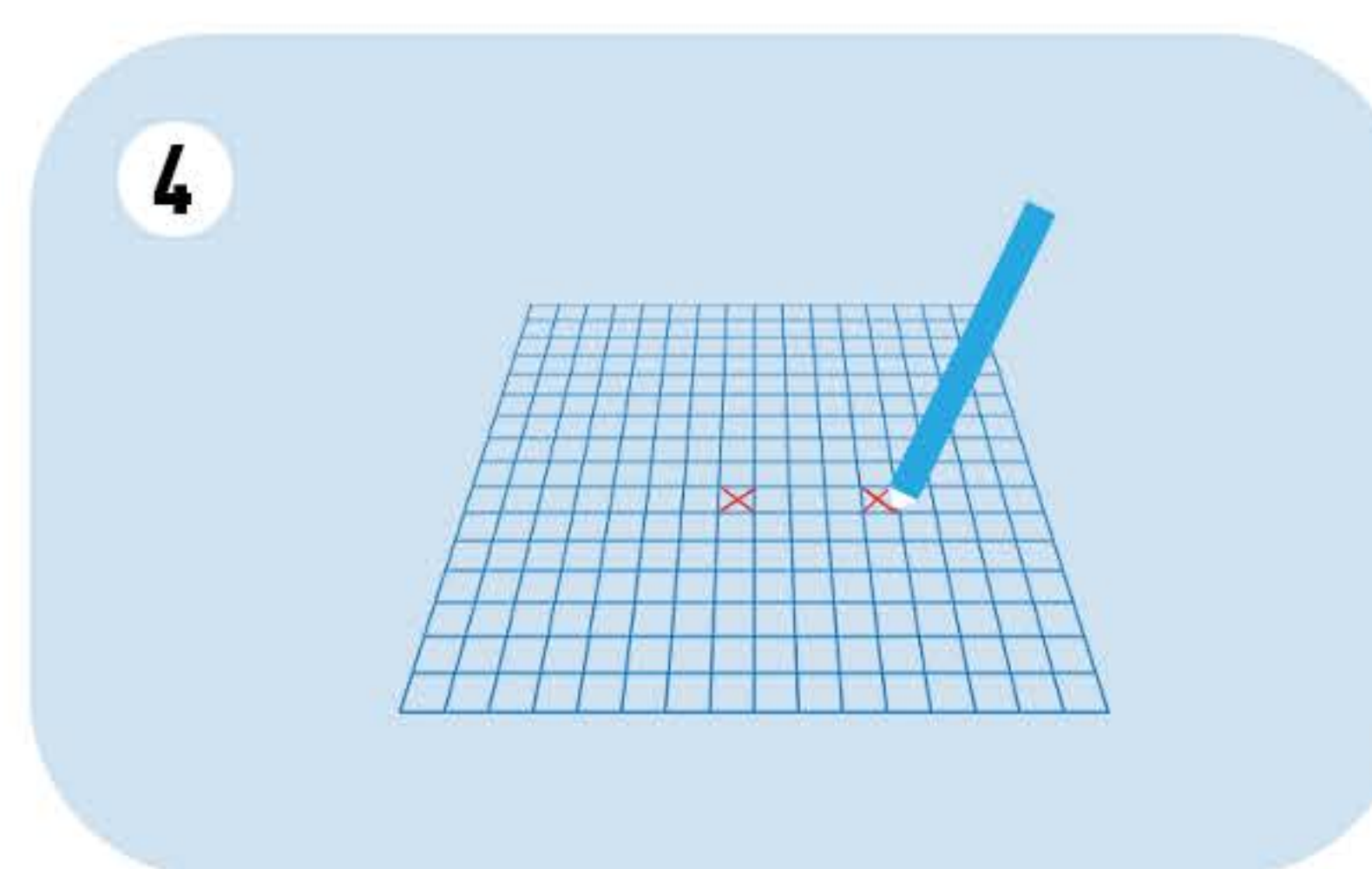
1. The part of skin which will be punctured have to be disinfected before use the tape.



2. Open the sterilized package and take it out, only one piece inside. Peel off the back tape, and paste it on the part that needs to be located.



3. Scan the site to be punctured by CT, and screenshot the image. Using the grid to confirm the puncture point.



4. Mark the point and go on the operation with the position located.

Positioning is faster with a tape compared to just experience

Save time by skipping palpation, needles with fluoro and taking extra exposures

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