

ACCESSORY CARE FOR YOUR LIFEWINDOW 9x AND LIFEWINDOW LITE Masimo/Respironics

ECG (Keep attached to monitor and hang leads and cable)

- LEADS: For these monitors, you can either have the 3 lead alligator clips (EC003) or the 3-lead snap in smooth clips (EC014). ECG leads should be replaced as needed. I would recommend about every 2 years so you still maintain good contact.
- CABLE: This should last for a long time unless it is damaged or chewed through. I would recommend changing this every 3-5 years. (EC001)

SPO2 (Keep attached to monitor and hang sensors and cable)

- Sensor: The technology of this SpO2 is Masimo. ***Please be sure when using lingual area (PO756 or PO758) to relocate the sensors position every 30 minutes to avoid pressure necrosis.*** These sensors will usually last about 8-12 months depending on use. You may see a sensor error on the screen of the monitor when this sensor needs to be changed.

Sensors: Tip Clip: PO756 – Transflectance: PO757 – Multisite Y Sensor PO758)

- Cable: Replace as needed. Every 3-5 years (PO 759)

SIDESTREAM CO2/MAINSTREAM CO2 (always remove and hang sidestream sample lines)

- The CO2 technology is Respironics. There are 4 different sample lines that can be used. All sample lines are good for 72hrs of use. I recommend when you open a new sample line to take tape and put the date on the sample line. If you are a busy clinic replace lines every 2 months, if you are a steady clinic replace lines every 3 months.
- All sample lines should be rotated between surgeries to give the line time to dry. I recommend hanging lines with mouth piece down and filter to the ceiling to allow all the moisture to drain down to the mouth piece.
- When opening a new sample line or if you are measuring the patient and the readings seem a little off you must do a zero calibration. Make sure the sample line is off the patient and you want to hit the zero-calibration button located in the CO2 parameter of you monitor. Once it reports it was successful the line/adaptor is ready to be used.
- Low humidity (No braiding): Trach tube above 4, dental cleanings or oral surgeries. (CAP121)
- High humidity: Trach tube above 4, surgeries only. (CAP120)
- Low dead space/Low humidity (No braiding): Trach tube under 4, dentals and oral surgeries. (CAP 122)
- Low dead space/High humidity: Trach tube under 4, surgeries. (CAP 123)
- Luer lock/Low Humidity (Equine): Trach tube above 4, dental cleanings or oral surgeries. (CAP124)
- Luer lock/High Humidity (Equine): Trach tube above 4, surgeries (CAP 125)

MAINSTREAM CO2: (Keep mainstream sensor attached to monitor and remove adapters only)

Though considered disposable (CAP112&113), in the veterinary field these are reused and recommended to be changed every 4-6 months. Please note if the adapter becomes broken or cracked it must be changed immediately and it is always best to keep extra on hand in your clinic.

- Airway Adapter- Disposable Regular Dead Space: Trach tube above 4, all surgeries and dentals(CAP112)
- Airway Adapter- Disposable Low Dead Space: Trach Tube under 4, all surgeries and dentals (CAP113)
- Airway Adapter – Low Dead Space Reusable: Trach tube under 4, all surgeries and dentals (CAP111) ****Autoclavable****
- Airway Adapter – Regular Dead Space Reusable: Trach tube above 4, all surgeries and dentals (CAP112) ****Autoclavable****
- Please perform zero-calibration when moving from regular dead space to low dead space adapters and vice versa. *Please find directions for zero-calibration above*

NIBP (Keep attached to monitor and hang hose and store cuffs in draw)

- Hose: Please check you hose for holes or gashes. This can cause the machine to give no readings. Change this hose as needed or if a gash or hole is reported. (BP013)
- Cuffs: All cuffs should have good sticking Velcro, no holes, or gashes in the tubing. Never tape a cuff to keep it on and never tie off the hose to avoid a hole. Cuffs should be replaced as needed. (Disposable BP014-BP018, Reusable BP019 and BP020)

TEMP (Keep attached to monitor and hang)

- Reusable Temp Probe- This probe has the sensor at the tip of the probe. Please be careful when placing this sensor to not hit hard feces or a wall in the rectum. This sensor usually last about 8-12 months depending on use. (TP004)

BATTERY

The monitor can stay on all the time if needed. We highly recommend to burn the battery at least 1x/monthly. To do this disconnect the power cord from the back of the LifeWindow. Let the monitor completely drain the battery until it shuts off. Then charge the monitor for about 12-18 hours or until the battery light turns green.

Masimo Animal Health Users Guide

PVI, SpO2, HR, and PI monitoring in Small Dogs (less than 60-70 lbs.) using TFI on Ventral Tail

The reflectance sensor has to pass through a thin capillary bed hit a bone and bounce back. It is important that the emitter and receiver touch directly on skin so you might have to do a light clip of hair around the ventral tail to get a reading.

Use vet wrap to place the sensor on the ventral base of the tail either transversely on a wide based tail or longitudinally if a narrow-based tail so that it can hit a coccygeal bone and bounce back.



Troubleshooting TFI Transflectance Sensor application

The transflectance sensor requires more technique to use than the lingual sensor.

Tips for using the transflectance sensor are:

If you wrap this sensor too tightly, you may impede perfusion to the sensor site. Wrap this sensor so that it is "snug". If the sensor is wrapped too loosely, it may move and display erroneous readings.

The most common site for this sensor is at the base of the tail close to the anus. Be sure there is no hair at this site and that the skin is not pigmented.

Option Site - TFI sensor on the metatarsal*. There is a spot immediately behind the large pad that has a slight indentation. Remove the hair and wrap the ankle securely, without too much pressure, and wait 10 to 15 seconds to see if you get a good pulse signal every time the heart beats. Utilize the PI and SIQ bar to help optimize sensor placement. If SIQ and PI are RED reposition sensor or try another site. If SIQ and PI are GREEN secure sensor in place with wrap.

PVI, SpO2, HR, and PI monitoring in Small Dogs (less than 60-70 lbs.) using TCI on the Tongue

If you have a small size dogs (less than 60-70 lbs.), then double folding their tongue to itself so that you can increase the thickness of the tongue tissue. After such folding, then place the lingual probe over the thickening tongue. **It is essential that the emitter and receiver are parallel.**

You should be able to get better PI and roughly after 3-4 minutes later you can get readings from PVI.

PVI, SpO₂, HR, and PI monitoring in Large Dogs using TCI on the Tongue

When monitoring SpO₂, HR, and PI only in Large Dogs (greater than 70 lbs.) place the Lingual TCI clip sensor on the tongue.

Make sure the tip of the tongue is touching the inner base of the sensor and **insure that the emitter and receiver are parallel.**

Troubleshooting

TCI Lingual Sensor

- This sensor can be placed on the right side, left side, or the end of the tongue. Wait approximately 10 to 15 seconds for an adequate pulse signal.
- If you are unable to obtain a SpO₂ reading, move the sensor to another site on the tongue and wait 10 to 15 seconds until an adequate pulse signal is displayed (green PI and SIQ bars).
- It is a good idea to secure the cables so the weight of the cable doesn't move the sensor.

The vulva or prepuce

- If the animal is large enough, it has been reported by some veterinarians that the prepuce or vulva might be an alternate site for the lingual clip sensor.

Achilles tendon

- On light colored animals (a color of gray or lighter), an alternate application site may be the Achilles tendon.

Having Issues? Please call Masimo Support 1 800-257-3810 ext 6302