



SenTec Digital Monitoring System

Continuous noninvasive ventilation
and oxygenation monitoring in NICU

PCO₂ | **PO₂**

Continuous | Noninvasive | Accurate | Safe | Easy to Use

Transcutaneous, noninvasive blood gas monitoring



Overcoming limitations of arterial blood gases, etCO₂ and SpO₂ monitoring

Assessing ventilation and oxygenation in neonatal patients is a challenge. Maintaining normal PaCO₂ ranges in neonates is important as abnormal PaCO₂ values may have detrimental effects on neonates' brain and lungs. Neonates in critical care units often have fluctuations of PaCO₂¹.

Arterial blood gas sampling

provides only a snapshot every few hours and bears the risk of invasiveness, especially in neonatal patients², and is painful.

End-tidal CO₂ (etCO₂) monitoring

is sometimes inefficient in patients with small tidal volumes³ and inapplicable in certain ventilation modes such as HFO⁴.

Measuring SpO₂ alone

is not sufficient to detect hyperventilation or hypoventilation. Changes of arterial CO₂ levels can never be detected by SpO₂ monitoring alone.

Continuous and noninvasive monitoring of tcPCO₂ and tcPO₂ supports therapy guidance for neonates in the NICU

Neonatal Journey in the NICU	Prevent	Stabilize	Wean	Recover
Noninvasive Ventilation e.g. High Flow Oxygen Therapy or nCPAP				
Invasive Ventilation e.g. Conventional ventilation or HFOV/HFJV				

Dedicated to neonatal needs

SenTec digital transcutaneous (tc) sensors provide continuous and accurate measurements, supporting healthcare professionals to monitor ventilation and oxygenation in neonates. For better patient outcomes where it matters most.



Different display options:

- tcPCO2, tcPO2 and heating power trends
- baseline and delta values

Two different SenTec TC Sensors connectable

V-Sign™ Sensor PCO2

PCO2 measured by a Stow-Severinghaus type electrode.

- reliable and safe
- clinically trusted for more than 10 years



Optionally available:

OxiVenT™ Sensor PCO2 | PO2

SenTec's OxiVenT™ Sensor combines optical tcPO2 with a state-of-the-art tcPCO2 technique.

PCO2 measured by a Stow-Severinghaus-type electrode.

PO2 measured optically (virtually drift free).



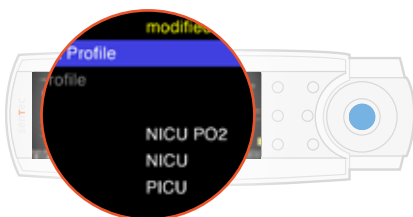


Set baseline and markers

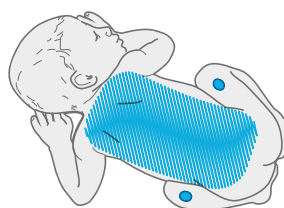
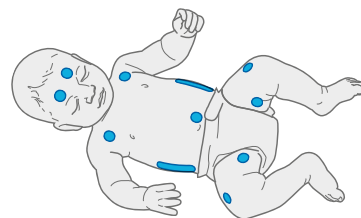
Set a baseline just before changing the treatment to assess the impact on the patient's ventilation and oxygenation.

User profiles

Quickly adapt settings to your needs: select individually customized profiles stored in the monitor.



Select from multiple recommended measurement sites



Trendlines allow early detection of ventilation and oxygenation changes

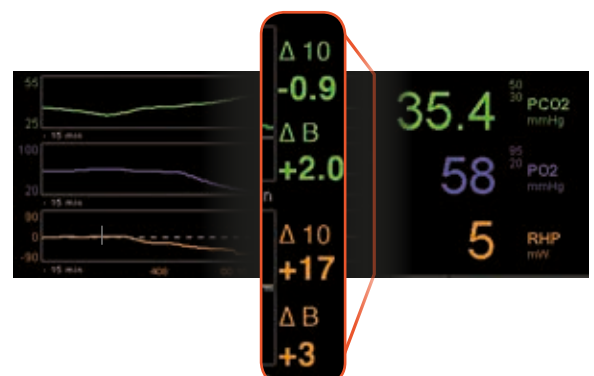
Estimates of PaCO2 and PaO2 in trendline, baselines and delta values.

Relative Heating Power

RHP shows the required heating power to keep the sensor at a set temperature. Changes of RHP may be attributable to changes in perfusion.

Delta values

Numerical indication of the difference between the current reading and the reading from the set baseline and e.g. 10 min before.



Effective and efficient monitoring

Save your time for the important tasks.



Smart CalMem

Disconnect the sensor (e.g. to untangle cables or to move the patient) without removing the sensor from the patient. No need to recalibrate the sensor when re-connecting.



Automatic calibration management

Simply store the sensor in the Docking Station – calibration is fully automatic. Within a few minutes, “Ready for Use” status is established and maintained until the sensor is applied to the patient.

Multi Site Attachment Rings (MAR)

The design enables a gentle sensor application and a smooth removal without damaging the sensitive skin.



Transportable

Lightweight, dedicated mounting plates/roll stands, and battery life up to 10 hours.

Connectivity | Data Management

Direct connectivity to Patient Monitoring Systems:

- GE
- Philips
- Dräger
- Mindray
- Spacelabs





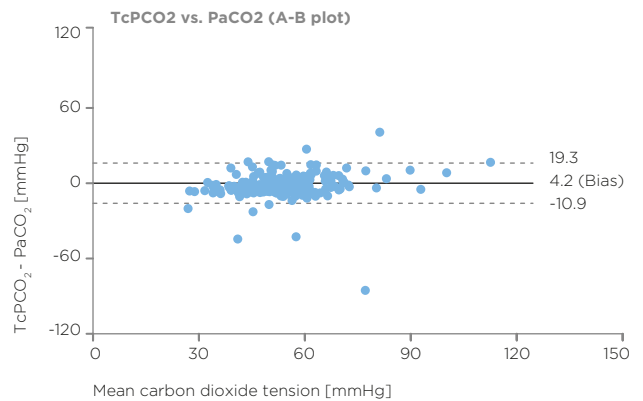
Making Sensor Application Safer and Easier

One application, one vial – Single Dose Contact Gel supports infection prevention initiatives.



Excellent accuracy

The high accuracy and safety of the SenTec tcPCO₂ sensor has been studied and validated in several clinical studies.



In a 2018 study⁵, Van Weteringen et al. demonstrated that tcPCO₂ measured with the SenTec Digital Monitoring System was in good agreement with conventional blood gas analysis. A total of 238 blood samples were analyzed from 69 infants with a gestational age of 24 to 31 weeks. Depending on their gestational age, infants were measured with a sensor temperature of 42 °C and 43 °C. The sensors were calibrated every two to three hours.

Reliable and safe



Safe sensor temperature and site time management

- A low sensor temperature of 41 °C for tcPCO₂^{6,7} is recommended and allows for up to 8 hours continuous monitoring in neonatal patients.
- Redundant sensor temperature controls to avoid the risk of skin irritations
- Automatic, customizable site time control and site inspection intervals
- Safety-relevant parameters are password-protected.

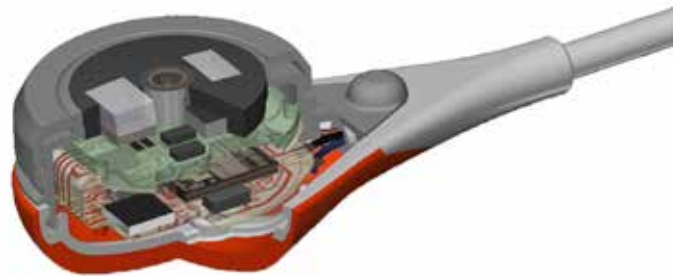


Automatic artifact detection

- Automatic data quality verification and artifact detection

Best signal quality

Digital Sensor with integrated CPU. Measured signals are digitized and preanalyzed in the sensor head for the best signal quality.



Clinically validated

Numerous clinical studies have been conducted with the SenTec Digital Monitoring System in the neonatal field. Leading neonatal hospitals around the world trust SenTec every day.



Literature

- ¹ **Wyatt, J.S., Edwards, A.D., Cope, M., Delpy, D.T., McCormick, D.C., Potter, A., Reynolds, E.O.**
Response of cerebral blood volume to changes in arterial carbon dioxide tension in preterm and term infants, *Pediatr Res.*, 1991, Jun 29(6): 553-7.
- ² **Mukhopadhyay, S., Maurer, R., Puopolo, K. M.**
Neonatal Transcutaneous Carbon Dioxide Monitoring - Effect on Clinical Management and Outcomes, *Respiratory Care*, 2016, 61(1), 90-97.
- ³ **Brouillette, R. T., Waxman, D.H.**
Evaluation of the newborn's blood gas status, 1997, *Clinical Chemistry* 43:1, 215-221.
- ⁴ **Berkenbosch, J. W., Tobias, J.**
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- ⁵ **Van Weteringen, W., Goos, T.G., van Essen, T., Gangaram-Panday, N.H., de Jonge, R.C.J., Reiss, I.K.M.**
Validation of a transcutaneous tcPO2/tcPCO2 sensor with an optical oxygen measurement in preterm neonates, Poster presentation at 14th European conference on pediatric and neonatal mechanical ventilation, Montreux 2018.
- ⁶ **Aly, S., El-Dib, M., Mohamed, M., Aly, H.**
Transcutaneous Carbon Dioxide Monitoring with Reduced-Temperature Probes in Very Low Birth Weight Infants, *Am J Perinatol* 2016.
- ⁷ **Sorensen, L.C., Brage-Andersen, L., Greisen, G.**
Effects of the transcutaneous electrode temperature on the accuracy of transcutaneous carbon dioxide tension, *Scandinavian Journal of Clinical and Laboratory Investigation*, 2011, Vol 71, 7, 548-552.

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