BOOST QUICK GUIDE MPR2 logO DATALOGGER



Quick Guide is not a replacement for Instructions For Use. For detailed instructions refer to the MPR2 logO DATALOGGER and NEUROVENT-PTO/PTO2L/TO IFU.

Cable Connections



- A Remove grey cap and connect to the Cable LWL
- B Connect Cable PTO to yellow connector
- C Connect Cable DATALOGGER with grey ICP label to grey connector
- D Connect Cable DATALOGGER with blue pO2 label to blue connector
- E Connect **Power Supply** to the red connector (Power Port)

Catheter Connections

Connection between catheter and Cable LWL



Step 2: Turn the connector until it locks



Locked Connection

Connection between catheter and Cable PTO



Start Screen



- 1 Alarm LED
- 2 LED Power ON
- 3 ON/OFF Key Press and hold to turn on/off
- 4 Swichtes Audio off
- 5 Switches Background lighting on/off
- 6 Changes Display Screen
- 7 Toggle Key

- 8 Mem: Available Memory Batt: Battery Charge
- 9 Display Configuration
- 10 Delete
- 11 Selection
- 12 Navigate up
- 13 Navigate down
- 14 Confirmation
- 15 Create a New Patient
- 16 Select Memory Mode

Device Settings

 1.) To start a new measurement, select "New patient" and press "OK".



Continue Monitoring Current Patient Press 'Menu'. Select 'Continue measurement'. Confirm Press 'OK'.



Select Alarm Limit



Select 'Cur', for last applied alarm settings.

Select 'Std', for manufacturer alarm settings.



*If no alarm limits are displayed, the alarm has to be turned off. $pO2=p_nO_3=p_mO_3=p_mO_3$

Connecting to CNS Monitor

□ #4	Help
ICP1 T1	
	ICP2
ICP2 ICP 12.9 8 T2 37.51 8:8	pO2
ICPA 0.3	
	T2
poz 137.9 Output	0.4
(nnny) Rhplitude: 412 Out1 > inactive	
Out2 > inactive	Info

1. Select 'OUT'

2. 2. Connect Datalogger cables to CNS monitor (not the bedside monitor as the image and Raumedic monitor displays), then press 'OK'

[4] ↑4	
Analogue output Out1 and Out2 Connect the cables to the bedside monitor. Press OK, in order to begin the configuration of the analogue output.	OK
Out1 > ICP2 Out2 > pO2	
	ESC

 Calibrate Bedside monitor. Zero bedside monitor according to manufacturer's instructions. Verify that the bedside monitor displays a numeric zero, then press 'OK'.

4 ∲ 4	
Analogue outpu	t Out1 and Out2
zeroing on the c Press OK when	played, Carry out the onnected bedside monitor.
	ESC

 ICP2 and pO2 are now displayed on the bedside monitor, press 'OK'.

[4] ∰4	
Analogue output Out1 and Out2 The configuration of the analogue outputs	
has been successfully completed.	
Out1 > ICP2	
Outz > pOz	
	OK

4. Calibration Test for Accuracy. To ensure proper communication 20mmHg ± 2mmHg (18-22mmHg) should be displayed on the bedside monitor, then press 'OK'. If this value is not displayed repeat step 3 or plug Datalogger cable into new pressure port.

4 ∰4 Analogue 20.0 mmH the display confirm wit	△ 読證證 SP output Outl and Outl g is displayed. Run a of the connected mor h OK.	check on hitor and
		ESC

 Output field displays Out1 and OUT2 active. ICP and pO2 values will be displayed on both the MPR2 and the bedside monitor.

1 #4 △ 15:25:16 SP Batt	Help
ICP1 T1	
	ICP2
ICP2 ICP 12.9 1 T2 37.3	38 39:0 pO2
CPA 0.3	
	T2
po2 137.4 Output	0.4
(nnny) Amplitude: 412 Out1 > ICF	2
Out2 > pC	12 Info

Device Memory Indicator

 When memory is 50% full press 'OK'. Once memory is full the oldest data on monitor will be erased and it will continue to record.

RAUMEDIC 05.25.16 Batt	
Welcome 2.10.0064 U	
ast measurement: natient no 80	
Not enough memory	
More than 50% of the memory is occupied. Recommendation: Please delete the memory, but if you want, first backup the data on your PC.	
completely.	OK
Close window with OK	

Error Messages





 Once data has been saved to PC, press 'Del'. To erase all stored data press 'Shift' and 'Del' at the same time and all memory will be erased.

RAUMEDIC 05.25.16 Batt	
Welcome 2.10.0064 U Last measurement: patient no. 3	Dis
Select a function. ■New patient documentation	Del Menu
Select the method of data saving. ⊠Trend + curves (short play)	Ŷ л
With Del you can erase data memory completely.	
Close window with OK	ОK

pO2?

Amplitude below 375

Clean Optical connections

(Cable LWL A) with alcohol wipe:

- between Cable LWL and catheter
- and between Cable LWL and socket A on MPR2 logO Datalogger

Sensor?

When Sensor? occurs, press 'Info' for additional information. If cause cannot be remedied, switch off channel by pressing 'ICP2', 'pO2'or 'T2'.

Graphic Display



Troubleshooting Questionable O₂ Values

- O₂ Reactivity test if oxygen values are questionable
- → Oxygen Challenge: place patient at 100% FiO, for 10 min.
- → No change in O₂ values
 Check catheter placement by CT Scan
 - Slightly turn the catheter as

blood may be on the oxygen window. (Blood on O₂ window will return low or no value for pO₂)

Screen Indicator

- Use to switch to graphic Display Screen 1 Numeric Display (current display) Screen 2 Live Data Screen 3 Trend Data
 - Screen 4 Device Settings

Threshold¹ p_{ti}O₂

Oxygen Monitoring $p_{u}O_{2}$ denotes oxygen partial pressure in extracellular fluid of the brain. Normal brain oxygen 25-35 mmHg 20-15 mmHg treatment initiated

< 15 mmHg for more than 4 hr increased mortality

< 10 mmHg for more than 30 mins increased mortality or worsen outcome

Brain Trauma Foundation and the Joint Section of Neurotrauma and Critical Care of the American Association of Neurological Surgeons and the Congress of Neurological Surgeons: Guidelines for the Management of Sever Head Injury. Park Ridge, IL. Brain Trauma Foundation 2007

BOOST Firmware Settings

 To start a new measurement, select "New patient" and press "OK"



2. To blind pO2 select "pO2"

1 117	4 ∄	21.19 SP	Hen Batt	Help
ICP1		T1		
				ICP2
ICP2 ICF	· 1.3 ³⁰	T2	35.89 375	pO2
ICP/	0.5	Ĩ		
pO 2	181.6	Outpu	t	T2
(mHg)	Amplitude: 401	Out1	> inactive	Out
		Out2	> inactive	Info

3. Select "Menu"

1 🛉 107 🗸	10:36:5 03.21.1	SP	fleri Batt		
pO2					
Set alarm limits vi	a Menu	. The	setti	ings are	
activated by press	ing OK.			- I	Menu
Show value		Yes			
Use channel		i es			-
Alarm	Range			Active	Ŷ
pO2 (mmHg)	10		80	∎No	ESC
					ОK

 To Fully blind the pO2 value use the "down arrow" to select "NO" and press "OK"



- 5. After "NO" has been selected, the shown warning will appear. Please note that these settings will be saved even if the MPR2 is restarted. All of the alarm limits are turned off and need to be manually reactivated. After the warning has been read, press "OK" and the warning will disappear.
- 6. The pO2 value is blinded, now a "REC" will appear to show that pO2 is still measured and recorded, but the pO2 value is not displayed. The Amplitude will still be shown to ensure that the catheter is functioning properly. The Amplitude should never be below a minimum of 375, an Amplitude of 400 is considered ideal.

11	107 🛆 🏭	8:56 SP Bert			
	Display pO2	switched off			
	The display of th	e pO2 values is	\mathbf{h}		
	switched off. The disabled Please or	alarm limits are			
	switch on the display of the pO2				
VI Va	values, you must manually activate the				
		Proceed with OK			
pO:	2 REG	Dutput			
(nnHg.	Amplitude: 398	Out1 > inactive	OK		
		Out2 > inactive			

	10:32:21 SP Batt	Help
	ICP1 T1	
		ICP2
	ICP2 ICP 1.3 1 T2 35.89	37.5 35.8 pO2
	ICPA 0.5	
	p02 pec Output	T2
((mmHg) Amplitude: 401 Out1 > inactive	Out
	Out2 > inactive	Info

 To turn pO2 Display on, repeat steps 2 and 3. Use "up arrow" to select "Yes" and press "OK".

1 🛉 107 🛛 4	≏ #:27:18 SF	∍ Hen Batt		
pO2				
Set alarm limits v	ia Menu. The	e sett	ings are	
activated by press	sing UK.			
Show value	Yes		(ŵ
Ose channel	Rapao		Activo	Ŷ
pO2 (mmHa)	10	80	E No	ERC
po2 (1 10		1=110	Eau
			(ΟK

8. pO2 Value displayed.

	1 # 107 수 18:32:23 SP 않t	Help
	ICP1 T1	
		ICP2
	ICP2 ICP 1.3 ³⁸ T2 35.89 32.5	pO2
	ICPA 0.5	
/		T2
((mmHg) Amplitude: 401 Out1 > inactive	Out
	Out2 > inactive	Info

 Screen 4 displays if either the pO2 value is displayed or blinded.



US Contact:

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