SPY Fluorescence Imaging Technology

Changing the Way You See Your Patients

The 1688 Advanced Imaging Modalities (AIM) 4K platform and SPY-PHI utilize SPY Fluorescence Imaging Technology to assist surgeons in the visual assessment of tissue perfusion.

**Brilliant Visualization**
Native fluorescence 4k is designed to provide realistic color reproduction and results in a sharp, highly detailed image

**Intuitive Functionality**
Customizable camera head button mapping for simple SPY mode toggling

**Multiple Visualization Modes**
Combines enhanced fluorescence signal information to enable different viewing modes for use across multiple specialties

A Single Institution’s Experience
In a retrospective study from 2015-2016, 347 patients were analyzed for anastomotic failures (leaks or strictures) before and after the introduction of SPY fluorescence technology.

**0.84%** Anastomotic failure rate when using SPY fluorescence imaging (n=2 of 238 patients)\(^1\)

**5.5%** Anastomotic failure rate without use of SPY fluorescence imaging (n=6 of 109 patients)\(^1\)

See more. Do more.
Clinical Impact

In a prospective, multi-center study that analyzed 139 patients who underwent left-sided/anterior resection using SPY fluorescence technology:

- There were 2 (1.4%) anastomotic leaks reported in the trial.
- SPY fluorescence technology changed the surgical plan in 11 (7.9%) patients, and no anastomotic leaks were found in the 11 patients.  

Economic Impact

During a single institution’s trial to justify capital costs, Starker et al. found:

- The average post-operative costs associated with major colon resection surgery were $16,086 for non-SPY fluorescence users versus $14,745 for SPY fluorescence users.
- With the cost of ICG dye factored, results showed an average cost savings of $1,216 per patient using SPY fluorescence.  

$42,386

Average reported cost per patient for a small and/or large bowel complication  

References:
3. Major Small and Large Bowel data originates from 2018 Medicare cost reports using Inpatient DRG 329-331 reported in conjunction with the Specific ICD-10 CM/PCS code(s) used to identify complications.