

Press Release:

## UNC and Wake County EMS Partner through EMF Grant to Study the Impact of Early Fluid Resuscitation for Sepsis in the Prehospital Setting

**Durham, NC, June 30, 2021** — [410 Medical, Inc.](#) a medical device company focused on innovative products for resuscitation of critically ill patients, and the [Emergency Medicine Foundation](#) (EMF), a 501(c)(3) nonprofit organization founded by the [American College of Emergency Physicians](#) (ACEP), today announced that the University of North Carolina at Chapel Hill Department of Emergency Medicine (UNC) and Wake County EMS are the recipients of the inaugural [LifeFlow Resuscitation Research Grant](#). Jane Brice, MD, MPH, Professor and Chair, The University of North Carolina at Chapel Hill, is the principal investigator for the 18-month project.

In collaboration with Wake County EMS, Dr. Brice will lead the researchers at UNC to evaluate the effectiveness of LifeFlow compared to usual care for early fluid delivery for septic patients in the prehospital setting. Wake County EMS is the sole 9-1-1 response and transport provider for a racially and socioeconomically diverse population of roughly 1 million individuals and treats approximately 700 septic patients each year. The proposed study will employ a pre-post quasi-experimental design, in which LifeFlow will be added to an established EMS sepsis protocol as part of a system-wide initiative to improve the quality of prehospital sepsis care. The study aims to have a significant impact on early initial management of sepsis and has the potential to reduce sepsis-related morbidity and mortality.

“Septic shock is a medical emergency that requires early fluid resuscitation to improve patient outcomes,” said Valerie De Maio, MD, MSc, FACEP, Senior Scientist and Director of Clinical Research at 410 Medical. “LifeFlow facilitates rapid fluid delivery titrated to reversal of hypotension and improvement in perfusion, making ongoing reassessment of fluid responsiveness and individualized fluid management possible. The portability and ease of use with LifeFlow makes it well suited for use in prehospital settings. We look forward to the eventual study results which we expect will identify best practices in fluid resuscitation to improve sepsis and septic shock treatment.”

“410 Medical’s investment in this important endeavor demonstrates true industry partnership in working to improve patient care,” said Jennifer L. Stankus, MD, JD, FACEP, Chair, EMF Board of Trustees, Madigan Army Medical Center Department of Emergency Medicine, Tacoma, Washington. “We are hopeful that this study will illuminate opportunities to streamline the critical resuscitation process with more precision and consistency, specifically with early fluids in sepsis and septic shock.”

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The LifeFlow Resuscitation Grant will fund the proposed prospective clinical research up to \$250,000 over 18 months. The investigators will present their research findings at the ACEP22 Scientific Assembly scheduled to take place in October 2022 in San Francisco, California.

**About 410 Medical, Inc.**

Founded in 2013, 410 Medical is developing and commercializing innovative products that enable frontline medical providers to improve care for critically ill patients. 410 Medical's first product family, the LifeFlow infusion system, is designed for patients in urgent need of rapid volume resuscitation. LifeFlow has been implemented at hospitals and EMS agencies across the United States. For more information visit [www.410medical.com](http://www.410medical.com).

**About The Emergency Medicine Foundation**

The Emergency Medicine Foundation (EMF) is a 501(c)(3) nonprofit organization founded in 1972 by visionary leaders of the American College of Emergency Physicians (ACEP). EMF supports scientifically rigorous research and education that improves the care of the acutely ill and injured. To date, EMF has awarded more than \$17 million in research grants to advance emergency medicine science and health policy. For more information visit <http://www.emfoundation.org>.

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