

RespSense™ Capnograph LifeSense® Capnograph/Pulse Oximeter *For Cardiopulmonary Resuscitation*

Capnography is a valuable tool during cardiopulmonary resuscitation (CPR) of intubated patients.



Did You Know?

The absence of cardiac output and pulmonary blood flow often results in CO₂ levels that fall abruptly. Properly administered, capnography can help to identify lower end tidal CO₂ (EtCO₂) levels so that appropriate changes in CPR such as rate or force of compression can take place.

In the 2010 update of CPR Guidelines, the American Heart Association recommends “the use of quantitative waveform capnography for confirmation and monitoring of endotracheal tube placement.”¹

The RespSense™ and LifeSense® capnography monitors from Nonin Medical provide continuous and reliable monitoring to help monitor the quality of chest compressions and detect the return of spontaneous circulation (ROSC).



RespSense™
WIDESCREEN
Capnograph

LifeSense®
WIDESCREEN
Capnograph/
Pulse Oximeter with
8000AA Sensor

The Nonin Medical Advantage

Nonin capnography monitors are ideal for use in the emergency department and on code carts throughout the hospital and other clinical sites that need to be prepared to perform CPR.

Highly portable with a widescreen touch-panel display, the LifeSense, with SpO₂ monitoring, and RespSense monitors are accurate, easy-to-use devices that are suitable for infant through adult patients in a wide range of clinical settings.

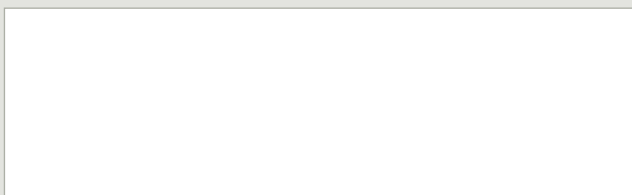
Key Benefits

- Fast, first breath detection of respiratory rate and end-tidal CO₂ (EtCO₂)
- Highly visible display
- Easy to use
- Small and lightweight for easy portability
- Unique moisture management
- Up to 8 hours of continuous battery life when fully charged
- Cost effective to purchase and operate with standard tubing
- Proven Nonin SpO₂ technology in the LifeSense monitor

Learn more: www.nonin.com/capnography

1) Field JM, Hazinski MF, Sayre MR, et al. 2010 American Heart Association Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care. Circulation. 2010;122:S640-S656

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