

# CARDIOVIT CS-200

### **INNOVATION AND EXCELLENCE**

The CARDIOVIT CS-200 is a multitasking system solution, combining proven diagnostic capabilities with the modern computer technology and the most widely accepted user-interface.



## **CARDIOVIT CS-200**

#### The Gold Standard

The CARDIOVIT CS-200 is the key to complete diagnostic services, including:

- 12-channel Resting ECG
- Automatic ECG measurements and interpretation (adult and pediatric)
- Vector Cardiography
- Pacemaker measurement
- QT Dispersion
- 12-channel fulldisclosure Exercise ECG, with ST monitoring and rhythm monitoring
- 24-h ECG Holter
- Fully integrated data management system
- Connection to network systems
- Resting rhythm recording
- Analysis of Ventricular Late Potentials
- Spirometry
- Ergospirometry

The open system architecture allows the implementation of new programs, future system expansion and network integration.



#### Innovations are our passion.

They belong to the SCHILLER brand and are the reason why SCHILLER ECG systems are outstanding and enjoy a worldwide reputation.

Thanks to 35 years of experience and close co-operation with the world's leading, practising cardiologists and physicians in the field of electrocardiography, we can provide you the CARDIOVIT CS-200, an ECG device which offers tailor-made solutions for professional diagnosis.

Due to a number of high-performance analysis and diagnostic tools, the CARDIOVIT CS-200 system has been able to extend its leading role. It offers even easier to use applications that increase the productivity, as well as innovative network solutions. Our excellent technologies facilitate the clinical decision-making and increase the reliability of your diagnoses.

New, advanced algorithms and analysis functions offer you additional opportunities when assessing the cardiac function during exercise tests. The CARDIOVIT CS-200 keeps up with your demands, be it in a laboratory with a great work volume or in a small practice where exercise tests are only performed occasionally. And what is more:

The CARDIOVIT CS-200 system can be configured very easily according to your information management requirements and supports simple as well as complex network solutions. Exercise tests performed with the CARDIOVIT CS-200 system are characterised by their accuracy, convenient application and efficiency.



Direct function keys provide single button operation for immediate ECG printouts.

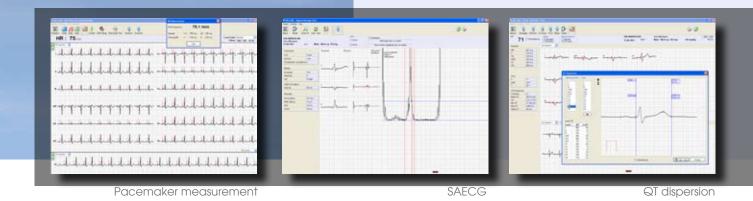
Autonomous emercency ECG (unique world wide).



Leading-Edge Technology: SCHILLER sets new standards in technology and know-how.

# Filtering the stress out of stress test data

The greatest challenge in the exercise test environment is to manage noise and movement artefacts present during the test. Several factors can create noise. SCHILLER offers four industry-leading programs for artefact and noise management to effectively suppress noise without compromising critical ECG data.



#### SPF SCHILLER Powerline Frequency

**Filter:** distortion-free suppression of superimposed 50 or 60 Hz sinusoidal interferences by adaptive digital filtering.

SSF SCHILLER Smoothing Filter, SMF SCHILLER Myogram Filter (muscle tremor filter): adaptive low pass smoothing filter to suppress muscle tremor and high-frequency noise: without affecting the QRS complex or the ST-T segment.

#### SBS SCHILLER Baseline Stabilizer:

filter to suppress or greatly reduce base line fluctuations without distorting the low frequency content of the ST-T segment (for resting and exercise ECGs).

When used in combination, these filters provide the physician with excellent ECG quality. They neither distort the computerised ECG interpretation nor the computerised ECG measurement values or the original ECG complexes. They greatly help the user to obtain a usable ECG at the

first attempt. Unlike traditional filtering systems, these filters do not influence the important diagnostic features of the ECG.

Excellent signal processing (noise reduction) is decisive to produce a high-quality output that can be further evaluated and interpreted by the physician.

## CS-200 Resting ECG

### Dynamic algorithms

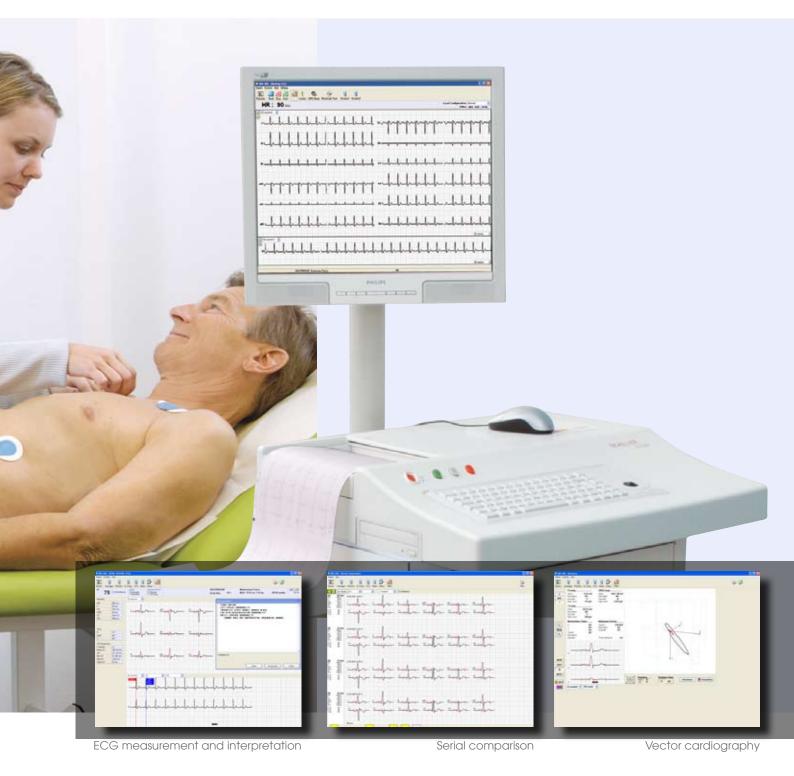
The CARDIOVIT CS-200 system offers you a comprehensive tool of clinically verified algorithms for the analysis and interpretation of ECGs.

The unique combination of arrhythmia and morphological algorithms creates further application opportunities for the disease management. This allows you to make more efficient therapeutic decisions and to employ invasive tests more specifically.

The SCHILLER measurement and interpretation software is the software of choice for hospitals, practices, clinics and clinical research institutes due to its excellent quality and reliability.



- SCHILLER measurement and interpretation software for children and adults (optional): 12-lead ECG analysis, offering quality and reliability without compromise. Your most valuable tool to get a clinically reliable second opinion.
- SAECG (high-resolution late potential analysis) (optional): the intuitive illustration allows a more efficient assessment of arrhythmic substrate in the heart, offering a convenient alternative to invasive procedures.
- Pacemaker detection software: corresponding to the latest pacemaker technologies.
- Pacemaker measurement software (optional): this advanced program measures the pacing frequency, performs individual measurements of pulse width for atrial and ventricular stimulation and determines the AV intervals.
- Vector cardiography (optional): the vector ECG gives you a three-dimensional view of the electrical activity and improves the assessment of the interior-posterior part of the heart.
- Serial ECG comparison: expansion of the SCHILLER measurement and interpretation software, allowing the analysis of short- and long-term changes in patient ECGs. Serial ECGs proved to be most efficient in the detection of myocardial infarctions, both for new, asymptomatic myocardial infarctions as well as for acute



myocardial infarctions in symptomatic patients. Serial electrocardiography is above all indispensable when assessing unstable angina pectoris.

• QT dispersion: indicates inhomogeneities in the ventricular repolarisation. The greater the QT dispersion, the more inhomogeneous the ventricular repolarisation and the greater the risk for a sudden cardiac death of the patient. QT dispersion analysis can be used as a further non-invasive method – in addition to signal averaged ECG (SAECG) and heart rate

variability (HRV) - for patients with an increased risk of life-threatening arrhythmia.

- **Rhythm ECG recording:** 12-lead full disclosure ECG recording, collecting up to 60 minutes of diagnostic data.
- Thrombolysis software (STP): helps physicians make decisions in preclinical care and in the emergency ward. Taking into account medication, age, sex and ECG of a patient, the program gives indications about the probability of acute cardiac ischaemia or the

acute coronary syndrome (ACS). The SCHILLER STP software package is an additional option to the computer-based ECG analysis. The information required for the calculation of the probability of an acute cardiac ischaemia is delivered in real time and is available for quality assurance matters at a later point.

(This software was validated in clinical studies at the Thorax Centre of the Erasmus University in Rotterdam (Professor Simoons))

## **CS-200 Exercise Testing**

# Redefining excellence in exercise testing

The CARDIOVIT CS-200 exercise testing system combines SCHILLER's proven ECG know-how with today's most modern, state-of-the-art personal computer innovations.

# Covering the full Spectrum of Electrocardiography

The CARDIOVIT CS-200 offers the performance of a conventional exercise testing system:

- Built-in, full-size thermal printer for immediate real-time printouts
- No start-up delay instant ECG reports at the push of a button
- Quick recording and printouts of ECGs
- Precise ECG measurements
- RS-232 and parallel interfaces
- Emergency ECG



The CARDIOVIT CS-200 exercise system benefits from the leading SCHILLER technology and a flexible and easily customised interface that meets the varying needs of different clinical scenarios.

The CARDIOVIT CS-200 exercise system's advanced features include colour graphic auto-comparison with superimposed current and reference complexes, continuous screen presentation of ST level and slope for all 12 average complexes, adaptation and re-analysis of the J-point, and an

interface for automatic blood pressure measurements.

The CARDIOVIT CS-200 exercise system offers configurable user profiles and the editing options known from Windows® to make the entire testing and reporting process more efficient. Unlimited full disclosure patient studies may be stored on the internal hard disk; moreover, the CARDIOVIT CS-200 system allows using a high-speed laser printer to significantly reduce paper expenses. In order to facilitate the timely distribution of test results, non-proprie-

tary Adobe Acrobat® PDF technology is used to create a portable electronic file that can be e-mailed for convenient review. This provides easy access to final report data without additional software expenses.

SCHILLER offers four patented, leading analysis programs for artefact and noise management to provide exceptionally clean ECG recordings without compromising the diagnostic quality of the ECG data. SCHILLER filters use the inherent redundancy of the 12-lead ECG to measure consistency among the various leads. Just



as a clinician can discern artefact from true signal by looking at multiple leads, SCHILLER filters perform a real-time analysis, resulting in clean ECG recordings without distortion of the true underlying signal.

SCHILLER BP-200 plus (optional) is an ambulatory blood pressure monitor for exercise testing. It is specifically designed for the use with treadmill, bicycle (ergometer) and pharmacological exercise tests. The SCHILLER BP-200 plus monitors the blood pressure, allowing you to focus on the

patient. Add the  ${\rm SpO}_2$  measurement option to make your exercise ECG system a complete and seamless diagnostic test centre. Whenever required, the SCHILLER BP-200 plus delivers reliable automatic blood pressure measurements. The BP-200 plus proprietary algorithms provide exceptional performance in this difficult environment. The hands-free interface makes BP-200 plus an indispensable part of exercise testing.

## CS-200 Spirometry

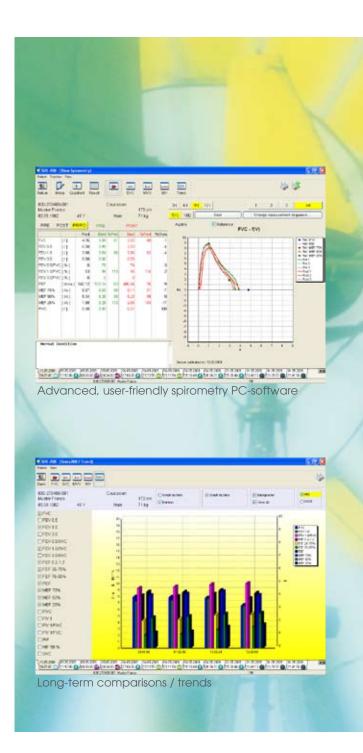
# PC spirometry of SCHILLER - easy and accurate

SCHILLER PC spirometry allows you to determine several diagnostically important parameters regarding static and dynamic lung volumes.

You can measure the slow (ERV, IC, VCin, VCex) and forced spirometry (FVC, VCmax, FEV1, MEF25, MEF50, MEF75, PEF, FEV1%VCmax, ...) as well as the maximum voluntary ventilation (MVV), and of course conduct pre-post comparisons. Easy operation pays off. You can enlarge the measurement windows to full screen with just a mouse click.

Moreover, the scaling of the axes can be adapted so that the curves are always clearly visible. SCHILLER PC spirometry is available with two alternative flow sensors. You can choose between the proven SP-150 disposable flow sensor (for optimal hygiene without calibration) and the reusable SP-20 sensor.

- · Calibration program
- Spirometry / flow-volume / MVV / MV
- Trend report
- · Interpretation program
- Pre-post comparison









## CS-200 Ergo-Spirometry

# Long experience in ergospirometry - compact and concise

#### Key features at a glance:

- The 12-channel ECG is completely integrated in the system
- Volume and Automatic gas calibration
- Ambient module
- Breath-by-Breath measurement
- Indirect Calorimetry (Nutrition assessment: For a perfect diet)
- Off-line blood gases/lactate
- Training and nutrition reports (LFsport)
- Interpretation with Ergocheck
- On-line display of test results
- Intrabreath: Testing during exercise
- Interfaces for hospital administration systems
- Modularly expandable

For your daily routine, you need an easy-to-use tool. We have therefore made the CARDIOVIT CS-200 ergospirometry even faster, more accurate and, above all, more economical.

The CARDIOVIT CS-200 ergospirometry is specialised in ergo-spirometric routine examinations. It combines everything you need in your daily routine, including practice-oriented performance data and an unparalleled ease of use. And the famous SCHILLER quality, of course. The modular concept permits upgrades

or expansion at a later stage – budget admitting or demands requiring.

To meet the high requirements, flow sensors are used in the CARDIOVIT CS-200 ergospirometry; these sensors are checked automatically, saving you time and effort. The patented flow sensors guarantee accurate measurements, have a small dead space and are light and small. They are therefore more comfortable for the patient, who is wearing a mask or mouthpiece with the sensor during the test.

In the same time it usually takes you to perform an exercise ECG or a pulmonary function test, you can conduct a complete, integrated metabolic test with the CARDIOVIT CS-200 ergospirometry. All you need for an exercise test with the CARDIOVIT CS-200 ergospirometry is integrated in a small device. No chemicals, expensive disposable tubes or flow sensors are required. All you need is calibration gas and disposable ECG electrodes (unless you prefer suction electrodes (optional)).

## SEMA-200 Data Management

### Manages and Archives Holter ECG und Ambulatory Blood Pressure Monitor (ABPM) data

Furthermore, in seamless combination with other SCHILLER applications, SEMA-200 will also manage and archive the following additional diagnostic data formats:

- Up to 72 hours of Ambulatory (Holter) ECG monitoring (requires MT-200 Holter program) including analysis of 2 or 3 channels, ST analysis, template matching, HR trend overview, HR variability, pacemaker templates, and reclassification in less than 2 seconds with "drag & drop" functionality.
- Up to 48 hours of Ambulatory Blood Pressure monitoring (requires MT-300 ABP program) including a measurement table, comprehensive statistical calculations, trends, and histograms.



Long term blood pressure Holter BR-102 plus



olter

24h ECG Holter

Are you contemplating an ECG management system? No problem with the CARDIOVIT CS-200.

Comprehensive network connectivity gives you access to the SCHILLER SEMA cardiology information system, optimising the workflow and enhancing the unit's functionality. Network access allows you to work more efficiently and receive additional support for clinical decisions.

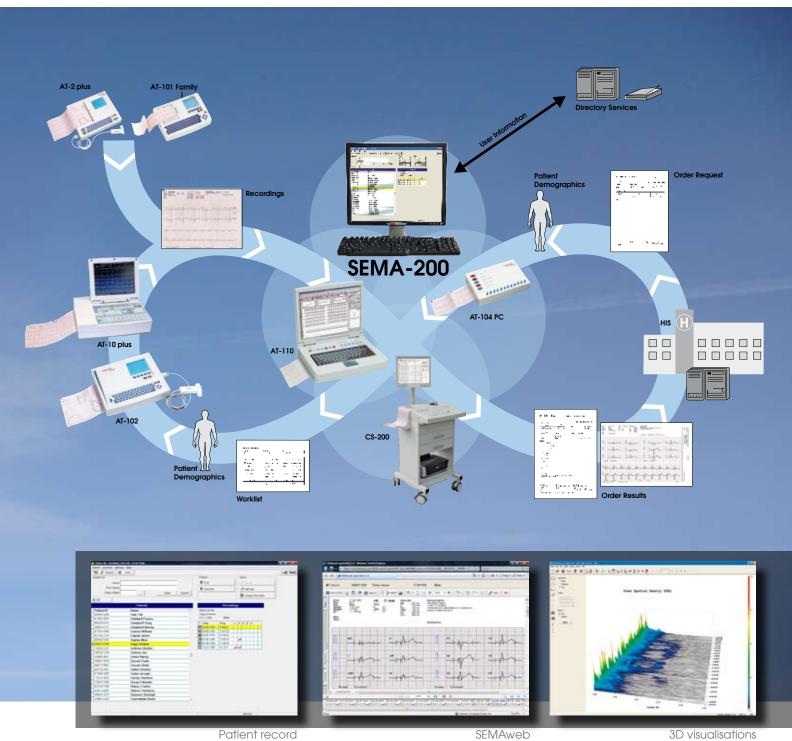
When connected to the SEMA-200 system, the CARDIOVIT CS-200 in-

cludes the functionality of a standard SEMA-200 client directly on the device. This offers unprecedented access to all previous studies and patient information at the time of testing. Analysis, interpretation and validation of recordings can either be done on the device itself, or in the comfort of your office on a SEMA-200 client.

Patient demographics can be automatically synchronised with Hospital Information Systems (HIS) or Electronic Medical Record (EMR) systems. This accelerates the time-consuming en-

try of patient data and minimises the probability of data entry errors. The optional barcode reader further increases efficiency through the automated entry of patient identifiers.

With the worklist function, a list of orders including patient demographics is downloaded directly to the device from HIS or EMR systems. This automates the ECG acquisition process and provides a traceable closed-loop workflow from order entry to billing.



Integration with the SEMA-200 data

management system enables the long-term archiving of your data, with easy to use search and editing tools to efficiently manage patients and recordings. Standard interfaces via HL7, GDT and XML further enable the CARDIOVIT CS-200 and SEMA-200 system to become integrated components in a larger systems solution, avoiding isolated information silos.

## THE ART OF CONNECTIVITY

## Technical Data CS-200

#### System:

Dimension: 60 x 62 x 153 cm (l x w x h)

Weight: 71 kg

Monitor: Size: 19" TFT LCD

Operator interface:

- Standard alphanumeric PC keyboard with built-in trackball
- Mouse
- Direct function keys for Start/Stop/MAN/AUTO-ECG

Power requirements: 115/230 V (nominal), 50/60 Hz

Power consumption: Max. 80 VA

Built-in uninterruptable power supply (UPS) provides at least 3 minutes of back-up power to system and printer (without monitor) in the event of power failure.

Operating system: WINDOWS™ XP Professional multi lingual

#### Storage medium:

- Hard disk
- DVD R/RW
- Network (Standard)

#### Hardware Options:

- Laser or inkjet printer
- ECG cable arm
- Electrode vacuum system
- Treadmill, ergometer or reclining ergometer
- BP-200 plus blood pressure device

All hardware options may be added at any time and are easily retrofitted.

#### Printing:

Chart paper: Thermoreactive, z-fold, width: A4, approx. 60 m, ready-to-file

Printing process:

Built-in high resolution thermal printer, 8 dots/mm amplitude axis, 40 dots/mm - time axis, @ 25 mm/sec. Paper speed:

5 / 10 / 12.5 / 25 / 50 mm/sec. (manual printout) Sensitivity:

5 / 10 / 20 mm/mV, automatic or manual selection Print format:

6 /12 channel printout optimally shown on a width of A4 (200 mm), automatic baseline adjustment Channels: 12

External printer (optional):

Printout on plain paper with laser or inkjet printer Frequency response: 0.05 – 150 Hz (IEC/AHA)

#### Safety Standards:

#### Specifications

Patient input: Fully floating and isolated, defibrillation protected (only with original SCHILLER patient cable) Safety Standards:

IEC/EN 60601-1, UL 60601-1; C22.2 No. 601.1- M90, IEC/ EN 60601-2-25, IEC/EN 60601-1-2 (EMC)

Protection Class: I according to IEC/EN 60601-1 (with internal power supply)

Applied Part: CF according IEC/EN 60601-1 Conformity:

according Directive 93/42/EEC (Medical Devices) Classification: Ila according Directive 93/92/EEC

#### Environmental conditions:

- Temperature, operating: 10 to 40 °C
- Temperature, storage: -10 to 50 °C
- Relative humidity, operating: 25 to 95 % (non-condensing)
- Pressure, operating: 700 to 1060 hPa

#### Resting ECG:

- Simultaneous acquisition of all 8 active electrode signals from 12 leads
- Sampling frequency: 4000 Hz
- Pacemaker detection:  $\geq \pm 2 \text{ mV/} \geq 0.1 \text{ msec.}$
- Emergency ECG
- Resting rhythm with event marking
- QT dispersion
- Review and re-measurement of all stored data Options:
- Computer-aided ECG interpretation for pediatric and adult ECGs (C)
- Vector Cardiography
- Late Potential analysis (time domaine)

#### **Exercise ECG:**

- Arrhythmia detection and review
- Standard and free programmable exercise protocols for bicycles and treadmills
- Automatic NIBP measurement
- Enlarged QRS complex with superimposed reference beat selectable for each lead
- Real time continuous ST analysis, amplitude and slope araphic
- Online ST measurement adjustment
- Re-analyse possibility of complete exercise test with ST, HR and NIBP trend graphic
- Borg scale, symptoms, end point criteria tables
- Emergency ECG any time possible

- Full disclosure rhythm review

#### SPF SCHILLER Powerline Frequency Filter:

Distortion-free suppression of superimposed 50 or 60 Hz sinusoidal interferences by adaptive digital filtering

SSF SCHILLER Smoothing Filter, SMF SCHILLER Myogram Filter (muscle tremor filter): 25 Hz/35 Hz low pass smoothing filter to suppress muscle tremor and highfrequency noise, without bothering the QRS complex SBS SCHILLER Baseline Stabilizer: Filter to suppress or greatly reduce baseline fluctuations without changing the measurement values (for Resting and Exercise ECGs) Online, Offline Anti Aliasing (to smooth the ECG signal

#### SEMA 200:

- Comprehensive management of diagnostic data of resting ECG, exercise ECG, spirometry, ergospirometry, 24-h ECG Holter, QT dispersion, SAECG
- Importing possibility via memory stick, network or RS-232 interface
- Validation of interpretation, measurement values and patient data
- Serial comparison of resting ECG data and curves on the screen

## BP-200 plus Blood Pressure Measurement (Option):

#### System:

Dimension: 222 x155 x 96 mm (l x w x h)

Weight: 1.08 kg (including SPO2, ECG Amp, excluding batteries)

Power supply:

External supply+9 VDC output @ 0-1.7 amps
LCD: Backlit graphical LCD with multi-language menu

- Interface: ECG and RS-232 interface for SCHILLER ECG stress
- test systems USB interface

Programming: Menu guidance 5 buttons Satety standards: IEC/EN 60601-1; UL 60601-1, C22.2 No. 601.1-M90; IEC/EN 60601-1-2 (EMC)

Protection Class: I according to IEC/EN 60601-1 (option: internal power supply)

Applied Part: BF/CF according IEC/EN 60601-1

Conformity: 0123 according Directive 93/42/ECC (Me-

Classification: Il a according Directive 93/42/EEC

#### Measurement:

Methods of measurement:

Primary: SCHILLER K-Sound Analysis with or without QRS trigger signal for stress test

Secondary: Oscillometric with smooth linear deflation for resting measurements

#### Measurement range:

- Systolic: 50 270 mmHg
- Diastolic: 20 150 mmHa - Heart rate: 40 – 250 BPM

Measurement intervals: 2 - 20 min.

Memory capacity: 200 measurements QRS Trigger:

Sianal from external ECG source

Sampling intervals: On command from ECG stress test system, manual or automatic measurement periods from 2 to 20 minute intervals

Indicator for the user: On screen message and audio tone for user defined ranges

#### Optional unit version:

Built in SpO<sub>2</sub> module and internal ECG amplifier (to generate the QRS- trigger signal to support the blood pressure measurement)

### Standard accessories:

- User guide
- Velcro fixing pads to secure cuff
- Adhesive pads to fix the microphone
- Ext. power supply
- Head phone
- Communication cable to stress test system
- QRS-trigger cable

### Optional accessories:

- Several cuff sizes
- Batterie charger
- Rechargeable batteries
- SpO, with cable and ear-sensor
- Pat. cable for internal ECG Amplifier
- (IEC coding, Code 1 / AHA coding, Code 2)

   Mini SD card for SW-Update and additional storage of the raw data

#### Spirometry:

#### Measured values:

FVC: FVC, FEV<sub>1.0</sub>′, FEV<sub>1.0</sub>′, FEV<sub>3.0</sub>′, FVC, FEV<sub>1.0</sub>′, FVC, FEV<sub>1.0</sub>′, FVC, FEV<sub>3.0</sub>′, FVC, FEV<sub>3.0</sub>′, FVC, FEF<sub>25.75%</sub>, FEF<sub>75.85%</sub>, PEF, MEF<sub>75%</sub>, MEF<sub>50%</sub>, MEF<sub>25%</sub>, FIVC, FIV<sub>1.0</sub>′, FIV<sub>1.0</sub>′, FIV<sub>1.0</sub>′, FIV<sub>1.0</sub>′, FVC, PIIF, MIF<sub>50%</sub>, SVC: SVC, ERV, IRV, TV

MV: MV. RR. TV MVV: MVV, RR, TV

#### Presentation:

- Flow/volume loop
- Volume/time graph
- Measurement values table
- -Trend display at >1 recording per patient
- Interpretation quadrant

#### Prediction equation:

Adults: ECCS, Austria, Crapo, Morris, Knudson, Knudson 76, Polgar, Berglund, Finland, India, Composite

Children: Quanier & Tammeling, Austria, India, Knudson, Knudson 76, Polgar

Extrapolated predicted values

Comparison: Pre/post medication possible

Standards compliance: ATS, ATS 94, OSHA, NIOSH

SPIROVIT SP-150 Pneumotach flowsensor for pulmonary function testing with disposable mouthpiece:

Dimensions: 118 x 36 x 28 mm; approx. 120 g

Measuring method: Pneumotachometer

Measuring accuracy: According to ATS standards < 3% Flow impedance: < 0.2 mbar\* s/l at 12 l/s

SPIROVIT SP-20 Pneumotach flowsensor for pulmonary

function testing with reusable mouthpiece:

Dimensions: 125 x 36 x 28 mm, approx. 160 g Measurina method, measurina ranges, measurina accuracy, flow impedance same as SP-150.

#### Basic unit:

- CS-200 Spirometry program with 4 PC based measurement programs for inspiratory and expiratory pulmonary function tests
- 1 pneumotach sensor (choice of SP-150 for disposable or SP-20 for reusable mouthpieces)
- Accessories: 2 noseclips and either 1 pack of disposable plastic mouthpieces (for SP-150) or 1 pack of disposable filters (for SP-20)
- 1 operating manual

Hardware option: Calibration syringe, P/N 2.100027

#### Ergo-Spirometry:

Technical Description Gas Analyzer:

Dimensions: (integrated into CS-200): 15 x 15 x 15 cm (l x h x w)

Weight: 2.35 kg
Power supply: 100 – 240 V, 50/60 Hz

Safety Class: VDE II, safety insulated, Class BF

#### Measurement Methods:

Breath-by-breath gas analysis

Flow volume processing according to ECCS or ATS

#### Amount of gas adjusted with STPD

#### Environmental sensors:

- Flow sensor insensitive to moisture: 0 to ± 17 l/sec., resolution 10 ml
- Temperature: 0 to 50 °C
- Barometer pressure: 600 to 1050 mBar

(measurement range: -100 to 3500 m above sea level) Flow measurement (patented diaphragm spiroceptor): Bi-directional pneumotacho flow sensor insensitive to moisture. Measurement range 0 to  $\pm$  17 l/sec., max. deviation ± 2.5 %, volume range 0 to 300 l, resolution 10 ml/sec

#### Gas analyzer

O, micro fuel cell:

Measurement range: 0 to 100 % O<sub>2</sub>

Measurement accuracy: Better than ± 0.1 %

Response time: < 80 msec. (10 to 90 %)

Ultra sound density method analyzer CO, Measurement range: 0 to 17.5 % CO.

Measurement accuracy: Better than ± 0.1 %

Response time: < 80 msec. (10 to 90 %) Fully automatic zero alignment and calibration of the

gas analyzers at minimal gas consumption

Automatic measurement of ambient conditions Manual entry of blood gas values (lactate etc.)

### Software:

Parameters: METS, VT, VE, fR, VO<sub>2</sub>, VCO<sub>2</sub>, RQ, VE/V, VO<sub>2</sub>-, VCO<sub>2</sub>-equivalents, O<sub>2</sub>-pulse, VD/VT, FEO<sub>2</sub>, FECO<sub>2</sub> as well as secondary parameters

Automatic determination of the anaerobic threshold after V-slope, CO<sub>2</sub> excess, EQO<sub>2</sub> minimum or RQ

Scaling optimization for the diagrams Editing possibility for all basic parameters

Export/import function with standardized protocols for integration into HIS

#### Operating Conditions:

Ambient temperature: Between 10 and 40 °C Relative humidity: Between 30 and 90 % Atmospheric pressure: Between 900 and 1060 hPa

The PowerCube produced by Ganshorn Medizin Electronic GmbH, Niederlauer, Germany, has been integrated into the CARDIOVIT CS-200 Ergo-Spiro device. It fully complies with SCHILLER's view on quality.

#### 24-h ECG Holter MT-101/200:

#### ECG acquisition:

#### ECG amplifier:

- Galvanically isolated: 5.5 kVDC
- Input impedance: >  $10 \text{ M}\Omega$
- Maximum electrode potential: ± 300 mVDC
- Common mode rejection: > 80 dB
- Dynamic range: ± 5.12 mVAC
- Frequency response: 0.05 150 Hz (-3 dB)
- Digital resolution: 2.5 µV, 12 bit
- Sampling frequency: 500 or 1000 Hz
- Time constant: = 3.2 sec.
- Pacemaker detection: ± 2..200 mV / 0.1..2 msec

- Patient cable: 2-lead: 4 electrodes
- 3-lead: 6 electrodes

#### Recorder:

#### Dimensions

94 x 61 x 20 mm, approx. 110 g (including battery) Data recording: Simultaneous 2- or 3-channel recording, differential

#### 24-h ECG Holter MT-101 nano:

#### ECG acquisition:

#### ECG amplifier:

- Galvanically isolated: 5.5 kVDC
- Input impedance: >  $10 \text{ M}\Omega$
- Maximum electrode potential: ± 300 mVDC
- Common mode rejection: > 80 dB
- Dynamic range: ± 5.12 mVAC
- Frequency response: 0.05 150 Hz (-3 dB)
- Digital resolution: 2.5 µV, 12 bit
- Samplina frequency: 500 or 1000 Hz
- Time constant: = 3.2 sec
- Pacemaker detection: ± 2..200 mV / 0.1..2 msec

### Patient cable:

- 2-lead: 5 electrodes
- 3-lead: 7 electrodes

#### Recorder

#### **Dimensions:**

62 x 58 x 18 mm (I/w/h)

Weight including rechargeable battery and memory

Data recording: Simultaneous 2- or 3-channel recording, differential

#### Long-term Blood Pressure Holter BR-102 plus:

#### System:

Dimensions:

101 x 69 x 28 mm (I x w x h)

Weight including rechargeable batteries: 198 g Power supply: 2 rechargeable NiMH batteries (≥ 2300 mAh), Type "AA"

LCD: Backlit graphical LCD with multi-language menu Interface: USB interface for data transfer and settings Programming: Menu guidance; 2 buttons

#### Measurement:

Methods of measurement: Auscultatoric (Korotkoff/Riva-Rocci) and oscillometric

Measurement duration: 24 h or 48 h

Measuring range, blood pressure: 30 - 300 mmHg

Measuring range, heart rate: 25 - 300 bpm Deflation rate: 2 - 9 mmHg/sec., automatic

Measurement intervals: 10 - 120 min

Memory capacity: Over 400 measurements and 30 sec. of voice recording

Option: Mini SD card for the additional storage of the raw

All technical data is subject to changes aiming to continuous innovations





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