# A7 Anesthesia system Fusion for Safety





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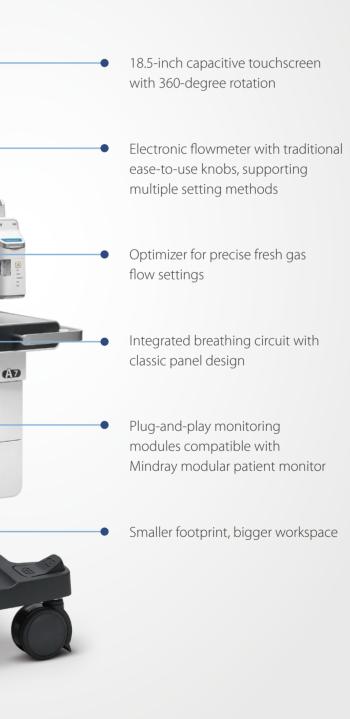




As clinical technology advances, the use of anesthesia continues to expand. Various patients and surgeries require high-quality anesthesia. Moreover, the current shortage of medical resources demands greater operation efficiency. Mindray's new A7 anesthesia system addresses the trend towards diversified anesthesia, offering an integrated solution that provides precise anesthesia and lean management. This helps improve the safety and efficiency of anesthesia.

# **Compact yet powerful**





# **Integrated Solution, Together and Stronger**



Centralized contro

Anesthesiologists can rer

and inhalational anesthe

AnaeSight<sup>™</sup> is an integrated solution for combined intravenous-inhalational anesthesia that connects anesthesia machines, patient monitors, and pumps. This brings greater convenience to operation and more confidential decision-making, significantly improving the safety and efficiency of anesthesia.

nthe same interface.



Combined intravenous-inhalational anesthesia (CIVIA) typically involves the use of multir to achieve a balanced anesthesia state while reducing the dosage of any single dru reactions. However, this method faces several challenges in anesthetic practice:



#### Multiple devices in scattered locations

Intravenous anesthetics are delivered via pumps, while inhalational anesthetics are delivered via anesthesia machines. Anesthesiologists must walk back and forth for observation and operation.



#### Vital signs on different interfaces

Due to patient variability, anesthesiologists need to closely monitor vital signs. However, this information is dispersed across different devices, making it hard to assess.

#### Lack of a combined drug effect indicator

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Anesthesiologists need to understand the pharmacokinetics and pharmacodynamics of each anesthetic drug and consider the interaction between drugs, relying heavily on their experience.

### **Combined drug effect**

egrate

assessments

An innovative indicator of the combined drug effect of multiple anesthetics called eMAC<sup>™</sup> is included in AnaeSight. This indicator is based on published pharmacokinetics and pharmacodynamics models, assisting with the administration of anesthetic drugs.

historical

AD



eMAC

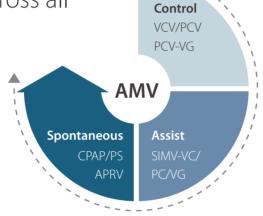
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# **Diversified Ventilation, Professional Care**

As the population ages and issues like obesity become more prevalent, optimizing ventilation management for patients during the perioperative period has become an important concern for anesthesiologists. A7 offers a range of ventilation methods, including both intubated and non-intubated anesthesia, to meet the needs of all patients.

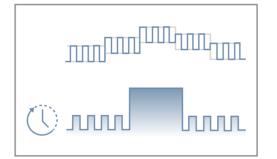
# Experience optimal performance across all stages of anesthesia

A full range of ventilation modes is available to meet the needs of patients of all ages, from adults to neonates. This enables precise ventilation care throughout the entire anesthesia process.



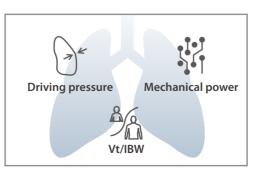
# Powerful Lung Recruitment Tool

- Two optional maneuvers: stepwise PEEP or sustained inflation
- A scheduled recruitment maneunver can be performed automatically



# Advanced monitoring parameters

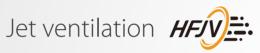
- Vt/IBW: clear guidance on lower tidal volume settings to avoid barotrauma
- Driving pressure: individualized guidance on ventilation parameter settings
- Mechanical power: precise assessment of perioperative lung injury and outcomes



# High Flow Nasal Cannula HFNC

High flow nasal cannula (HFNC) plays an important role in maintaining safe oxygen saturation of patients as it extends the safe apnoeic oxygenation especially for patients with poor oxygen saturation such as bariatric, pediatric, critical ill or difficult airway.

- Direct setting of total flow and O<sub>2</sub> concentration with maximum flow up to 100L/min
- Built-in design with no additional gas or power source required, saving space and minimizing clutter



Jet ventilation can be used in shared airway surgeries, difficult airway cases, and more. It can improve patient safety by maintaining oxygenation while creating a better surgical field.

- Improved safety: superimposed jet ventilation to maintain patient oxygenation while avoiding CO<sub>2</sub> retention
- Smoother operation: quickly switch between jet and conventional ventilation
- More environmentally friendly: compact design, space-saving without cluster





# More Flexible, More Reliable

The operating room environment is complex due to the presence of numerous equipment. Anesthesiologists face heavy, fast-paced, and intense work every day. The new A7 anesthesia system is equipped with a flexible design, intuitive interaction, and reliable performance. It helps anesthesiologists deal with daily work easily in various anesthesia environments.

# Flexible for daily work



1920x108

18.5-inch capacitive touchscreen

1920x1080 HD







instruction



Rotatable screen with 360-degree angle of view



Plug-and-Play monitoring modules



Optional flip-up work table for more working space



Neat cable management, clean and tangle-free



# Easy for maintenance

- Integrated breathing system with heating module to reduce condensation
- Compatible with both reusable and disposable soda lime canisters, ease to replace the absorbent
- All parts are autoclavable, preventing cross-infection
- FlowSecure<sup>™</sup> ensures the flow sensors maintain accuracy while extending their life span

# More options for gas supply

### **Optional built-in turbine module**

The ventilator can work normally without a high-pressure gas supply, providing non-interrupted ventilation support.

### **Optional internal air supply**

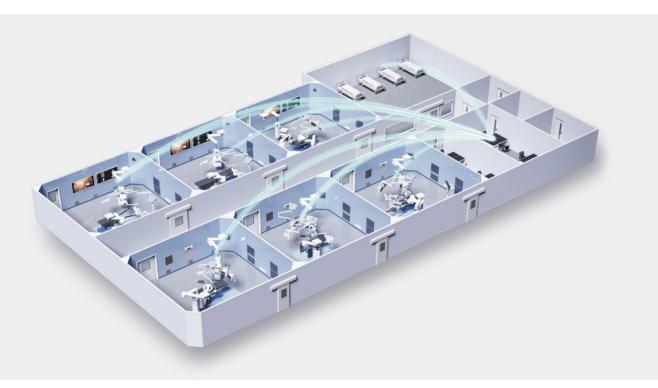
Delivering fresh gas of air-oxygen mixture is still possible in the case of no high-pressure air supply, avoiding prolonged exposures to hyperoxia.





# **Stay Connected for Greater Efficiency**

Comprehensively improve the operating efficiency of departments through information technology, make complicated work orderly, help clinical workers easily cope with various challenges, comprehensively improve the quality of medical services centered on patients, and realize lean management of all departments.



# Overview of patient status in each operating room

- Monitor patient vital signs in real-time across all operating rooms
- Conveniently review the complete surgical process information of patients

# Overview of the operational status of devices

- Overview of anesthesia machine distribution and utilization
- Summary of anesthesia machine self-test results
- Statistics of anesthetic gas consumption

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130/75 <b>15</b>	115/70	10
http://www.weiter.com/		75
	=112/72	99
= 120/80 = <mark>8</mark>	112/73	15





# Remote control solution in DSA room

A remote control solution in DSA room relies on the perioperative ecological system. This allows anesthesiologists to remotely control the anesthesia machine, patient monitor, and pumps in the operating room from the DSA control room, thus ensuring the safety of patients and anesthesiologists.

The remote observation and control feature allows for immediate intervention, ensuring patient safety and reducing the time for radiation exposure in the DSA operating room, thus reducing occupational injuries.

# A7

#### Anesthesia system

#### **Physical Specifications**

# **Dimensions and Weight**

Height	1495 mm
Width	763 mm
Depth	766 mm
Weight	≤140 kg (with 3 yokes, without vaporizers and
-	gas cylinders)
Work Surface	
Height	830 mm
Width	462 mm
Depth	352 mm
Weight limit	30 kg
Flip-up Work Surface	
Length	379 mm
Width	303 mm
Weight limit	15 kg
Drawer (2 or 3 drawers,	Internal Dimension)
Height	123 mm/ 72 mm
Width	275 mm
Depth	340 mm
Weight limit	5 kg
Bag Arm	
Height	1108 mm
Length	510 mm
Swiveling angle	$\pm$ 90 degrees
Casters	
Diameter	125 mm
Brake	Centre brake with Lock / Unlock icons
Cable pusher	Cable pusher for each caster
Work Light	
Settings	OFF, Low, High
Main Screen	
Display size	18.5 inch
Display type	Capacitive touch screen
Resolution	1920 x 1080
Rotated	-60° to 60°
Tilted	-15° to +45°
Display parameters	All setting and alarm parameters (including
	Breath rate, I/E ratio, Tidal volume, Minute
	volume, PEEP, MEAN, PEAK, PLAT, and $O_2$
	concentration, EtCO <sub>2</sub> , N <sub>2</sub> O, Aesthesia gas concentration, BIS)
Graphic waveforms	
Graphic waveforms	Pressure, Flow, Volume, CO <sub>2</sub> , O <sub>2</sub> , Anesthetic gas, N2O, BIS
	Up to 5 waveforms display simultaneously
Spirometry loops	Pressure-Volume, Flow-Volume and Pressure- Flow
Timer	Display on screen timer
System Status Display	
Display size	5.5 inch
Display type	Color LCD
Display content	Gas supply pressure, Airway Pressure, Tidal
	, valuma a

#### **Ventilator Specifications Modes of Ventilation**

Manual/Spontaneous ventilation/CPB Volume Control Ventilation (VCV) with PLV function Pressure Control Ventilation (PCV) Pressure Control Ventilation with volume guarantee (PCV-VG)

volume



Continuous Positive Airway Pressure/Pressure Support Ventilation with apnea backup (CPAP/PS) Pressure Support Ventilation (PS) with apnea backup Synchronized Intermittent Mandatory Ventilation (SIMV-Volume Controlled and SIMV-Pressure Controlled) Synchronized Intermittent Mandatory Ventilation Volume Guarantee (SIMV-VG) Airway Pressure Release Ventilation (APRV) Adaptive Minute Ventilation (AMV) Compensation Circuit gas leakage compensation and automatic compliance compensation

#### **Ventilation Parameters Range**

Ventilation Parameters	Range
Tidal volume	10 to 1500 mL (VCV, SIMV-VC)
	5 to 1500 mL (PCV-VG, SIMV-VG)
	With TV/IBW indicator
Pinsp	3 to 80 cmH2O
Plimit	10 to 100 cmH <sub>2</sub> O
ΔPsupp	0, 3 to 60 cmH <sub>2</sub> O (CPAP/PS)
Respiration rate	2 to 100 bpm
I:E	4:1 to 1:10
Tpause	OFF, 5% to 60%
Tinsp	0.2 to 10.0 s
Trigger window	5% to 90%
Flow trigger	0.2 to 15 L/min
Pressure trigger	-20 to -1 cmH <sub>2</sub> O
Exp%	5% to 80%
Min rate	2 to 60 bpm
Tslope	0.0 to 2.0 s
Apnea I: E	4:1 to 1:10
ΔPapnea	3 to 60 cmH <sub>2</sub> O
Phigh	3 to 80 cmH <sub>2</sub> O
Plow	OFF, 2 to 50 cmH <sub>2</sub> O
Thigh	0.2 to 10.0 s
Tlow	0.2 to 10.0 s
Thigh:Tlow (I:E)	50:1 to 1:50
MV%	25% to 350%
<b>Positive End Expiratory</b>	Pressure (PEEP)
Туре	Integrated, electronic controlled
Range	OFF, 2 to 50 cmH <sub>2</sub> O
<b>Monitoring Parameters</b>	;
Tidal volume	0 to 3000 ml
Minute volume	0 to 100 L/min
Peak pressure	-20 to 120 cmH <sub>2</sub> O
Mean pressure	-20 to 120 cmH <sub>2</sub> O
Plateau pressure	-20 to 120 cmH <sub>2</sub> O
I:E	50:1 to 1:50
Rate	0 to 150 bpm
PEEP	0 to 70 cmH <sub>2</sub> O
Delta Tidal volume	0 to 3000 ml
Minute volume leakage	0 to 10.0 L/min
Driving Pressure	0 to 120 cmH <sub>2</sub> O
Resistance (R)	0 to 600 cmH <sub>2</sub> O/(L/s)

Elastance (E)	0.003 to10 cmH <sub>2</sub> O /mL	Pneumatic Specificati	ions	
Mechanical Power	0.00 to 100.00 J/min	Pipeline Supply		
Inspired oxygen (FiO <sub>2</sub> )	18% to 100%	Gas type	$O_2$ , $N_2O$ and Air	
Control Accuracy		Pipeline input range	280 to 600 kPa (40 to 87	' psi)
Volume delivery	≤60 ml: ± 10 ml	Pipeline connections	DISS or NIST	
	$>60 \text{ ml and} \le 210 \text{ ml}: \pm 15 \text{ ml}$	<b>Pipeline Supply Press</b>	ure Monitoring	
	>210 ml: $\pm 7$ % of the set value	Display type	Electronic	
Droccure delivery		Ranges	0 to 1000kPa (0 to 140 p	osi)
Pressure delivery	$\pm$ 2.5 cmH <sub>2</sub> O or $\pm$ 7% of the set value,	Accuracy	$\pm$ (4% of the full scale re	ading + 8% of the
	whichever is greater		actual reading)	-
PEEP	$\pm$ 2.0 cmH <sub>2</sub> O or $\pm$ 7% of the set value,	Cylinder Supply	-	
Dete	whichever is greater	Cylinder supply	E Cylinder (American st	yle or UK style)
Rate	$\pm$ 1bpm or $\pm$ 10% of the reading, whichever is	O2 input range	6.9 to 20 MPa (1000 to 2	•
	greater	N2O input range	4.2 to 6 MPa (600 to 870	) psi)
Monitoring Accuracy		Air input range	6.9 to 20 MPa (1000 to 2	•
Volume monitoring	≤60 mL: ± 10 mL	Cylinder connections	Pin-Index Safety System	•
	>60 and $\leq$ 210 mL: ± 15 mL	Yoke configuration	O2, N2O, Air	. ,
<b>.</b>	>210 mL: $\pm$ 7% of the reading	Cylinder Supply Press		
Pressure monitoring	$\pm$ 2.0 cmH <sub>2</sub> O or $\pm$ 4% of the reading,	Display type	Mechanical or Electroni	с
_	whichever is greater	Air range	0 to 25 MPa (0 to 3500 p	
Rate	$\pm$ 1bpm or $\pm$ 5% of the reading, whichever is	O2 range	0 to 25 MPa (0 to 3500 p	
	greater	N2O range	0 to 10 MPa (0 to 1400 p	
MV	$\pm$ 0.1L/min or $\pm$ 8% of the reading, whichever	Accuracy	$\pm$ (4% of the full scale re	
	is greater	/ lecaracy	actual reading)	adding to to of the
Alarm Setting			actual reading)	
Paw High	2 to 100 cmH <sub>2</sub> O	Ventilator Performan	CA.	
Paw Low	0 to 98 cmH <sub>2</sub> O	Peak gas flow	180 L/min + Fresh Gas F	low
TV High	5 to 1600 mL	O <sub>2</sub> Controls	100 L/IIII1 1 110311 0031	1010
TV Low	OFF, 0 to 1595 mL	Supply failure alarm	≤ 220 kPa	
MV High	0.2 to 100 L/min	ACGO (Auxiliary Com		
MV Low	0 to 99 L/min	Control type	Mechanical	
Rate High	4 to 100 bpm, OFF	,,		and procedure at ACCO
Rate Low	OFF, 2 to 98 bpm	Safety pressure	A relief valve limits fresh	•
FiO₂ High	20% to 100%, OFF		outlet port to not more	than 12.5 KPa
FiO <sub>2</sub> Low	18% to 98 %	O <sub>2</sub> Flush		
Apnea alarm	No breath has been detected within the	Flow rate	25 to 75 L/min	
	apnea time.	Auxiliary Flowmeter (		
Apnea delay time	5 to 60 s (by volume or pressure)	Auxiliary O <sub>2</sub> Flowmeter		
	10 to 40 s (by CO2 waveform)		Range	0 to 15 L/min
Data Storage and Reco	rding		Indicator	Flow tube
Configuration storage	up to 10 customized profiles	Auxiliary O2&Air Flown		
Log storage	10000 entries of alarm and activity logs		Flow range	0 to 15 L/min
History trend	48 hours of continuous trend data		Oxygen concentration	21 % to 100 %
Screenshot	up to 50		Indicator	Glass tube and LED
Lung Recruitment Tool	•	High Flow Nasal Cannu	ıla	
Multi-step recruitment	(Increasing PEEP progressively)		Flow range	2 to 100 L/min
Control parameters	a maximum of 7 steps		Oxygen concentration	21 to 100 %
	ΔPsupp, PEEP, Breaths, I:E, Rate		Indicator	Glass tube and LED
	PEEP on exit	Anesthetic Gas Scave	nging System (AGSS)	
Preset procedure	up to 5	Type of disposal system		
One-step recruitment	(sustain inflation)		Active: High-flow or low	/-flow
Control parameters	Pressure Hold, Hold Time, PEEP on exit	Pump rate	75 to 105 L/min (High-f	low)
Cycle Interval	OFF, 1 - 180 min		25 to 50 L/min (Low-flo	w)
•	OFF, 1 - 180 mm	Venturi Suction Regu	lator	
Insp Hold & Exp Hold Insp Hold Measurement	Catat Dalat Di	Supply	Air, from system gas sou	urce
Exp Hold Measurement		Gas supply range	280 to 600 kPa	
	PEEPI, PEEPIOL	Maximum vacuum	≥50 kPa	
Jet Ventilation	$10 \pm 200 + D_{2} (0.1 \pm 2 + 2)$	Maximum flow	≥25 L/min	
Jet pressure (HF)	10 to 200 kPa (0.1 to 2 bar)	<b>Continuous Suction R</b>		
Jet pressure (NF)	10 to 350 kPa (0.1 to 3.5 bar)	Supply	External vacuum	
Jet Frequency (HF)	50 to 1500 bpm	Gas supply range	-72 to -40 kPa	
Jet Frequency (NF)	1 to 100 bpm	Maximum vacuum	$\geq$ 65 kPa with external v	acuum applied of 72
I:E	3:1 to 1:5		kPa	
FiO2	21 to 100 %	Maximum flow	$\geq$ 40 L/min with external	l vacuum applied of
Laser safety mode	ON, OFF	Maximum now	≥ 40 L/min with externa 72 kPa	a vacuum applieu ol
Pressure monitoring	0 to 120 cmH <sub>2</sub> O		72 N U	
PEEP monitoring	0 to 70 cmH <sub>2</sub> O	Floctronic Flow contra	ol system (Electronic Mix	or)
				~.,

#### **Direct Flow Control Mode**

O <sub>2</sub> flow range	0, 0.2 to 15 L/min	
Air flow range	0 to 15 L/min	
N <sub>2</sub> O flow range	0 to 12 L/min	
O <sub>2</sub> flow accuracy	$\pm$ 50 ml/min or $\pm$ 5% of setting value,	
	whichever is greater	
Balance gas (Air/N <sub>2</sub> O) flow accuracy		
	$\pm$ 50 ml/min or $\pm$ 5% of setting value,	
	whichever is greater	

O2 concentration in O<sub>2</sub>/ N<sub>2</sub>O mixture  $\ge$  25%

#### **Total Flow Control Mode**

Total flow range Total flow accuracy	0, 0.2 to 20 L/min ± 100 ml/min or ± 5% of setting value, whichever is greater
O2 concentration	whichever is greater
Range	21% to 100% (The balance gas is Air)
	26% to 100% (The balance gas is $N_2O$ )
Accuracy	$\pm$ 5% V/V for flows < 1 L/min
	$\pm$ 5% of setting for flows $\geq$ 1 L/min

#### Optimizer

Available when CO2 or AG module is loaded

#### Flow Pause

The fresh gas flow and ventilation will be paused for 1 minute at default. (Maximum 2 minutes)

#### **Backup Flow Control System**

#### **Control Type** Mechanical (Control needle valve and knob)

Flow Ran

Flow Range	
Control range (O <sub>2</sub> )	1 to 15 L/min
Total flow meter	
Range	0 to 15 L/min
Indicator	Flow tube
Indicator accuracy	$\pm$ 10% of the indicated value for flows
	(between 10% and 100% of full scale with
	oxygen)

#### **Breathing System Specification**

**Breathing system volume** Automatic ventilation 1800 ml Manual ventilation 1950 ml

CO <sub>2</sub> Absorber Assembly			
Absorber capacity	1500 ml		
Absorber type	1 Pre-Pak canister or Loose fill absorbent		
Inspiratory Airway Pressure Gauge			

-20 to 100 cmH<sub>2</sub>O Range

> $\pm$  (2% of the full scale reading + 4% of the actual reading)

**Flow Sensor** 

Type

Туре

Accuracy

Variable orifice flow sensor Inspiratory and expiratory port Location **Oxygen Sensor** Type Galvanic fuel cell FiO<sub>2</sub> displayed 18% to 100% Accuracy ± (volume fraction of 2.5 % +2.5 % gas level) Response time < 20 seconds **Breathing System Connectors** Exhalation 22 mm OD / 15 mm ID conical Inhalation 22 mm OD /15 mm ID conical 22 mm OD /15 mm ID conical Manual bag port **Bag-to-Ventilator Switch** Type **Bi-stable** Switch between manual and mechanical

#### Control ventilation

#### Adjustable Pressure Limiting (APL) Valve

Manually control with quick relief function

Range	Approximately 0 (SP), 5 to 70 $cmH_2O$	
Tactile knob indication $\geq$ 30 cmH <sub>2</sub> O		

#### **Breathing Circuit Parameters**

System compliance	$\leq$ 2 mL/cmH <sub>2</sub> O in manual ventilation
	Automatically compensates for compression
	losses within the breathing circuit in
	automatic ventilation mode
Expiration resistance	< 6.0 cm H <sub>2</sub> O @60 L/min
Inspiration resistance	< 6.0 cm H <sub>2</sub> O @60 L/min
Leakage	≤ 50 mL @ 3 kPa
System safety pressure of	on patient circuit $110 \pm 10 \text{ cmH}_2\text{O}$

#### **Breathing System Temperature Controller**

Breathing system temperature maintained at least 31°C typical at 20°C ambient temperature in normal condition

#### Materials

All materials in contact with exhaled patient gases are autoclavable up to a maximum temperature of 134°C, except O<sub>2</sub> sensor and mechanical pressure gauge.

All materials in contact with patient gas are latex free.

#### Vaporizers

#### Anesthetic agent delivery

Vaporizer	Mindray V60/V80 Anesthetic Vaporizer
Support agents	Halothane, Isoflurane,
	Sevoflurane, Desflurane
Position	Max.3 positisons (2 active, 1 inactive)
Mounting mode	Selectatec®, with interlocking function

#### **Monitor Modules**

Side-stream CO <sub>2</sub> Module			
CO2 Measurement range 0 ~ 152 mmHg (0 to 20%)			
CO2 Accuracy	±2 mmHg (0 ~ 40 mmHg)		
	$\pm$ 5% of the real reading (41 ~ 76 mmHg)		
	$\pm$ 10% of the real reading (77 ~152 mmHg)		
CO2 Resolution	1 mmHg		
O2 Measurement range	0 to 100%		
O2 Accuracy	±1% (V/V) (0 ~ 25%)		
	±2% (V/V) (25 ~ 80%)		
	±3% (V/V) (80 ~ 100%)		
O2 Resolution	1%		
Pump rate	Neonatal: 100 mL/min or 120 mL/min		
	Adult/Pediatric: 120 mL/min or 150 mL/min		
Response time	<4.5 s@100 mL/min; <4.5 s@120 mL/min		
	<5 s@120 mL/min; <5 s@150 mL/min		
Main-stream CO <sub>2</sub> Modu	le		
Measurement range	0 to 150 mmHg (0 to 20%)		
Accuracy	± 2 mmHg (0 ~ 40 mmHg)		
	$\pm$ 5% of the reading (41 ~ 70 mmHg)		
	$\pm$ 8% of the reading (71 ~ 100 mmHg)		
	$\pm$ 10% of the reading (101 ~ 150 mmHg)		
Resolution	1 mmHg		
Response time	<2 s		
Alarm limit	EtCO <sub>2</sub> High: OFF, (low limit +2) to 99 mmHg		
	EtCO2 Low: OFF, 0 to (high limit - 2) mmHg		
	FiCO <sub>2</sub> High: OFF, 1 to 99 mmHg		
Anesthesia Gas (AG) Me	odule		
Measurement mode	Infrared absorption, side-stream		
Monitor gases	$CO_2,O_2$ (Paramagnetic $O_2$ module), $N_2O,$ and		
	any of the five anesthetic agents: DES, ISO,		
	ENF, SEV and HAL		
Warm-up time	<45 s (ISO accuracy mode)		
	<10min (full accuracy mode)		
Sample rate	Adu/Ped: 150, 180, 200 ml/min		
	Neo: 100, 110, 120 ml/min		
Monitoring range	CO2: 0 to 30% (0.0 to 226mmHg)		
	O <sub>2</sub> /N <sub>2</sub> O: 0 to 100%		

HAL,	HAL, ISO, ENF: 0 to 30%		
SEV:	0 to 30%		
DES:	0 to 30%		

EEG

0 to 100

#### **BIS/BISx4 Module**

Measured parameters BIS, BIS L/ BIS R Sweep speed Alarm limit

BIS low: 0 to (BIS high -2) Calculated parameters SQI/SQI L, SQI R; EMG/EMG L, EMG R; SR/SR L, SR R; SEF/SEF L, SEF R; TP/TP L, TP R; BC/BC L, BC R; sBIS L, sBIS R; sEMG L, sEMG R; ASYM

BIS high: (BIS low +2) to 100

6.25 mm/s,12.5 mm/s, 25 mm/s or 50 mm/s

#### **NMT Module**

Stimulation output Pulse width: 100, 200, or 300 µs; Stimulation current range: 0 to 60 mA in increments of 5 mA Maximum skin resistance: 3 kΩ @ 60 mA, 5 kΩ @ 40 mA Block recovery OFF, 1,2, 3, 4, 5 %, 10 %, 20 %, 30 %, 40 %. 50 %, 60 %, 70 %,80 %, 90 %, 100 % TOF (Train of Four) mode TOF-Ratio (response percentage): 5 % to 160 % TOF-Count (number of responses): 0 to 4 TOF-T1% (response to the first stimulus as percentage of the reference value): 0 % to 200 % ST (Single Twitch) mode ST-Ratio (response percentage): 0 % to 200 %

DBS (Double-Burst Stimulation) 3.2/3.3 mode DBS-Ratio (response percentage): 5 % to 160 % DBS-Count (number of responses): 0 to 2 PTC (Post-Tetanic Count) mode

PTC-Count (number of responses): 0 to 20

#### **Anesthesia Function**

#### **Agent Consumption Calculation**

Usage speed range	HAL, ISO: 0 mL/h ~ 250 mL/h SEV: 0 mL/h ~ 450 mL/h DES: 0 mL/h ~ 900 mL/h
Accuracy	$\pm$ 2 mL/h, or $\pm$ 15% of the reading, whichever is larger
Total usage range	0 to 3000 ml
Accuracy	$\pm$ 2 mL, or $\pm$ 15% of the reading, whichever is larger
<b>Anesthetic Prediction</b>	-
Patient type	Height: 150 to 200 cm
	Weight: 40 to 140 kg
	Age: 18 to 90 years old
Anesthetic agents	Desflurane, Isoflurane, Sevoflurane and
	Halothane
Prediction trend and wa	veform
	Dynamic short trend waveforms of FiAA,
	EtAA, FiO <sub>2</sub> and EtO <sub>2</sub> in the last 10 min
	and prediction trend waveforms of FiAA,
	$EtAA$ , $FiO_2$ and $EtO_2$ in the next 20 min.
Prediction deviation	EtAA=0: less than volume fraction of 0.05 %
	EtAA $\neq$ 0: - 20 % to 30 % of the measured EtAA,
	or - 5 % to 7.5 % of the vaporizer maximum
	setting, whichever is greater
	$EtO_2:$ - 10 % to 15 % of the measured $EtO_2,$ or
	volume fraction of - 5 % to 7.5 %, whichever is
	greater

#### AnaeSight™

Remote operation of the	Infusion Pump/Syringe Pump	
eMAC™	Indication of the combined drug effect of the	
	following drugs	
Anesthetic agents	Sevoflurane, Desflurane, Isoflurane	
Intravenous drugs	Propofol, Remifentanil, Alfentanil, Sufentanil	
Patient type	Height: 150 to 200 cm	
	Weight: 40 to 140 kg	
	Age: 18 to 90 years old	

#### **Electrical Specifications**

#### Main Electrical De

Main Electrical Power	
Power input	220-240 V~, 50/60 Hz, 8A max
	100-240 V~, 50/60 Hz, 8A max
	100-120 V~, 50/60 Hz, 8A max
Power consumption	OFF mode: <8W
	Standby mode: <65W
	Active mode: <80W (under typical condition)
	Maximum: <120W
Power cord	5 m (length)
Battery Power	
Battery type	Li-ion, 14.4 VDC, 6.6Ah per battery
Run-time	One new battery: minimum 90 minutes under
	typical operating conditions
	Two new batteries: minimum 180 minutes
	under typical operating conditions
Battery charge time	≤ 8 hours
Time to shut down from	the first Lower Battery Alarm
	5 minutes minimum
	(new fully-charged battery)
Safety feature	in case of electricity and battery failure,
	manual ventilation, gas delivery and agent
	delivery are possible
Auxiliary Electrical Out	
Number of outlets	3 or 4
Output current	3 A max. for each outlet, 5 A max. for total
<b>Communication Port</b>	
Communication port	RS-232 compatible serial interface
LAN port	RJ-45 network port
USB port	2 USB ports
Video signal port	HDMI port

#### **Environmental Specifications**

Operating	
Temperature	10 to 40°C
Relative humidity	15 to 95%
Barometric	70 to 106.
Storage	
Temperature	-20 to 60°
	-20 to 50°
Relative humidity	10 to 95%

(noncondensing) .7 kPa

Relative humidity Barometric

°C for main unit, °C for O<sub>2</sub> sensor 10 to 95% (noncondensing) 50 to 106.7 kPa

#### **Resistance to Ingress of Fluids**

Complies with the requirements of clause 11.6.3 in IEC 60601-1 and also the requirements in IEC 60529 for protection against vertically falling water drops equipment (IPX1)

Not all features are for sale in all countries. Please contact your local Mindray sales representative for the most current information.



www.mindray.com

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# **V60 Anesthetic Vaporizer**

**Operator's Manual** 

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- all installation operations, expansions, changes, modifications and repairs of this product are conducted by Mindray authorized personnel;
- the electrical installation of the relevant room complies with the applicable national and local requirements; and
- the product is used in accordance with the instructions for use.

## 

- This Anesthetic Vaporizer must be operated by skilled/trained clinical professionals.
- It is important for the hospital or organization that uses this equipment perform a reasonable service/maintenance plan. Neglecting this may result in machine breakdown or personal injury.

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- Malfunction or damage caused by improper operation or repair by unqualified orunauthorized service people.
- Malfunction of the instrument or part whose serial number is not legible enough.
- Others not caused by instrument or part itself.

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#### FOR YOUR NOTES

# **1.1 Safety Information**

# 

• Indicates a potential hazard or unsafe practice that, if not avoided, could result in death or serious injury.

# 

• Indicates a potential hazard or unsafe practice that, if not avoided, could result in minor personal injury or product/property damage.

### NOTE

• Provides application tips or other useful information to ensure that you get the most from your product.

### 1.1.1 Warnings

# 

- Do not operate the Anesthetic Vaporizer before reading this manual.
- The user of the Anesthetic Vaporizer must fully understand and strictly follow the instructions for use.
- Before putting the system into operation, the user must verify that the Anesthetic Vaporizer is in correct working order and operating condition.
- Do not use the Anesthetic Vaporizer in the environment outside the specified temperature and pressure ranges.
- To avoid explosion hazard, do not use the Anesthetic Vaporizer in the presence of flammable anesthetic agent, vapors or liquids.
- Dispose of the package material, observing the applicable waste control regulations and keep them out of children's reach.
- To avoid explosion hazard, use only specified non-combustible anesthetic agent in compliance with the requirement of ISO80601-2-13.
- Any unauthorized organization or untrained person must not change or disassemble the Anesthetic Vaporizer.
- This Anesthetic Vaporizer may not be modified without the manufacturer's permission.
- The medical device must be inspected and serviced regularly by service personnel.
- Before use, check that the shipping package is intact.
- The Anesthetic Vaporizer shall not be serviced or maintained while in use with a patient.
- Do not use the Anesthetic Vaporizer when there is an anesthetic agent leak..
- The vaporizer is designed for use only with the specific anesthetic agent named on the filler block (and further indicated by labels of different colors). Do not use the vaporizer if the vaporizer is filled with any agent other than the agent specified on the front label.
- This Anesthetic Vaporizer is not suitable for use in an MRI environment.

## 1.1.2 Cautions

# 

- Use only accessories specified in this manual.
- At the end of its service life, the Anesthetic Vaporizer, as well as its accessories, must be disposed of in compliance with the guidelines regulating the disposal of such products.
- The Anesthetic Vaporizer may become unstable if the unit is tilted beyond 10 degrees.
- Always install or carry the Anesthetic Vaporizer properly to avoid damage caused by drop, impact, strong vibration or other mechanical force. Do not carry by the control dial or the handle for locking lever.

### 1.1.3 Notes

### NOTE

- Keep this manual close to the Anesthetic Vaporizer so that it can be obtained conveniently when needed.
- This manual describes all features and options. Your Anesthetic Vaporizer may not have all of them.
- This product is latex free.

# **1.2 Anesthetic Vaporizer Symbols**

	Refer to instruction manual/booklet	
↓ ↑	Gas flow direction	
+	Adjust concentration as the arrow shows	
Press and Lock	Press and lock as the arrow shows	
$\triangle$	Caution	
MR	MR Unsafe – do not subject to magnatuc resonance imaging (MRI)	
	Unified circulation mark indicates that products marked them passed	
	all specified in the technical regulations of the Customs Union of the	
EAC	procedure for the assessment (confirmation) of conformity and	
	complies with the requirements applicable to all the products technical	
	regulations of the Customs Union.	

# 2.1 Product Description

This vaporizer is an unheated, calibrated anaesthetic vaporizer outside the circuit. It is used jointly with the fresh gas delivery system and provides accurate concentration of anaesthetic agent through the control dial.

Each vaporizer is calibrated for a specified anesthetic agent and is only suitable for that anesthetic agent. The specific agent that the vaporizer must be used with is marked in text and by specific color on the vaporizer.

The vaporizer provides the function of temperature, air pressure and flow compensations. Therefore, under the circumstances specified in this manual, the output concentration of the vaporizer is not influenced by ambient conditions, such as temperature, gas flow and ventilation pressure.

The Anesthetic Vaporizer is not suitable for use with an anesthetic delivery system with vaporizer placed inside the circuit system due to relatively high internal pneumatic resistance.

The vaporizer delivery system is in compliance with ISO80601-2-13.

The Key Filler system is in compliance with ISO5360. Quik-Fil system complies with the performance data of ISO5360.

Mindray recommends that the output concentration is monitored through an anesthetic gas monitoring device in compliance with ISO80601-2-55 to detect any hazardous output values.

Use an anesthetic gas scavenging system in compliance with ISO80601-2-13 to minimize atmospheric pollution in the operating room.

# 

• Do not use the Anesthetic Vaporizer in mobile vehicles, aeroplanes, helicopters and ships.

# 2.2 Intended Use

V60 anesthetic vaporizer is an unheated, calibrated anesthetic vaporizer used for evaporating liquid anesthetic agents and delivering mixed gas of controlled concentration to an anesthetic delivery system.

It is available in Isoflurane, Sevoflurane, Enflurane and Halothane variants.

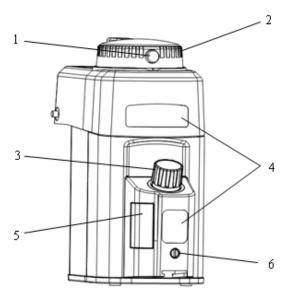
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- The Anesthetic Vaporizer is intended to be operated only by licensed clinicians and qualified anesthesia personnel who have received adequate training in its use. Anyone unauthorized or untrained must not perform any operation on the Anesthetic Vaporizer.
- This Anesthetic Vaporizer is not suitable for use in an MRI environment.

# 2.3 Anesthetic Vaporizer Appearance

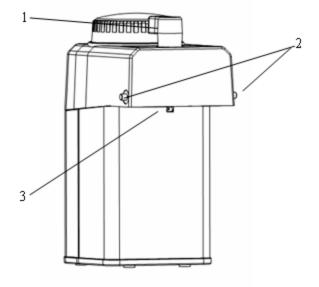
### 2.3.1 Front View

- 1. "0" button
- 2. Control dial
- 3. Filling system
- 4. Color mark for anesthetic agent
- 5. Sight glass for filling level
- 6. Drainage knob



# 2.3.2 Rear View

- 1. Handle for locking lever
- 2. Interlock system
- 3. Locking pin



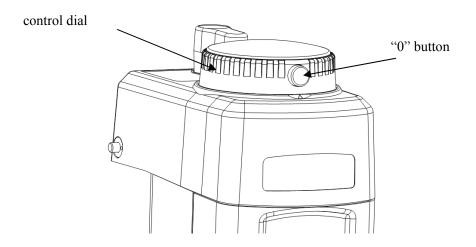
# 2.4 Configuration Differences

Model	Anesthetic agent	Filling system	Accessory
Sevoflurane Key Filler Vaporizer	Sevoflurane	Key Filler system	Sevoflurane Key Filler filling adapter
Isoflurane Key Filler Vaporizer	Isoflurane	Key Filler system	Isoflurane Key Filler filling adapter
Sevoflurane Quik-Fil Vaporizer	Sevoflurane	Quik-Fil system	Sevoflurane Quik-Fil filling adapter Sevoflurane Quik-Fil drainage funnel
Sevoflurane Pour Fill Vaporizer	Sevoflurane	Pour Fill system	/
Enflurane Key Filler Vaporizer	Enflurane	Key Filler system	/
Enflurane Pour Fill Vaporizer	Enflurane	Pour Fill system	Enflurane Key Filler filling adapter
Halothane Key Filler Vaporizer	Halothane	Key Filler system	1
Halothane Pour Fill Vaporizer	Halothane	Pour Fill system	Halothane Key Filler filling adapter
Sevoflurane Key Filler Vaporizer	Sevoflurane	Key Filler system	/

# 3.1 Control Dial

The control dial is used to set the output concentration of the anesthetic agent. The control dial is marked with output concentration of the anesthetic agent from the vaporizer. The graduation to which the dial is turned indicates the output concentration.

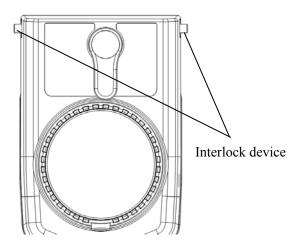
The "0" button on the vaporizer has locking function. Press this button first before turning the control dial.



If the vapour is stored in high temperature and then used, the concentration of the delivered anesthetic agent may be high. To enable pressure equalization, always turn the control dial to 1% after connecting the anesthetic workstation, and wait for at least 15 seconds.

# 3.2 Connecting and Interlock System

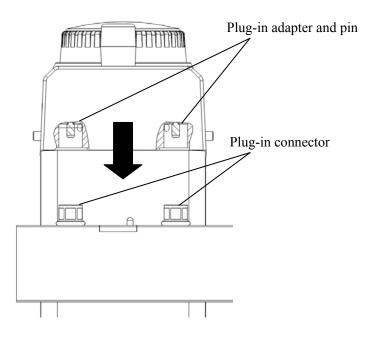
When the anesthetic delivery system is connected to multiple vaporizers, the interlock systems of the vaporizers ensure that only one vaporizer can be switched on at any one time while the others are switched off and blocked.



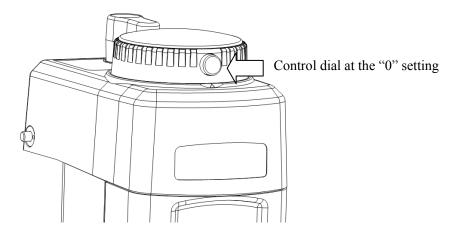
## 3.2.1 Plug-in Adapter/Plug-in Connector

The vaporizer is applicable to anesthetic delivery systems with plug-in connectors with an Ohmeda Selectatec® compatible manifold system.

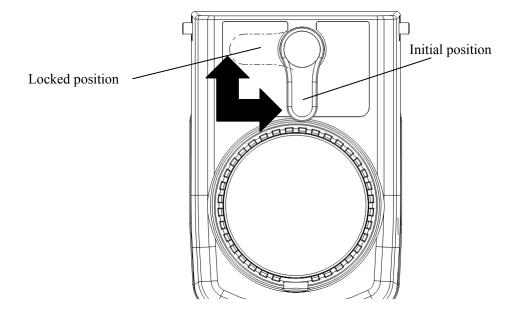
The holes in the plug-in adapter on the vaporizer fit onto the pins on the plug-in connector on the anesthetic delivery system.



To connect/disconnect the vaporizer, the control dial must be at the "0" setting indicating locked status.

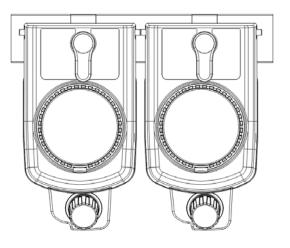


Press the handle for locking lever and turn the handle clockwise for  $90^{\circ}$  to lock the vaporizer and counter clockwise for  $90^{\circ}$  to release locking.



## 3.2.2 Interlock Device

Ohmeda Selectatec<sup>®</sup> compatible interlock device is used. When the anesthetic delivery system is connected to multiple vaporizers, if one vaporizer is switched on, the two pins on the interlock device are pushed out, preventing other vaporizers from being switched on.



# 

- Before operation, check if the interlock device is fully functional..
- A malfunction in the interlock system can endanger the patient by overdosing or mixing anesthetic agents.

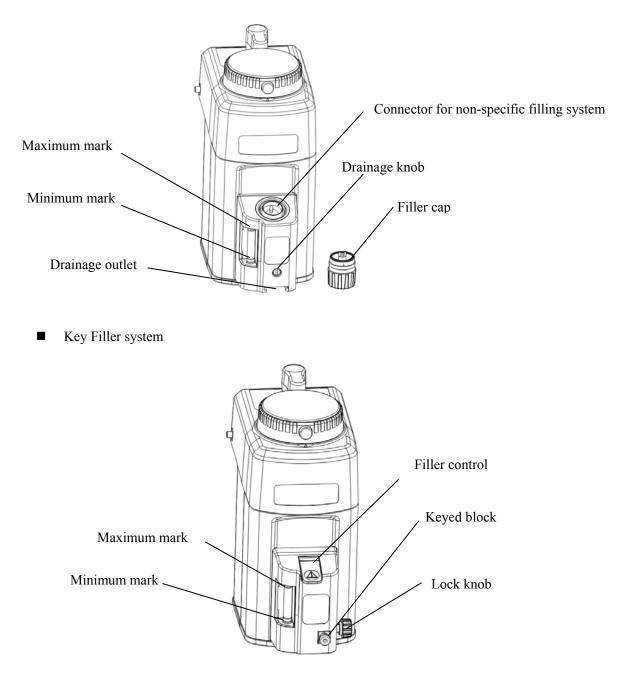
### NOTE

- To ensure the normal operation of the vaporizer, connect the vaporizer in the correct flow direction corresponding with the arrows on the Anesthetic Vaporizer.
- When the anesthetic delivery system has three and more than three groups of plug-in connectors, check if there is an interlock function between nonadjacent connectors. Otherwise, vaporizers are recommended to be connected right next to each other.

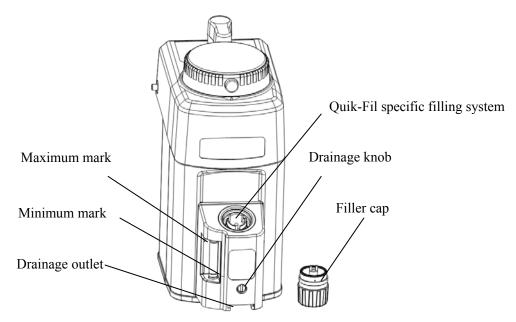
# 3.3 Filling System

The filling system is used to fill and drain the specific anesthetic agent. The filling system has a liquid level indicator which displays filling level with the maximum and minimum levels marked.

Pour Fill system



Quik-Fil system



# 4.1 Checks before Filling

- 1. Check the vaporizer for damage.
- 2. Set the control dial to "0" position.
- 3. Observe use-by date for anesthetic agent.
- 4. Use on anesthetic delivery systems made by other manufacturers only after a functional system check for geometry, leakage, pressure and flow has been carried out by trained service personnel (on each type of anesthetic delivery system).
- 5. After filling for the first time, wait 15 minutes for the dry wicks inside to become saturated (The filling level of the anesthetic agent may drop. Refill if required.)

### NOTE

• The Anesthetic Vaporizer may only be used on the anesthetic delivery system after the operating organization has checked all technical specifications of the Vapor and the anesthesia system are met. Any deviations might result in incorrect concentrations being delivered.

# 4.2 Filling the Vaporizer

# 

• Only fill the vaporizer with the anesthetic agent specified on it.

# 

• Take care not to spill anesthetic agent. Inhaling anesthetic agent vapor endangers health.

### NOTE

- Mindray recommends the use of Key Filler or Quik-Fil filling systems to prevent incorrect filling and to reduce the volume of anesthetic agent vapor released during the filling process.
- Ensure adequate ambient ventilation when filling the vaporizer.

Before use, check that the correct anesthetic agent is used. For instance, check the name of anesthetic agent and color mark on the vaporizer and the anesthetic agent bottle.

Enflurane	Orange
Isoflurane	Purple
Sevoflurane	Yellow
Halothane	Red

From a technical viewpoint, the same anesthetic agent from different manufacturers with different tradenames, which are identical in composition and physical and chemical properties and are approved as medicaments, can be administered in combination in the vaporizer and monitored with anesthetic agent monitor.

# 

- Stop using a vaporizer immediately which has been filled or partly filled with the wrong anesthetic agent or other substance to prevent danger to health. If this occurs, mark the vaporizer for incorrect filling and call the distributor for repair.
- Use anesthetic agent monitors in compliance with ISO80601-2-55. Many anesthetic agent monitors do not identify mixtures of anesthetic agents and/or detect that the anesthetic agent being measured differs from the agent that was set. Unusual deviations in the concentration displayed on a monitor may indicate incorrect filling. If this has happened, mark the vaporizer and call the distributor for repair.

## 

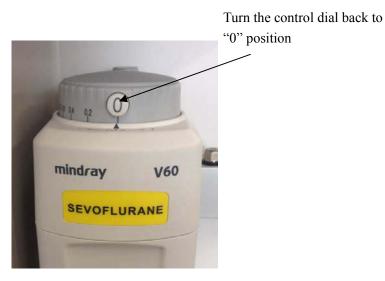
- Make sure that the drainage knob is closed when filling the vaporizer as anesthetic agent may escape from the drainage outlet if it is not closed.
- Keep the vaporizer upright or hanging vertical while it is being filled. If it is at an angle it can be overfilled which may lead to concentrations which are too high or too low.
- During disconnection of Key Filler and Quik-Fil filling adaptor from the vaporizer and the bottle adaptor from the bottle, small amounts of anesthetic agent will escape to the environment.

#### 4.2.1 Pour Fill System

The filling steps of V60 Isoflurane Pour Fill Vaporizer and V60 Sevoflurane Pour Fill Vaporizer are the same.

If the vaporizer is connected to the anesthetic delivery system, fresh gas flow can remain as set.

1. Turn the control dial clockwise back to "0" position until the "0" button pops up.



### 

• Significant quantities of anesthetic agent vapor may escape if the control dial does not return to "0" position.

## 

- It is necessary to wait at least 5 seconds after setting the control dial to the 0 position before opening the vaporizer. This allows the pressure to balance and prevents fresh gas and anesthetic agent vapor from escaping out of the vaporizer.
- 2. Unscrew the filler cap slowly, so that any pressure in the vaporizer can escape slowly.



3. Check if the names of anesthetic agent and color mark on the vaporizer and the anesthetic agent bottle correspond. If the correct agent is being used, unscrew the cap from the anesthetic agent bottle. Pour anesthetic agent slowly into the filler receiver.

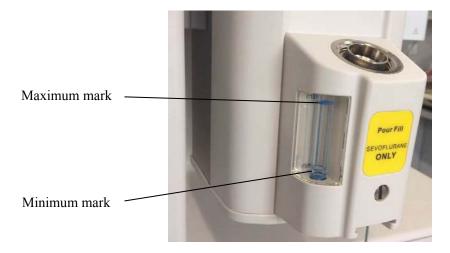


# 

• Take care not to spill anesthetic agent. Inhaling anesthetic agent vapor endangers health.

4. Check the filling level on the sight glass during filling. The vaporizer must be hanged vertical or stand upright during this check.

During the filling process, the filling level must not exceed the maximum mark, or there is a risk of incorrect output concentration. If the maximum mark has been exceeded, the agent will flow out .Please drain the excess liquid (see 4.3 Draining the Vaporizer) until the level drops below the maximum mark.



5. When the maximum mark is reached, stop pouring agent. If the vaporizer is filled above the maximum mark by a few millimeters, the anesthetic agent will start to overflow through the overflow hole.

## 

- When the anesthetic vaporizer is overflowed, the anesthetic agent will escape to the environment.
- 6. Tighten the filler cap clockwise. If this is not done properly, fresh gas and anesthetic agent may escape when the vaporizer is switched on next time.



7. Tighten the cap of the anesthetic agent bottle even if it is completely empty.

## 

- When the filling level of the anesthetic agent is outside the maximum or minimum mark, incorrect output concentration may occur.
- Before use, check the filling level of the anesthetic agent.

## 

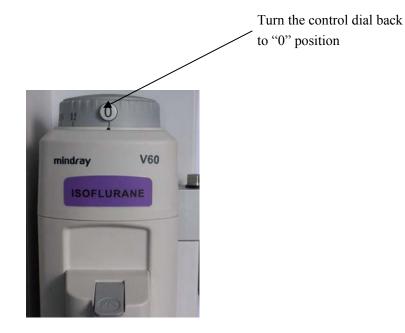
• Anesthetic agent vapor will escape into ambient atmosphere if filling operations are not done properly.

#### 4.2.2 Key Filler System

The filling steps of V60 Isoflurane Key Filler Vaporizer and V60 Sevoflurane Pour Fill Vaporizer are the same.

If the vaporizer is connected to the anesthetic delivery system, fresh gas flow can remain as set.

1. Turn the control dial clockwise back to "0" position until the "0" button pops up.



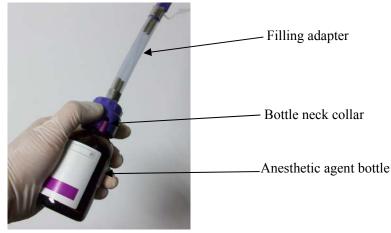
## 

• Significant quantities of anesthetic agent vapor may escape if the control dial does not return to "0" position.

## 

• It is necessary to wait at least 5 seconds after setting the control dial to the 0 position before opening the vaporizer. This allows the pressure to balance and prevents fresh gas and anesthetic agent vapor froming escaping from the vaporizer.

2. Select the correct filling adapter and anesthetic agent bottle. Screw the filling adapter firmly into the anesthetic agent bottle. Before use, check that the color marks and names/symbols of anesthetic agent on the filling adapter, anesthetic agent bottle and vaporizer must correspond to the anesthetic agent used.



## 

• Do not use a damaged filling adapter or an anesthetic agent bottle without collar. If a bottle without collar is used, specific filling adapter cannot be identified, underlying the risk of filling a wrong anesthetic agent.

## 

• If the connection between the filling adapter and anesthetic agent bottle is not leak-tight, anesthetic agent may escape.

#### NOTE

• If a new anesthetic agent bottle is partly empty, there may be a leak.

3. Turn the lock knob counter clockwise.



4. Remove the keyed block.



5. Push the keyed end of the filling adapter into the opening of the filling system until it cannot move.



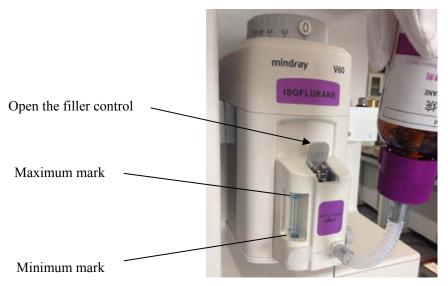
6. Tighten the lock knob clockwise.



- If the connection between the filling adapter and filling system is not leak-tight, anesthetic agent may escape.
- 7. Raise the anesthetic agent bottle upside down slowly.



8. Open the filler control and the liquid agent will flow into the vaporizer.



9. Check the filling level in sight glass during filling. When the maximum mark is reached, flow stops automatically.

## 

- If the connection between the filling adapter and anesthetic agent bottle or that between the filling adapter and filling system is not leak-tight, anesthetic agent may continue to flow into the vaporizer.
- 10. Close the filler control.
- 11. Put down the anesthetic agent bottle slowly.
- 12. Unscrew the lock knob.
- 13. Pull the keyed end of the filling adapter out of the filling system.
- 14. Put the keyed block back into the opening of the filling system.
- 15. Tighten the lock knob.
- 16. Unscrew the filling adapter.
- 17. Tighten the cap of the anesthetic agent bottle even if it is completely empty.

## 

• If the connection between the keyed block and filling system is not leak-tight, anesthetic agent may escape, endangering health.

#### NOTE

- Anesthetic agent bottle must not be stored with filling adapter connected, otherwise anesthetic agent will escape.
- During disconnection of the male adaptor from the vaporizer and the bottle adaptor from the bottle, small amounts of anesthetic agent will escape to the environment.

#### 4.2.3 Quik-Fil System

If the vaporizer is connected to the anesthetic delivery system, fresh gas flow can remain as set.

1. Turn the control dial clockwise back to "0" position until the "0" button pops up.

## 

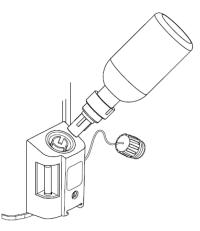
• Significant quantities of anesthetic agent vapor may escape if the control dial does not return to "0" position.

## 

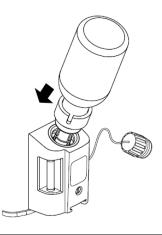
- It is necessary to wait at least 5 seconds after setting the control dial to the 0 position before opening the vaporizer. This allows the pressure to balance and prevents fresh gas and anesthetic agent vapor froming escaping from the vaporizer.
- 2. Select the correct filling adapter and anesthetic agent bottle. Remove cap from the anesthetic agent bottle, checking that the bottle and filler mechanism are not damaged. Screw the Quik-Fil adapter firmly into the anesthetic agent bottle.
- 3. Remove the cap from the anesthetic agent bottle, checking that the bottle and filler mechanism are not damaged.
- 4. Screw the Quik-Fil adapter firmly into the anesthetic agent bottle.

- If the connection between the filling adapter and anesthetic agent bottle is not leak-tight, anesthetic agent may escape.
- Agent-specific filling cannot be assured when bottles without collars used.

5. Remove the filler cap and insert the bottle equipped with adapter into the filler receptacle. Rotate the bottle gently to align the bottle filler adapter with the slots in the filler receptacle.



6. Press the bottle until the liquid begins to flow into the vaporizer.



- If the connection between the filling adapter and anesthetic agent bottle is not leak-tight, anesthetic agent may escape.
- 7. Check the filling level in sight glass during filling. When the maximum mark is reached, stop pressing the bottle. And pull out the bottle slowly. If the vaporizer is filled above the maximum mark by a few millimeters, the anesthetic agent will start to overflow through the overflow hole.

8. Check that the sealing ring on the filler cap is not damaged, and screw the filler cap.

## 

- Tighten the filler cap. Failure to do so may cause fresh gas and anesthetic agent to escape when the vaporizer is switched on next time.
- 9. Unscrew the filling adapter.
- 10. Tighten the cap of the anesthetic agent bottle even if it is completely empty.

## 4.3 Draining the Vaporizer

### 

• Anesthetic agent which has been drained off must be handled, stored or disposed of as medicament. If this is not done, there will be a risk of administering incorrect anesthetic agents.

## 

• Take care not to spill anesthetic agent. Do not inhale anesthetic agent vapor which endangers health.

#### NOTE

- Do not drain liquid anesthetic agent into an open container or significant quantities of anesthetic agent vapor will escape.
- Do not reuse the anesthetic agent drained from the vaporizer.

#### 4.3.1 Pour Fill System

The draining steps of V60 Isoflurane Pour Fill Vaporizer and V60 Sevoflurane Pour Fill Vaporizer are the same.

Place the vaporizer upright or suspend so that all the anesthetic agent can drain out.

- 1. Turn the control dial clockwise back to "0" position until the "0" button pops up.
- 2. Hold the correct bottle for the anesthetic agent being drained below the drainage outlet at the bottom of the vaporizer.



3. Unscrew the filler cap counter clockwise slowly.



4. Rotate the drainage knob counter clockwise for three to four turns. Drain until no more anesthetic agent can be seen in the sight glass and no more anesthetic agent runs into the bottle. If necessary, close the drainage knob quickly and continue the drainage process with a new bottle. If the anesthetic agent has to be removed from the wick, see *4.4 Blowing off the Vaporizer*.



#### NOTE

- Do not fill the bottle to the very top. This can lead to escape of anesthetic agent.
- 5. When the vaporizer has been completely drained, close the drainage knob clockwise.
- 6. Tighten the cap of the anesthetic agent bottle even if it is completely empty.
- 7. Tighten the filler cap.

## 

• Tighten the filler cap and drainage knob after draining the vaporizer is completed. Failure to do so may cause anesthetic agent to escape.

#### 4.3.2 Key Filler System

The draining steps of V60 Isoflurane Key Filler Vaporizer and V60 Sevoflurane Pour Fill Vaporizer are the same.

Place the vaporizer upright or suspend so that all the anesthetic agent can drain out.

- 1. Turn the control dial clockwise back to "0" position until the "0" button pops up.
- 2. Select the correct anesthetic agent bottle and open the bottle. Do not use a damaged filling adapter or anesthetic agent bottle.
- 3. Select the correct filling adapter for the anesthetic agent.
- 4. Screw the filling adapter firmly into the anesthetic agent bottle.

- If the connection between the filling adapter and anesthetic agent bottle is not leak-tight, anesthetic agent may escape, endangering health.
- 5. Turn the lock knob counter clockwise.



6. Remove the keyed block.



7. Push the keyed end of the filling adapter into the opening of the filling system until it cannot move.



8. Tighten the lock knob clockwise.



# 

• If the connection between the filling adapter and filling system is not leak-tight, anesthetic agent may escape.

9. Keep the anesthetic agent bottle below the vaporizer. Open the filler control to drain until no more anesthetic agent can be seen in the sight glass and no more anesthetic agent runs into the bottle. If anesthetic agent bottle should be replaced, close the filler control. Take out the filling adapter. Repeat step 4 after a new anesthetic agent bottle is replaced.



- 10. Close the filler control.
- 11. Unscrew the lock knob.
- 12. Pull the keyed end of the filling adapter out of the filling system.
- 13. Put the keyed block back into the opening of the filling system.
- 14. Tighten the lock knob.
- 15. Unscrew the filling adapter.
- 16. Tighten the cap of the anesthetic agent bottle even if it is completely empty.

#### 

• Close the filler control and tighten the lock knob after draining the vaporizer is completed. Failure to do so may cause anesthetic agent to escape.

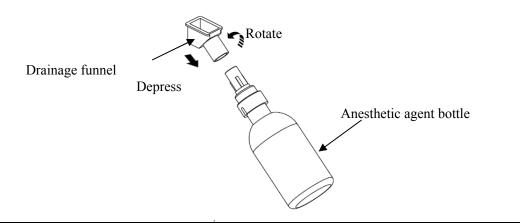
#### NOTE

- Anesthetic agent bottle must not be stored with filling adapter connected, or anesthetic agent will escape.
- During disconnection of the male adaptor from the vaporizer and the bottle adaptor from the bottle, small amounts of anesthetic agent will escape to the environment.

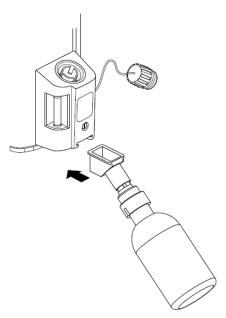
#### 4.3.3 Quik-Fil System

Place the vaporizer upright or suspend so that all the anesthetic agent can drain out.

- 1. Turn the control dial clockwise back to "0" position until the "0" button pops up.
- 2. Remove the cap from an empty Sevoflurane anesthetic agent bottle. Screw the Quik-Fil adapter firmly into the anesthetic agent bottle. Insert the drainage funnel. Depress the drainage funnel and rotate the bottle simultaneously until it cannot move.



- If the connection between the filling adapter and anesthetic agent bottle is not leak-tight, anesthetic agent may escape, endangering health.
- 3. Insert the bottle equipped with Quik-Fil drainage funnel into the slot at the bottom of the vaporizer.



4. Unscrew the filler cap counter clockwise slowly, so that any pressure in the vaporizer can escape slowly.

#### NOTE

- Do not fill the bottle to the very top. This can lead to escape of anesthetic agent.
- 5. Rotate the drainage knob counter clockwise for three to four turns by the filler cap or the key of drainage funnel. Drain until no more anesthetic agent can be seen in the sight glass and no more anesthetic agent runs into the bottle. If necessary, close the drainage knob in good time and continue the drainage process with a new bottle.
- 6. Close the drainage knob clockwise.
- 7. Tighten the filler cap.
- 8. If the anesthetic agent has also to be removed from the wick, see *4.4 Blowing off the Vaporizer*.

## 

- Tighten the filler cap and drainage knob after draining the vaporizer is completed. Failure to do so may cause anesthetic agent to escape when the vaporizer is switched on next time.
- 9. Unscrew the drainage funnel and adapter from the bottle.
- 10. Tighten the cap of the anesthetic agent bottle even if it is completely empty.

### 4.4 Blowing off the Vaporizer

If the anesthetic agent has also to be removed from the wick after draining, set the control dial to 5% and flush for 5 hours at 5 L/min Air or for 2 hours at 10 L/min Air to allow gas to flow into the waste gas scavenging system.

### 5.1 Checklist—checks before each use

Use the vaporizer within the specified operating range.

## 

- Under no circumstances should the vaporizer ever be used at atmospheric pressure and temperature at which the anesthetic agent could start to boil, as the concentration delivered will rise and be uncontrolled. For more information, see 11.3 Influence of Temperature.
- This Anesthetic Vaporizer is not suitable for use in an MRI environment.

Prepare the anesthetic delivery system in accordance with Instructions for Use and connect the waste gas scavenging system. Switch on the anesthetic agent monitor. Set the correct anesthetic agent and alarm limits. Switch on the oxygen and CO<sub>2</sub> monitor and set the alarm limits.

- The Anesthetic Vaporizer may become unstable if the unit is tilted beyond 10 degrees.
- If a vaporizer is operated at an angle of more than 30° (fixed position), uncontrolled concentrations may occur. Connections, plug-in connectors/plug-in adapters may leak when used at greater angles.
- The filling level shown in the sight glass will not be correct when the vaporizer is used at an angle. This may lead to overfilling.

#### NOTE

- We recommend using monitors which can differentiate between different anesthetic agents for continuous monitoring to prevent deviations in concentration, leaks or incorrect filling from injuring the patient.
- When using Low Flow and Minimal Flow, the concentration of the anesthetic agent may deviate significantly from the vaporizer setting. For this reason, measurement of inspiratory and/or expiratory anesthetic agent concentration is essential.
- We recommend monitoring oxygen concentration continuously and setting at least a low alarm limit to detect insufficient oxygen supply.

### **5.2 Setting Checks**

- 1. The filling level in the sight glass should be between the minimum and maximum marks.
- 2. Filling system:

Pour Fill/Quik-Fil: Put the filler cap in place and tighten it securely. Tighten the drainage knob securely.

Key Filler: Close the filler control and tighten the lock knob securely.

3. Connector system:

Plug-in connector on anesthesia machine: Press the plug-in adapter level on the seals.

Handle for locking lever: Swing the handle for locking lever counter clockwise. Check if the vaporizer is secure and is hanging vertical on the machine, when viewed from front and side.

Other connectors: The vaporizer is connected firmly and securely on the anesthetic delivery system.

# 

- Check as per the above items. If these are not done, fresh gas and anesthetic agent vapor may escape endangering health.
- 4. If several vaporizers are connected at a time, check that the interlock systems on the vaporizers and anesthetic delivery system are of same type.

Check the interlock system of each vaporizer as follows:

1) Switch off fresh gas.

2) Set one vaporizer to any concentration.

3) Turn the control dials of other vaporizers. All other vaporizers must be switched off and impossible to switch on.

4) Switch off the vaporizer. Set the control dial to "0" position.

## 

- When the anesthetic delivery system has three and more than three groups of plug-in connectors, check if there is an interlock function between nonadjacent connectors. Otherwise, vaporizers are recommended to be connected right next to each other.
- Check as per the above items. If these are not done, an incorrect concentration may be displayed.
- Interlock device malfunction may cause several vaporizers to be switched on simultaneously which endangers the patient by resulting in overdosing or a mixture of anesthetic agents.
- 6. Check that the vaporizer, connector, and fresh gas circuit are leak-tight (see Instructions for Use for Anesthetic delivery system).
- 7. Flush the breathing system with fresh gas before connecting a patient.

- Do not operate the vaporizer until all checks have been carried out and the results meet the requirements.
- All repairs must be carried out by qualified service personnel.

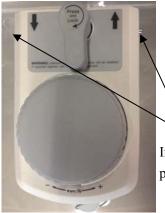
#### FOR YOUR NOTES

## 

- Handle the vaporizer with care. Be careful not to tilt or drop.
- Stop using the vaporizer immediately if it has been tilted or dropped.
- Do not carry by the control dial or locking lever handle.
- Before operation, check that the locking lever is capable of locking the vaporizer securely onto the manifold.
- Only use Anesthetic Vaporizer with anesthetic delivery systems that are suitable according to ISO80601-2-13.
- If the Anesthetic Vaporizer is connected to anesthetic delivery systems from other manufacturers, it is the responsibility of the operator to ensure that all technical specifications of the Anesthetic Vaporizer and the anesthetic delivery systems are met.

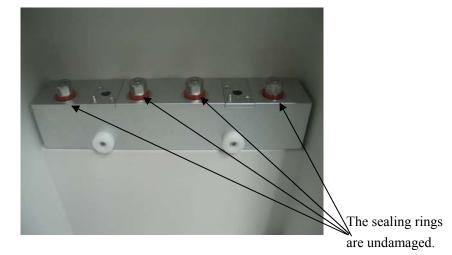
### 6.1 Connecting the Vaporizer

1. The interlock device must be in the original position.



Interlock device in the original position.

2. The sealing rings on the anesthesia machine plug-in connector must be undamaged. There should be no foreign bodies on the plug-in connector.



- 3. Switch the vaporizers off when one or more than one vaporizers have been on the manifold of the anesthetic delivery system, before hanging on another vaporizer.
- 4. Set the control dial to "0" position.



5. Hold the vaporizer in vertical position with both hands and lower gently onto the anesthesia machine plug-in connector.



6. Depress the handle for locking lever and turn it for 90° clockwise. The vaporizer is then secured and cannot be removed.



Locking lever in locked position



- 7. Connect two or more than two vaporizers on the anesthetic delivery system:
- If the anesthetic delivery system has two groups of plug-in connectors, the interlock pins of the two connected vaporizers must be contact directly.



When the anesthetic delivery system has three and more than three groups of plug-in connectors, check if there is an interlock function between nonadjacent connectors. Otherwise, vaporizers are recommended to be connected right next to each other.

#### 

• The plug-in adapter must be level and stable on the sealing rings. Otherwise, there may be a loss of fresh gas, leaks, excessively low output concentrations or the interlock device may jam. To solve this problem, disconnect the vaporizer first (see 6.4 Disconnecting the Vaporizer) and check the positions of locking lever and vaporizer manifold of the anesthetic delivery system. Then re-connect the vaporizer.

#### NOTE

• Take care when lowering the Vaporizer onto the plug-in connector

### 6.2 Adjusting the Concentration of Anesthetic Agent

- Before operation, check that the control dial turns normally.
- Do not use the vaporizer tilted for an angle of more than 30°(fixed position). Risk of incorrect output concentration or escape of anesthetic agent may result otherwise.
- 1. Set the flow of fresh gas on the anesthetic delivery system.
- 2. Press the "0" button.
- 3. Turn the control dial counter clockwise to the required concentration of anesthetic agent.



#### NOTE

- If the concentration cannot be set, do not force the control dial. Check that all other vaporizers connected are in "0" position and that the interlock device is operational.
- Stop use of the vaporizer if the control dial gets loose or falls off.

During use, check the filling level in the sight glass regularly. The filling level is not visible between the minimum and maximum marks then do not use the vaporizer. When the vaporizer is empty or overfilled then the output concentration can be incorrect. When the minimum mark is reached, fill the vaporizer (see *4.2 Filling the Vaporizer*).

1. If the anesthetic agent monitor shows implausible values, check the vaporizer for incorrect filling and check the monitor for incorrect setting.

#### NOTE

• During prolonged operation with both a high flow of fresh gas and a high concentration, the concentration administered may decrease. See 11.8 Influence of Running Time.

- Jerky movements or tilting at an angle of more than 30° can cause incorrect output concentration.
- Equip with anesthetic gas scavenging system which complies with ISO80601-2-13 to purify the air of the operating room.
- 2. If it is necessary to change to another vaporizer:
  - (1) Set the vaporizer being used to "0".
  - (2) Disconnect the vaporizer being replaced (see 6.4 Disconnecting the Vaporizer).
  - (3) Switch the anesthetic agent monitor to the new anesthetic agent (If necessary, refer to the agent monitor instruction for use).
  - (4) Connect the new vaporizer (see *6.1 Connecting the Vaporizer*).

## 6.3 Switching off the Vaporizer

- 1. Turn the control dial clockwise until the "0" button pops out to prevent it from being switched on accidentally.
- 2. If required, turn off the fresh gas flow on the anesthetic delivery system.

## 

- The vaporizer must never be left switched on without fresh gas flow. Otherwise anesthetic agent vapor at a high concentration can get into the machine circuit and ambient air and harm people and materials.
- 3. If the vaporizer is not going to be used for up to six months, then the anesthetic agent inside the vaporizer should be drained.
- 4. If the vaporizer remains on the anesthetic delivery system:
  - (1) The locking lever on the plug-in adapter should remain locked on.
  - (2) Keep within the permissible temperature and humidity range.
  - (3) Observe use-by date of the anesthetic agent.
- 5. If the vaporizer has to be removed from the anesthetic delivery system, see 6.4 *Disconnecting the Vaporizer* and 6.5 *Moving when Filled*.

### 6.4 Disconnecting the Vaporizer

- Take care not to drop the vaporizer. Do not use the vaporizer if it has been dropped. Damage may cause incorrect output concentration. Do not carry by the control dial or locking lever handle to avoid the risk of injury.
- Disconnect the vaporizer only when the control dial is set to "0" to avoid the risk of incorrect output concentration and of anesthetic agent escaping.
- Place vaporizers only on firm even surfaces or hang on stable brackets.
- 1. Turn the control dial back to "0" position clockwise.
- 2. Turn the handle for locking lever for 90° counter clockwise until it springs up automatically.
- 3. Use both hands to lift the vaporizer off the anesthesia machine.

• If there are no valves on the anesthesia machine plug-in connectors, fresh gas and anesthetic agent vapor may escape when the vaporizer is removed.

#### 6.5 Moving when Filled

This operation is only to be done as part of normal operation, not for storage and transport.

1. The anesthetic delivery system can be moved at the workplace with the vaporizer switched on.

#### NOTE

- Jerky movements or tilting at an angle of more than 30° can cause incorrect output concentration.
- 2. The anesthetic delivery system with securely fastened vaporizers can be moved with control dial set at "0", if there is no risk of tilting by more than  $30^{\circ}$ .

## 

• When tilted at an angle of more than 30°:

The anesthetic agent may overflow when the control dial is set at "0", endangering health.

When the control dial is set above "0", the anesthetic agent may leak and get into the flow control system and cause excessively high or low concentrations when the vaporizer is used next time.

3. When the vaporizer is detached from the anesthetic delivery system and transported separately, the control dial must remain at the "0" position.

#### FOR YOUR NOTES

## 

- Obey applicable safety precautions.
- Read the material safety data sheet for each cleaning agent.
- Read the operation and service manual before disinfecting the Anesthetic Vaporizer.
- Wear gloves and safety glasses.

#### NOTE

- To help prevent damage, refer to the manufacturer's data if you have questions about a cleaning agent.
- Do not permit liquid to go into the Anesthetic Vaporizer housings.

## 7.1 Cleaning

- 1. Clean the surface of the vaporizer housing with a damp cloth soaked in water, or green soap tincture (The pH value is 7.0 to 10.5)
- 2. After cleaning the housing, remove the remaining detergent by wiping with a dry lint free cloth.

## 

- Do not immerse the Anesthetic Vaporizer or the filling adapter in detergents.
- The detergent must not be allowed to get under the control dial.
- Do not allow the detergent to get into the gas inlet, gas outlet, or filling system.

## 

• If liquids other than the anesthetic agents specified for the vaporizer get into the vaporizer, the patient may be injured.

## 7.2 Disinfecting

Use surface disinfectants for disinfection.

- 75% of alcohol
- ◆ 70% of isopropyl alcohol
- 2% of glutaraldehyde (neutral)
- Sodium hypochlorite solution (10% available chlorine)
- Super Sani-Cloth (0.5% Quaternary ammonium chloride and 55% Isopropyl alcohol)

## 

• Do not sterilize the vaporizer and accessories. Damage inside may cause incorrect output concentration.

## 8.1 Repair Policy

## 

• Do not modify or disassemble the vaporizer. Any change of the vaporizer may cause incorrect output concentration.

Stop using the vaporizer immediately if it has been found to need repair. Contact trained service personnel for repair. After repair, test the vaporizer to ensure that it is functioning properly, in accordance with the specifications.

#### NOTE

- All repairs must be carried out by qualified service personnel.
- Replace damaged parts with components manufactured or sold by Mindray. After repair, test the unit to make sure that it complies with the manufacturer's published specifications.
- Contact Mindray for service assistance.

## 8.2 Maintenance Schedule

Test after care and service of the anesthetic delivery system or vaporizer, after prolonged shutdown and at least every six months.

Minimum frequency	Maintenance
Daily	The control dial can be turned to "0" position.
	After the "0" button is pressed, the control dial can be turned counter clockwise, close to the highest concentration mark.
Weekly	Clean the external surfaces.
	Check the concentration weekly when continuous monitoring is not available
	(see section 8.3 Checking the Concentration).
Biweekly	The vaporizer has no damage or loose parts.
During filling and draining	Check the filling system. See section 8.4 Checking the Filling System.
During cleaning and	Check the anesthesia machine plug-in connectors. See section 8.5 Checking the
installation	Plug-in Adapter.
	The gas inlet and outlet are not soiled.
Semiyearly and after service	All-round checks of <i>8 User Maintenance</i> should be performed by trained service personnel.

## 

• Do not pour water or any cleaning solutions into the vaporizer.

### 8.3 Checking the Concentration

Check the vaporizer output concentration weekly when continuous monitoring is not available

- 1. Preparation
  - (1) Fill the vaporizer—at least half full between minimum and maximum marks.
  - (2) Use a valid anesthetic agent monitor.
  - (3) Connect the monitor to the common gas outlet of the anesthesia machine. Make sure that the connections are leak-tight.
  - (4) Connect the waste gas scavenging system and start operation.
  - (5) Set the monitor to anesthetic agent being used and to continuous measurement.
  - (6) Set air flow of 2 L/min on the anesthesia machine. Use  $O_2$  if Air is not available.

#### 2. Measuring

- (1) Check the output concentration at "0" position, 0.4, 1, 2, 3, 5, and MAX in ascending order.
- (2) Correct measured values, according to the carrier gas..

Air check: no correction.

O<sub>2</sub> check: reduce the measured values as follows:

Measured value vol%	Correction
<1%	-0.05
1.0-2.0	-0.10
2.0-4.0	-0.20
5.0-8.0	-0.30

If the data displayed is in % partial pressure, no correction is made. If it is in vol.%, it needs to be converted to partial pressure. The formula is:

Concentration (% partial pressure) =  $\frac{\text{Measured value (vol.%) x atmospheric pressure (kPa)}}{101.3 \text{ kPa}}$ 

3. Determine the accuracy range.

Range of concentration accuracy (maximum value always applies)				
<b>Operating environment</b>	15 to 35°C or 0.2 to 10 L/min	10 to 15°C or 35 to 40°C or 10 to 15 L/min		
Set concentration $\leq 6\%$	±0.20 vol.% or ±20% rel., whichever is greater	+0.30/-0.20 vol.% or +25/-20% rel., whichever is greater		
Set concentration > 6%	$\pm 0.25$ vol.% or $\pm 20\%$ rel., whichever is greater	+0.35/-0.25 vol.% or +30/-20% rel., whichever is greater		

4. Test result

If the corrected measured value is within the permissible range of output concentration, the vaporizer can be put into operation.

### 

• If the corrected measured value is not within the permissible range of output concentration, do not use the vaporizer. Have the vaporizer checked by trained service personnel.

#### 5. After test

- (1) Switch off the vaporizer. Set the control dial to "0" position.
- (2) Switch off Air or  $O_2$  flow on the anesthesia machine.

### 8.4 Checking the Filling System

Verify the following:

- Pour Fill system
- 1. The sealing ring for filler cap is in good condition.
- 2. The filling opening is clean.
- 3. The sight glass shows normal liquid level.
- Key Filler system
- 1. The sealing cushion for filling device is in good condition.
- 2. Only the correct filling adapter fits into the filling system.
- 3. The filler control can be opened and closed smoothly.
- 4. The sight glass shows normal liquid level.
- Quik-Fil system
- 1. The sealing ring for filler cap is in good condition.
- 2. The filling opening is clean.
- 3. The valve core inside the filling opening can be depressed and retracts smoothly.
- 4. The sight glass shows normal liquid level.

#### 8.5 Checking the Plug-in Adapter

Verify the following:

- 1. When the Handle for locking lever is turned to locking position, turns back automatically.
- 2. The locking lever is undamaged and not buckled.
- 3. The interlock device is undamaged, guides easily and cannot be removed.
- 4. Two interlock pins are present.
- 5. Sealing areas are undamaged.
- 6. Manufacturer's plate on the back of the vaporizer is present and secure.

#### Fault Cause Remedy No concentration The vaporizer liquid level is Fill the vaporizer. delivered or concentration below the minimum mark. The control dial is set to "0". excessively high/low Set the control dial to $\geq 0.2$ vol.%. No vaporizer is connected; Connect the vaporizer; Or several vaporizers are Or switch off the unintended connected, but unintended vaporizer. vaporizer is switched on. The vaporizer is tilted during or Before operation: flush the vaporizer before operation when the control with fresh gas. See sections 4.3 dial is not at "0". If this has **Draining the Vaporizer** and 4.4 happened, liquid anesthetic agent Blowing off the Vaporizer. Then may have entered the flow control check the concentration. See section 8.3 Checking the Concentration. system. Leak, for example, plug-in Disconnect the vaporizer. Check adapter is not fitted flush on seals. plug-in adapter safety locking device and sealing rings. Have them repaired by trained service personnel if damage is found. Valves in the anesthesia machine Repair by trained service personnel. plug-in connectors are damaged. The vaporizer temperature is Allow the vaporizer to reach normal outside the specified application temperature, allowing at least 15 min range, such as filled with very per $^{\circ}$ C deviation from the specified cold anesthetic agent, or operated range. See section 11.3 Influence of with both flow and concentration *Temperature*. Refill with anesthetic high over a prolonged period. agent at room temperature. The vaporizer is operated with Change the concentration because of carrier gas other than air. carrier gas. See section 11.5 Influence of Gas Composition. The monitor displays volume Convert the measured value to percentage, not partial pressure. partial pressure. See section 8.3 Checking the Concentration. The vaporizer or anesthetic Check with another vaporizer to monitor is defective. establish whether the vaporizer or anesthetic monitor is faulty. Repair by trained service personnel if the

# 9.1 Operation Related Faults and Remedies

		vaporizer is defective.
	The vaporizer is incorrectly installed or the plug-in adapter is damaged.	If necessary, re-install the vaporizer or have it repaired by trained service personnel.
The vaporizer detection system on anesthetic delivery system displays anesthetic agent which is	A different anesthetic agent has just been used and high concentrations of it are still present in the breathing system.	Flush the breathing system or wait for gas to change.
different from the vaporizer.	The monitor settings have not been changed after anesthetic agent has been changed.	Change monitor settings.
The control dial cannot be set to concentration.	Interlock jams or another vaporizer is still switched on.	Switch off other vaporizer. For interlock fault, have it repaired by trained service personnel.
	The "0" button is not pressed. The control dial is jammed.	Press the "0" button. Repair by trained service personnel.
The concentration can be adjusted without pressing the "0" button.	The "0" button is defective.	Repair by trained service personnel.
Anesthetic agent vapor has leaked during use.	The plug-in adapter is not fitted flush.	Check the anesthesia machine plug-in connector sealing rings and sealing surfaces. Check that the locking lever is not buckled.
	The filler cap is not tightened or the sealing ring is defective.	Tighten the filler cap. Repair by trained service personnel if the sealing ring is defective.
	Drainage screw is not closed.	Tighten the drainage screw.
Filling level cannot be read in the sight glass or	The vaporizer is completely empty.	Refill the vaporizer.
incorrect filling level is shown in the sight glass.	The vaporizer is overfilled.	Drain the vaporizer to the maximum mark and check the concentration.
	Sight glass display is faulty.	Repair by trained service personnel.

Fault	Cause	Remedy
Anesthetic agent leaks from	The drainage knob is not	Close the drainage knob.
the drainage outlet.	closed.	
Anesthetic agent leaks from	Seal on the filling system is	Repair by trained service
the filling system.	damaged.	personnel.
Anesthetic agent leaks from	The vaporizer is filled above	Drain the vaporizer to the
overflow.	the maximum mark.	maximum mark and check the
		concentration.
Anesthetic agent does not flow	The filler cap is not opened or	Open the filler cap or repair by
out when drained.	the drainage outlet is blocked.	trained service personnel.
Anethetic agent does not flow	The inner tube is blocked by	Close the filler control.
into anesthetic vaporizer by	liquid	Unplug the keyed end of
Key Filler adapter		filling adapter from the
		opening of the filling system.
		And then let the liquid in the
		inner tube draining into the
		bottle.

# 9.2 Filling and Draining Related Faults and Remedies

### 9.3 Plug-in Adapter Related Faults and Remedies

Fault	Cause	Remedy
The vaporizer cannot be	The interlock device is still	Disengage the interlock
disconnected.	engaged.	device.
The plug-in adapter is not	Engagement mechanism on	Excessive force used may lead
fitted flush on anesthesia	the plug-in adapter or plug-in	to jamming when
machine plug-in connector	connector is damaged.	disconnecting the vaporizer.
seals.		Contact us immediately.
	There is foreign body between	Remove foreign body.
	the plug-in connector and	
	plug-in adapter.	

#### FOR YOUR NOTES

## 10.1 Storage

Storage for longer than 6 months:

- 1. Drain and blow off the vaporizer (See 4.3 Draining the Vaporizer and 4.4 Blowing off the Vaporizer).
- 2. Turn the control dial to "0". The vaporizer handle for locking lever and interlock device are in their original positions.
- 3. If packing is necessary, see *10.2 Transport*.
- 4. Observe storage temperature. See *A Product Specifications*. If storage temperature range is exceeded, internal damage may occur which could cause incorrect output concentration. Before putting into operation again, carry out all-round inspection first.

#### NOTE

- When the anesthetic vaporizer is not in use for a long period of time, use the plug to block the gas inlet and outlet.
- If the anesthetic vaporizer is stored in high temperature and then used, the concentration of the delivered anesthetic agent may be high. To enable pressure equalization, always turn the control dial to 1% after connecting the anesthetic workstation, and wait for at least 15 seconds.

# 10.2 Transport

- 1. Turn the control dial to "0"
- 2. Disconnect the vaporizer from the anesthetic delivery system.
- 3. Drain the vaporizer completely. Then clean and disinfect the vaporizer.
- 4. Each vaporizer must be packed separately with care. Use original packing when possible.

If original packing is not available, use strong packing with at least 5 cm of impact-resistant material around each vaporizer. Fasten packing securely.

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• Do not transport the vaporizer with anesthetic agent filled, or it may cause incorrect output concentration.

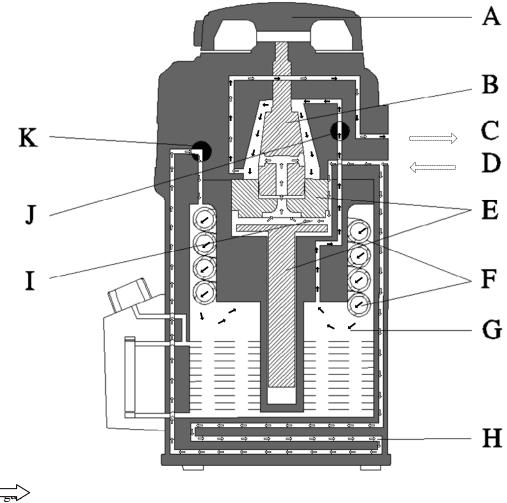
#### NOTE

• Liquid anesthetic agents and filled vaporizers are subject to Hazardous Goods Regulations. These regulations do not apply to the residues of anesthetic agents left in the wick after draining.

# **11.1 Operating Principle**

The following image illustrates the operating principle of the vaporizer.

Control dial position above 0--Vaporizer switched on:



F۲

Fresh gas mixed with anesthetic gas

The fresh gas is routed through valves J and K, which are linked to the control dial A, and through the vaporizing chamber G.

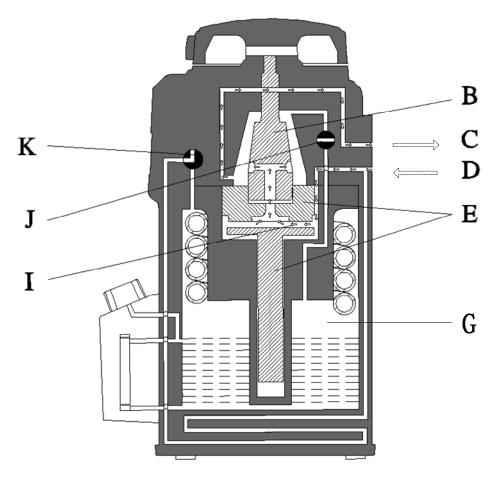
Fresh gas enters by the inlet D. Some of the fresh gas is routed through the vaporizing chamber G, and charged with anesthetic agent in soaked wick F. The rest of the fresh gas is routed past the airway I and through the temperature compensator E.

The two flows are mixed in the space behind the two flow controls (cone valve B), and routed to the outlet C.

The output concentration control of anesthetic agent vapor is important.

- 1. The concentration is influenced by the temperature compensator E, which makes use of the thermal expansion characteristics of different materials to expand or contract, based on heating or cooling, the airway I. This process compensates for the influence of temperature on the satuation concentration.
- 2. The pressure compensating system H effectively reduces the pumping effect.

Control dial position at 0-Vaporizer switched off



Fresh gas flows from the inlet D to the airway I, and then passes the temperature compensator E and the cone valve B, finally flows out from the outlet C.

The vaporizing chamber G is completely shut off from the gas flow by valves J and K. No anesthetic-agent can escape from the vaporizing chamber G.

# 11.2 Calibration

Every vaporizer is individually set at  $22^{\circ}$ C and at a continuous air flow of 2 L/min without ventilation pressure, and tested at  $22^{\circ}$ C as well as 2 L/min.

Calibration is in % partial pressure as the depth of anesthesia depends on the patient's uptake which is itself determined by partial pressure. Concentration delivered in % partial pressure at normal pressure of 101.3 kPa is identical numerically with the output given in volume percent, so the scale values on the control dial of the vaporizer given in vol.%, shows the concentration delivered at  $22^{\circ}$ C with dry gases (see *A Product Specifications*).

The output in vol.% must be corrected for other atmospheric pressure values (see *11.6 Influence of Atmospheric Pressure*) but partial pressure always remains constant.

For simplicity, settings on the vaporizer and in the Operator's Manual are given in the abbreviated form of vol.%, which means vol.% at 101.3 kPa.

# 11.3 Influence of Temperature

The saturation concentration of the anesthetic agent rises as temperature rises. The concentration deviation is automatically compensated by routing a higher proportion of the gas flow through the vaporizer bypass system.

The linear change of the bypass valve changes the flow through the bypass in a non linear manner .For the full temperature range, the non linear manner does not match perfectly the non linear variation of the partial pressure, so that the vaporizer cannot fully compensate the concentration deviation resulting from changes in temperature and the concentration delivered remains slightly dependent on temperature.

# 

• Under no circumstances should the vaporizer ever be used at atmospheric pressure and temperature at which the anesthetic agent could start to boil, as the concentration delivered will rise and be uncontrolled.

As altitude increases, the boiling point falls.

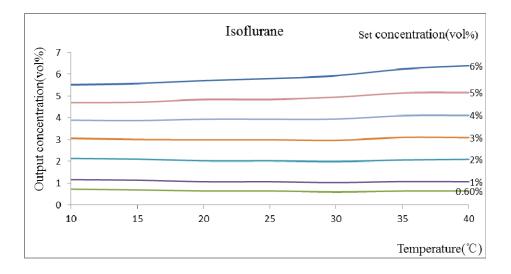
Atmospheric	101.3 kPa	90 kPa	80 kPa	70 kPa
pressure/altitude	0 m	1000 m(≈3280	2000 m( $\approx 6560$	3000 m(≈9840 ft)
		ft)	ft)	
Isoflurane	48.5℃	45.4℃	*42.2°C	*38.9℃
Sevoflurane	58.6℃	53.4°C	52.1℃	48.7℃
Enflurane	56.5℃	53.4°C	50.3℃	46.8℃
Halothane	50.2°C	46.8℃	*43.4°C	*39.8℃

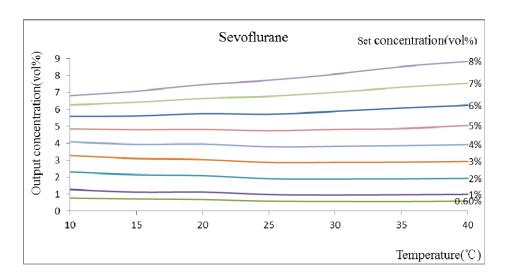
\* Note: Isoflurane and halothane cannot be used under these conditions.

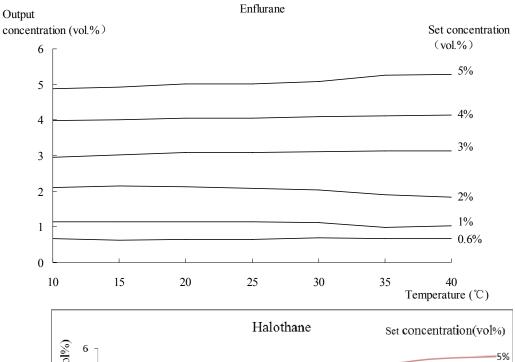
Differences in temperature between the vaporizer and the atmosphere within the temperature range are compensated automatically so that the output concentrations are within the specified concentration accuracy. If the temperature of the vaporizer before use is outside 10 to  $40^{\circ}$ C, a time of 15 min/°C has to be allowed for temperature adjustment so that the concentration remains within the accuracy specified.

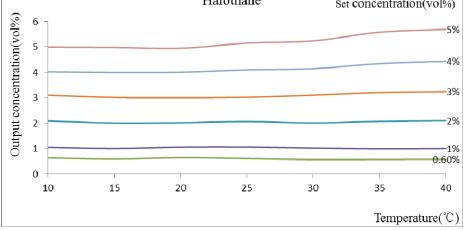
When the vaporizer is being operated with a high gas flow or a high concentration, the anesthetic agent inside will cool down gradually which results in drop in the output concentration (see *11.8 Influence of Running Time*).

The diagrams show typical temperature dependence when operating with a 2 L/min flow of Air. If temperature is not within this range, the deviations are shown as following figures, despite continuing compensation:







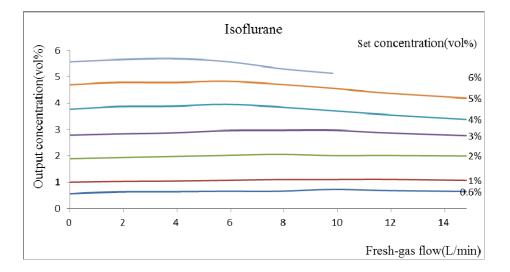


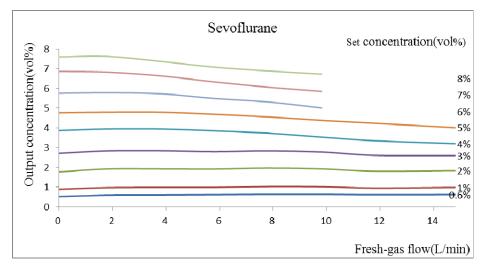
### 11.4 Influence of Flow

Within the specified flow range, the concentration delivered by the vaporizer is only slightly dependent on the fresh gas flow.

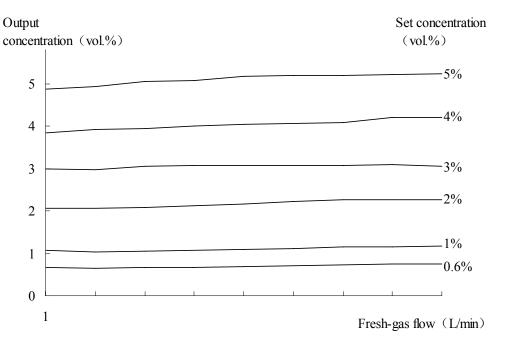
In case of high fresh gas flow or high concentration, full compensation is not made for the cooling of the anesthetic agent because total saturation of the gas flowing through the liquid vaporizing system does not occur and the output concentration is reduced slightly (see *11.8 Influence of Running Time*).

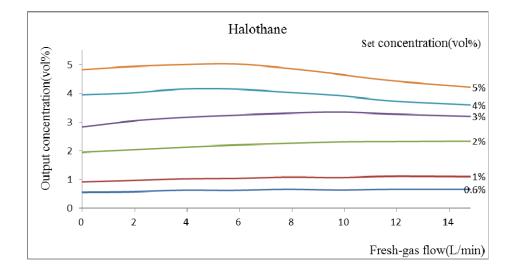
The diagrams show the influence of flow on the concentration delivered after 1 minute at  $22^{\circ}$ C, 101.3 kPa when operating with Air.





Enflurane





#### **11.5 Influence of Gas Composition**

The concentration delivered by the vaporizer is dependent on the composition of the fresh gas since the viscosity and density of the gas changes from one gas to another. The vaporizer is calibrated with Air because the concentration delivered is then exactly in the middle of the range for the anesthetic gas mixtures available.

When 100%  $O_2$  is used, the output concentration compared with Air rises by 10% of the set value and by not more than 0.5vol.%.

When a mixture of 30% O<sub>2</sub> and 70% N<sub>2</sub>O is used, the concentration falls by 10% of the set value at most, and by not more than 0.5vol.%.

The effect of gas composition is different for different anesthetic agents and, for this reason, maximum effects are given here.

When changing from one gas mixture to another, an additional dynamic effect can occur which may result in a further deviation in concentration until any earlier fresh gas is flushed out of the vaporizer.

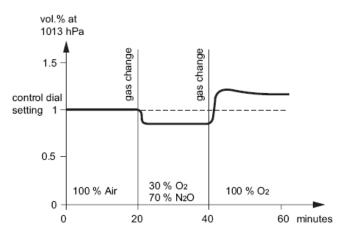
These deviations and their duration will all be greater under the following circumstances:

- 1. The lower the volume of anesthetic agent in the vaporizer;
- 2. The higher the concentration set;
- 3. The lower the gas flow;
- 4. The more extreme the change of gas type.

The extent of this dynamic deviation increases as gas flow increases, though the duration of the deviation will decrease.

The following diagram shows the influence of gas composition on output concentration when carrier gas is set to 1 vol.%.

If the humidity of gas is higher than that specified in appendix A "Product Specifications", the output concentration will be affected slightly.



# **11.6 Influence of Atmospheric Pressure**

The anesthetic agent partial pressure delivered by the vaporizer is all but independent of atmospheric pressure, so that weather-based fluctuations do not need to be taken into account and altitude-based pressure changes in the range 70 to 106 kPa will only lead to small deviations within the accuracy specified. For this reason, the physiological effect within the specified anesthetic agent concentration of the vaporizer is independent of atmospheric pressure.

When measuring the output concentration of the vaporizer in partial pressure, there is no influence of ambient pressure. When measuring in volume percent, the measured values do, however, change with atmospheric pressure and the measured values rise, when atmospheric pressure falls below 101.3 kPa.

The following formula for conversion applies:

Concentration (% partial pressure) =

Measured value (vol.%) x atmospheric pressure (kPa) 101.3 kPa

# 

• Under no circumstances should the vaporizer ever be used at atmospheric pressure and temperature at which the anesthetic agent could start to boil, as the concentration delivered will rise and be uncontrolled.

# 11.7 Influence of Fluctuations in Pressure

During ventilation, pressure fluctuations on the anesthetic vaporizer can cause a higher concentration to be delivered than is shown on the control dial setting.

The vapor in the vaporizing chamber is compressed when pressure rises, and it expands when pressure falls. If this effect is strong enough, small quantities of saturated vapor will be pumped backwards through the inlet of the vaporizing chamber into the fresh gas. This is described as the pumping effect. The higher the ventilation pressure and ventilation frequency, the more rapid the fall in pressure during expiration. The lower the fresh gas flow, the smaller the quantity of anesthetic agent in the vaporizer, the more obvious the pumping effect. The compensation system of the vaporizer will reduce these effects.

### **11.8 Influence of Running Time**

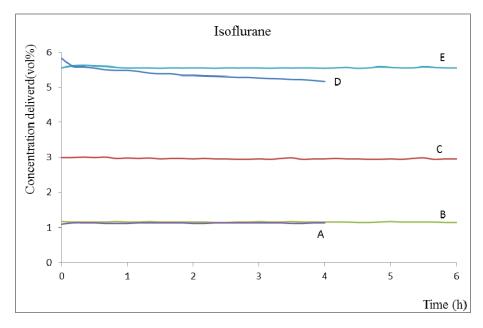
Evaporation of the anesthetic agent during operation cools the vaporizer slowly. The saturation concentration of the anesthetic agent in the vaporizer decreases more rapidly the longer the duration of operation, the higher the concentration set and the higher the fresh gas flow selected, i.e. when more anesthetic agent evaporates with time.

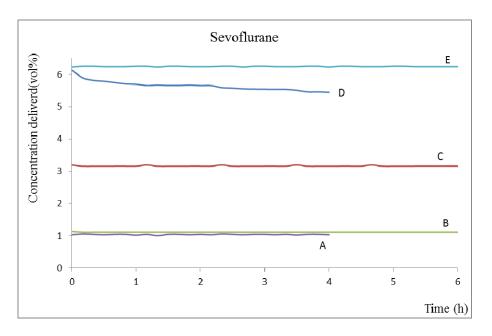
Temperature compensation counters this effectively and limits deviations in the concentration delivered. After a certain period of operation, the vaporizer stabilizes at a slightly lower temperature and an output concentration which is a slight deviation from the set value.

The accuracy given in *A Product Specifications* applies as long as the temperature of the vaporizer does not fall outside the operating range.

The diagrams show typical concentration curves over 4 hours and 6 hours of running time respectively, measured at  $22^{\circ}$ C and 101.3 kPa.

- A. Fresh gas flow of 4 L/min, concentration set of 1%, running time of 4 hours.
- B. Fresh gas flow of 10 L/min, concentration set of 1%, running time of 6 hours.
- C. Fresh gas flow of 4 L/min, concentration set of 3%, running time of 6 hours.
- D. Fresh gas flow of 4 L/min, concentration set of 6%, running time of 4 hours;
- E. Fresh gas flow of 1 L/min, concentration set of 6%, running time of 6 hours.
- F. Fresh gas flow of 4 L/min, concentration set of 5%, running time of 4 hours.
- G. Fresh gas flow of 1 L/min, concentration set of 5%, running time of 6 hours.

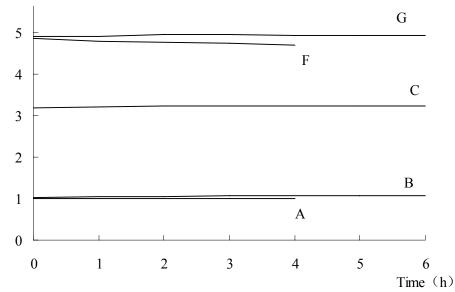


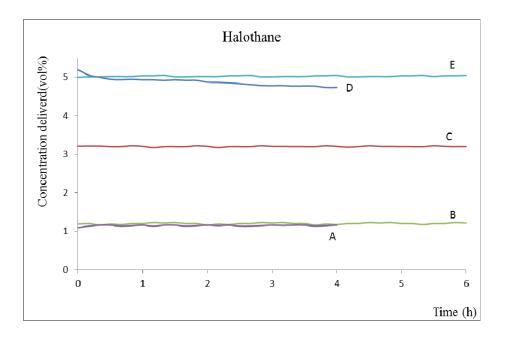


Enflurane



delivered (vol.%)





# A.1 Standards Compliance

The Anesthetic Vaporizer is in compliance with the following industry standards.

EN ISO 14971 /ISO 14971	Medical devices-Application of risk management to medical devices
EN 1041	Information supplied by the manufacturer with medical devices
EN	Medical devices-Symbols to be used with medical device labels, labeling
ISO15223-1/ISO15223-1	and information to be supplied
EN ISO 5360	A possibility vanarizars A sont specific filling systems
/ISO 5360	Anaesthetic vaporizers - Agent-specific filling systems
EN 62366/IEC62366	Medical devices - Application of usability engineering to medical devices
	COUNCIL DIRECTIVE 93/42/EEC of 14 June 1993 concerning medical
/	devices
EN 60601-1/IEC	Medical electrical equipment Part 1: General requirements for basic
60601-1	safety and essential performance
EN 60601-1-6.	Medical electrical equipment Part 1-6: General requirements for basic
EN 60601-1-6:	safety and essential performance - Collateral standard: Usability
EN 980	Symbols for use in the labelling of medical devices
150 20601 2 12	Medical electrical equipmentPart 2-13:Particular requirements for basic
ISO 80601-2-13	safety and essential performance of an anaesthetic workstation

# A.2 Physical Specifications

Weight	$6 \pm 0.5$ kg (empty)
Dimensions	Height: 235 mm±10mm
	Width: 235 mm±10mm
	Depth: 200 ±10 mm
Filling volume	360 ml (dry wick)
	300 ml (moist wick)
	260 ml (between the minimum and maximum marks)

# A.3 Operating Range

Temperature		
During operation	10 to 40°C	
During storage (empty)	-20 to 60 °C	
During transport (empty)	-20 to 60°C	
Humidity		
During operation	15 to 95%, non-condensing	
During storage	10 to 95%, non-condensing	
Atmospheric pressure		
During operation and shut-down (filled, control dial at "0" position)	70 to 106 kPa	
During storage (empty)	50 to 120 kPa	
Concentration range		
Isoflurane	0 to 6%	
Sevoflurane	0 to 8%	
Enflurane	0 to 5%	
Halothane	0 to 5%	

# A.4 Performance Specifications

Range of concentration accuracy (maximum value always applies)			
Operating environment	15 to 35°C or 0.2 to 10 L/min		10 to 15°C or 35 to 40°C or 10 to 15 L/min
Set concentration $\leq 6\%$	±0.20 vol.% or ±20% rel., whichever is greater		+0.30/-0.20 vol.% or +25/-20% rel., whichever is greater
Set concentration > 6%	±0.25 vol.% or ±20% rel., whichever is greater		+0.35/-0.25 vol.% or +30/-20% rel., whichever is greater
Maximum angle of tilt			
Alone, freestanding		10°	
During operation (fixed position)		30°	
Pressure difference			
Difference between pressure range and ambient pressure on the vaporizer outlet		vient pressure on the	-10 to 10 kPa

# A.5 Product Configurations

Filling system			
	Key Filler	Quik-Fil	Pour Fill
Isoflurane vaporizer	Yes	No	Yes
Sevoflurane vaporizer	Yes	Yes	Yes
Enflurane vaporizer	Yes	No	Yes
Halothane vaporizer	Yes	No	Yes

# A.6 Flow Range

Flow Range
0.2 to 15 L/min
0.2 to 10 L/min for concentrations > 5 Vol.%

#### FOR YOUR NOTES

The anesthetic vaporizer should work with the following accessories.

Description	PN
Filling adapter	
Key Filler filling adapter for enflurane vaporizer	040-000064-00
Key Filler filling adapter for isoflurane vaporizer	040-000065-00
Key Filler filling adapter for sevoflurane vaporizer	040-000066-00
Key Filler filling adapter for halothane vaporizer	040-000063-00
Draining adapter	
Quik-Fil drainage funnel for sevoflurane vaporizer	040-000067-00

#### FOR YOUR NOTES

### C.1 Symbols

Symbol	Description
-	minus
%	percent
/	per; divide; or
$\approx$	about
~	to
^	power
+	plus
=	equal to
<	less than
>	greater than
≤	less than or equal to
≥	greater than or equal to
±	plus or minus
×	multiply
C	copyright

# C.2 Terminology

Terminology	Description
Air	Medical compressed air
N <sub>2</sub> O	Medical nitrous oxide
O <sub>2</sub>	Medical oxygen
ТМ	Trademark
®	Registered trademark
Vol.%	Percentage by volume of anesthetic agent in fresh gas at outlet. Unit of output concentration.
%	Percentage
%rel	Relative deviation from value in %
°C	Degree Celsius, unit of temperature

[	
0	Degree, unit of plane angle
Kg	Kilogram, unit of mass
kPa	Kilopascal, unit of pressure
hPa	Hundred Pascal, unit of pressure
Ра	Pascal, unit of pressure
pН	Hydrogen ion concentration
Ml	Milliliter, unit of volume
L/min	Liter per minute, unite of flow
Min	Minute, unit of time
Н	Hour, unit of time
М	Meter, unit of length
Mm	Millimeter, unit of length
EN	European Norm
ISO	International Organization for Standardization
Iso	Isoflurane
Sev	Sevflurane
Enf	Enflurane
Hal	Halothane
Pour Fill	While filling, fill anesthetic agent into the filler directly. While draining, open the draining valve by specific key to drain the anesthetic agent into the anesthetic agent bottle.
Key Filler	Adopt filling adapter and bottle neck collar to connect to the anesthetic agent bottle, to operate filling and draining anesthetic agent.
Quik-Fil	While filling, adopt filling adapter to connect the anesthetic agent bottle and filler together. While draining, turn on draining valve by specific key, and adopt draining adapter and drainage funnel to connect the anesthetic agent bottle and the anesthetic vaporizer to drain anesthetic agent.

P/N: 046-001002-00 (8.0)



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# Anesthesia accessory

CATALOGUE

2022.06

#### Finding the Right Part

This catalog has been designed to make finding the right part easy. Chapters are organized by specific accessory categories. Simply locate the type of part you are looking for under the appropriate category.

#### Note:

This catalog is not an Operating Instructions Manual. This catalog will assist you in identifying the correct parts and accessories to connect to your Mindray Anesthesia machine, please refer to the Operating Instructions Manual. Warnings, Precautions and Notes can also be found in the Operating Instructions.





05

06

CONTENTS	
	thesia mask, bag, hing circuit
)2 Vaporizer	
Module & Sensor	
SSS, Suction unit, Gas s	20 Supply
g solution	
es	
	53

Picture	Part No.	Description	Apply to
	040-001817-00	Aircushion mask, disposable, size #0	All
	040-001818-00	Aircushion mask, disposable, size #1	All
	040-001819-00	Aircushion mask, disposable, size #2	All
	040-001820-00	Aircushion mask, disposable, size #3	All

#### Anesthesia Mask



#### Disposable Anesthesia Mask

- Single patient use to avoid cross-infection
- Ergonomic design for convenient one-hand operation
- Adjustable air cushion design for optimal comfort and tightness
- Transparent design for optimal visibility
- Materials in accordance with ISO-10993:10993 biological compatibility requirements
- Complete range of models with color-coded hook for easier identification













Picture	Part No.
	040-001821-00

Description Aircushion mask, disposable, size #4 Apply to All

Picture	Part No.	Description	Apply to
	040-001835-00	Silicon face mask, reusable, size #0	All
	040-001836-00	Silicon face mask, reusable, size #1	All
Ö	040-001837-00	Silicon face mask, reusable, size #2	All
	040-001841-00	Silicon face mask, reusable, size #3	All



040-001822-00

Aircushion mask, disposable, size #5

All



#### Reusable Anesthesia Mask

- Ergonomic design for convenient one-hand operation
- Transparent design for optimal visibility
- Materials in accordance with ISO-10993:10993 biological compatibility requirements
- Full range of models for different clinical applications









Picture	Part No.	Description	Apply to
	040-001842-00	Silicon face mask, reusable, size #4	All

8	Mark Lange L.	10	
	8		

040-001843-00 Si

Silicon face mask, reusable, size #5

All

#### **Breathing Bag**

#### Disposable breathing bag

- Single patient use to avoid cross-infection
- Standard 22F connector compatible with all conventional devices
- Latex free materials to prevent latex allergy
- Full range of models for different clinical applications



Part No.	Description
040-001827-00	Latex-free breathing bag, disposable, 0.5L
040-001828-00	Latex-free breathing bag, disposable, 1L
040-001829-00	Latex-free breathing bag, disposable, 2L
040-001830-00	Latex-free breathing bag, disposable, 3L

Reusable breathing bag

- Use of innocuous medical grade materials

- Standard 22F connector compatible with all conventional devices

- Full range of models for different clinical applications

Part No.	Description
040-001856-00	Silicon breathing bag, reusable, 0.5L
040-001857-00	Silicon breathing bag, reusable, 1L
040-001858-00	Silicon breathing bag, reusable, 2L
040-001859-00	Silicon breathing bag, reusable, 3L

Apply to
All
All
All
All



Apply to
All
All
All
All

	Part No.	Descript
	040-001876-00	Disposa Includir
		- Adult c
		- Elbow
- Constanting		- Straigh

#### Anesthesia Breathing Circuit



#### Disposable breathing circuit

- Single patient use to avoid cross-infection
- Use of innocuous medical grade materials
- Good compliance and low flow resistance
- Transparent design for optimal visibility
- Light weight to easy operation
- Standardized and air-tight connectors for innovative assembly
- Elbow connector with air sampling and monitoring



Picture

- Child c
  - Elbow - Straigh
  - Bacteri
- Extensi
- Latex-f

#### 040-001831-00

Bacteria Bacterial Viral rem Pressure Dead spa Connectors: 22F/15M-22M/15F

8



Description	Apply to
Disposable breathing circuit package, Adult, Including:	All
- Adult circuit with Y-piece, 1.5 m, diameter 22mm, 22F, 1pcs	
- Elbow connector with Luer lock port, 1pcs	
- Straight connector, 22M-22M, 1pcs	
- Bacteria filter, 1pcs	
- Extension tube, 0.5 m, 22F, 1pcs	
- Latex-free breathing bag, 3L, 1pcs	
Disposable breathing circuit package, Child, Including:	All
- Child circuit with Y-piece, 1.5m, diameter 15 mm, 22F, 1pcs	
- Elbow connector with Luer lock port, 1pcs	
- Straight connector, 22M-22M, 1pcsz	
- Bacteria filter, 1pcs	
- Extension tube, 0.5m, diameter 15 mm, 22F, 1pcs	
- Latex-free breathing bag, 1L, 1pcs	
Bacteria Filter, disposable, 1 pcs	All
Bacterial removal: >99.9995%	
Viral removal: >99.995%	
Pressure Drop: <0.15kPa @ 30 L/min	
Dead space: 25.5 ml	

Part No.	Description	Apply to
115-030717-00	<b>Disposable breathing circuit accessory kit with mask, Adult, including:</b> - 040-001876-00 Disposable breathing circuit package, Adult (circuit with Y-piece 1.5m, Extension tube 0.5m, Elbow connector, Straight connector, Bacteria filter, Breathing bag 3L), 1 pcs - 040-001822-00 Aircushion mask, disposable, size #5, 1 pcs	All
115-030718-00	Disposable breathing circuit accessory kit with mask, Child, including: - 040-001878-00 Disposable breathing circuit package, Child, (circuit with Y-piece 1.5m, Extension tube 0.5m, Elbow connector, Straight connector, Bacteria filter, Breathing bag 1L), 1 pcs - 040-001819-00 Aircushion mask, disposable, size #2, 1 pcs	All

#### **HFNC Circuit**

Picture	Part No.	Description
	040-006057-00	Single tube f



#### **Open Circuit**

Picture	Part No.	Description	Apply to
	040-001704-00	Mapleson C circuit, Adult open circuit, including: - Breathing tube, 1.8m, 1 pcs - Connector, 22/15M, 1 pcs - Latex-free breathing bag, 2L, 1 pcs - APL valve, 1 pcs	All



00	Nasal ca



#### 040-001703-00

T-piece system circuit, Child open circuit, including:

All

- Breathing tube, 1.8m, 1 pcs - Connector, 22/15M, 1 pcs
- Latex-free breathing bag, 0.5L, 1 pcs
- APL valve, 1 pcs

10

on	Apply to
e for HFNC, disposable, ID 22 mm, length 1.8 m	A9/ A8/
	WATO EX-65 Pro

Tubing kit for HFNC, disposable, with heated wire, ID 22 mm, length 1m, 1.5m

Nasal cannula for HFNC (OPT842-small size)

cannula for HFNC (OPT844-medium size)

Nasal cannula for HFNC (OPT846-large size)

A9/ A8/ WATO EX-65 Pro

A9/ A8/

WATO EX-65 Pro

#### Reusable breathing circuit

- Use of innocuous medical grade materials
- Good compliance and low flow resistance
- Transparent design for optimal visibility
- Standardized and air-tight connectors for innovative assembly
- Y-piece with port for temperature and pressure monitoring



Picture	Part No.	Description	Apply to
Jac Barrow	115-031780-00	Reusable breathing circuit accessory kit, Adult, including: - 040-001850-00 Breathing tube, silicon, adult, 1.5m, 2 pcs - 040-001859-00 Silicon breathing bag, 3L, 1 pcs - 040-001843-00 Silicon face mask, size #5, adult large, 1 pcs - 040-001866-00 connector, Y-piece, with sample port, 1pcs - 040-001868-00 connector, L type (Elbow), 22M/15F, 22F, 1	5
	115-031781-00	Reusable breathing circuit accessory kit, Child, including:	All



including:

- 040-001851-00 Breathing tube, silicon, child/infant, 1.5m, 2 pcs

- 040-001857-00 Silicon breathing bag, reusable, 1L, 1 pcs

- 040-001837-00 Silicon face mask, size #2, child, 1 pcs

- 040-001866-00 connector, Y-piece, with sample port, 1pcs

- 040-001868-00 connector, L type (Elbow), 22M/15F,22F, 1pcs



040-001850-00

Breathing tube, silicon, reusable, Adult, 1.5m

All





040-001854-00 Breathin

040-001866-00 connect





040-001868-00

ption	Apply to
ng tube, silicon, reusable, Child/infant, 1.5m	All
ng tube, silicon, reusable, Adult, 0.45m	All
tor, Y-piece, reusable, with sample port	All

connector, L type (Elbow), reusable, 22M/15F,22F	All
--------------------------------------------------	-----

### Mindray V60 Vaporizer



# Vaporizer



- Large capacity

- Highly compatible supporting different anesthetic agents
- Automatic flow, temperature, pressure compensation
- Maintenance-free design



115-005345-00



115-005349-00





115-005346-00



Mindray V60 vaporizer, Isoflurane, Pour fill

Mindray V60 vaporizer, Isoflurane, Key filler, with Key filler adapter

Mindray V60 vaporizer, Sevoflurane, Pour fill

Mindray V60 vaporizer, Sevoflurane, Key filler, with Key filler adapter

Apply to All except A9

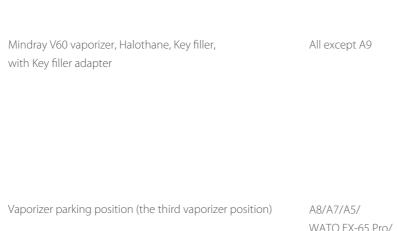
All except A9

All except A9

All except A9

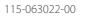
### Mindray V90 Vaporizer

Description	Apply to	Picture	Part No.
Mindray V60 vaporizer, Sevoflurane, Quik-Fil	All except A9	• INHING ON	115-063020-00
Mindray V60 vaporizer, Halothane, Pour fill	All except A9	e minutray	115-063018-00
Mindray V60 vaporizer, Halothane, Key filler, with Key filler adapter	All except A9	• relationsy	115-063017-00





	-	4.	
		mindray	



# Mindray V with adap



Indray V60

Part No.

115-005350-00

115-014139-00

115-017631-00

Picture





16

Description	Apply to
Mindray V90 vaporizer, Isoflurane, Safety Filling, with adapter	A9

Mindray V90 vaporizer, Sevoflurane, Safety Filling,	A9
with adapter	

Mindray V90 va	porizer, Sevoflurane	, Quik-Fil	Α9

Mindray V90 vaporizer, Desflurane, Safe-T-Fil A9

17

### Adapter for Vaporizer

Picture	Part No.	Description	Apply to	Picture	Part No.
	040-000065-00	Key filler Adapter for filling the vaporizer, Isoflurane	V60		040-000063-00
	040-000066-00	Key filler Adapter for filling the vaporizer, Sevoflurane	V60	L	115-064147-00



(III)

115-026747-00	Quik-Fil Adapter for filling the vaporizer, Sevoflurane	V60, V90



Quik-Fil Drain Funnel adapter for draining the vaporizer, V60 Sevoflurane



115-064146-00



115-082300-00 Filli

Description	Apply to
Key filler adapter for filling the vaporizer, Halothane	V60

Safety filling adapter for filling the Mindray V90 vaporizer, V90 Isoflurane

Safety filling adapter for filling the Mindray V90 vaporizer, V90 Sevoflurane

Filling converter for Sevoflurane

V60, V90

### Flow sensor



ÌÌ	



Description	Apply to
Inspiration flow sensor, 1 pcs Expiration flow sensor, 1 pcs	WATO EX-65 Pro/ EX-55 Pro/
Flow sensor kit, including: - Inspiration flow sensor, 1 pcs 0601-30-69700	EX-65/EX-55/ EX-35/EX-30/
- Expiration flow sensor, 1 pcs 0601-30-78894	EX-20

Inspiration Flow sensor, 1 pcs Expiration Flow sensor, 1 pcs Flow sensor kit, including: - Inspiration Flow sensor, 1 pcs 115-008262-00 - Expiration Flow sensor, 1 pcs 115-008263-00

All



Picture	Part No.	Descrip
Hand Hard	115-009958-00	<b>Oxyge</b> Oxyger Oxyger



115-034487-00



115-041519-00

Flow sensor kit, autoclavable, including: - Inspiration flow sensor, 1 pcs 115-041507-00 - Expiration flow sensor, 1 pcs 115-041508-00

A7/A5



115-065993-00



115-016612-00

20

### iption

### en monitoring kit, including: en sensor Medicel MOX-2 and

en sensor mounting kit

### Apply to

A7/A5/ WATO EX-65 Pro/ EX-55 Pro/EX-65/ EX-55/EX-35 with Pre-Pak circuit

### Oxygen monitoring kit, including:

Oxygen sensor OOM102-1 and Oxygen sensor cable

# Oxygen monitoring kit, including:

Base for Oxygen sensor and Oxygen sensor MOX-2

### Oxygen sensor position choke plug kit, including:

- 043-003033-00 Oxygen sensor position cap, 1 pcs - 115-016612-00 Oxygen snesor position choke plug, 1 pcs WATO EX-35 without Pre-Pak circuit WATO EX-30/EX-20

A9/A8

A7/A5

### O, monitoring accessory

Part No.

0611-10-45654



	040-000898-00
Evenes and	





115-064181-00 Base for Oxygen sensor

Description

Oxygen sensor, Medicel MOX-2, 1 pcs

Oxygen sensor, OOM102-1, 1pcs

Oxygen sensor cable

A9/A8

A7/A5/ WATO

EX-65 Pro/

EX-55 Pro/

EX-35

EX-65/EX-55/

Apply to

EX-55 Pro

WATO EX-35

without pre-pak circuit

WATO EX-30/EX-20

A9/A8/A7/A5/ WATO EX-65 Pro/

WATO EX-65/EX-55 WATO EX-35 with pre-pak circuit

# CO<sub>2</sub> module and accessory



### Sidestream CO, module and accessory

- Sampling lines are disposable

- Water trap can be reused (Should be replaced every month)
- Latex free
- Good biocompatibility

Part No.	Descriptio
115-030418-00 120-013811-00	Sidestrear Sidestrear
	115-030418-00



### 115-024752-00

- including:

### ion

am CO<sub>2</sub> module, without accessory am CO<sub>2</sub> module, without accessory

### Apply to

### A7, A5

WATO EX-65 Pro/ EX-55 Pro/ EX-65/ EX-55/ EX-35

# Sidestream CO, accessory kit, Adult/Pediatric,

- Dryline airway adapter, straight, Adu/Ped, 2 pcs - DRYLINE II Water Trap, Adu/Ped, 2 pcs - Sampling line, Adu/Ped, 2.5 m, 2pcs - Quick connector for gas return, 1 pcs

A7/A5/ WATO EX-65 Pro/ EX-55 Pro/ EX-65/ EX-55/ EX-35

Picture	Part No.
	115-024753-00

Description	Apply to
Sidestream CO <sub>2</sub> accessory kit, Neonate, including: - Airway adapter, Neonate, 2 pcs - DRYLINE II Water Trap, Neonate, 2 pcs - Sampling Line, Neonate, 2.5 m, 2 pcs - Quick connector for gas return, 1 pcs	A7/A5/ WATO EX-65 Pro/ EX-55 Pro/ EX-65/ EX-55/ FX-35

115-024797-00	Sidestream CO <sub>2</sub> module kit, with accessory, Adult/Ped, including: - CO <sub>2</sub> module, 1-slot, 1 pcs - CO <sub>2</sub> accessory kit, Adult/Pediatric	A7/A5
115-024798-00	Sidestream CO <sub>2</sub> module kit, with accessory, Neonate, including: - CO <sub>2</sub> module, 1-slot, 1 pcs - CO <sub>2</sub> accessory kit, Neonate	A7/A5
120-015033-00	Sidestream CO <sub>2</sub> module kit, with accessory, Adult/pediatric, including: - Sidestream CO <sub>2</sub> module - Sidestream CO <sub>2</sub> accessory kit, Adult/Pediatric	WATO EX-65 Pro/ EX-55 Pro/ EX-65/ EX-55/ EX-35
120-015034-00	Sidestream CO <sub>2</sub> module kit, with accessory, Neonate, including: - Sidestream CO <sub>2</sub> module - Sidestream CO <sub>2</sub> accessory kit, Neonate	WATO EX-65 Pro/ EX-55 Pro/ EX-65/ EX-55/ EX-35



Adult/pe - External - External

115-002594-00

- Dryline a
- Water tr
- Samplin - Quick co
- 115-002595-00

- including:

24

Description	Apply to
External sidestream CO <sub>2</sub> module, with accessory, Adult/pediatric, including: - External sidestream CO <sub>2</sub> module	WATO EX-30
- External sidestream CO <sub>2</sub> module	
External sidestream CO2 module, with accessory, Neonate, including: - External sidestream CO <sub>2</sub> module - External sidestream CO <sub>2</sub> accessory kit, Neonate	WATO EX-30
External sidestream CO <sub>2</sub> accessory kit, Adult/pediatric, including: - Dryline airway adapter, straight, Adu/Ped, 2 pcs - Water trap, Adu/Ped, 2 pcs - Sampling line, Adu/Ped, 2.5 m, 2pcs - Quick connector for gas return, 1 pcs	WATO EX-30

### External sidestream CO<sub>2</sub> accessory kit, Neonate,

- Airway adaptor, 2 pcs - Water trap, neonate, 2 pcs - Sampling Line, Neonate, 2.5 m, 2 pcs - Quick connector for gas return, 1 pcs WATO EX-30

### Mainstream CO, module and accessory

- Short response time
- Adapter are disposable
- Latex free
- Good biocompatibility

### For A7, A5, WATO EX-65 Pro, EX-55 Pro, EX-65, EX-55, EX-35

Picture	Part No.	Description
	115-030414-00	Mainstream CO <sub>2</sub> module, without accessory



### Mainstream CO, accessory kit, including:

- Capnostat CO<sub>2</sub> sensor, with cable 2.4 m, 1 pcs - Airway adapter, Adu/Ped, disposable, 1 pcs
- Airway adapter, Neonate, disposable, 1 pcs
- Cable Holding Clips, 5 pcs

### 115-030410-00

### Mainstream CO, module kit, with accessory, including:

- Mainstream CO, module, CAPNOSTAT
- Mainstream CO, accessory kit

### AG module and accessory

- Sampling lines are disposable
- Water trap can be reused (Should replaced every month)
- Latex free
- Good biocompatibility

### For A9, A8, A7, A5, WATO EX-65 Pro, EX-55 Pro, EX-65, EX-55, EX-35

Picture	Part No.	Descripti
	115-030368-00	AG+O <sub>2</sub> m
	115-030369-00	AG modu

### 115-030385-00

### 115-030379-00

- AG accessory kit

### 115-030380-00

### tion

module, 2-slot, without accessory

ule, 2-slot, without accessory

### AG accessory kit, including:

- Dryline airway adapter, straight, Adu/Ped, 2 pcs - Airway adapter, Neonate, 2 pcs - DRYLINE II Water Trap, Adu/Ped, 2 pcs - Sampling line, Adu/Ped, 2.5 m, 2 pcs - DRYLINE II Water Trap, Neonate, 2 pcs - Sampling Line, Neonate, 2.5 m, 2 pcs - Quick connector for gas return, 1 pcs

### AG+O, module kit, with accessory, including:

- AG+O, module , 2-slot

### AG module kit, with accessory, including:

- AG module , 2-slot - AG accessory kit

### BIS module and accessory

- Flexible design adjusts to different head sizes
- Connector provides secure click-in connection with push button release
- BIS sensor single patient use, avoiding cross-infection
- Latex-free
- Good biocompatibility, avoiding allergic reactions to patient

### For A9, A8, A7, A5, WATO EX-65 Pro, EX-65



Part No. Description 115-013194-00 BIS module, 1-slot, without accessory



BIS Measuring Cable Assembly, 4.5 m, 1 pcs

Picture	Part No.	Descri
	6800-30-50878	<b>BIS acc</b> - BIS M - BIS Se



6800-30-50144

6800-30-50880

6800-30-50427

- BIS module, 1-slot - BIS accessory kit , Pediatric

### ription

### accessory kit, Adult, including:

Measuring Cable Assembly, 4.5 m, 1 pcs Sensor Quatro 186-0106, Adu, disposable, 5 pcs

### BIS accessory kit, Pediatric, including:

- BIS Measuring Cable Assembly, 4.5 m, 1 pcs - BIS Sensor Quatro 186-0200, Pediatric, disposable, 5 pcs

### BIS module kit, with accessory, Adult, including:

- BIS module, 1-slot - BIS accessory kit, Adult

### BIS module kit, with accessory, Pediatric, including:

### BISx4 module and accessory

For A9, A8, A7, A5, WATO EX-65 Pro, EX-65

Picture	Part No.	Description
	115-005707-00	BISx4 Measuring Cable Assembly, 4.5 m, 1 pcs
	115-005614-00	BISx4 accessory kit, Adult, including: - BISx4 Measuring Cable Assembly, 4.5 m, 1 pcs - BISx4 Sensor Quatro 186-0212, Adult, disposable, 5 pcs

115-030406-00

00	BISx4 module kit, with accessory, Adult, including:
	- BIS module, 1-slot

- BISx4 accessory kit, Adult

### AG+BIS module and accessory

For A9, A8, A7, A5, WATO EX-65 Pro, EX-65

Picture	Part No.	Descrip
	115-030370-00	AG+O <sub>2</sub> +
	115-030371-00	AG+BIS

115-030381-00	AG+
	inclu
	- AG-
	- AG
115-030382-00	AG+

115-030383-00

115-030384-00

including:

- AG+BIS module , 2-slot - AG accessory kit

### including:

- AG+O<sub>2</sub>+BIS module , 2-slot - AG accessory kit

- BIS accessory kit, Adult

### including:

- AG+BIS module , 2-slot - AG accessory kit - BIS accessory kit, Adult

### ption

+BIS module, 2-slot, without accessory

module , 2-slot, without accessory

### AG+O<sub>2</sub>+BIS module kit, with AG accessory, without BIS accessory,

### uding:

5+0,+BIS module , 2-slot accessory kit

### AG+BIS module kit, with AG accessory, without BIS accessory,

### AG+O,+BIS module kit, with AG accessory, with BIS accessory,

### AG+BIS module kit, with AG accessory, with BIS accessory,

### NMT module and accessory

For A9, A8, A7, A5

Picture	Part No.	Description
	115-020916-00	NMT module, without accessory

# .....

115-018586-00

### NMT accessory kit, including:

- NMT main cable

- NMT transducer cable
- ECG electrode (3M, 2245), 50 pcs
- Bandage for NMT transducer, disposable, 20pcs

115-020917-00

NMT module kit, with accessory, including:
- NMT module, 1-slot

- NMT accessory kit

# Anesthetic gas scavenging system (AGSS)



### Active AGSS assembly and accessory

Picture	Part No.	Descriptio
	115-017376-00	AGSS Asse AGSS Asse

### tion

sembly, low-flow, high vacuum sembly, high-flow, low vacuum

### Apply to

A7/A5/ WATO EX-65 Pro/ EX-55 Pro EX-65/EX-55 EX-35/EX-30 EX-20

licture	Part No.	Description	Apply to	Part No.	Description
	115-006557-00	Waste gas transfer hose, from main unit to AGSS assembly (801-0631-00074-00)	A7/A5/ WATO EX-65 Pro/ EX-55 Pro EX-65/EX-55 EX-35/EX-30 EX-20	115-030332-00	AGSS kit, low flow, high vacuum, including: - AGSS Assembly, low-flow - Waste gas transfer hose, from main unit to AGSS a - AGSS low flow receiving hose, from AGSS assembl - AGSS Three-way connector, from ACGO to AGSS
	115-009097-00 115-009073-00	AGSS high flow receiving hose, from AGSS assembly to hospital's waste gas disposal system AGSS low flow receiving hose, from AGSS assembly to hospital's waste gas disposal system	All	115-030333-00	AGSS kit, high flow, low vacuum, including: - AGSS Assembly, high-flow - Waste gas transfer hose, from main unit to AGSS a - AGSS high flow receiving hose, from AGSS assemb - AGSS Three-way connector, from ACGO to AGSS
	082-001372-00	AGSS receiving hosing, (35G-WAGD-DS/FG2-3), from AGSS assembly to vacum system		115-011860-00	AGSS kit, low flow, high vacuum, including: - AGSS Assembly, low-flow - Waste gas transfer hose, from main unit to AGSS a - AGSS low flow receiving hose, from AGSS assemble - AGSS mounting kit

- AGSS kit, high flow, low vacuum, including:
  - AGSS Assembly, high-flow
  - Waste gas transfer hose, from main unit to AGSS assembly
  - AGSS high flow receiving hose, from AGSS assembly to hospital's waste gas disposal system
  - AGSS mounting kit

Active AGSS kit

115-011859-00

### SS assembly mbly to hospital's waste gas disposal system SS

5S assembly embly to hospital's waste gas disposal system SS

5S assembly mbly to hospital's waste gas disposal system

> WATO EX-30/ EX-20

S assembly embly to hospital's waste gas disposal system

### Apply to

A7/A5/ WATO EX-65 Pro/ EX-55 Pro EX-65/EX-55 EX-35/

A7/A5/ WATO EX-65 Pro/ EX-55 Pro EX-65/EX-55 EX-35/

WATO EX-30/ EX-20

### Passive AGSS accessory

Picture	Part No.	Description	Apply to
	115-002342-00	Passive AGSS accessory kit, including: - Tube, 32mm, 1 pcs - Adaptor, 1 pcs	All



AGSS Three-way connector, from ACGO to AGSS 115-042912-00

All

# Suction system



### Venturi suction system (External)

Part No.	Description
115-009509-00	Venturi suction kit, Air drive, NIST, including: - Suction main unit, venturi - Suction T connector, NIST - Suction liquid collection bottle bracket kit
115-011380-00	Venturi suction kit, Air drive, DISS, including: - Suction main unit, venturi - Suction T connector, DISS - Suction liquid collection bottle bracket kit

Apply to

WATO EX-30/ EX-20

WATO EX-30/ EX-20

Part No.	Description	Apply to
115-041470-00	Venturi suction kit, Air drive, NIST, including: - Suction main unit, venturi - Suction T connector, NIST - Suction liquid collection bottle bracket kit, for rail	WATO EX-35
115-041471-00	<b>Venturi suction kit, Air drive, DISS, including:</b> - Suction main unit, venturi - Suction T connector, DISS - Suction liquid collection bottle bracket kit, for rail	WATO EX-35
115-015266-00	<b>Venturi suction kit, Air drive, NIST, including:</b> - Suction main unit, venturi - Suction T connector, NIST - Suction liquid collection bottle bracket kit, long, for rail	A5
115-015267-00	Venturi suction kit, Air drive, DISS, including: - Suction main unit, venturi	A5

### Pipeline continuous vacuum suction system (External)



### Pipeline continuous vacuum suction kit, including:

- Suction main unit, vacuum

- Suction liquid collection bottle bracket kit
- Vacuum hose assembly

- Suction T connector, DISS

- Suction liquid collection bottle bracket kit, long, for rail

Part No.	Description	Apply to	Part No.	Description	Apply to
115-020734-00	Pipeline continuous vacuum suction kit, US, US/DISS	WATO EX-30/ EX-20	115-041474-00	Pipeline continuous vacuum suction kit, US, US/DISS	WATO EX-35
115-020735-00	Pipeline continuous vacuum suction kit, US, DISS/PB	WATO EX-30/ EX-20	115-041475-00	Pipeline continuous vacuum suction kit, US, DISS/PB	WATO EX-35
115-020736-00	Pipeline continuous vacuum suction kit, US, DISS/Ohmeda	WATO EX-30/ EX-20	115-041476-00	Pipeline continuous vacuum suction kit, US, DISS/Ohmeda	WATO EX-35
115-020737-00	Pipeline continuous vacuum suction kit, US, DISS/Chemetron	WATO EX-30/ EX-20	115-041477-00	Pipeline continuous vacuum suction kit, US, DISS/Chemetron	WATO EX-35
115-020738-00	Pipeline continuous vacuum suction kit, US, DISS/BS	WATO EX-30/ EX-20	115-041478-00	Pipeline continuous vacuum suction kit, US, DISS/BS	WATO EX-35
115-020739-00	Pipeline continuous vacuum suction kit, Australian, NIST/SIS	WATO EX-30/ EX-20	115-041479-00	Pipeline continuous vacuum suction kit, Australian, NIST/SIS	WATO EX-35
115-020740-00	Pipeline continuous vacuum suction kit, French, NIST/FS	WATO EX-30/ EX-20	115-041480-00	Pipeline continuous vacuum suction kit, French, NIST/FS	WATO EX-35
115-020741-00	Pipeline continuous vacuum suction kit, Germany, NIST/GS	WATO EX-30/ EX-20	115-041481-00	Pipeline continuous vacuum suction kit, Germany, NIST/GS	WATO EX-35
115-020742-00	Pipeline continuous vacuum suction kit, Britain, NIST/BS	WATO EX-30/ EX-20	115-041482-00	Pipeline continuous vacuum suction kit, Britain, NIST/BS	WATO EX-35

### Pipeline Vacuum Hose assembly

- Gas supply: Vacuum, Hose length: 5 m; Apply to all models

Part No.	Specification	Standard	Hose color	Gas outlet (machine)	Gas inlet (wall)	Picture	Part No.	Description	Apply to
082-001333-00 082-001334-00	35U-VAC-DS/DS-5 35U-VAC-PB/DS-5	USA	White	DISS DISS	DISS Puritan-Bennett		040-001532-00	Vacuum Liquid collection bottle/flask, with overflow protection	All
002 001225 00						1			
082-001335-00	35U-VAC-OH/DS-5			DISS	Ohmeda		040-001533-00	Vacuum Liquid collection bottle/flask, without overflow protection	All
082-001336-00	35U-VAC-CH/DS-5			DISS	Chemetron				
082-001340-00	35U-VAC-BS/DS-5			DISS	British standard				A 11
082-001341-00	35I-VAC-BS/NS-5	ISO	Yellow	NIST	British standard		115-033264-00	Suction tube connect the anesthesia machine and liquid collection bottles, 3m, with filters	All
082-001339-00	35I-VAC-GS/NS-5			NIST	Germany standard				
082-001337-00	35I-VAC-SIS/NS-5			NIST	Australian SIS standard				
082-001338-00	35I-VAC-FS/NS-5			NIST	French standard				

						Standard: USA		
						Part No.	Specification	Gas supply
						082-001227-00	34U-OXY-BS/DS-5	0 <sub>2</sub>
						082-001228-00	34U-AIR-BS/DS-5	Air
Central gas	s supply hose					082-001229-00	34U-N2O-BS/DS-5	N <sub>2</sub> O
						082-001356-00	34U-OXY-CH/DS-5	0 <sub>2</sub>
						082-001355-00	34U-AIR-CH/DS-5	Air
	A A	*				082-001354-00	34U-N2O-CH/DS-5	N <sub>2</sub> O
- Hose length 5 m						082-001376-00	34U-OXY-OH/DS-5	O <sub>2</sub>
- Apply to all mode						082-001374-00	34U-AIR-OH/DS-5	Air
Standard: ISO						082-001373-00	34U-N2O-OH/DS-5	N,0
Part No.	Specification	Gas supply	Hose color	Gas outlet (machine)	Gas inlet (wall)			2
082-003443-00	34U-OXY-DS/DS-5	0 <sub>2</sub>	Green	DISS	DISS	082-001375-00	34U-OXY-PB/DS-5	0 <sub>2</sub>
082-003445-00	34U-AIR-DS/DS-5	Air	Yellow			082-001378-00	34U-AIR-PB/DS-5	Air
082-003444-00	34U-N2O-DS/DS-5	N <sub>2</sub> O	Blue			082-001377-00	34U-N2O-PB/DS-5	N <sub>2</sub> O

### Hose color

Green

Yellow

Blue

Green

Yellow

Blue

Green

Yellow

Blue

Green

Yellow

Blue

### Gas outlet (machine)

### Gas inlet (wall)

### DISS



### British standard







DISS



Ohmeda







### Standard ISO

Standard: ISO					
Part No.	Specification	Gas supply	Hose color	Gas outlet (machine)	Gas inlet (wall)
082-001209-00	34I-OXY-BS/NS-5	0 <sub>2</sub>	White	NIST	British standard
082-001210-00	34I-AIR-BS/NS-5	Air	Black & White		6
082-001211-00	34I-N2O-BS/NS-5	N <sub>2</sub> O	Blue		
082-001212-00	34I-OXY-GS/NS-5	0 <sub>2</sub>	White	NIST	Germany standard
082-001213-00	34I-AIR-GS/NS-5	Air	Black & White		
082-001214-00	341-N2O-GS/NS-5	N <sub>2</sub> O	Blue		
082-001215-00	34I-OXY-SIS/NS-5	0 <sub>2</sub>	White	NIST	Australian SIS standard
082-001216-00	34I-AIR-SIS/NS-5	Air	Black & White		
082-001217-00	34I-N2O-SIS/NS-5	N <sub>2</sub> O	Blue		
082-001218-00	34I-OXY-FS/NS-5	0 <sub>2</sub>	White	NIST	French standard
082-001219-00	34I-AIR-FS/NS-5	Air	Black & White		
082-001220-00	34I-N2O-FS/NS-5	N <sub>2</sub> O	Blue		

# Mounting solution



### Mounting solution for patient monitor N19/N22

Picture	Part No.	Description	Apply to
	115-066025-00	GCX Bracket kit for N19/N22,fixed height	A7/A5
3	115-066027-00	GCX Bracket kit for N19/N22,variable height	A7/A5





)	GCX bracket kit for N19/N22, fixed height

A9/A8

### Mounting solution for patient monitor N17/N15/N12, ePM15

Picture	Part No.	Description
	115-066028-00	GCX Brack



115-066074-00

GCX brack M series,



115-066029-00

scription	Apply to
V Drachat for N17/N17/N17/ODM15 fund bright	
X Bracket for N17/N15/N12/ePM15, fixed height	A7/A5
	WATO
	EX-65 Pro/
	EX-55 Pro/
	EX-65/ EX-55/
	EX-35/EX-30/EX-20

cket kit for N17/N15/N12/ePM15, fixed height,	A9/A8
8"x8"	

GCX Bracket for N17/N15/N12/ePM15,variable height

A9/A8/A7/A5 WATO EX-65 Pro/ EX-55 Pro/ EX-65/ EX-55/ EX-35

### Mounting solution for patient monitor ePM10/12, uMEC10/12/15, iPM, iMEC

115-070767-00

# Picture

Part No.	Description	Apply to
115-070011-00	GCX Bracket for ePM10/12, uMEC10/12/15, iPM, iMEC,	A7/A5
	fixed height	WATO
		EX-65 Pro/
		EX-55 Pro/
		EX-65/ EX-55/
		EX-35/EX-30/EX

GCX bracket kit for ePM10/ePM12/uMEC, fixed height,



	M series, 8"x8"	
N.		

115-070768-00

GCX Bracket for ePM10/12, uMEC10/12/15, iPM, iMEC,
variable height

A O / A O / A 7 / A F
A9/A8/A7/A5
WATO
EX-65 Pro/
EX-55 Pro/
EX-65/ EX-55/
EX-35

A9/A8







115-069067-00

115-069068-00

115-069069-00

### Mounting solution for patient monitor T5/T8

Picture	Part No.	Description	Apply to
	115-015770-00	GCX bracket kit for Beneview T5, PM 9000, fixed height	A7/A5 WATO
	115-015783-00	GCX bracket kit for Beneview T8, fixed height	EX-65 Pro/ EX-55 Pro/
			EX-65/ EX-55/ EX-35/EX-30/E

115-015771-00

GCX brack rack mour

115-015784-00

GCX brack rack moui

50

cket kit for Beneview T5, fixed height, with module	A7/A5
unting pole	WATO
	EX-65 Pro/
cket kit for Beneview T8, fixed height, with module	EX-55 Pro/
unting pole	EX-65/ EX-55/
	EX-35/EX-30/EX-20

cket kit for T5/ePM15, fixed height, M series, 8"x8" A	9/A8
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GCX bracket kit for T8,fixed height, M series, 8"x8"

GCX bracket kit for T5, fixed height, M series, 8"x8", A9/A8 with SMR module rack mounting pole

GCX bracket kit for T8, fixed height, M series, 8"x8", with SMR module rack mounting pole

### Top shelf mounting kit

Picture	Part No.	Description	Apply to
	115-004003-00 115-004004-00	Top shelf mounting kit for Beneview T8, not support SMR Top shelf mounting kit for Beneview T5, not support SMR	All

Top shelf mounting kit for N15/17, ePM15

Top shelf mounting kit for N12, ePM12/10







115-069445-00

115-070794-00

Top shelf mounting bracket

A9/A8

All

All

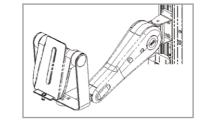
### **Other Accessories**

Picture	Part No.	Description	Apply to
	115-054836-00	Bracket for liquid collection bottles and humidifier	A9/A8



115-071657-00

115-030486-00



115-069585-00

Bracket for humidifier

GCX bracket kit for Pumps

GCX bracket kit for TE7

WATO EX-65 Pro

A9/A8

A9/A8

Picture	Part No.	Description	Apply to
V Hub Arm Holding Screws	115-024614-00	GCX support arm(M series), V Hub Arm kit, for cable management	A9/A8/A7/A5



Support arm kit for holding breathing tubes, with tube clip	A9/A8/A7/A5

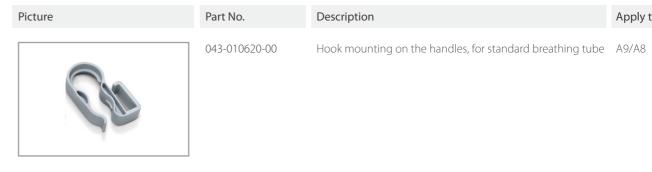


115-014961-00	Trolley for Air compre



GCX external auxiliary work surface, 034-000460-00 including 12" x 12" tray and articulating arm A9/A8/A7/A5

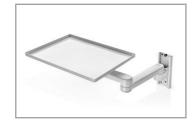
All





115-011304-00

115-017042-00



54

ion	Apply to

Tube clip, for coaxial breathing hoses, 1pcs

A9/A8/A7/A5 WATO EX-65 Pro/ EX-55 Pro/ EX-65/ EX-55/ EX-35

Quick connector for gas return, from gas module in the anesthesia machine to the AGSS or breathing circuit

A9/A8/A7/A5 WATO EX-65 Pro/ EX-55 Pro/ EX-65/ EX-55/ EX-35

# Breathing system

Picture	Part No.	Description	Apply to	Picture	Part No.	Description
	115-030838-00	Sodalime canister, for WATO EX-55/65/55 Pro/65 Pro, or WATO EX-20/30/35 breathing circuit with bypass	WATO series		040-000358-00	Bellows
	115-034194-00	Sodalime canister, for WATO EX-20/30/35 breathing circuit without bypass	WATO EX-20/ EX-30/ EX-35	6 Males	0601-20-78976	Foam pad for for WATO EX- breathing cire
	801-0631-00066-00	Sodalime canister, for Pre-pak breathing circuit	A7/A5/ WATO EX-65 Pro/ EX-55 Pro/ EX-65/ EX-55/ EX-35		115-046756-00	Quick Release
	115-066324-00	Sodalime canister with handle, for Pre-pak breathing circuit (A9/A8)	A9/A8		115-048035-00	Flexible bag a

### n

### Apply to

A7/A5 WATO Series

for soda-lime canistor,

EX-55/65/55 Pro/65 Pro, or WATO EX-20/30/35

circuit with bypass , 20 pcs

ease APL Valve Assembly

ag arm assembly

WATO series

A7

A9/A8/A7/A5 WATO EX-65 Pro/ EX-55 Pro/ EX-65/ EX-55/ EX-35

### Battery

Picture	Part No.	Description	A
	115-018011-00	Li-ion Battery Package, 11.1 V, 4400mAh	V

### **Cylinder Accessory**

Picture

Picture	Part No.	Description	Apply to
	0348-00-0185	Cylinder yoke seal, 6 pcs	All
° ° ° ° ° °			

Description

Breathing system cleaning adaptor kit



115-062081-00



115-033063-00

Part No.

045-004527-00

Cylinder yoke spanner

All

Apply to

A9/A8

### Apply to

WATO EX-30/ EX-20

Li-ion Bat Pack (10.95V) Li-ion Battery Package

A7/A5 WATO EX-65 Pro/ EX-55 Pro/ EX-65/ EX-55/ EX-35









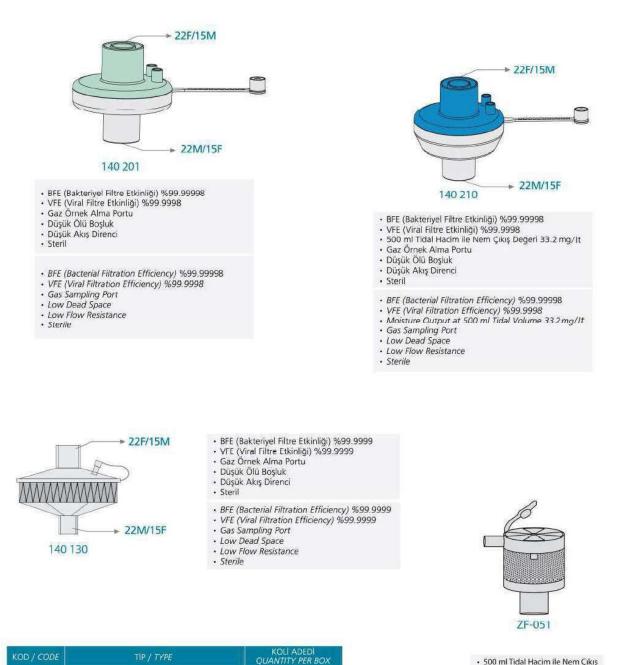
# RESPIRATORY & ANESTHESIA Solunum & Anestezi

612









100

100

100

400

• 500 ml Tidal Hacim ile Nem Çıkış

- Değeri 24 hr: 28.8 mg/1 lt H<sub>2</sub>O .
- Aspirasyon Portu
- Oksijen Portu
- Düşük Ölü Boşluk
  Düşük Akış Direnci
- Steril
- Moisture Output at 500 ml Tidal
- Volume 24 hr: 28.8 mg/1 lt H<sub>2</sub>O Suction Port
- Oxygen Port
- · Low Dead Space
- Low Flow Resistance Sterile

140 201

140 210

140 130

ZF-051

**BAKTERİ FİLTRESİ** 

**BACTERIAL FILTER** 

HEPA FILTRE HEPA FILTER

HMEF (BAKTERİ VE NEM) FİLTRE

TRAKEOSTOMI HME FILTRE TRACHEOSTOMY HME FILTER

HMEF (BACTERIAL AND MOISTURE) FILTER