

FOR ACUTE BLEEDING PATIENTS

# Take the Guesswork out of Hemostasis Analysis

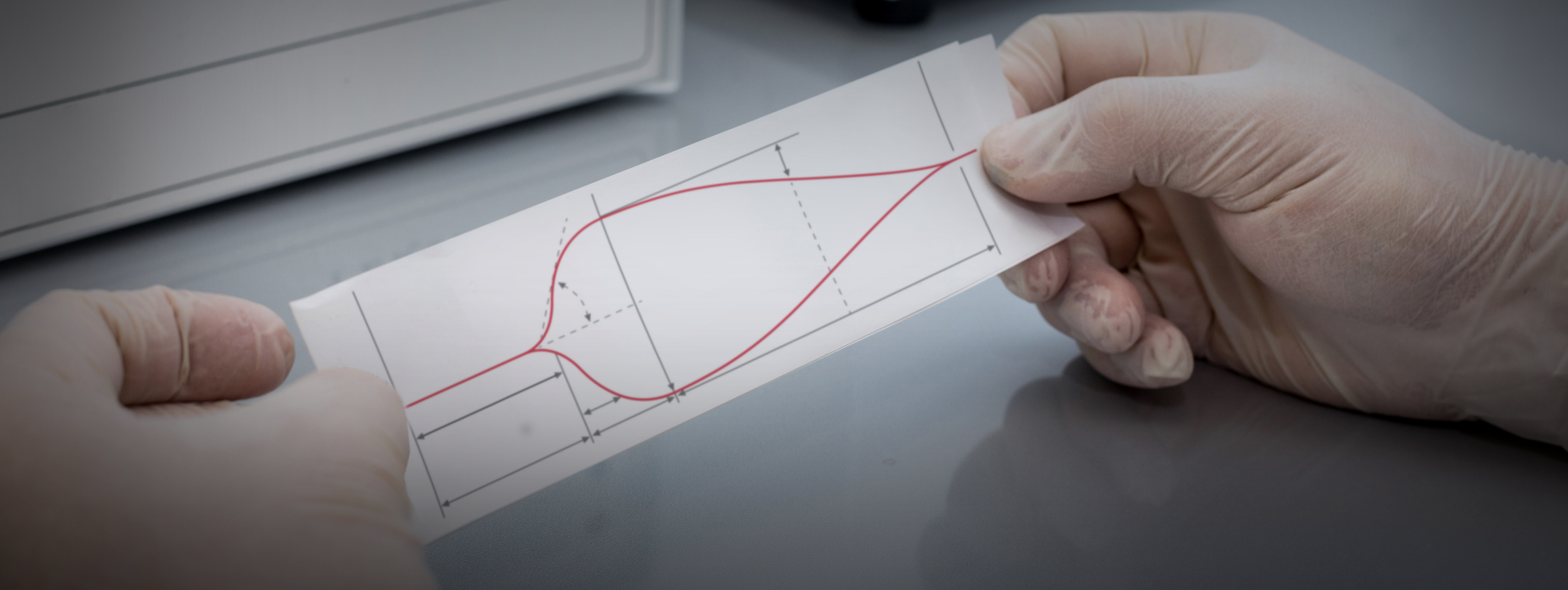


**The Quantra® Hemostasis System provides the results you need to make confident treatment decisions.**

Cartridge based • Fully automated • Intuitive dials display

 **Quantra**®  
Hemostasis System

## Traditional viscoelastic hemostasis analyzers can be challenging.



### In an acute bleeding situation, interpreting thromboelastogram or TEMogram results can be a burden on clinicians.

In an observational study analyzing perceptions of TEMogram results, users identified the “non-intuitiveness of the result presentation as a challenge, particularly in emergencies and for inexperienced users.”<sup>1</sup>

### In an observational study of thromboelastography users, after a two-month trial:



**Only 29%** of staff felt confident interpreting results<sup>2</sup>



**Just over half** felt whole blood hemostasis analyzer results would guide blood component management<sup>2</sup>

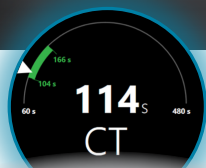
**“Considerable education is required to make practical use of the TEG® result.** Until knowledge regarding TEG and its interpretation becomes more widespread, then TEG, or indeed similar point-of-care testing, is unlikely to be utilized to benefit patients fully.”<sup>2</sup>



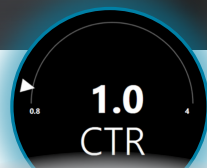
The Quantra® System is intuitive by design.



**CTH: Heparinase Clot Time\* (Seconds)**  
Reflects clot initiation with the neutralization of heparin



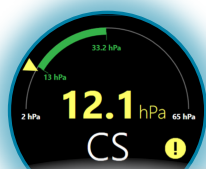
**CT: Clot Time (Seconds)**  
Reflects clot initiation with sensitivity to heparin



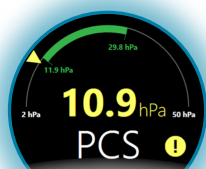
**CTR: Clot Time Ratio\***  
A CTR >1.4 is significant for heparin effect.  
(CTR = CT/CTH)



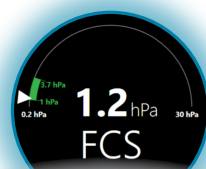
**CSL: Clot Stability to Lysis†**  
Reduction of clot stiffness, likely due to fibrinolysis



**CS: Clot Stiffness (HectoPascals)**  
Reflects overall clot stiffness



**PCS: Platelet Contribution to Clot Stiffness (HectoPascals)**  
Integrates information about platelet number and platelet function<sup>3</sup>



**FCS: Fibrinogen Contribution to Clot Stiffness (HectoPascals)**  
Correlates with laboratory-based fibrinogen assays<sup>3</sup>



This symbol signifies a result value that is outside the reference range (green area), but within the reportable range.

\*QPlus® Cartridge only  
†QStat® Cartridge only



In two separate studies of medical professionals, **>95% of questions** pertaining to each of the results and their clinical interpretation **were answered correctly**<sup>4,5</sup>

The Quantra Hemostasis System fits seamlessly into the workflow of your lab or point of care areas and requires **minimal time to train personnel**.

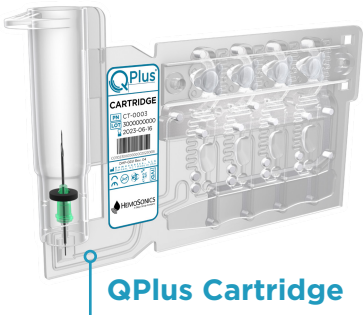
The **Quantra® Hemostasis System** brings the power of next-generation whole blood hemostasis to your laboratory or to your physicians at the point of care with **indications for cardiac<sup>6-8</sup>, trauma<sup>9,10</sup>, liver transplant<sup>11,12</sup>, and major orthopedic<sup>6,13</sup> procedures**. Proprietary ultrasound technology directly and accurately measures whole blood hemostasis, delivering actionable data to inform transfusion decisions and improve bleeding management.<sup>14</sup>

**Quantra System Output Parameters<sup>15-17</sup>** to assess coagulation factors, platelets, fibrinogen and fibrinolysis.

Parameter	Unit of Measure	Reportable Ranges	Description
CT: Clot Time	seconds (sec)	60 – 480	Reflects clot initiation with sensitivity to heparin
CTH: Clot Time with Heparinase QPlus® Cartridge only	seconds (sec)	60 – 480	Reflects clot initiation with the neutralization of heparin
CTR: Clot Time Ratio QPlus Cartridge only	unitless ratio [CT/CTH]	0.5 – 5	A CTR > 1.4 is significant for heparin effect
CSL: Clot Stability to Lysis QStat® Cartridge only	percent (%)	10 – 100	Reduction of clot stiffness, likely due to fibrinolysis
CS: Clot Stiffness	hectoPascals (hPa)	2 – 65	Reflects overall clot stiffness
PCS: Platelet Contribution to Clot Stiffness	hectoPascals (hPa)	2 – 50	Integrates information about platelet number and platelet function <sup>3</sup>
FCS: Fibrinogen Contribution to Clot Stiffness	hectoPascals (hPa)	0.2 – 30	Correlates with laboratory-based fibrinogen assays <sup>3</sup>

**Indications:** The Quantra Hemostasis System is comprised of the Quantra Hemostasis Analyzer, QPlus Cartridge, QStat Cartridge, Quantra Quality Controls (Level 1 and Level 2), Quantra Cleaning Cartridge, and Quantra Desktop Remote Viewer (QDRV) Software. Results obtained with the Quantra System should not be the sole basis for patient diagnosis.

**References:** **1.** Gasciauskaitė G. et al. User Perceptions of ROTEM-Guided Haemostatic Resuscitation: A Mixed Qualitative–Quantitative Study. *Bioengineering*. 2023;10(3):386. <https://doi.org/10.3390/bioengineering10030386> **2.** Morton S, Galea J, Uprichard J, Hudson A. The practicalities and barriers of using TEG® 6s in code red traumas: an observational study in one London major trauma centre. *CJEM*. 2019;21(3):361-364. <https://doi.org/10.1017/cem.2018.426> **3.** Naik BI, Tanaka K, Sudhagani RG, Viola F. Prediction of hypofibrinogenemia and thrombocytopenia at the point of care with the Quantra® QPlus® System. *Thromb Res*. 2021;197:88-93. **4.** Winegar DA, Viola F. Is the Quantra QPlus system easy to interpret? American Association of Clinical Chemistry (AACC) Annual Scientific Meeting, Virtual Congress, December 13-17, 2020. **5.** Winegar DA, et al. Improving the interpretation of viscoelastic test results in the critical care setting. American Association of Clinical Chemistry (AACC) Annual Scientific Meeting, July 24-28, 2022. **6.** Groves DS, et al. Multicenter evaluation of the Quantra QPlus system in adult patients undergoing major surgical procedures. *Anesth Analg*. 2020;130:899-909. **7.** Zlotnik D, et al. Assessment of a Quantra-guided hemostatic algorithm in high-bleeding-risk cardiac surgery. *J Cardiothorac Vasc Anesth*. 2023;37:724-731. **8.** Tibi P, et al. Retrospective study assessing outcomes in cardiac surgery after implementation of Quantra. *J Cardiothorac Surg*. 2023;18:149. **9.** Michelson EA, et al. Initial clinical experience with the Quantra QStat system in adult trauma patients. *Trauma Surg Acute Care Open*. 2020;5:e000581. **10.** Rossetto A, et al. Sonorheometry versus rotational thromboelastometry in trauma: a comparison of diagnostic and prognostic performance. *J Thromb Haemost*. 2023;21:2114-2125. **11.** Flores AS, et al. Multicenter evaluation of the Quantra with the QStat cartridge in adult patients undergoing liver transplantation. *Liver Transpl*. 2023;29:1216-1225. **12.** Soucy-Proulx M, et al. Sonorheometry device thresholds in liver transplantation: An observational retrospective study. *J Clin Med*. 2024;13:696. **13.** Naik BI, et al. SEER sonorheometry versus rotational thromboelastometry in large volume blood loss spine surgery. *Anesth Analg*. 2016;123:1380-1389. **14.** Volod O , Francesco Viola F. The Quantra system: System description and protocols for measurements. *Methods Mol Biol*. 2023;2663:743-761. **15.** QPlus Cartridge Instructions for Use (IFU). HemoSonics, LLC. **16.** QStat Cartridge Instructions for Use (IFU). HemoSonics, LLC. **17.** Quantra® Hemostasis Analyzer User Manual. 2020. HemoSonics, LLC.



QPlus Cartridge



QStat Cartridge



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