C86
Patient Monitor

- 15 inch LED touch screen.

C86 patient monitor is designed to meet your every second care of patients in clinical, configuring 12.1" LED touch screen, fixed handle, various mounting solutions as well as handwriting pen, it is therefore your optimal choice for acute care.
In case of different clinical environment such as in ICU, C86 provides IPX1 waterproof protection to satisfying strict environment requirements.

Fixed handle, more compact with small weight, easy to carry

Aesthetically pleasing new interface design

USB, VGA, network and multifunctional interface

Wall mount, rolling stand

Large capacity of Lithium battery support long time working without power supply

Configuration

Standard configuration

- ECG
- PR
- SpO_2
- NIBP
- RESP

Option configuration

- Dual-IBP
- BIS
- AG
- ICG
- Thermal Printer
- Nellcor/ Masimo SpO_2
- $EtCO_2$
- C.O.
- TEMP

Recommended configuration

	operating room	ICU	CCU	general ward
12-lead ECG	✓	✓	✓	×
MASIMO SpO_2	✓	✓	✓	×
Comen SpO_2	✓	✓	✓	✓
Side-stream $EtCO_2$	✓	✓	✓	×
Mainstream $EtCO_2$	✓	✓	×	×
BIS	✓	✓	✓	×
C.O.	✓	✓	✓	×
IBP	✓	✓	×	×
AG	✓	×	×	×
ICG	✓	✓	✓	×

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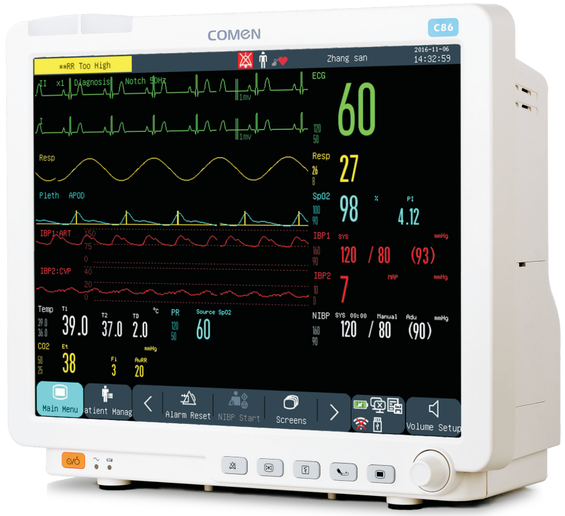
COMEN



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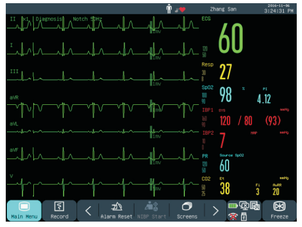
Patient Monitor

With leading ECG technology, anti-motion & week perfusion SPO_2 technology as well as accurate NIBP measurement technology and cooperation with word leading medical technique providers such as Masimo´ Covidien´ Respironics´ Medis，C86 is designed to optimize performances by configuring $Etco_2$, AG,BIS and noninvasive hemodynamic monitoring into one, helping you care even the most critical patients with professional assistance.

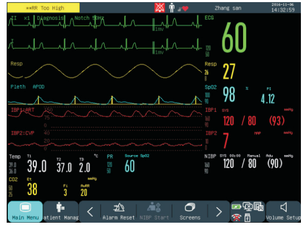
ECG

- 3/5/12-lead ECG measurement technology , leads automatic identification
- Intelligent leads off detection and automatically leads selection guarantee uninterrupted monitoring
- ECG ensures intensive monitoring for a particular waveform
- CMRR≥105dB, outstanding ECG anti-interference capability
- Support arrhymia analysis & ST segment analysis



IBP

2-channel IBP with SIMILAC accessories optional, Support monitor ABP, PAP, CVP, LAP, RAP, ICP etc

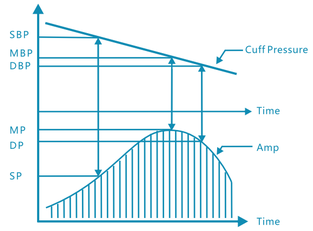


Masimo SpO_2

Performance Claim	MasimoSET Pulse Oximeter
SpO_2 Accuracy (70-100%)	
Adult/Pediatric (No Motion)	±2 digits
Adult/Pediatric (Motion)	±3 digits
Perfusion Index Range	0.02% - 20%
Accuracy in Low Perfusion	Adult ±2 Neo ±3 digits
Forehead Sensor	TF-I ±2 digits
Ear Sensor	TC-I ±3.5 digits
Fragile Skin non-adhesive (No Motion)	SofTouch ±3 digits
Fragile Skin non-adhesive (Motion)	SofTouch ±3 digits
SpO_2 Accuracy (60-80%)	
Adult/Pediatric (No Motion)	Not Currently Claimed[1]
Forehead Sensor	Not Available
Pulse Rate Accuracy (70%-100%)	
Pulse Rate (No Motion)	25 - 240 bpm ±3 digits
Pulse Rate (Motion)	25 - 240 bpm ±5 digits
Pulse Rate - Low Perfusion	25 - 240 bpm ±3 digits

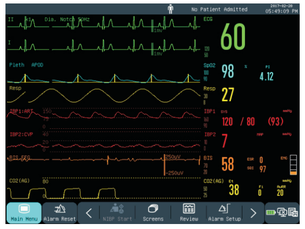
NIBP

AcuTec™ NIBP technology, high accuracy for hypertension monitoring.
The initial inflatable pressure can be selected to improve the accuracy of measurement and the comfort of patients.



Anesthetic Gas

Collaborates with MASIMO, adopts the advanced anesthetic gas module for monitoring 8 types of gas (O_2, Co_2, N_2O, ENF, ISO, DES, SEV, HAL). Automatic identification of the anesthetic gas, short time for warm-up, long service life and supports the MAC value (minimum alveolar concentration).



$EtCO_2$

- Collaborates with US RESPIRONICS, MASIMO, Plug and Play $EtCO_2$ monitoring.
- Use CAPNOSTAT 5 / IRMA mainstream sensor for optimal performance in monitoring intubated patient.
- Small, durable and lightweight mainstream sensor provides accurate and reliable monitoring for all intubated patients from neonates to adults.
- No calibration required.
- Use LoFlo / ISA sidestream sensor for monitoring non-intubated patient.
- Flexible, compact CO_2 sensor provides consistent and reliable monitoring of adult, pediatric and neonatal patients.
- Sample rate ⩽ 50ml/min(micro-stream).

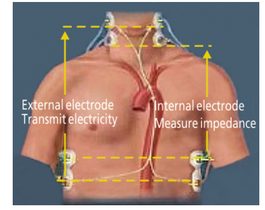
BIS (Depth of Anesthesia) module

The BIS module has been designed to be used in the monitoring of the evel of consciousness of aperson during the application of general anaesthesia or in intensive care. This is accomplished byregistering the electroencephalographic signal (EEG) by means of surface electrodes which is thenanalyzed by a digital process. As a result of the applied calculation, an index "BIS" is obtained, which serves as guidance to theexperts who use it to determine the level of consciousness of the patient during surgery.

Critical time
Seize every second to save life

Non-invasive Hemodynamic

- Collaborates with MEDIS, impedance cardiography for non-invasive continuous hemodynamic monitoring.
- Micro-signal transmit through disposable electrode.
- Blood volume and Blood Flow Velocity varies with heartbeat, DISQ®technology processes impedance signal variation.
- Variation of impedance applies to non-invasive Z MARC™ algorithm for acquiring SV, CO, SVR, Contractility and TFC etc.

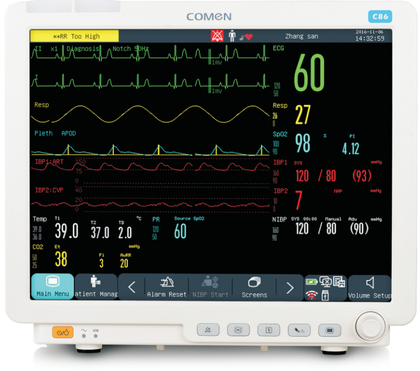


Intelligent Alarm

I-KLOK ®intelligent alarm management, auto-identification of alarm level. Self-adjust proper alarm time to reduce false alarms.

C.O. (invasive cardiac output) module

C86 is involved itself in invasive cardiac output technique, but C.O. measurement is conducted with conventional thermo dilution invasive cardiac output and other hemodynamic parameters. The monitor can measure "blood temperature", "calculating cardiac output", "calculating hemodynamics". The cardiac output is measured with floating catheter led from vein to pulmonary artery followed by injecting a certain amount of ice water at 0°C (injecta) such that the blood temperature will be varied after the injecta and blood output from the heart are mixed together thereby achieving cardiac output by measuring blood temperature variation before and after infected in accordance with the principle of heat balance.



- Support wire & wireless central monitoring system.