



**AK MedTec**

## SMART TEXTILES

Heated stretcher support

Heated vacuum mattress

04/2022



[www.akmedtec.com](http://www.akmedtec.com)



## Prices



Stretcher support

from €1,948.00  
plus shipping costs



Vacuum mattress

from €1,977.00  
plus shipping costs



Battery

€ 269.00  
plus shipping costs



12 V charger

€ 219.00  
plus shipping costs



220 V charging unit  
(single)

€ 227.00  
plus shipping costs



220 V charging unit  
(double)

€ 268.00  
plus shipping costs

Stretcher support set from €2,489.00  
plus shipping costs

- Stretcher support
- 2 batteries
- 220 V charging unit (single)

Vacuum mattress set from €2,518.66  
plus shipping costs

- Vacuum mattress
- 2 batteries
- 220 V charging unit (single)

# The heated stretcher pad/vacuum mattress

The heated stretcher pad and vacuum mattress from AK MedTec is a patent-pending system of the product brand "SMARTTEXTILES".

So far only a matter of course for every  
motorist

A claim that every healthy person already enjoys as a matter of course in the car.

## Advantages of SMART TEXTILES

Body temperature is one of the most fundamental vital parameters of our organism.

The original aim is to supply heat to the patient by actively preheating or directly heating the stretcher support or vacuum mattress. An efficient heat supply not only helps to maintain the patient's personal well-being.

A must in emergency rescue and ambulance  
services

The heated stretcher pad and vacuum mattress should be the standard in emergency rescue and patient transport, not only for sick people. Many deployments and situations in patient transport justify the year-round use of SMARTTEXTILES.

Hypothermia is caused by or leads to:

- Clotting disorder
- Cardio-depressive arrhythmias
- Electrolyte shifts
- Alteration of the drug metabolism
- Infection/Intoxication
- Traumatized patients with major blood loss
- Burns
- Elderly people (reduced heat production)

Analogue or in future via app

It was very important to us that we integrate the operation for the rescue service staff in such a way that everyone finds their personal comfort zone. The SMART TEXTILES can be controlled both in analogue form directly via the control panel and in future via a control app, which is currently being developed. The app is prospectively available for iOS and

Android.



No chance for liquids

The heated stretcher pad and vacuum mattress offer no chance for body fluids to penetrate the interior. All seams are largely welded and internal. The control unit and the battery compartment are also protected against the ingress of liquids.

## Disinfection

Careful manual cleaning is not required for a heavily soiled stretcher pad or vacuum mattress. The stretcher support can be easily cleaned of dirt with a jet of water. The relevant defined disinfection is then carried out without even coming into contact with the rest of the patient's body fluids.

## Our current distribution partners

### Germany



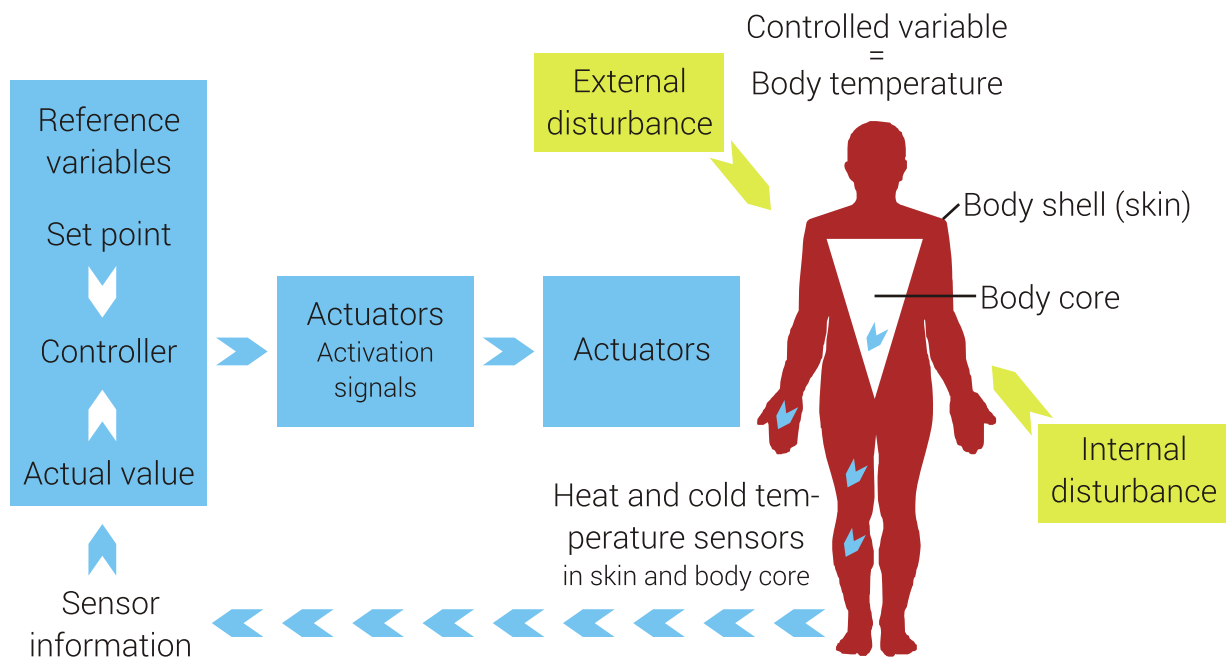
### Austria



### Switzerland



# Advantages and disadvantages of warming the patient in prehospital emergency medicine



Regulatory centre > Hypothalamus in the intermediary brain

Hypothermia leads to

1. Lateral hypothalamus: - Behavioural changes
  2. Anterior hypothalamus: - Blood flow regulation / heat generation regulation / regulation of the sweat glands
  3. Posterior hypothalamus: - Set point adjustment if necessary
- > Hypothalamus measures body temperature and is the regulatory centre
  - > Adjustment of the set and actual temperature
  - > At deviations of - / + 0.1°C (inter-threshold range), effector mechanisms are set in motion

Hypothermia > Drop in body temperature below 36°C

1. Accidental hypothermia > "Accidental" (shipwreck, trauma, bathing accidents...)
2. Induced hypothermia > Switching off cold counter-regulation (e.g. induction of anaesthesia)

Body temperature is one of the most fundamental vital parameters of our organism. The original aim of the heated stretcher support is to supply warmth to the patient by actively preheating or directly heating the stretcher support. An efficient heat supply not only helps to maintain the patient's personal well-being.

1. Coagulation disorders > For every 1°C drop in core body temperature, the activity of coagulation proteases decreases by 10% > Trauma - induced coagulopathy is increased
2. Cardio-depressive effects/arrhythmias
3. Electrolyte shifts
4. Alteration of the drug metabolism
5. Immune modulation/infections

Traumatised patients / especially with major blood loss internally and/or externally

- > Improvement / maintenance of coagulation
- > Reduction of trauma-induced coagulopathy / bleeding control
- > Protection against further heat loss

Burns

- > Improvement of the coagulation
- > The increased heat emission via the damaged parts of the body can be reduced
- > Avoidance of hypothermia leading to further damage

# Advantages and disadvantages of warming the patient in prehospital emergency medicine

## Intoxication / especially alcohol intoxication

- > The increased heat release due to peripheral vasodilation is counteracted
- > Fewer cardiovascular complications

## Induced hypothermia (during induction of anaesthesia)

- > The induction of anaesthesia switches off the cold counter-regulation mechanismst
  - > Threatening hypothermia is avoided (especially when inducing anaesthesia in traumatised patients)

## Resuscitation (with accompanying massive hypothermia)

- > According to ERC 2015, mild hypothermia is the goal (32 °C - 34 °C / or also 36 °C) > for all temperatures below 32 °C, the guiding principle applies ("no one is dead until warm and dead") > Resuscitation until body temperature has reached min. 32 °C (under warming)

## Diseases of the musculoskeletal system (intercostal neuralgia / tension)

## SIRS (Systemic Inflammatory Response Syndrome) = Sepsis

- > If temperature regulation is massively disturbed
  - > Temperature hypothermia

## Elderly people

- > have impaired temperature measurement (decrease in peripheral thermo-sensory function in particular)
- > have reduced heat production (due to reduced basal metabolic rate)
- > In elderly people, thermoregulation is limited, especially in acute and chronic diseases

## Paediatric emergencies

- > Due to the changed anatomy of a child's body, children give off more heat than adults, especially in acute (non-febrile) illnesses and injuries > Avoiding hypothermia is essential

## Drug metabolism improved / ensured (by avoiding / improving hypothermia)

## Not recommended for

## Hyperthermic disorders (except burns)

- > Heat stroke
- > Heat exhaustion
- > Insolation

## Resuscitation (if KT is in the range of 32°C to fever)

## Pyrexia / fever

## SIRS (when body temperature is febrile)

In the complication of malignant hyperthermia during induction of anaesthesia (mutation at the ryanodine - 1 - receptor)

## Local / areal inflammation

## Infections of the skin / parasite infestation

Many thanks for the elaboration to Thomas Doberstein from the rescue station Oschatz.

## Source reference

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