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Book Descriptions:

cardiette bp one manual

Measuring functions Blood pressure Primary Client Use Intended for ambulatory blood pressure monitoring Measurement Site Upper Arm Measurement Occurrence Intermittent measurements at specified intervals or times Availability Available Currently Accuracy Assessment Recommendation Basis Medaval Legacy approval Older clinical validation; older protocol ESH Europe ABPM A BIHS recommendation that does not exist Stride BP ABPM Published evidence Validation Publications Polo Friz H, Sega R, Facchetti R, Primitz L, Beltrame L, Bombelli M. Accuracy evaluation of the Cardiette BP one ambulatory blood pressure monitor. We decided to determine the accuracy of measures made with BP one, using the protocol of the British Hypertension Society published in 1990, and revised in 1993, for evaluating the accuracy of BP measurement devices. METHODS The evaluation included beforeuse calibration, inuse assessment, afteruse calibration, and static device validation that involved 85 participants. On the basis of the percentages of measurements differing from the mercury sphygmomanometer standard by 5, 10, and 15 mmHg, the device was graded A for systolic and diastolic BP, for low, median, and high BP values. CONCLUSION On the basis of the standards indicated by the 1993 modified British Hypertension Society protocol, the BP one recorder can be classified as A grade both for systolic and diastolic pressure. Together they form a unique fingerprint. Blood Pressure Monitoring. 2008 Apr;132107110. METHODS The evaluation included beforeuse calibration, inuse assessment, afteruse calibration, and static device validation that involved 85 participants. On the basis of the percentages of measurements differing from the mercury sphygmomanometer standard by 5, 10, and 15 mmHg, the device was graded A for systolic and diastolic BP, for low, median, and high BP values. <http://www.sportsbrothers.at/userfiles/3g3jv-manual-pdf.xml>

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METHODS The evaluation included beforeuse calibration, inuse assessment, afteruse calibration, and static device validation that involved 85 participants. CONCLUSION On the basis of the standards indicated by the 1993 modified British Hypertension Society protocol, the BP one recorder can be classified as A grade both for systolic and diastolic pressure. AB OBJECTIVE Blood pressure BP Cardiette BP one system BP one is an oscillometric ambulatory BP monitor manufactured in Italy in conformity to current regulations for medical devices. CONCLUSION On the basis of the standards indicated by the 1993 modified British Hypertension Society protocol, the BP one recorder can be classified as A grade both for systolic and diastolic pressure. By continuing you agree to the use of cookies. Preferred devices for home use also have automated storage of multiple readings, or mobile phone, PC or internet link connectivity enabling data transfer. These devices have minor model differences which do not affect the blood pressure measurement accuracy, such as memory improvement, provision of bluetooth, PC connection, printer facilities, or additional functions. It should have at least 3 channels of simultaneous ECG data, and be capable of simultaneous acquisition of all 12 leads. It should measure all basic axes and durations including RR, PQ, QT, ATC, P, QRS, T, and HR. The data will also contain the recording date and time, sensitivity setting, chart speed, and leads being recorded. It can also include an expandable storage capability. Linepowered ECG units will not disarm when the line cord is unplugged or when line power is otherwise interrupted. By continuing to use this site, you consent to this policy. Click to learn more. Change settings OK Cardioline microtel BT 01277812968 About Us Login Contact Us Sitemap Products Map On Sale Change cookie settings Contact Us Login Forgot Password. Ideal for Telemedicine

use. <http://www.net-work.cz/data/3g3hv-manual.xml>

The device also has the option of storing up to 75 ECGs in SCP digital format and transmitting them to a local PC via a Bluetooth wireless connection. Ability to transmit the ECG in an analogue format via sound coupling. Possibility of managing the ECG test in SCP format with storage of up to 75 ECGs. The file is identified by datetime acquisition and through patient data, which can be entered on the minimized alphanumeric keyboard and system display. Transmission of the ECG file can occur via the USB port and also via the wireless Bluetooth channel. John Brunner, author of several Dysopias including Stand on Zanzibar, New. The very next day. Nomaan Mujahid and Arjun Kallapur came 2lld in the prestigious Limca Book of. Since they did not attempt to correct for medical price i This company is a part of the Grover Group of companies, having a successful and growi Go 1 11 entered. JudgeRESERvED SEATS. We are appalled atAcquires data in 15 seconds. Stress Adapters Included on ECG Cable. Advanced PC Based ECG System. Patient ECG Cable 10 Lead Patient ECG Cable for PC ECG Acquisition Box. PC ECG 12005 ECG Cable includes stress adapters. PC ECG 1200M ECG Cable needs added stress adapters. PC ECG USB Cable USB Cable power supply. Press Stud Adapters Available in 3mm and 4mm. SpiroSafe Pulmonary Filters 10 Casings with 250 replacement filters. Fits all Micro Medical Spirometers. Cautery Electrode Tips Electrode wire straight. Electrode wire angled. Electrode loop 4mm. Electrode loop 8mm. Electrode straight slip knot. Electrode angled slip knot. Electrode ball point straight. Electrode ball point angled. Electrode hook angled. Set of 10 cautery electrode tips. Bipolar Forceps The Bipolar Forceps is provided with a standard European connection enabling use with GIMA Diatermo and Electrosurgical Units from European manufacturers. Features Nylon insulation. Stainless Steel blank. Molded plastic caps. The Connecting Cable is available separately. 5.

General Equipment 9 UV Steriliser 15W Single shelf steriliser with rack. Maintains surgically clean instruments after disinfection. Diagnostic Set 2.8V Battery operated. 3.5V Rechargeable NiMH Battery. Rechargeable handle with Lithium Ion Battery. A set includes Otoscope head, ophthalmoscope head, handle and speculae. Available in Heine, Welch Allyn and Riester. Bedstep Single and Double Anaesthetic Instrument Trolley Single drawer, with rail around top shelf. 450mm x 450mm x 860mm Anaesthetic Instruments Trolley Double Drawer, with rail. 915mm x 455mm x 865mm 9. Medical Furniture 19 Dressing Trolley with Rail Small Dressing Trolley with Rail, 455mm x 455mm Medium Dressing Trolley with Rail, 610mm x 455mm Large Dressing Trolley with Rail, 915mm x 455mm Instrument Trolley Small Instrument Trolley, 450mm x 450mm Medium Instrument Trolley, 600mm x 450mm Large Instrument Trolley, 915mm x 450mm Poison Cupboard Poison Cupboard, Double Door, Lockable. Poison Cupboard, Single Door, Lockable. Learn how we and our ad partner Google, collect and use data. To browse Academia.edu and the wider internet faster and more securely, please take a few seconds to upgrade your browser. Evidence on the antithrombotic management of ACS showed that the introduction onto the market of biosimilars approved on the basis of simple biological criteria, without robust data from comparative clinical trials, may be hazardous. Moreover, the mixtures of LMWHs polysaccharide chains, some immunoallergic properties, and potential contamination during the extraction process raise safety concerns. Save to Library Edit PaperRank Readers Related Papers Mentions View Impact A prospective multicentre study on the treatment of cardiovascular risk factors and claudication symptoms in patients with peripheral artery disease the IDOMENEO study Vasa, 2015 Measures of arterial stiffness could be affected by the presence of abdominal aortic aneurysm AA.

PWV and PWA were measured in male patients with AAA from an ongoing Danish AAA screening trial. Information on blood pressure, medications, BMI and smoking status was obtained at inclusion. In total, 157 patients were included. Mean age was 73 years. There was no difference in PWV between the groups. Haemodynamic properties of the aorta are affected by the presence of ILT in patients with AAA that is not explained by aortic size. Alternatively, these findings could be

explained by associations between ILT and properties of the left ventricle. Save to Library Edit PaperRank Readers Related Papers Mentions View Impact The dogma of aspirin a critical review of evidence on the best monotherapy after dual antiplatelet therapy Thrombosis Journal, 2015 Dual antiplatelet therapy based on the combination of an adenosine diphosphate ADPreceptor ant.The current controversy on the duration of dual antiplatelet therapy should not conceal another major issue the choice of the more appropriate antiplatelet monotherapy after the dual treatment phase. The aim of this article is to critically analyze the available evidence in this topic. Data from studies like CAPRIE, MATCH, PROFESS, CHANCE, DAPT and others, raise questions as why antiplatelet monotherapy after the dual phase should only be based on aspirin, in spite of a lack of evidence surprisingly not highlighted by key opinion leaders and experts. Perhaps the time for an open debate on these topics is ripe. We prospectively conducted a webbased survey including cardiologists and internists who attended continuing medical education courses on cardiovascular medicine. The overall response rate was 22.4% 21.1% for cardiologists and 24% for internists.

Coexistence of both medical history of rheumatic disease and clinical signs of valvular involvement were considered as essential prerequisites for the diagnosis of rheumatic AF by half of the respondents, and onethird assumed that lone aortic valve disease was sufficient for AF to be defined as valvular. A similar proportion of respondents considered that in the presence of mitral regurgitation, AF had to be defined as valvular. The majority of responding physicians considered the degree of valvular defect of lesser importance for the definition of valvular or nonvalvular origin of AF. It is urgent to issue clear widely accepted definitions of the origin of AF, which should improve clinical practice and research. Save to Library Edit PaperRank Readers Related Papers Mentions View Impact Mortality at 30 and 90 days in elderly patients with pulmonary embolism a retrospective cohort study by Hernan Polo Friz, Davide Sorbo, and Dario Meloni Internal and Emergency Medicine, 2014 Pulmonary Embolism PE incidence increases with age. Data on mortality and prognosis in elderly.Data on mortality and prognosis in elderly patients with suspected PE are lacking. 1 To assess 30 and 90day mortality in subjects with PE from an elderly population seen in the emergency department ED; 2 to test the prognostic accuracy of a simplified Pulmonary Embolism Severity Index sPESI coupled to a highly sensitive cardiac Troponin T hscTnT level. A retrospective cohort study was performed, including patients evaluated in the ED of Vimercate Hospital for clinically suspected PE from 2010 to 2012. Adding the hscTnT level to sPESI did not improve its performance. 1 In an elderly population referring to the ED with clinically suspected PE, mortality was high both in subjects with and without confirmed PE; 2 the ability of sPESI and hscTnT to predict PE mortality seems to be lower than reported in studies based on data from younger populations.

Better risk stratification tools will be necessary to improve clinical management in this setting. Save to Library Edit PaperRank Readers Related Papers Mentions View Impact A higher ddimer threshold safely rulesout pulmonary embolism in very elderly emergency department patients by Davide Sorbo, Hernan Polo Friz, and Dario Meloni Thrombosis Research, 2014 Ddimer is commonly used in the workup of suspected Pulmonary Embolism PE, but its specificity.We evaluated whether using a higher cutoff value for Ddimer could increase the test specificity without reducing its sensitivity for rulingout PE in elderly and very elderly patients presenting to the Emergency Department ED. All patients with Ddimer and pulmonary Computed Tomography Angiography CTA performed in the ED of Vimercate Hospital, from 2010 through 2012 for clinical suspicion of PE were included in this retrospective cohort study. Biosimilars are much more complicated to develop than a generic version of small molecule drugs and this is especially true for LMWHs. Evidence on the antithrombotic management of ACS showed that the introduction onto the market of biosimilars approved on the basis of simple biological criteria, without robust data from comparative clinical trials, may be hazardous. The machine has two operating modes manual and automatic and is supplied with an internal rechargeable battery.All other currencies are for display purposes only. Exchange rates may

vary. Displayed cost does not include customs fees. After the file has been opened, the signaldialog will appear. This mode is used when you have an acquisition program running that writes EDF or BDF. While the acquisition program writes the data to the file, you can use EDFbrowser to watch follow the actual data. The default interval time between the updates is 500 milliseconds and can be changed in the settings menu. Also, the start date and start time needs to be set in the filename of the video for synchronization.

The following text is copied from. The years, YYYY, obviously are 2013, 2014 and so on. The start time is based on the 24h clock with HH ranging from 00 till 23, so midnight is coded as 00h00m00s. The decimal fraction of a second noted here by .XXXX can have any length and can also be omitted for example in 06h37m12s. If the filename of the video does not contain the start date and start time, you can still continue to use the video but in that case EDFbrowser will assume that the start time of the video coincides with the start time of the EDF file. You can resize the video window by dragging the bottom right corner with the mouse. All other operations like stop, pause, etc. Do not use the control interface of VLC, it will interfere with EDFbrowser. If you want to remove only one particular signal, leftclick on the signal label of the signal you want to remove. A small dialog will appear and gives you the possibility to remove that particular signal from the screen. See also signaldialog. Be aware that a page time of more than five minutes slows down the program. When you leftclick on it, the Signal properties dialog will be opened. You can also drag this label with the left or right mouse button to change the offset or amplitude of the signal, see also Adjusting the position and size of the signals. Aliases can be created in the Signal properties dialog and will be stored in your montage. On top you will see a list of opened files. Select highlight the file from which you want to add signals. At the left part of the dialog you see a list of all the signals which are in the selected file. Now you will see the selected signals on the screen. When you want to make a combination derivation of two or more signals, do as follows. Open the signaldialog. Select the file from which you want to add signals. Now you can add more combinations or simply close the dialog. A small dialog will be opened and let you change the amplitude and color.

You can also remove filters if any or remove the signal from the screen. You can also enter an alias for the signal name. Another option is to activate one or more crosshairs for precise measurements. This will show you a list of all signals which are on the screen. Simply click on the signal of interest. This will move the signal up or down on the screen i.e. it changes the offset of the signal. Rightclick on the signal label and move the mouse pointer up or down while keeping the right mouse button pressed. The mouse wheel can be used to scroll horizontally. The step size of the mouse wheel can be set in the settings menu. A value of zero disables mouse wheel scrolling. Keep the middle mouse button pressed to drag horizontally. You can also zoom in. Just click on one of the annotations to jump to that position in the file. This window is dockable. You can change the size of the window, but also the position. You can make the window floating as well by dragging it with the mouse. By rightclicking on an annotation in the annotation list, you can perform several operations based on the annotations. First select the type of filter highpass, lowpass, notch, bandpass or bandstop. Depending on the type and model of the filter, you can adjust the order, Q factor and passband ripple. Algorithm for the moving average filters LPF the mean of the last n data samples. You can adjust or fine tune the frequency, order or Q factor of a filter and watch the result at the same time. Use this dialog when you want to remove a filter. Increasing or decreasing the FFT block size affects the FFT resolution. The default FFT block size can be set in Settings menu. In case you set the FFT block size equal to timescale x sample frequency, exactly one FFT will be performed. It's possible to let the FFT blocks overlap each other. There is also a power spectrum window available that automatically updates when you walk through a file. A small dialog will be opened which shows a list of signals which are on the screen.

Click on a signal of interest and a docked Power spectrum FFT will be opened. This Power spectrum

will be automatically updated when you navigate through the file. Here you can switch on colorbars to highlight different frequency regions. The properties of the colorbars number of colorbars, frequency, color, etc. can be adjusted in the Settings menu. The height of the colorbar is relative to the sum, peak or average of the the power of all the frequencybins in that region, according to the settings in the Settings menu. Use the sliders to zoom into a particular area. Printing can be done by clicking on the printbutton. You can print to a printer, file PDF or Postscript or as an image. It exports the data to text ASCII. Clicking on the cursorbutton will display a cursor. Use the mouse to drag the cursor. The algorithms for the window functions are taken from Spectrum and spectral density estimation by the Discrete Fourier transform DFT, including a comprehensive list of window functions and some new attop windows from the Max Planck Institute. The CDSA will appear as a docked window on the bottom but can also be dragged to the top or can be put in detached mode floating where ever you want on your screen. Adjust the size of the CDSA window as you prefer.

Segment length The length of one measurement. All segments together will present a horizontal array of segments. **Block length** The block length is the window size of the FFT. If the segment length is 30 seconds and the block length is 2 seconds, 15 FFTs will be performed in one segment if the the overlap is set to 0%. The output of these 15 FFTs will be averaged. Higher block lengths increases the FFT resolution. Lower block lengths increases the signal to noise ratio. **Overlap** Percentage of an FFT block that will overlap the next FFT block. Maximum frequency is limited to half the samplingrate nyquist frequency **Max.** Adjust and experiment with this setting untill you find the optimal setting. **Min.**

level Minimum level equals black. Adjust and experiment with this setting untill you find the optimal setting. **Logarithmic** If checked, it will apply the base10 logarithm of the output of the FFT in order to increase the dynamic range. **Power** If checked, display the power instead of the voltage. When using the Annotation editor, the hypnogram will be updated realtime when adding, moving or deleting annotations. The timescale datablocksize of the averaging window will be equal to the timescale of the mainwindow. So, if you want to average 20 seconds, set the timescale to 20 first. A dialog will be opened where you can choose to which signal you want to apply the averaging. Only the triggers with an onsettime that lies between the two timevalues will be used for the averaging. Select the ratio of the time before and after the triggerpoint. The yellow colored, dashed, vertical line is the triggerpoint, i.e. the onsettime of the annotations triggers. Use the sliders to zoom into the signal. The timescale is relative to the trigger onset point. This method only works correctly when the samplefrequency of the ECG recording is an integer multiple of the powerline frequency. In case they are synchronized, this method will remove also the harmonics of the powerline frequency. In that case extra notchfilters for the harmonics are not necessary. The advantage of this method is that it will not cause ringing or other distortion in the waveform of the QRS complex like notchfilters do. You will be able to select one of the signals on your screen as the source for the QRS detector. The selected signal must have a samplerate of at least 200 Hz and must have a physical dimension unit uV, mV or V. The detector will over the whole file and at the end it will import the Rpeaks as annotations. The annotations can be exported to different formats using the Export annotations tool. There is also the possibility to import the RRintervals as annotations.

Some statistics about the Heart Rate variability are available here. Note The QRS detection requires a samplerate of 200Hz or higher. The physical dimension unit must be expressed in uV, mV or V. A brief description of the statistics **Mean**, the average of the RRintervals. **SDNN**, the standard deviation of RRintervals. **RMSSD**, the square root of the mean squared difference of successive RRs. **NN20**, the number of pairs of successive RRs that differ by more than 20 ms. **pNN20**, the proportion of NN20 divided by total number of RRs as a percentage. **NN50**, the number of pairs of successive RRs that differ by more than 50 ms. **pNN50**, the proportion of NN50 divided by total number of RRs as a percentage. The data used for the statistics is derived from the timewindow that is visible on the screen. In case you want to see this info permanently at the bottom of the screen during navigation

through the file, use the following procedure. After having imported the ECG QRS detector output as annotations, more options are available by rightclicking on one of the annotations in the annotationlist. The maximum number of filter taps is limited to 5000. An easy way to create FIR filters is to use an online design tool like It generates a list of filter coefficients which can be copy and pasted into EDFbrowsers Custom FIR filter dialog. For example, the following list of filter coefficients is equivalent to a moving average filter boxcar filter with 10 samples filter taps You can copy and paste the following list into EDFbrowser as an example. Velocity is expressed in units e.g. uV per 0.25 milliSeconds. If the filter detects two fast transients with opposite polarity and within 3 milliSeconds, it will consider it a spike which will be suppressed. The transient is measured for every sample with a delta t of 0.25 milliSeconds. The sample will be compared with an older sample 0.25 milliSeconds before. Setting the value of velocity too high, will cause the spikes not to be detected.

Setting the value of velocity too low, will cause false triggers. Holdoff is used to prevent a retrigger of the filter within the holdoff period after the last trigger. The Spike filter can not be used with samplerates lower than 4000 Hz. Signals with lower samplerates will not be visible in the Spike filter dialog. The Spike filter dialog has no apply button. Activating or deactivating the spike filter is simply done by selecting or deselecting one or more signals. Changing the value of velocity or holdoff will cause an immediate update of the screen. Keep the left mousebutton pressed and move the mousepointer in the direction of the right lower corner. When you release the left mousebutton, the content of the rectangle will be expanded to the whole screen. You can repeat this step and zoom in again. Use the backspace button on your keyboard to zoom out and restore the previous settings. After using the backspace button, you can zoom in again by pressing the insert button on your keyboard. Leftclick on the signallabel of the signal of interest. A small dialog will appear. Click on Ruler. A floating ruler will appear. Drag and drop the ruler with the left mousebutton. A small dialog will appear. Click on Crosshair. A crosshair will appear. Drag and drop the crosshair with the left mousebutton. Now you can add another crosshair. The second crosshair will show you the differences delta in time and value of the signals. In addition, the number of zerocrossings i.e. switching from positive to negative or vice versa and the frequency of that part of the signal will be shown. A dialog will be opened where you can choose a directory and filename to store your montage. You can bind the F1 to F12 keys to twelve different montages. This way you can quickly switch between different montages by pressing key F1, F2, etc. Click on the first row F1; Now you can select a montage. You can assign twelve different montages to keys F1 F12.

Now you can quickly switch between predefined montages by pressing one of these keys. Use this option when you want to align two or more files manually. Userdefined synchronizing Files are timelocked with a custom offset. Usually after synchronizing the files manually. You can change which file should be the reference in the Time menu. You can adjust the horizontal position time of two different files by using two crosshairs. Put one crosshair at a signal of the first file and put the second crosshair at a signal of the second file. Now the position of the two crosshairs and that particular position of the two files will coincide with each other. Or you can drag a trace horizontally by keeping the middle mouse button wheel pressed. You can also edit labels signalnames, physical dimension, prefilter and transducer names. If the file you want to edit has been opened in EDFbrowser already, close it first before starting this tool. This tool can also be used to repair a file that can not be opened with EDFbrowser because of invalid characters in the header the EDF format allows 7bit ascii characters only or other errors. Close the header editor. Now open the file in the usual way. It supports different samplerates between the signals. Note to windowsusers these lines are separated by a linefeed only, so the file does NOT look OK in Notepad, use a real editor instead. Each line contains the commaseparated values of the sampletime and of all samples that were taken at that time. Different sampling frequencies are allowed in the file. In that case, not all signals are sampled at each sampletime. Those sample values are simply left empty, but the commaseparator is there. Then start the tool and select the file. Uncheck all the signals you do not want into the new

file. If you want to shorten the file, choose the first datarecord starttime and the last datarecord endtime. If you dont want to downsample, set the samplerate divider to 1 default.

Otherwise select one of the possible divider values. Those values depend on the actual samplerate and the datarecord duration. The antialiasing filter order can be choosen as well. The default is 4th order. This prevents practically any change of aliasing. The decimal separator of numbers must be a dot. The onset time encoding can be expressed as The startbit has always a high level and the stopbit has always a lowlevel. At idle the signal should stay at low level. The following example shows a dcevent with decimal code 170 The rising edge of the startbit represents the time of the event for example, an evoked potential. The voltage levels can be freely chosen. Note that the intervaltime between two consecutive events must be more than ten times the bittime. It is possible not to use the code but just only the startbit. Note The signal which contains the DCevent must be put on the screen in order to be available in the selectionscreen. Also, the signal must be unipolar, i.e. not a derivation. Next, the detectionalgorithm of the triggers in this signal will bypass any filters. The average of the majority is the zpage. The algorithm is derived from A common value in EEG applications is 3000 uV Physical minimum will be equal to physical maximum. By changing the multiplier you can add gain to the signal before converting. It is possible to exclude columns, by unchecking the corresponding row in the signalstable. Click on the startbutton to start the conversion. Click on the savebutton to save the entered parameters in a template. Click on the loadbutton to load parameters from a template. If you to choose this value too small, the top of the signal will clip at the peaks. If you choose this value too big, small values of the signal will not be visible and the signal will look coarse. Note 2 The maximum physical value that the converter can handle, is limited to 9999999. Values above will be clipped to 9999999 and values below 9999999 will be clipped at 9999999.