Ventilation

Heyer VS500s

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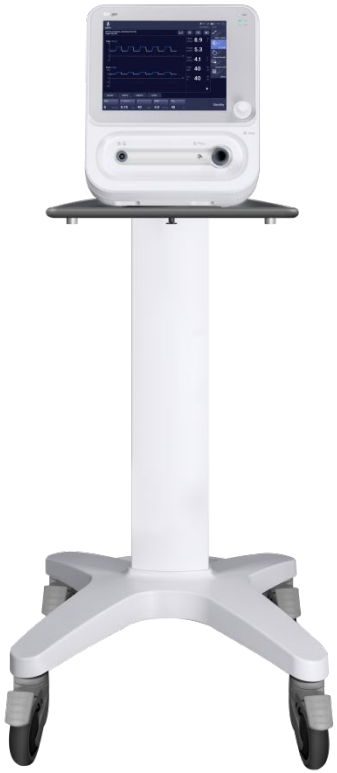
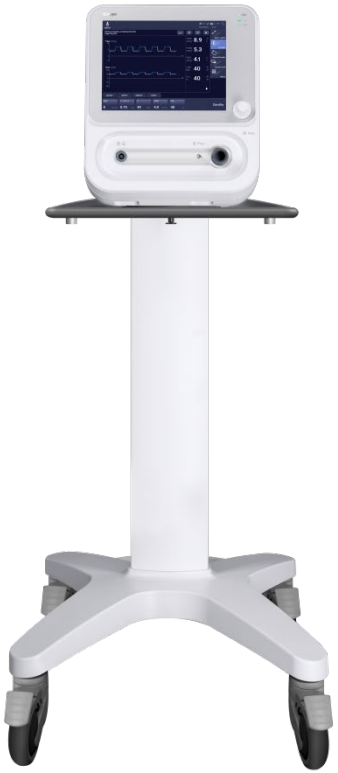
Description



Premature, Neonatal & Pediatric Ventilator

VS500S is a specially designed non-invasive ventilator for premature infant, neonate and pediatric.
It provides comprehensive non-invasive ventilation to meet various respiratory management requirements.

Properties



Features & benefits

10.4” highly sensitive capacitive touchscreen

Provides clear vision with comprehensive monitoring data.

Easy to learn, Easy to operate

User-friendly interface

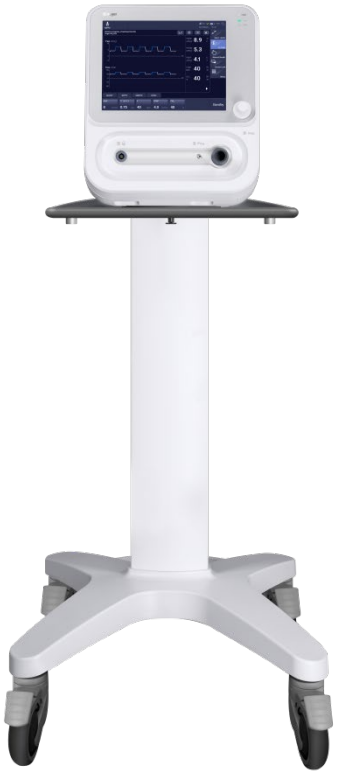
No hidden menu

Immediately access and change ventilation modes and parameters

Real-time monitoring assures patient safety

With SpO2 module, VS500S has real-time monitoring including 3 waveforms, SpO2/FiO2, PI, and OSI to give more reference for clinical decisions to facilitate early diagnosis of Acute Lung Injury and Acute Respiratory Distress Syndrome.

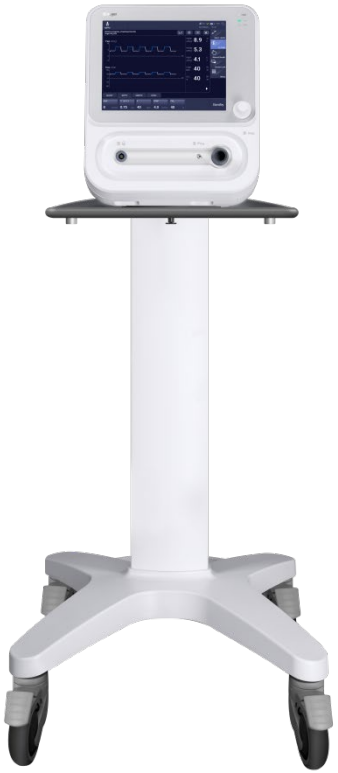
Properties



Features & benefits

Oxygen Saturation Index- (OSI) A noninvasive Tool for Monitoring Hypoxemic Respiratory Failure in Newborns
OSI can be calculated readily and continuously at the bedside, without the need for invasive blood sampling, and may be useful in identifying infants with mild to moderate HRF and evaluating response to some interventions.
Perfusion index (PI)
Perfusion index (PI) is normally monitored with pulse oximeters. It is a good indicator of the reliability of the pulse oximeter reading, and can be used as a non-invasive tool to predict illness severity and mortality in pediatric ICU and emergency departments.
SpO2/FiO2

Properties



Features & benefits

The SpO2/FiO2 is an independent indicator of ARDS development among patients at risk.
Waveforms: Pressure-T, Flow-T, SpO2-T
Provide real-time information about patient-ventilator interaction and ventilator function. You can observe the change in a patient's condition from breath to breath, detect problems related to mechanical ventilation, evaluate
the patient's response to interventions, and use this information to adjust therapy as needed.