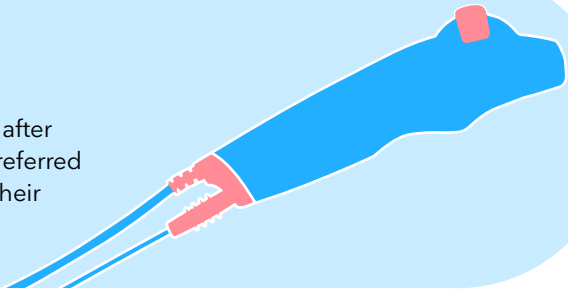
Clinical Performance

SCIENTIFIC EVIDENCE RELATED TO SINGLE-USE BRONCHOSCOPES

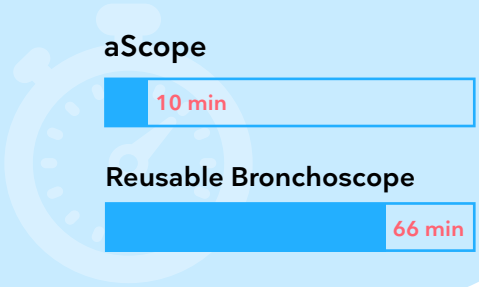
Kriege et al. (2020)

Physicians prefer Ambu® aScope™ 4 Broncho over reusable flexible bronchoscopes (RFBs) both for intubation and bronchoscopy. Overall, after conducting 175 intubations and bronchoscopy procedures: 103 (59%) preferred aScope 4 Broncho, 35 (20%) had no preference, and 37 (21%) preferred their conventional RFB.



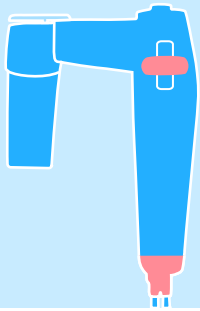
Marshall et al. (2017)

Ambu® aScope™ 3 Broncho enabled an equivalent microbiological yield after bronchoalveolar lavage, while significantly reducing the delay from indication to procedure at a similar or lower direct cost of use. **The median interval between identification of the need-to-start of the procedure was shorter with single-use bronchoscopes (10 min) versus conventional reuable flexible bronchoscopes (66 min).**



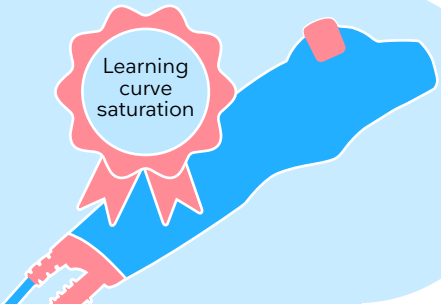
Zaidi et al. (2017)

Single-use flexible bronchoscopes (SFBs), achieved a larger bronchoalveolar lavage (BAL) volume yield than conventional bronchoscopes, with comparable cell yield and viability. The greater BAL volume return achieved with SFB could lead to reduced risk of post-procedural side effects such as cough, pleuritic chest pain and fever, which may improve tolerability and patient comfort.



Flandes et al. (2020)

aScope 4 Broncho scored well for ease of use, imaging, and aspiration. Portability and immediacy of use were key advantages. The quality of aScope Broncho was assessed in 21 Spanish hospitals. The ease of intubation and maneuvering was rated “very easy” and the image and aspiration quality as “optimal”.



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