TECHNICAL INFORMATION

GENERAL SPECIFICATIONS

• Dimensions with pads:

- 30,0 cm (11.81 in) length.
- 21,5 cm (8.46 in) depth. 28,0 cm (11.02 in) height.

• Weight:

- Device 5.15 kg (11.35 lbs).
 NiMH battery 1.10 kg (2.43 lbs).
- Li-Ion battery 0.60 kg (1.32 lbs).
- External pads 0.85 kg (1.87 lbs) - Complete set (NiMH battery) - 7.10
- kg (15.66 lbs) (except NIBP)
- Complete set (Li-Ion battery) 6.60 Kg (15.66 lbs) (except NIBP).

• Electrical:

- AC: 100 to 265 VAC, 50/60 Hz (automatic selection). - DC external: 11 to 16 VDC.
- Removable rechargeable
- battery: - Type: NiMH, 14.4 VDC 4.5 A/h.
- Duration: Battery with full charge 3 hours in monitor mode, without printer, or a minimum of 140 shocks at 360 joules or a minimum of 200 shocks at 200 joules.
- Battery full-charge time (when fully unloaded): 8 hours.
- **OPTIONAL BATTERY****
- Type: Li-lon, 14.8 VDC 4.4 A/h. Duration: Battery with full charge - 3 hours in monitor mode, without printer, or a minimum of 140 shocks at 360 Joules or a minimum of 200 shocks at 200 joules. - Battery full-charge time (when fully
- unloaded): 8 hours. **Consult availability

• Memory:

- Type: Nand Flash. Capacity: 2 Mbytes.
- Patients stored >150 patients.
- Storage: 15 seconds of ECG when in shock, physiological alarm and panel events.
- ECG: 2 continuous hours of ECG curve recording, when in AED mode.

• RTC – Real Time Check (available when equipped with Li-lon optional battery):

- Defibrillation self-test, battery level, connected pads, power source connection check. Check is performed 3 times which are set in advance. This information is wirelessly transmitted to a PC with RTC System software installed and within range of the network.

ENVIRONMENTAL SPECIFICATIONS

- Temperature: - Operational: 0 to 50°C. - Storage: -20 to 50°C.
- Humidity:
- Operational: 10 to 95% RH, without condensation - Storage: 10 to 95% RH, without condensation
- IP Rating: IPX1.

DEFIBRILLATOR

Instramed Ltda.

CEP 91140-310

Pavilhão 19

Beco José Paris, 339

Porto Alegre RS Brazil

Phone: +55 (51) 3073 8200

WWW.INSTRAMED.COM.BR

- Waveform:
- Biphasic truncated exponential. Waveform parameters adjusted in terms of patient's impedance.

• Shock application:

By means of multifunctional pads (adhesive) or defibrillation pads.

Adult/external defibrillation: - Scales: 1, 2, 3, 4, 5, 6, 7, 8, 9,

- 10, 20, 30, 50, 80, 100, 150, 200, 250, 300 and 360 Joules. Maximum power limited to 50 J with internal or children's pads.
- Controls: On/Off button, charge, shock synchronism
- Power selection: Therapy button on the front panel.
- Charge control: Button on the front panel, button on the external pads. Shock control: Button on the front
- panel, buttons on the external pads. Synchronized control: SYNC button on the front panel.

Charge Auto-Sequencing:

 When enabled, it charges power previously set by the user for the first, second and third shocks, with no need to manually adjust the selector.

• Charge indicators:

- Sound signal of equipment being charged.
- Sound signal of completed charge. · LED on external pads and charge level indicated on the display.

Maximum charging time:

- (200J): mains supply and battery
- < 4s. - (360J): mains supply and battery . < 6s.

- Adult: 10.3 cm (4.05 in) x 8.5 cm (3.34 in). Contact area: 81.9 cm² (12.69 in²)
- Cardioversion:
- < 60 ms.

• Pads (options):

- Adult and child external (included). - Adult and child internal (optional).
- (optional).

AED MODULE

Voice instructions, visual indications CPR instructions, USB 2.0. Multilanguage, Sudden Death Prevention Technology (SDP).

• USB:

- USB 2.0 for transfer of the electrocardiogram stored in AED mode to a compatible PC.

• SoftDEA:

- Software for viewing the data transferred to the PC.

EXTERNAL PACEMAKER

- (OPTIONAL) • Modes:
- Demand or fixed

• Amplitude:

European Representative:

Bd. Général Wahis 53, 1030

Phone: + 32.2.732.59.54

Fax: + 32.2.732.60.03

E-mail: mail@obelis.net

Obelis S.A.

Brussels Belgium

- From 5 mA to 200 mA (resolution of 5 mA), accuracy 10% • Pulse width:
- 20 ms (± 1 ms)

• Frequency:

From 30 ppm to 180 ppm (increments of 5 ppm), accuracy • Sensitivity: - 5, 10, 15, 20, 30 and 40 mm/mV.

• ECG response frequency:

Diagnostic mode - (0.05 -100 Hz).
Monitor Mode - (1-40 Hz).

- Identified and shown with low level

• Time to restore ECG baseline

• AC line filter:

- 60 Hz or 50 Hz.

• Patient insulation:

- Defibrillation proof.

ECG: CF Type.

- SpO₂: CF Type.

alarm.

≤ 3 seconds.

• SpO, range:

0 to 100 %

• Pulse range:

- 30 to 250 BPM.

• SpO, precision:

• Pulse precision:

- 12.5; 25 e 50 mm/s.

CAPNOGRAPHY (OPTIONAL)

• Measurement range CO.:

 $- \pm 2 \text{ mmHa} (0 - 38 \text{ mmHa}).$

 $-\pm 5\% + 0.08\%$ for each 1mmHg

- Prints up to three simultaneous

- 12.5; 25 or 50 mm/s with precision

48 mm (width) x 30 m (maximum

- EN 60601-1:1990 (A1:1993,

- NBR IEC 60601-1:1994 +

- NBR IEC 60601-1-2:2006

- NBR IEC 60601-2-4:2005

- NBR IEC 60601-2-27:1997

- NBR IEC 60601-2-49:2003

- EN 60601-2-25:1995 (A1:1999)

Folder CardioMax Eng R2.5 - 2016

A2:1995, A13:1996)

amendment 1997

- EN 60601-1-2:2007

- EN 60601-2-4:2003

- EN 60601-2-27:2006

- EN 60601-2-49:2001

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CARDIOMAX B

80 🛯

above 38 mmHg (39 – 99mmHg)

- ± 2 BPM.

Scan speed:

- 0 – 99 mmHa.

• Consumption:

Compensation:

- BTPS, N₂O, O₂.

derivations.

Thermal

of $\pm 5\%$

Paper size:

lenath).

STANDARDS:

• Weight:

- 0.4 kg.

• Speed:

PRINTER (OPTIONAL)

• Precision:

-15W

• Type:

- ± 2 % from 70 to 100%.

± 3 % from 50 to 69%.

SpO₂ (OPTIONAL)

• Loose Electrode:

after defibrillation:

Refractory period: - 340 ms (from 30 to 80 ppm)

- 240 ms (from 90 to 180 ppm). NIBP (OPTIONAL)
- Operating principle:
- Oscillometric. Automatic measurement
- mode - 1, 2, 3, 4, 5, 10, 15, 30, 60 and 90

- Systolic: 40 - 130 mmHg

MAP: 26 - 110 mmHg.

Overpressure limit by

- Adult: 290 mmHg max.

- Adult: 300 ± mmHa

- Neonate: 150 ± mmHa

Battery level indicator:

- 128.2 mm x 170.9 mm

- 640 x 480 pixels (VGA)

- 12.5; 25 and 50 mm/s.

ECG (supports up to 12

- 3 or 5 lead ECG cable.

Multifunctional pads.

External pads.

- 15 to 350 BPM

simultaneous derivations when

equipped with optional cable)

- 10 lead ECG cable (optional)

- ± 1 BPM from 15 to 350 BPM.

Rejection in common mode:

Greater than 90 dB, measured

according to AAMI standards for heart monitors (EC 13).

- Neonate: 145 mmHg max.

Overpressure protection by

software:

hardware:

Resolution:

- 1 mmHa

• Diagonal:

Color LCD TFT.

Resolution:

• Scan speed:

Inputs:

• Range:

ANVISA 10242950009

• Precision:

DISPLAY

- Yes

• Size:

- 8.4"

• Type:

minutes • Manual:

- One measurement

Measurement interval:

• Adult: - Systolic: 40 - 260 mmHa MAP: 26 - 220 mmHa.

- Diastolic: 20 - 200 mmHa • Pediatric:

- Systolic: 40 160 mmHg.
- MAP: 26 133 mmHg.
 - Diastolic: 20 120 mmHg Neonate:

- Diastolic: 20 - 100 mmHg

• Electrode size:

- Children: 4.5 cm (1.77 in) x 4.0 cm (1.57 in). Contact area: 18 cm² (2.79 in²)

- Multifunctional for pacemaker, monitoring and defibrillation

- Multifunctional extension (optional).

• Functional characteristics:





Cardioversor Monitor **Biphasic Defibrillator**

NEW!

Same compact size, now with an 8.4" screen



- Automated External Defibrillator Mode (AED)
- Sudden Death Prevention Mode (SDP)
- Electrocardiogram (ECG) up to 12 derivations
- Oximetry (SpO₂)
- Non invasive pacemaker
- Non-invasive pressure (NIBP)
- Capnography (EtCO₂)
- Printer

-=-

A.

INSTRAMED

• Removable rechargeable battery

CARDIOMAX E

- - buttons.

 - Quick access to main functions.











SMART.

more organized way.

ADVANCED:

**Pre-release product. Please verify availability.

COMPLETE, ADVANCED, RELIABLE AND EASY TO USE.

PRACTICAL:

Light.

Strong, comfortable strap.

Ready to use in less than 6 seconds.

RTC_

Real Time Ch

Designed without sharp edges, ideal for emergency transport

Biphase power delivery of up to 360 Joules.

The battery, which is easy to replace, allows more than 100 shocks.

EASY TO USE:

All operations are concentrated in only two

Easy operation - 1, 2, 3 standard.



Reliability is the most important aspect for equipment designed to save lives. With the new RTC (Real Time Check) technology, CardioMax performs constant self-diagnosis and reports, in advance, if there is any maintenance action to be done, guaranteeing that it will always be available for immediate use.**



CARDIOMAX 8 - WHAT ALL EMERGENCY EQUIPMENT SHOULD BE:

Interface that automatically adjusts to the number of parameters, presenting the important information in a clearer and

New Auto Sequencing Charge function - When enabled, applies charges preconfigured by the user for the first, second and third shocks without the need to change the selector manually.

Smart monitoring alarms.

Equipped with the AED (Automated External Defibrillator) Mode, CardioMax becomes even more complete and appropriate, being ideal for accompaniment of high risk patients because it has Sudden Death Prevention (SDP) technology. This characteristic allows CardioMax to monitor the patient continually and identify the beginning of a Ventricular Fibrillation or Rapid Ventricular Tachycardia episode.

In this situation, the equipment activates a visual and sound alarm, allowing the patient to be treated with shock in a much shorter time, significantly increasing the chances of reversing cardiorespiratory arrest.