

Rid-A-Tick™

A new system for the removal of ticks from humans and animals.

- Safe & efficient removal without the use of tweezers.
- Encapsulates the insect for easy removal and disposal.
- Nearly eliminates the chance of blood transfer from person to person or from your pet.
- Rid-A-Tick will help you fight Lyme disease potential.

Why Rid-A-Tick?

Lyme disease and other tick-borne diseases continue to sicken thousands of people each year and that number is growing. Rid-A-Tick can simply and easily help you to reduce the risk of acquiring a tick-borne disease by removing the tick promptly and completely. Pulling the tick off mechanically can cause a larger wound and increase the risk of infection. Rid-A-Tick allows the removal of the tick without the use of tweezers or other mechanical devices. This may also reduce the swelling and skin irritation from a tick bite.

When using Rid-A-Tick to remove ticks from people, it is possible to nearly eliminate the potential of blood transfer from person to person. The patch separates the human hand from the tick and greatly reduces the risk of blood transfer.

Rid-A-Tick gives you a safe and simple way to remove embedded ticks without the use of tweezers.

What is Rid-A-Tick?



The world's first and only medical patch system to remove embedded Wood Ticks and Black-Legged Ticks (*Ixodes scapularis*), formerly known as the Deer Tick from people and pets. Ticks are exoskeleton breathers. They can be made to extract themselves from humans or pets by smothering the lower half of their body.

The Rid-A-Tick patch is made from 3M® medical tape. This hypoallergenic, latex-free medical tape carries FDA approval. Each patch is approximately 1" in diameter and is designed to cover the majority of tick sizes.

RID-A-TICK patches are placed on the deeply embedded tick and gently pressed into place, making sure that no air can reach the tick's body. A waiting period of several minutes, up to thirty for extreme cases, will allow time for the tick to "back out". The patch is removed and folded in half to encapsulate the tick for easy disposal. If the tick is to be examined by a physician, it is neatly encased in the patch, head and body.

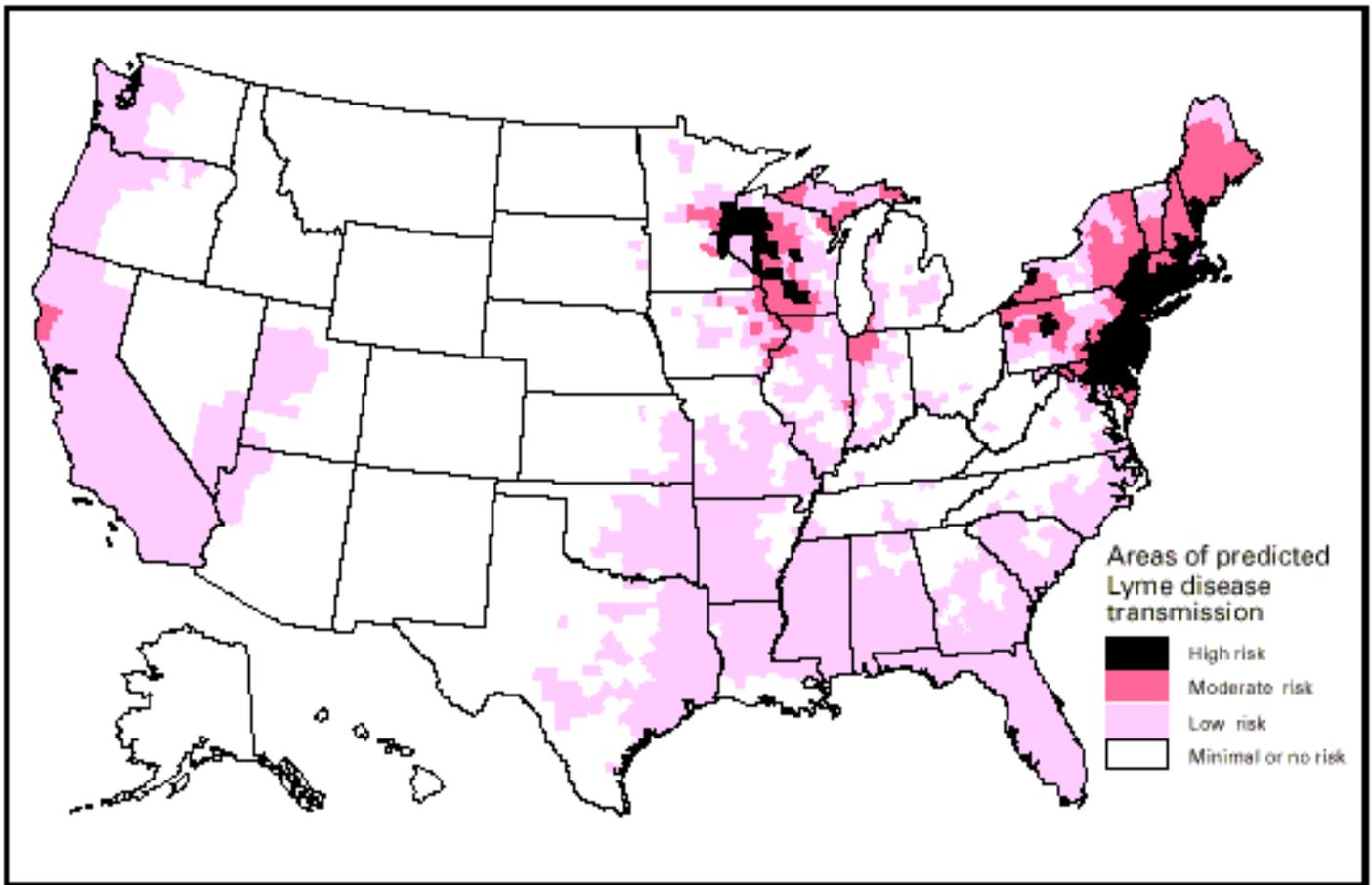
Keeping the patch sealed to the skin is the most critical aspect of tick removal. Multiple moving ticks can be removed by simply placing the patch on them, moving from tick to tick. Perspiration and skin oils may interfere with the adhesive. Be sure the area around the embedded tick is as clean and dry as possible.

What is the risk?

See map below of Lyme Disease risk in the U.S. from the Centers for Disease Control. Ninety-five percent of these cases were from the states of Connecticut, Delaware, Rhode Island, Maine, Maryland, Massachusetts, Minnesota, New Jersey, New Hampshire, New York, Pennsylvania, and Wisconsin.

Black-legged ticks (*Ixodes scapularis*), formerly known as Deer Ticks, are responsible for transmitting Lyme disease bacteria to humans in the northeastern and north-central United States. On the Pacific Coast, the bacteria are transmitted to humans by the western black-legged tick (*Ixodes pacificus*).

National Lyme disease risk map with four categories of risk



Note: This map demonstrates an approximate distribution of predicted Lyme disease risk in the United States. The true relative risk in any given county compared with other counties might differ from that shown here and might change from year to year. Risk categories are defined in the accompanying text. Information on risk distribution within states and counties is best obtained from state and local public health authorities.

Tick-borne diseases at record levels across the country

An estimated 300,000 Americans are diagnosed with Lyme disease each year according to the CDC, and the prevalence is rising across the US, even in states that have not reported any cases of Lyme before. Since national surveillance began in 1982, the number of annual Lyme cases reported has increased nearly 25-fold. The disease is also spreading out geographically in Northeastern, Mid-Atlantic, and North-Central states, while western blacklegged ticks transmit infection on the Pacific Coast. Experts believe that there are more deer ticks in Minnesota than any other state. About 20% of the ticks in Minnesota are infected with the Lyme bacteria, in other areas of the country, particularly the Northeast, up to 50% of the ticks are affected. Lyme disease is transmitted to humans from tick bites. The Ticks that transmit the disease are most active from April to September, which means spring and summer are the prime times for infection.