

DIOI INFANT OXYGENATOR DI3I INFANT ARTERIAL FILTER

Designed for the WIDEST RANGE of pediatric patients

#### PRODUCT SPECIFICATIONS DIOO Oxygenator

STATIC PRIMING VOLUME (ml) MEMBRANE SURFACE AREA (m2) MAX BLOOD FLOW (maxflow, ml/min) Reference Flow AAMI (ml/min) DP @ maxflow (mmHg) HEAT EXCHANGER SURFACE AREA (m HEAT EXCHANGER EFFICIENCY @ max HARDSHELL RESERVOIR	– 0.22 – 700 – 1000* – 175 2) 0.03	
Capacity (ml)		
Minimum Operating Level (ml)	— 10	
Cardiotomy Filter Pore Size (µm)	- 33	
Venous Filter Pore Size (µm)		
Pressure Relief Valve	– +5/-80 mmHg	
OXYGENATOR MODULE CONNECTIONS	3	
Venous Inlet	3/16"1/4"	
Arterial Outlet	3/16"	
HARD-SHELL RESERVOIR CONNECTIONS		
Venous Return	3/16"1/4"	
Outlet	3/16"1/4"	
FILTERED PORTS		
Suction Inlets	— 7 x LL	
Vertical Inlet	3/16"	
Unfiltered Port	-LL	
COATING	- Phosphorylcholine	

\*AAMI reference flow is the flow in which oxygen delivery equals 40 ml/min/L of blood flow under AAMI standard conditions (35% Hct, 37C, Hgb=12 mg/dl, FiO<sub>2</sub>=100%).

#### PRODUCT SPECIFICATIONS D I 30 ARTERIAL FILTER

STATIC PRIMING VOLUME (ml, weighed) MAX BLOOD FLOW (ml/min) PORE SIZE (µm) CONNECTIONS Inlet Connector Outlet Connector Purging Lines COATING	_ 700 _ 40 _ 3/16" _ 3/16" _ 2 x LL
PRODUCT SPECIFICATIONS	
STATIC PRIMING VOLUME (ml, weighed) MAX BLOOD FLOW (ml/min) PORE SIZE (µm) CONNECTIONS Inlet Connector Outlet Connector Purging Lines COATING	2500 40 - 1/4" - 1/4" - 2xLL

TRUST SORIN GROUP TO DELIVER THE INNOVATIONS THAT CONTINUE TO ADVANCE PEDIATRIC PERFUSION.



The Sorin Group Italia Quality System complies with: EN ISO 13485:2003/AC:2007

MANUFACTURED BY: Sorin Group Italia S.r.l.

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#### PRODUCT SPECIFICATIONS DIOI OXYGENATOR

STATIC PRIMING VOLUME (ml) MEMBRANE SURFACE AREA (m2) MAX BLOOD FLOW (maxflow, ml/min) Reference Flow AAMI (ml/min) DP @ maxflow (mmHg) HEAT EXCHANGER SURFACE AREA (r HEAT EXCHANGER EFFICIENCY @ ma HARDSHELL RESERVOIR	— 0.61 — 2500 — 3500* — 155 n2) 0.06	
Capacity (ml)	1500	
Minimum Operating Level (ml)		
Cardiotomy Filter Pore Size (µm)		
Venous Filter Pore Size (µm)		
Pressure Relief Valve	— +5/-80 mmHa	
OXYGENATOR MODULE CONNECTION	NS	
Venous Inlet	1/4"	
Venous Inlet	<u> </u>	
HARD-SHELL RESERVOIR CONNECTIONS		
Venous Return	3/8" - 1/4"	
Outlet	1/4"	
FILTERED PORTS		
Suction Inlets	3 x 1/4" + 2 x 3/16"	
Vertical Inlet	— 1/4 <b>"</b>	
Additional Inlets	4 x LL	
Unfiltered Port	— LL	
COATING	Phosphorylcholine	

\*AAMI reference flow is the flow in which oxygen delivery equals 40 ml/min/L of blood flow under AAMI standard conditions (35% Hct, 37C, Hgb=12 mg/dl, FiO<sub>2</sub>=100%).

Code

#### Ordering Information DESCRIPTION

D100 Dideco KIDS Neonatal Oxygenator,	
with Hardshell Reservoir, Phisio coated	050531
D100 Dideco KIDS Neonatal Oxygenator,	
Oxy Module, Phisio coated	050534
D130 Dideco KIDS, Neonatal Arterial Filter, Phisio coated	050538
D120 Dideco KIDS, Neonatal Hardshell Reservoir Phisio coated -	050536
D101 Dideco KIDS Infant Oxygenator,	
with Hardshell Reservoir, Phisio coated	050540
D101 Dideco KIDS Infant Oxygenator,	
Oxy Module, Phisio coated	050543
D131 Dideco KIDS, Infant Arterial Filter, Phisio coated	050542
D121 Dideco KIDS, Infant Hardshell Reservoir, Phisio coated	050544
D633 Oxygenator Bracket	05083
D634 Arterial Filter Bracket	050539



# A COMPLETE FAMILY OF PEDIATRIC PERFUSION SYSTEMS



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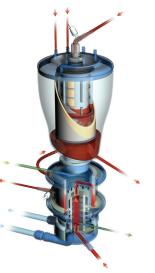




# PERFUSION SYSTEMS DESIGNED FOR THE BROADEST RANGE OF PEDIATRIC PATIENTS ...

Small, sensitive neonatal and pediatric patients deserve dedicated perfusion systems. The Dideco KIDS line of pediatric oxygenators and arterial filters are the latest from a long history of pediatric perfusion advancements from Sorin Group.

Designed to minimize hemodilution and reduce foreign surface area exposure, Dideco KIDS provides optimal clinical flexibility and perfusion support to a broad range of neonatal and pediatric patients.



# MINIMIZED SURFACE AREA

The D100 and D101 utilize a circumferential flow path to increase the efficiency of the membrane surface area in the oxygenator. As a result, surface area exposure is minimized, keeping  $O_2$ and CO<sub>2</sub> transfer rates balanced. By not having excess surface area, more precise CO<sub>2</sub> control is possible at lower rates.

### LOW PRIMING VOLUME

For true neonates, the D100 oxygenator and D130 arterial filter provides the smallest priming volume of any pediatric perfusion system in clinical use, just 47 mls.

For larger pediatric patients, the D101 oxygenator and D131 arterial filter offer the ideal balance between high performance and low priming volume: only 115 mls for patients up to 2.5 LPM blood flow.

## LOW SURFACE AREA

At 0.22 m2, the D100 membrane is sized for neonatal patients without unneeded surface area. The D101's 0.61 m<sup>2</sup> membrane is sized for a wide range pediatric patients.

## ADVANCED RESERVOIR

The D100 and D101 reservoirs include features that optimize performance but make set-up easy for adult fingers.

• Luer lock connectors on D100, to allow small tubing to be connected easily and quickly

 Integrated pressure relief valve for safer use with vacuum assisted drainage

• Low minimum operating level - only 10 ml for D100 and 30 ml for D101

• Unique hybrid cardiotomy filter (both screen and depth fiter) to reduce hold up volume and foreign surface contact

# INTUITIVE, FAST AND EASY SET-UP

The brackets hold each oxygenator securely with simple latches that are easy to use and maintain. The luer lock connectors on the D100 cardiotomy lid allow connection without trying to manipulate small diameter tubing onto barb ports. The gas inlet is located on the top of each oxygenator, and the reservoir can be rotated as needed to optimize visibility. Hansen fittings on the side of the oxygenators make water connections easy.

The D130 and D131 arterial filters utilize purge lines on both sides of the filter to make priming fast and easy. In the event of massive air in the arterial line, priming is made easier by purging both sides of the filter screen.



#### HIGH BIOCOMPATIBILITY

To deliver the best possible care for your neonatal and pediatric patients, Sorin Group has developed highly biocompatible products that feature phosphorylcholine (PC) coating. PC treatment provides a stable coating, which is demonstrated to be effective in improving platelet preservation and reducing platelet foreign surface adhesion.1

<sup>1</sup> DeSomer, et al. Phosphorylcholine coating of extracorporeal circuits provides natural protection against blood activation by the material surface. European Journal of Cardiothoracic Surgery 18 (2000) 602-606.



# Performance Data

# DIOO

Oxygen Transfer

0.5

Blood Flow Rate (LPM)

0.6

0.6

0.7

0.8

0.7

0.8

0.4

50 -

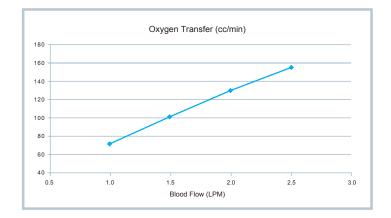
0.2

0.2

0.3

0.3

DIOI





The D130 and D131 arterial filters provide purge lines on both sides to make priming fast and easy.



# OPTIMAL RESERVOIR FOR THE SMALLEST PATIENTS

Matching the reservoir design to the patient size is an important step toward minimizing circuit volume. Our sequential cardiotomy filter automatically minimizes the filter surface area in contact with the blood while adjusting to the incoming flow volume.



The optimal reservoir shape and venous filter allow operation at extremely low levels: • 10 mls for D100

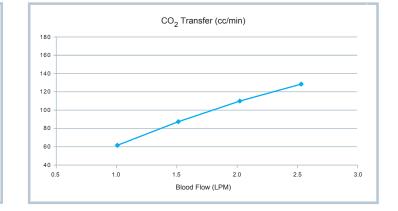
• 30 mls for D101

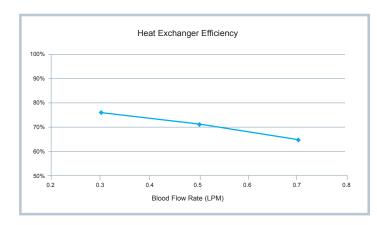
CO<sub>2</sub> Transfer 40

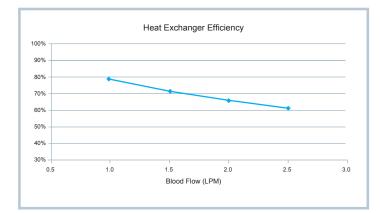
0.5

Blood Flow Rate (LPM)

0.4







Performance data: D100 and D101 In vitro tests with bovine blood at AAMI standards conditions Hgb: 12 ± 0,2 g/dl B.E.: 0 ± 5 mmol/l Blood Temp.: 37 ± 1 °C O<sub>2</sub> Venous Sat.: 65 ± 5 % Venous pCO<sub>2</sub>: 45 ± 5 mmHg Water flow rate at water side = 10 lpm

S5 MAST MOUNTED PUMPS AND DIDECO KIDS OXYGENATORS AND ARTERIAL FILTERS WORK TOGETHER

We have optimized both the pump and circuit design to further reduce prime volume.

