

Neonatal / Pediatric Ventilation for Hospital, MRI and Transport

pNeuton mini ventilator with CPAP for invasive and non-invasive patient support

- Pure pneumatic operation — no electricity or batteries required
- Patient Range — 400 grams to 25 kg with continuous flow settings from 6 to 20 L/min
- IMV + CPAP or CPAP — use with ET tubes, nasal masks or prongs
- Built-in oxygen mixing — 21 to 100%, to meet the precise needs of your patient
- MRI conditional to 3T — use the mobile stand and remote alarm for safe ventilation next to the MRI



Reliable, versatile neonatal / pediatric ventilation for all patient care applications

The pNeuton mini ventilator is the *only* truly portable, pneumatic ventilator for neonates to children with nCPAP, oxygen mixing and patient alarms.

With a broad range of clinical applications, the mini provides immediate life support for at risk deliveries, transport and ventilation needs - short or long term, even tandem therapy with high-frequency ventilation.

With its CPAP mode the miniFlow Patient Interface supports the spontaneous breathing of newborns to optimize oxygenation, transport and weaning from the ventilator.



Patient Care Application;

- Intensive Care Unit
- Labor & Delivery
- MRI and Radiology
- Bunnell High-Frequency Jet Ventilation
- Transport — Intrahospital or Ground
- Air Transport — Helicopter / Fixed Wing



Specifications

pNeuton mini

Description

- Pneumatically powered for use on neonates, infants and children
- Patient Range - 400 gram to 25 kilogram
- Modes - CMV, IMV + CPAP or CPAP only - continuous flow pressure limited ventilation
- Pressures displayed on manometer
- MRI Conditional: static magnetic field of 3 T or less, maximum spatial gradient magnetic field of 720-gauss/cm or less, **no gauss line restriction**
- miniFlow Patient Interface supports nasal prong / mask application
- Gas Consumption - flow setting + 3 L/min oxygen
- Size - 6.0" H X 8.7" W X 7.8" D (15.2 cm X 22.1 cm X 19.8 cm)
- Weight - 9 lbs (4 kg)
- Input gas requirement (oxygen and medical air): 55 psi \pm 15 psi (3.8 bar \pm 1 bar) each gas
- Meets International Standards for Transport Ventilators
 - ASTM: F1100 90 - Ventilators Intended for Use in Critical Care
 - ISO: ISO 10651-3: 1997 - Lung Ventilators for Medical Use - Particular requirements for emergency and transport ventilators
 - Airworthiness: RTCA DO-160G - Environmental Conditions and Test Procedures for Airborne Equipment, as applicable

Control Settings

- | | |
|--------------------|---|
| • Inspiratory Time | 0.25 to 2 seconds |
| • Expiratory Time | 0.25 to 20 seconds |
| • Continuous Flow | 6, 8, 10, 15 or 20 L/min |
| • Peak pressure | 15 to 60 cm H ₂ O (mbar) |
| • PEEP / CPAP | 0 to 20 cm H ₂ O (mbar) |
| • Oxygen | 21 to 100% \pm 3%, requires oxygen and medical air source |



Audible and Visual Alarms

- All pneumatic alarm system (no batteries) with remote alarm output
- Patient Disconnect
 - Automatic reset when alarm condition resolves
 - 10 second response, 25 second silence / reset button
 - Pressure: less than 3 cm H₂O
- High Pressure - independently adjustable from Peak Pressure
- Low gas source pressure
 - If either source gas drops below 40 psi (2.8 bar)
 - Continues operation as long as oxygen is available

Specifications are subject to change at any time without notice.



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