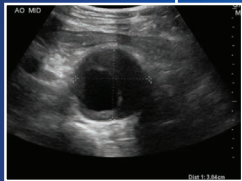


An increased optic nerve sheath diameter has been shown to act as a surrogate for increased intracranial pressure, allowing for noninvasive monitoring of ICP and may guide treatment.

Qualitatively estimate ejection fraction to determine need for inotropic support, differentiate PEA vs pseudo-PEA, identify pericardial tamponade and guide pericardiocentesis.

Estimate circulating volume status by visualizing the inferior vena cava to determine need for fluid resuscitation.

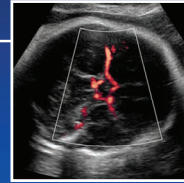
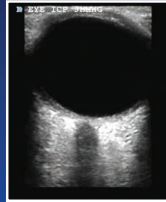


Identify aortic aneurysm and dissection.

Nerve blocks for safe treatment of extreme pain from fractures or extrication.

Femoral artery cannulation for monitoring and titrating resuscitative treatments. Future utility for REBOA and ECMO.

For more information, or to schedule a demo, call 1-866-TERASON or visit [www.terason.com](http://www.terason.com).



Can reveal occlusions of the middle cerebral artery (MCA), which is responsible for over 50% of ischemic strokes. There is some evidence that externally applied ultrasound waves may be able to break down clots at the cellular level, allowing for treatment in the field without dangerous fibrinolytics.

Can identify multiple pathologies, including bronchial intubation, pulmonary edema, pneumothorax, pneumonia, atelectasis and pleural effusion.

Identify internal hemorrhage from traumatic and medical (e.g., ruptures of ectopic pregnancy or aortic aneurysm) causes.



Rapidly guide vascular access in difficult populations, such as pediatric, shocked or obese patients.

