

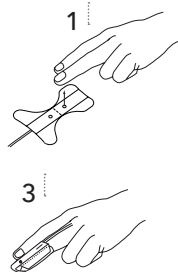
LNCS® Sensor Application



Adhesive Sensors / Non-Adhesive Sensors

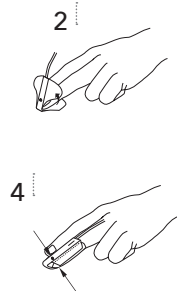
Adtx

Adult
>30 kg



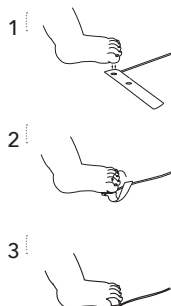
Pdtx

Pediatric
10-50 kg



Inf

Infant
3-20 kg



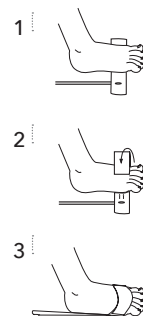
Neo

Adult
>40 kg



Neo/NeoPt/NeoPt-500

Neonatal
<3 kg



The site must be checked frequently or per clinical protocol to ensure adequate adhesion, circulation, skin integrity, and correct optical alignment. Exercise caution with poorly perfused patients; skin erosion and pressure necrosis can be caused when the sensor is not frequently moved. Assess site as frequently as every (1) hour with poorly perfused patients and move the sensor if there are signs of tissue ischemia.



See the Directions for Use (DFU) for the applicable LNCS and/or LNC Cable for more detailed information. Instructions/Directions for Use/Manuals are available in electronic format at <http://www.Masimo.com/TechDocs>

Technical Support: 1.800.326.4890
Customer Service: 1.877.4.MASIMO

For professional use. See instructions for use for full prescribing information including indications, contraindications, warnings and precautions. Caution: Federal (USA) law restricts this device to sale by or on the order of a physician.

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Troubleshooting

Tips for Successful Monitoring

The following general points will aid in ensuring oximetry monitoring success

- Choose a site that is well perfused and will completely cover the detector window; the site should be cleaned of debris and dried prior to sensor placement
- The ring or middle finger are preferred sites for adults and pediatrics; smaller fingers can be used if the fingers are large and/or thick
- Place the sensor on a site that is not too thick, has sufficient perfusion, and provides proper alignment of the emitter and detector
- Place the detector on the more fleshy area of the site with the emitter aligned directly over the detector
- Place the sensor on a site that has unrestricted blood flow
- If the adhesive no longer adheres to the skin, use a new sensor or use replacement tape
- When changing application sites or reattaching the sensor, first disconnect the sensor from the patient cable
- Do not select a site near potential electrical interference (electrosurgical unit, for example)
- Move the sensor to a better perfused site if the Perfusion Index (PI) reading is low
- Ensure the sensor is not applied too tightly

Difficult, Questionable, or No SpO₂ Reading

Inappropriate sensor, excessive motion, excessive ambient light, or strobe light interference

1. Always evaluate the patient's condition as the primary means of determining treatment
2. Verify correct sensor is being used for the patient
3. Verify the sensor is correctly positioned with the emitter positioned directly over the detector
4. In areas with excessive ambient light or monitors which emit bright light, cover the sensor with a dark or opaque material, then disconnect the sensor from the cable and reconnect

Low Perfusion

Low amplitude arterial pulsations

1. Make sure the emitter and photodetector are aligned directly opposite each other
2. Select a site where the distance between the emitter and detector are minimized
3. Rule out occlusion of blood flow; ensure that sensor is not on too tight
4. Select Max sensitivity or use a Masimo Trauma, Newborn Infant/Pediatric, or Newborn Neonatal sensor
5. Attempt to warm patient
6. Move sensor to better perfused site

See the Directions for Use (DFU) for the applicable Sensor and/or Cable for more detailed information.

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