

A Known Clinical and Economic Burden

Accidental or forced Foley catheter removal events and traumatic catheterizations are well-recognized causes of urethral injury. These events are associated with patient harm, including urethral trauma and bleeding, and can require additional clinical intervention.^{1 2}

In addition to clinical impact, these events contribute to increased hospital resource utilization and unexpected costs for both the patient and the facility.

A Prospective Multi-Institutional Study¹

The economic impact of catheter-associated urethral injuries has been evaluated in a prospective study conducted across two tertiary referral hospitals. Over a 6-month period, 37 iatrogenic urethral injuries were recorded.

Key findings:

- ~\$10,000 additional cost per event
- Average of 9.4 additional hospital days per patient

These estimates reflect the immediate cost of managing injury and do not include the impact of long-term complications or follow-up care.

Common Risk Factors

Accidental or forced catheter removal events are concentrated in identifiable patient populations, particularly those with altered mental status.²

Patients at increased risk include:

- Delirium, dementia, or altered mental status
- Recovery from anesthesia or sedation
- Agitation related to brain injury, medications, or acute illness

These events most commonly occur in monitored care settings, including intensive care and post-operative units, where catheter use is frequent and patients are at elevated risk.

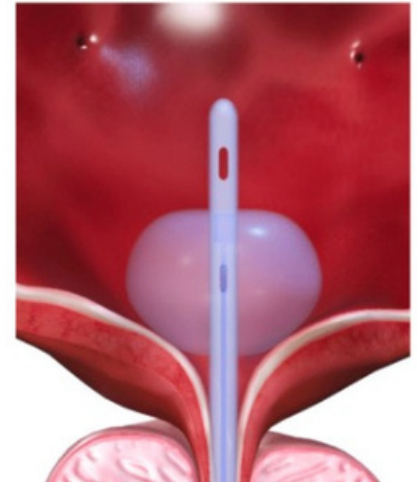
Economic Impact in a Representative ICU

For a hospital with:

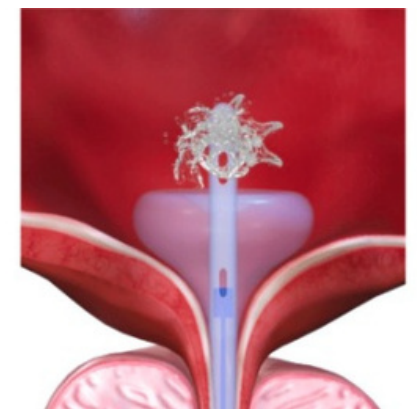
- 1,000 Foley catheter placements annually
- ~5% incidence of removal events (~50 events)³

This represents an estimated:

- ~\$500,000 in annual event-related costs¹



CATHETER IN PLACE



AUTOMATIC DEFLATION
WHEN PULLED

Egress™ Safety Catheter is Designed to Reduce a Meaningful Cost Driver

Catheter removal events represent a recurring and costly source of hospital burden.

The Egress Safety Catheter is designed to address a known clinical and economic risk by changing how the catheter responds during accidental or forced removal events.

¹ Davis NF, et al. J Urol. 2016. ² Leslie SW, et al. StatPearls. 2023. ³ Wu AK, et al. BJU Int. 2011.