Edwards Benchmark best practices developed for all stages of the clinical pathway

Pre-Procedure

• Staff commits to Edwards and provides access to or other clinician



- Heart team/multidisciplinary
- Optimized assessment pathway and screening
- Education for patients, family, and referring physicians
- Same-day admission of elective patients
- local protocols



Peri-Procedure

- procedural approach (e.g. skin prep, sedation, vascular access)
- Capacity to meet Edwards Benchmark Procedural Safety Plan
- Streamlined procedure matched to patient needs

Post-Procedure

- Edwards Benchmark accelerated reconditioning
- of new AV blocks and conduction delays
- Continuity of care with implanting physician or delegate through discharge



The Edwards Benchmark Program targets meaningful clinical outcomes



For more information:

Website:

eu.edwardsbenchmark.com

Email:

Benchmark EU@Edwards.com

- 1. Lauck, S.B.: Wood, D.A.: Baumbusch, I.: et al. Vancouver Transcatheter Aortic Valve Replacement Clinical Pathway: Minimalist Approach, Standardized Care, and Discharge Criteria to Reduce Length of Stay. Circ Cardiovasc Qual Outcomes, 9 (2016), pp. 312-321
- 2. Barbanti, M; van Mourik, M.S.; Spence, M.S.; et al. Optimizing Patient Discharge Management after Transfemoral Transcatheter Aortic Valve Implantation: The Multicentre European FAST-TAVI Trial. EuroIntervention 2019; Jaa-528 2019
- 3. Wood, D.A.; Lauck, S.B.; Cairns, J.A.; et al. The Vancouver 3M (Multidisciplinary, Multimodality, But Minimalist) Clinical Pathway Facilitates Safe Next-Day Discharge Home at Low-, Medium-, and High-volume Transfemoral Transcatheter Aortic Valve Replacement Centers: the 3M TAVR Study, I Am Coll Cardiol Intv, 12 (2019), pp. 459-469

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Edwards Benchmark Program Transcatheter Valve Care Pathway



A program designed to align the multidisciplinary heart team on the minimalist TAVI approach and improve the patient clinical pathway.



Edwards

Self assessment & action plan

The Edwards Benchmark Program is a systematic,

Transcatheter Aortic Valve Implantation (TAVI).

evidence-based approach to optimizing

Designed to educate the multi-

disciplinary heart team and improve

pathway, it provides guidelines for

minimzing length of stay and the

use of hospital resources, with no

Self-Assessments

Each Heart Team member

completes an individual

Assesses current alignment

with Edwards Benchmark best practices (1 to 5 scale) • Results will be anonymized and reviewed by Heart Team

clinical outcomes.

operations at every point of the clinical

compromise to patient safety or target

Digital platform & resources

Digital Platform

Interactive, self-paced lessons educate the user on the best practices

- Insights from 3M, FAST-TAVI, and pilot site experiences
- objections
- Decision trees for common process

- Safety Checklist

 - Clinical Protocols

- Tips to overcome

5. Peri-Procedure Overview

6. Post-Procedure Overview

Six Module Categories:

2. Best Practices Overview

3. Heath Care Economics

and Administration

4. Pre-Procedure Overview

1. Introduction to Benchmark

Resources Include: -

• Literature Compendium

- Administrative Compendium





1.5 day training for the whole heart team

- Learn from experts
- Work as a team to identify areas of improvements
- Share experience with others

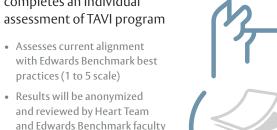
Edwards Benchmark Faculty

Removing roadblocks through peer-to-peer education

Expert support

- As a site completes its action plan, certain best practices may be more difficult to adopt
- Specialized faculty members visit sites to help teams overcome specific implementation hurdles
- Visits to a site having implemented the Edwards Benchmark best practices







Digital platform automatically compiles and averages results of individual self-assessment scores

- Multidisciplinary Heart Team discusses results at site activation meeting
- Team creates action plan based on identified needs
- Team can prioritize high impact changes, designate tasks, and assign due dates to individuals



Lessons Include: