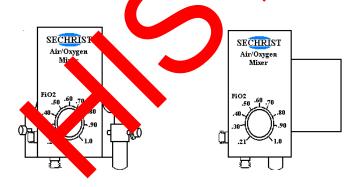


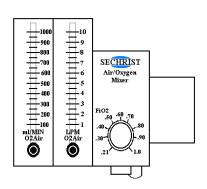
3500 / 3500HL Series Air / Oxygen Mixer

USER'S MANUAL Low Flow Models:

20099, 3500CP-G20451, 20459 & 20090 (Not Offered in US/Ec ope Markets)

High Tow Models: 360. & 3601







Sechrist Industries, Inc.

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FEDERAL LAW (USA) RESTRICTS THIS DEVICE TO SALE BY OR ON THE ORDER OF A PHYSICIAN.

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CEON



Registered Address:

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ii P/N 100001

INTRODUCTION

We at Sechrist Industries, Inc. thank you for choosing a Sechrist air/oxygen mixer. We also caution you that before attempting to use the mixer in a patient care setting, you must make yourself thoroughly familiar with the instructions in this manual and any product labeling. Throughout this manual, warnings, cautions, and notes will be utilized to bring your attention to particularly important matters.

USER/OWNERRESPONSIBILITY

WARNING: It is the responsibility of the procuring organization to assure they have the tooling, equipment and training necessary to perform the tasks they are procuring components or kits for.

WARNING: Hospitals or users who perform certain repairs and/or periodic service without undergoing training by Sechrist Industries assumes sole responsibility for any malfunction, which results from improper usage, faulty maintenance, improper or unauthorized repairs, damage or alteration performed.

The Sechrist mixer will perform in accordance with the specifications and descriptions contained within this manual and accompaning labeling when the mixer is operated and maintained in accordance with the instructions contained within this manual and other accompanying documentation. Do not attempt operate this equipment before reading and thoroughly understanding these instructions. The mixer should be checked periodically as specified within this manual (see Rous. The mixer should be provided at the Sechrist home offices in Anabeim, CA or by an interpretation of the provided and authorized by Sechrist Industries. However, Sechrist recognizes that some hospitals and other users maintain their own service groups from the lengineers and the provided space components and kits for such effort.

WARNINGS & CAUTIONS

WARNING: indicate the possibility of personal injury or death to the patient and/or operator of the dev.

CAUTION: indicate the potential of damage to equipment and/or other property if the cation is ignored.

Notes: call attention to statements that are intended to supplement or egal asize basic installing controlled within this manual.

WARNING: It is the responsibility of the procuring organization to as the they have the tooling, equipment and training necessary to perform the tasks they are procuring components or kits for.

WARNING: No modification of this equipment is glowed. Do not modify this equipment without authorization from the manufacturer. If this equipment is modified, appropriate inspection and testing in the continued safe use of the equipment.

WARNING: Hospitals or users who performed sertain repairs are or periodic service without undergoing training by Sechrist Industries assumes sole responsibility for any malfunction, buch resident performed.

WARNING: The user of the Sechrist of Oxygen Mixer shall have sole responsibility for any malfunction, which results from improper usage, faulty maintenance, improper and the chorized reports, damage or alteration performed by anyone other than Sechrist Industries.

WARNING: Alarm/bypass conditions but the corrected swiftly, as the selected oxygen concentration, will not be delivered during a bypass situation.

WARNING: Liquid water or other contaminants in either supply gas, particularly in the air supply, will cause malfunction of this equipment and any attached equipment. Supply gases should meet gas dryness of .0045 mg water per cubic centimeter of gas.

WARNING: Oxygen concentration must be monitored downstream from the mixer with a suitable, calibrated oxygen analyzer, equipped with alarms that can be set for high and low FIO2's. FIO2's should then be adjusted to maintain appropriate blood gas concentrations.

WARNING: The mixer is designed to mix air and O2 only; do not modify the inlets to accommodate any other source gases.

WARNING: Oxygen vigorously accelerates combustion. To avoid explosion hazard, do not expose the mixer to any instruments or other equipment that may have been contaminated by oil or grease. Gas supplied to the mixer must be extremely clean (no more than 25 parts per million (ppm) of gaseous hydrocarbons is allowed.) A high concentration of hydrocarbons in the gas supply is a fire hazard.

1

WARNING: The mixer audible alarm may not function when both air and O2 supply pressures are less than the minimum specified inlet pressure.

WARNING: The outlets have the capability of providing gas pressures equal to the inlet pressures. Therefore, any attached equipment must provide safety relief protection in order to prevent excessive pressures from being delivered to patients.

WARNING: Whenever a patient is attached to respiratory care equipment, constant attendance is required by qualified personnel. The use of alarm or monitoring systems does not provide absolute assurance of a warning for every possible system malfunction. In addition, some problems may require immediate attention.

WARNING: Excessive supply pressures (> 70 psi, 482 kPa) may result in mixer damage or malfunction. Use of a suitable supply gas regulation system is necessary.

WARNING: A Sechrist air/oxygen gas mixer is a sophisticated medical device designed for use by qualified personnel under the direction of a qualified physician.

WARNING: This product should only be maintained and repaired by a Sechrist Industries factory-trained technicial or by written instructions from Sechrist Industries. This product should not be modified in any way, except with prior written approval of Sechrist Industries Unapproved modifications can result in death or serious injury.

WARNING: The mixer does not contain gas-sterilizing filters and will supply the same quality of as sure lied from the gas ources. Use of appropriate gas purity and gas line filters is the responsibility of the user.

WARNING: When the Sechrist mixer is used to supplement respiratory equipment, the user refer to any follow the instructions provided by the manufacturer of the respiratory equipment.

CAUTION: Do not immerse the mixer in any solution. Do not sterilize.

CAUTION: This precision gas-mixing device may become nonfunctional damaged if used with the watertrap assembly and filters provided.

CAUTION: Before using this mixer, verify that the performance to perform procedure to performed by a qualified individual.

SUIVIMARYOFSYMBOLS

SYMBOL	MEANING	
\triangle	Caution	
	Manufacturer	
M	Date of Manufacture	
Ţ <u>i</u>	The symbol indicates to user/operator to refer to instruction manual/ booklet	
<u>^!</u>	Warning, prohibition or mandatory action	



Caution: Federal law restricts this device to sale by or on the order of a physician.

INDICATIONSFORUSE

Intended Use

The purpose of the device is to enable qualified personnel to mix medical-grade air and medical-grade oxygen, at operator selected ratios, for delivery to patients through various types of respiratory care equipment.

The Sechrist air/oxygen mixer is a precision pressure regulation and proportioning device, which is designed to accurately mix medical grade air and medical grade oxygen (O₂). The mixer can provide for FIO₂'s of .21 to 1.0 for delivery to a variety of respiratory devices. The mixer receives air and oxygen via diameter index safety system (D.I.S.S.) inlet connections at a nominal pressure of 50 psi. (344 kPa). The unit will operate satisfactorily with inlet pressures of 30 – 70 psi (207 - 482 kPa) providing that the pressures are within 20 psi (138 kPa) of one another. The Sechrist air/oxygen mixers may be indicated whenever precise concentrations of oxygen are required for clinical applications. Use of the mixer in its appropriate configuration, may be found throughout the healthcare environment. Uses include but may not be limited to bed delivery of precise oxygen concentrations directly to the patient or delivery of precise FIO₂'s to other equipment, such as a ventilator, isollettes, or resuscitation equipment.

CONTRAINDICATIONS

While supplemental oxygen therapy is not without possible side effects, such as absorption atelectasis, and or sen toxy, the detrimental ects of oxygen should never prevent its use when indicated ¹.

¹Donald F. Eagan, MD, Eagan's Fundamentals of Respiratory Care, Fifth Edition 1999

OPERATING INSTRUCTIONS

- Before using the mixer, verify that performance verification has been completed.
- If applicable, connect the mixer outlet to the inlet device that will be dering the oxy concentration to the patient.
- From reliable, pressure regulated gas sources, connect both molical grate ir and medical grade oxygen to the mixer inlets utilizing appropriate gas hoses (P/N IV 308 air supply hose and P/N IV 309 oxygen supply hose).

NOTE: The alarm/bypass will activate when the first gas connected. The alarm will reset upon the connection to the second gas supply.

- ◆ Using the calibrated control knob, select the desired an annual (FIO₂) from .21 to 1.0.
- If the configuration includes a flowmater/s, in gas flow through the flowmater (s) by tuning the knob(s) on the flowmater (s) counter clockwise to the desired flow setting.
- Begin the operation of the attached deliver unit, if appeable.
- After the selected gas mixed has younged out to come air from the delivery unit, analyze and monitor the delivered gas concentration with a calibrated oxygen analyzer. Appropriately set the high arm and marm limits on the analyzer.
- Periodically observe the watertrap amply for the accumulation of moisture. Moisture should be removed from the water trap assembly by depressing the valve at the bottom of the watertrap bowl.
- ♦ Periodically observe the oxygen analyzer and evaluate the delivered FIO₂.

SPECIFICATIONS

Multiple configurations are available, with and without attached flowmeter(s). All models utilize the same gas mixer and therefore the following specifications apply to all configurations.

High flow configurations	at least 100 lpm @ an FIO₂ of .60 with inlet pressures of 50 psi (344 kPa). Supply range of 30-70 psi produces an output
	flow within a range of 70-150 lpm
Low flow configurations	at least 40 lpm @ an FIO₂ of .60 with inlet pressures of 50 psi (344 kPa). Supply range of 30-70 psi produces an output
	flow within a range of 29-60 lpm

Supply Pressures **

Nominal	50 psi (344 kPa)± 10 psi (68 kPa) (@ 4.0 standard cubic feet per minute (SCFM) min. flow)
Minimum	30 psi (207 kPa)
Maximum	70 nsi (482 kPa)

Bleed Flow***

High flow configurations	8.0 to 10.0 lpm @ 16 lpm flow setting
Low flow configurations	2.5 to 4.5 lpm @ 8 lpm flow setting

Dimensions (without flow meters)

Height	6 inches (15.24 cm)
Width	6 inches (15.24 cm) (pole mount) / 6 ½ inches (16.51 cm) (wall mount)
Depth	6 inches (15.24 cm) (pole mount) / 5 ½ inches (13.97 cm) (wall mount)
Weight	6 lbs. (2.73 kg)

Service Life	2 y	/ear	S
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Optional flowmeters

1 – 10 lpm	± 3% of full scale
1 – 15 lpm	± 3% of full scale
0 – 16 lpm	± 3% of full scale
2 - 20 lpm	± 3% of full scale
2 – 32 lpm	± 3% of full scale
3 – 30 lpm	± 3% of full scal
100 - 1000 ml/min	± 3% of full

^{*}NOTE: The mixer will maintain the delivered FIO_2 within \pm 1% of the selected content ration with small fluctuations of the supply pressure. The additional 2% error results from the readability of the set point and scale error.

Optional Accessories

The following operator detail ble inlet results sees comply with Compressed Gas Association (CGA) V-1, V-5, and G-4.1:

Ref. IV 308 14 foot (4.27 m) An apply 55e

Ref. IV 309 14 foot (4.27 m) Oxygen Supply Hose

PERFORMANCE VERIFICATION

Prior to each clinical usage, the user should perform an alarm test and analyze the full FIO_2 range. With an accurately calibrated oxygen analyzer, the user should analyze the FIO_2 at the following settings; 21%, 40%, 60%, 80%, and 100%. Additionally, the user should briefly disconnect one supply gas to assure that the bypass/alarm system is functioning. With a single supply gas disconnected, the audible alarm should sound and the analyzed FIO_2 should indicate the FIO_2 of the single supply gas; i.e. 21% if the oxygen was disconnected and 100% if the air supply was disconnected.

The following more extensive procedure should be performed at least once a month, or more frequently as indicated or desired.

This procedure provides a means of determining if the mixer is functioning in accordance with the design specifications. This verification is intended to be performed in the health care setting by qualified personnel. The procedure should be followed exactly as outlined. If the mixer fails to meet the established standards, it should be removed from clinical application until calibration and/or service is accomplished (see troubleshooting section or service manual)

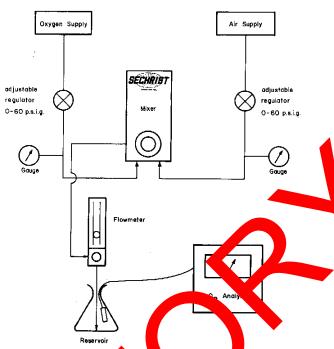
NOTE: It is strongly recommended that personnel responsible for performance verification testing keep accurate records of testing activities.

^{**}NOTE: The outlet pressure of the mixer will always be ghtly lower of the two supply pressures. Some respiratory equipment attached to the mixer may require closer tolerances; if so, consult with the manufacturer of the mixer may require.

^{***}NOTE: The bleed flow is located on the bottom of the proportion of the proportion of the bleed flow is located on the bottom of the proportion of the bleed flow is located on the bottom of the proportion of the bleed flow is located on the bottom of the proportion of the bleed flow is located on the bottom of the bleed flow is located on the bottom of the bleed flow is located on the bottom of the bleed flow is located on the bottom of the bleed flow is located on the bottom of the bleed flow is located on the bottom of the bleed flow is located on the bleed

The performance verification process requires a simple configuration as diagramed below.

Figure 2



- Connect the mixer to the supply gases with independently adjustable essuit esgulators.
- Connect a flowmeter to the mixer outlet.
- Direct the flow from the flowmeter to a reservoir (e.g. a land or to making sure that no room air is being entrained to dilute the mixture.
- Place a calibrated O₂ analyzer probe within the reservoir.

Test for overall accuracy

- Set both supply pressures to 50 psi (344 kPa
- Set the flowmeter to 8 lpm for confidentions was rate following f meters; 0 10 lpm, 1 15 lpm, 0 16 lpm, and 100 1000 ml/min.
- Set the flowmeter to 15 lpm for configurings with the following flowmeters; 2 20 lpm, 2 32 lpm, and 3 30 lpm.
- Compare the O₂ analyzer reading the following settings. Since the mixer has an overall accuracy of ± 3% and if the analyzer accuracy is within ± 1%, the following comparisons should agree within ± oints.
 - .2
 - .40
 - .60
 - .80
- Test for accuracy with varying inlet pressures.
 - Set the FIO₂ to .60 with the inlet pressures at 50 psi (344 kPa).
 - Verify the setting accuracy comparing the setting with the analyzed value.
 - Set the O₂ pressure to 40 psi (276 kPa) leaving the air supply at 60 psi (414 kPa).
 - Note the analyzer reading.
 - Set the O₂ pressure to 60 psi (414 kPa) and the air supply to 40 psi (276 kPa)
 - Note the analyzer reading.
 - ♦ Analyzed O₂ concentrations should vary by no more that 2% with the above pressure changes.

Test the alarm module function.

- Set supply pressures to 50 psi (344 kPa).
- Set the FIO₂ to .60.
- Reduce the air supply pressure to 24 psi. (166 kPa).
- The audible alarm should sound within the following pressure range of 24-28 psig, and the O₂ analyzer should read 100%.
- Slowly increase the air supply pressure to 50 psi (344 kPa). The alarm should cease and reset prior to obtaining a supply pressure of 40 p.s.i. (276 kPa).
- Reduce the O₂ supply pressure to 24 psi (166 kPa).
- The audible alarm should sound within the following pressure range of 24-28 psig, and the O₂ analyzer should read 21%.
- Slowly increase the O₂ supply pressure to 50 psi (344 kPa). The alarm should cease and reset prior to obtaining a supply pressure of 40 psi (276 kPa)

Check the inlet filters.

- To test the flow through the water trap filter and air inlet filter assemblies, a small test port has been provided on the rea fithe mixer just above the air inlet.
- Turn both supply gases off and allow the gases to cease flowing. With a ¼ inch hex nut driver, remove the plug from the topic port and install a 10-32 threaded nipple.
- Connect an accurate pressure gauge (0-60 psi) (0-414 kPa) to the nipple.
- Turn the supply gases on and set the flow to 16 lpm.
- Set the mixer FIO₂ control to .21.
- Observe the pressure registered by the gauge connected to the test port.
 - The difference between the test gauge pressure and the supply pressure should vary by no than 5 psi (34 kPa).
 - If the pressure differential is > 5 psi (34 kPa) replace the inlet filters as our red in the roles main ance section.

ROUTINEMAINTENANCE

NOTE: The manufacturer will make available on request circuit diagram component lists, descritions, calibration instructions, or other information that will assist trained service personnel to repair those parts of medical equipment to designated by the acturer as repairable by service personnel.

Routine maintenance of the mixer is limited to periodic performance verification explacement of the inlet filters and cleaning of the exterior surfaces. A mixer in need of calibration or service should not be used until the necessary professor and servicing may only be accomplished by personnel trained and authorized to do so by echrist Industries. Routine maintenance, as defined in this manual, may be performed by a competent individual having experience in the mair mance of deviation of the exterior surfaces. A mixer in need of calibration and servicing may only be accomplished by personnel trained and authorized to do so by echrist Industries. Routine maintenance, as defined in this manual, may be performed by a competent individual having experience in the mair mance of deviation of the exterior surfaces. A mixer in need of calibration or service should not be used until the necessary professor and the equipment has been tested to determine that it is functioning properly. Calibration and servicing may only be accomplished by personnel trained and authorized to do so by echrist Industries. Parts designated within this manual should be replaced only with parts manufactured or sold by Sechrist Industries.

Routine maintenance procedure

- Inlet filters
 - Periodically replace air water ap/in filter (P/N 3529E in Figure 4) at least every 6 months or as needed.
 - Replace the internal sinternal stainless steel filters (P/N 3522K in Figure 3) at least every 6 months or as needed.

	CAUTION
	Do not immerse the mixer in any solution. Do not attempt to sterilize.

Cleaning

> Exterior surfaces of the mixer may be wiped clean with a mild soap solution or a liquid disinfectant solution. Do not use cleaning agents that contain abrasives.

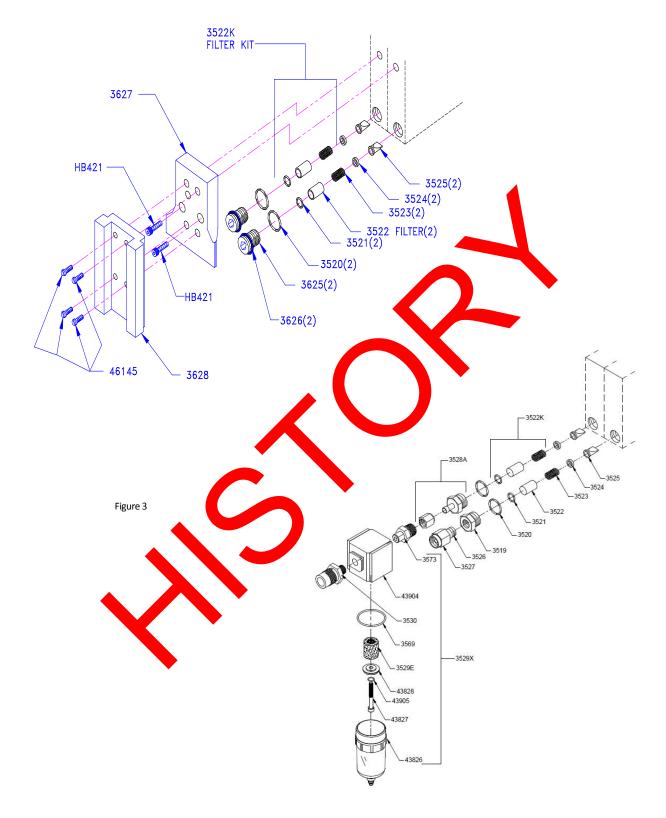


Figure 4

FACTORY OVERHAUL

In order to assure proper function and accuracy, the Sechrist air/oxygen mixers must be thoroughly overhauled every two- (2) years. To maintain the product warranty, this overhaul must be performed by Sechrist Industries or by Sechrist authorized personnel.

LIFETIMEOFDEVICE

The lifetime of Sechrist air/oxygen mixers is 20 years provided they are overhauled using Sechrist supplied components and Sechrist certified technicians once every 2 years.

TROUBLESHOOTING

Problem	Possible Cause	Correcti
	O ₂ analyzer out of calibration (most common problem).	Recalibrate O₂ analyzer.
	Improper purity of supply gases.	Check/verify supply a
Inaccurate FIO₂	Incorrect gas supplied to inlet.	Assure to could and hoses are collected correctly.
maccurate PiO ₂	Front and rear seats are worn.	
	Incorrect calibration of proportioning module.	**Recall te mixer as outlined in the service manual.
	Malfunctioning balancing module.	**R librate balancing module as outlined in the service panual.
FIO ₂ control knob is difficult to	Faceplate has shifted.	Reposit n faceplate.
turn.	Bent adjustment shaft.	place shaft and recalibrate as outlined in the service manual.
FIO₂ change > 1% when	Air or O₂ inlet filter may be dirty causing 20 psi (138 kPa) difference.	Replace inlet filter.
testing.	Regulator needle out of calibration.	**Recalibrate mixer as outlined in the service manual.
	Dirty inlet filter(s)	Replace filter(s).
Continuous alarm with both inlet pressures equal.	By has check all leaking	**Clean check ball and seat.
	Alarm is tyle out on libration.	**Recalibrate as outlined in the service manual.
	Descrive alarm ed.	**Replace alarm reed.
Alarm not sounding with the loss of pressure from one source gas.	A module out of calibration.	**Recalibrate as outlined in the service manual.
Jource Bas.	Alarm poppets stuck.	**Clean, lubricate poppets and recalibrate as outlined in the service manual.

If the problem or concern continues after taking the appropriate corrective action, consult an authorized Sechrist service representative or contact Sechrist Industries Technical Support.

^{**} To be performed only by authorized personnel.