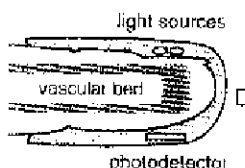


General Instructions for the use of Viamed SpO₂ probes

Viamed SpO₂ probes are compatible to most original manufacturers probes and are used in the same way. It is important that the original manufacturers instructions and guidelines are followed so that you achieve the best results with the combination of Viamed probe and original manufacturers instrument.

Viamed reusable SpO₂ probes and sensors are supplied non sterile. They should be cleaned between patients with cleaning agent such as 70% alcohol a 1:10 bleach to meet infection control guidelines.

Observe alignment to ensure proper position of the light source and photodetector for each sensor.



Sensors that are placed on the extremities should be positioned at heart level. When selecting a sensor site, priority should be given to an extremity free from an arterial catheter, blood pressure cuff or intravenous infusion line.

Tightly applied sensors, use of additional tape on the sensor, or presence of a tourniquet or restrictive dressing, peripheral venous blood may become pulsatile and could result in inaccurate SpO₂ values.

To minimize the potential for ambient light interference in the presence of bright light sources such as direct sunlight, phototherapy lights, infrared lamps, and surgical lamps, cover the sensor site with an opaque material.

Check sensor site, and move the sensor to another site at least every 4 hours as specified in the directions for use. Avoid applying additional tape to minimize the risk of impaired perfusion and tissue injury.

Applying tape over the cable will help prevent the sensor from becoming dislodged.

General Instructions for the use of Viamed SpO₂ probes

General placement of probes

Adults (40 kg) & Paediatrics (15-40Kg)

The preferred application site is index finger, with cable running back along top of hand.

The thumb, other finger, or great toe are alternate sites. If the toe is used the cable should run along the sole of the foot.

For patients over 30Kg the Flexible Y probe can be used on alternate sites on the ear lobe or pinna. In this instance the cable can be run down the side of the patient's face and body.

Change site at least every 4 hours.

Infants (3—15 kg)

The preferred application site is great toe, with cable running along sole of foot,

Change site at least every 4 hours.

Neonates (1—3Kg)

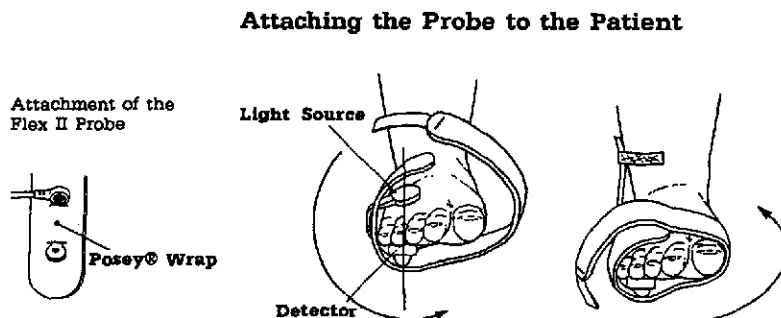
The preferred application site is ball of foot or the palm of the hand below the fingers, with cable running along palm.

Change site at least every 4 hours.

Flexible Y Probe

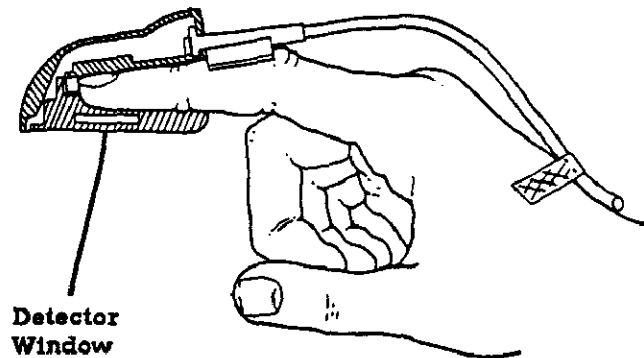
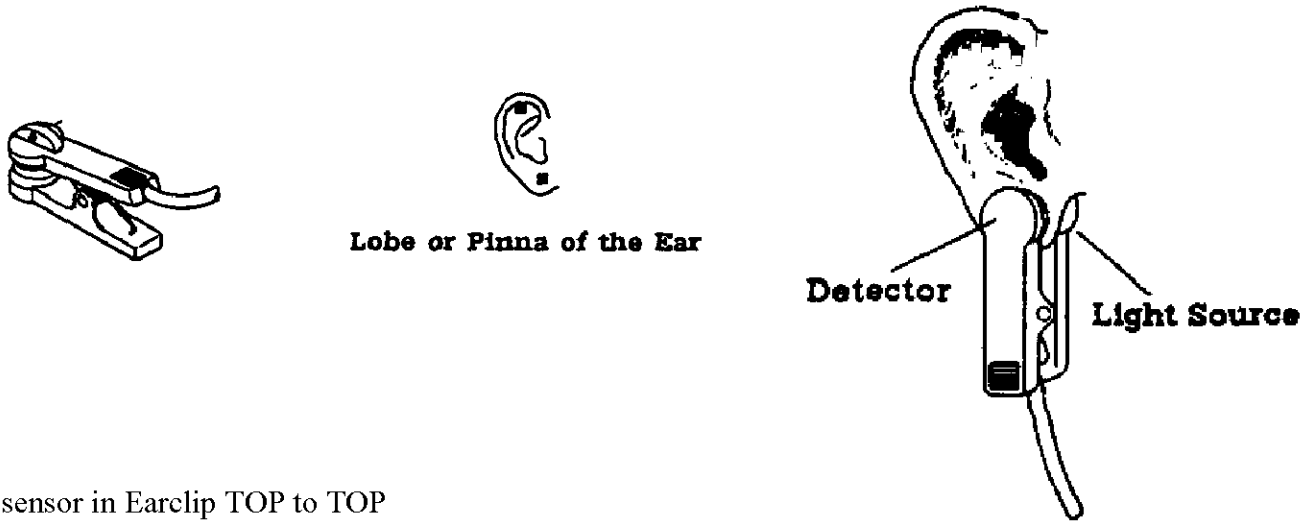
Flexible Y probes can be attached to the patient in various ways

Using a Posey^R wrap



General Instructions for the use of Viamed SpO₂ probes

Attaching the Flexible Y probe to the ear



Oximetry/ SPO General/Ear probe Instructions **Properly Applied**



General Instructions for the use of Viamed SpO₂ probes

WARNING:

Patient Safety—If the EarProbe is damaged in any way, discontinue use immediately.

WARNING Prolonged monitoring or patient condition may require changing the probe test site periodically. Change the probe site at least every four hours to reduce the risk of blistering, skin erosion, or Ischemic skin necrosis (especially if the site is poorly perfused).

WARNING: Do not allow the tape to block the Probe's light detector.

WARNING: Excessive ambient light, ultraviolet light, incandescent light excessive motion, low perfusion, and warming lamps at the probe site may cause erroneous readings.

WARNING: An inflated blood pressure cuff on the same limb as the probe will cause erroneous readings. Select another site.

WARRANTY

Viamed SpO₂ probes are warranted to be free from functional defects in materials and workmanship for 12 months provided that they are used correctly and cleaned in accordance with these instructions

EarProbe Application Precautions

WARNING:

WARNING: Patient Safety—

WARNING: Data Validity—Excessive ambient light, excessive motion, low perfusion, or electrical interference at the probe site may cause erroneous readings. To ensure accuracy, see Section 10/Signal and Data Reliability.

Attaching the EarProbe to the Patient

~StabWzer

Attachment of

EarProbe