



Burn Wound Treatment

According to the American Burn Association (ABA), there are approximately 128 Burn Centers in the US.



When treating severely burned patients, clinicians must balance the risk of infection and sepsis with the level of excision **necessary** to minimize inflammation and maximize the potential of preparing the burn surface for a successful skin grafting procedure. Grafting success depends on the removal of all necrotic (dead) tissue to clear the entire surface to the highly vascularized granulation tissue bed.

In-vitro Study





A series of optical phantoms for evaluation of the system were created. The phantoms simulate optical properties of human tissue and blood flow in the tissue. To objectively evaluate the effectiveness of the debridement we tested and demonstrated the depth sensitivity, and depth resolution of the NTVA system. B





In-vivo preliminary testing (Pre Clinical healthy human subjects)



NTVA: Non-Contact Tissue Viability Assessment

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CCD camera

Collimation lens



NTVA Novel methodology to discriminate viable from necrotic tissue

The NTVA non-contact imaging system herein proposed, as opposed to common NIRS techniques, does not require absolute concentration retrieval of the chromophores present in the cardiovascular system; rather it will determine the health of the investigated tissue by analyzing spontaneous hemodynamic oscillations [cardio and respiratory induced: ~0.3 and ~1 Hz associated with blood volume changes.



Partners and Affiliates

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