



# MANAGING FLUID OVERLOAD IN PEDIATRIC PATIENTS ( $\geq 20\text{KG}$ )

## GENTLE AND PREDICTABLE FLUID REMOVAL USING AQUADEX SMARTFLOW™

In critically ill pediatric patients, managing fluid balance is crucial in reducing the risk of morbidity and mortality.

### In pediatric patients, studies have shown:

- **3% increase** in mortality for every 1% increase in fluid overload<sup>1,2</sup>
- Children with **more than 20% fluid overload** had a higher odds ratio for mortality<sup>1,2</sup>
- Diuretics and adult CRRT devices can be **poorly tolerated by pediatric patients**<sup>3-7</sup>

## BENEFITS OF THE AQUADEX SMARTFLOW™ THERAPY IN PEDIATRIC PATIENTS (≥20KG)

- **SIMPLE:** Easily adjustable blood flow rates helps achieve desired fluid balance
- **GENTLE:** Only 35ml of extracorporeal volume in the blood circuit
- **SMART:** Contains multiple diagnostic capabilities to help clinicians tailor therapy to their patients



**aquadex**  
SmartFlow™

## ADDITIONAL BENEFITS OF THE AQUADEX SMARTFLOW SYSTEM

- Safe and precise fluid removal
- Easy setup and monitoring
- No significant change to electrolyte balance
- Low extracorporeal blood volume in patented circuit

### RX ONLY

**INDICATION:** The Aquadex SmartFlow System is indicated for: Continuous ultrafiltration therapy for temporary (up to 8 hours) or extended (longer than 8 hours in patients who require hospitalization) use in adult and pediatric patients weighing 20 kilograms or more whose fluid overload is unresponsive to medical management, including diuretics. All treatments must be administered by a healthcare provider, within an outpatient or inpatient clinical setting, under physician prescription, both of whom having received training in extracorporeal therapies.

Aquadex SmartFlow™ is a trademark of CHF Solutions, Inc.

**chf solutions**

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**Sources:** <sup>[1]</sup>Sutherland SM, et al. Am J Kidney Dis. 2010 Feb;55(2):316-25. <sup>[2]</sup>Gillespie RS, et al. Pediatr Nephrol.2004;19 (12):1394-1399. <sup>[3]</sup>Felker MG and Mentz RJ. J Am Coll Cardiol. 2012; 59(24):2145-53. <sup>[4]</sup>Doering A, et al. Int J Emerg Med. 2017;10(17). <sup>[5]</sup>Costanzo MR, et al. J Am Coll Cardiol. 2007;49(6):675-683. <sup>[6]</sup>Raina R et al. Front Pediatr. 2018 Oct 29;6:306. <sup>[7]</sup>Basu Rk et al. Int J Nephrol. 2011(2011):785392.