**BACKGROUND**

- 765,000 cardiac surgery patients undergo temporary pacing in the US annually
- Temporary epicardial pacing wires (TEPW) are used to prevent or normalize postoperative dysrhythmias
- TEPWs are directly pulled from the body during removal
- 1% of wire removals produce **critical complications** such as cardiac perforation and tamponade
- Preventative measures against complications unnecessarily exacerbate hospital workflow congestion

**SOLUTION**

- Similar to standard TEPW
- Easily integrates into surgeon and nurse workflow
- Low cost with minimal changes to materials used

**BENEFITS**

- Negligible Force on Heart
- Optimized Workflow
- Reduced Risk of Tamponade
- Paces Heart at Current Standard
- Shorter Patient Stay
- Lower Hospital Expenses

**NEXT STEPS**

- Reiterative testing
- In-vivo testing
- Patient studies
- Standardization of manufacturing process
- Intellectual Property

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Fig. 1 (Left) Standard TEPW placement

A. Placement of ventricular and atrial pacing wires
B. Complications during pacing wire removal