

### Innovation timeline

Philips, a long history of excellence in pulse oximetry

**1972 ←** · Discovery of pulse oximetry by Takuo Aoyagi 1976 -• First **in vivo oximeter** (no blood • 1988 draw required) from HP · First HP standalone pulse oximeter 1989 • First HP SpO<sub>2</sub> module for 1997 •— a multi-parameter monitor · First HP silicone sensors for · First HP adult silicone glove sensor pediatrics, neonates, ears 1998 --- First HP silicone sensors for **infants** 1999 • · FAST-SpO<sub>2</sub> (HP/Philips algorithm) 2002 released • FAST-SpO<sub>2</sub> algorithm available in IntelliVue monitors 2004 - First Philips 2005 single patient use finger clip · First Philips single patient use **cloth wrap** sensor sensor 2006 • First Philips reusable clip **→ 2007** sensor for **spot check** · Perfusion change indicator added to FAST-SpO<sub>2</sub> 2009 -· Signal quality indicator added to FAST-SpO<sub>2</sub> 2010 · First Philips non-adhesive, · Cableless single patient use wrap sensor SpO<sub>2</sub> pods and Mobile 2011 -**CL** sensors · Smart Alarm Delay added released to FAST-SpO<sub>2</sub> · New patient-worn device. MX40, with FAST-SpO<sub>2</sub> 2015 · Smart Alarm Delay 2018 released for USA · Philips Nasal Alar SpO<sub>2</sub> Sensor\* for poorly perfused patients

# SpO<sub>2</sub> sensors to meet your needs



You rely on pulse oximetry throughout your hospital, for applications ranging from the routine to the highly critical. Upon admission or when patients are being prepared for discharge, a spot check of a patient's pulse oximetry can provide reassurance or alert you to potential problems. When used in critical care, the need for reliable pulse oximetry escalates. Pulse oximetry delivers a fundamental measure of the well-being of your patients.

### Optimized for FAST

Our sensors are designed and optimized for FAST-SpO $_2$  (Fourier Artifact Suppression Technology). An algorithm used in our IntelliVue, Avalon, SureSigns, Efficia, HeartStart and Goldway monitors, FAST-SpO $_2$  filters out noise from the sensor signal, thereby addressing many issues associated with traditional pulse oximetry, such as interference from ambient light.

Designed and tested following Philips rigorous design controls process, our sensors achieve high levels of quality and durability. They meet applicable international standards set by regulatory authorities and standards bodies such as ISO and IEC.





Access to the appropriate  $\mathrm{SpO}_2$  sensor for each application is critical to offering each patient personalized, world-class monitoring. We invite you to explore the advantages of our full line of sensors that addresses needs across the healthcare continuum. Whether you are looking for sensors for particularly difficult applications or want to save money across your healthcare delivery system, Philips pulse oximetry sensors are a smart choice.

## Flexible options control costs

Partner with us and allow our clinical experts to assist you in selecting the sensors to fit your needs. Reusable options help control costs while single patient use varieties may reduce the risk of cross-contamination. We provide you with a variety of purchase options and offer risk-sharing programs. We will work with you to design a personalized program that accommodates your needs.

- By unit, hospital or healthcare network
- Bundled with modules, monitors, cables and sensors
- · Utilizing a discount agreement or via a strategic partnership
- For the length you desire, from 1-10 years

### Sensors for every department

For each area, we propose a primary purpose for pulse oximetry and recommend sensors to meet these clinical needs.



### **NICU**

Long-term, continuous monitoring

Single patient use, non-adhesive sensor

### L&D

**Continuous** monitoring

Reusable silicone boot sensor or low-adhesive sensor

### Pre-op

Single sensor throughout the case

Single patient use alar low-perfusion solution\*

### OR

Ongoing monitoring for most-acute patients

Single patient use alar low-perfusion solution\*

### **PACU**

Single sensor throughout the case

Single patient use alar low-perfusion solution\*

### **PICU**

Extended continuous monitoring

Reusable silicone sensor or weightspecific single patient use, non-adhesive sensor

### **Adult CCU**

Extended continuous monitoring

Reusable boot or clip sensor or single patient use alar low-perfusion solution\*

## Adult ICU, < two-day stay

Continuous monitoring

Low-adhesive sensor or reusable silicone boot sensor

### Adult ICU, longer stay

Continuous monitoring

Reusable silicone boot sensor or single patient use alar low-perfusion

### ED waiting, triage

Spot-checking

Reusable clip or silicone boot sensor

# ED observation, short-term stay

**Continuous** monitoring

Reusable glove sensor or lowadhesive sensor

### General ward

Spot-checking (or ICU sensor)

Vital signs machine-compatible silicone boot or reusable clip sensor

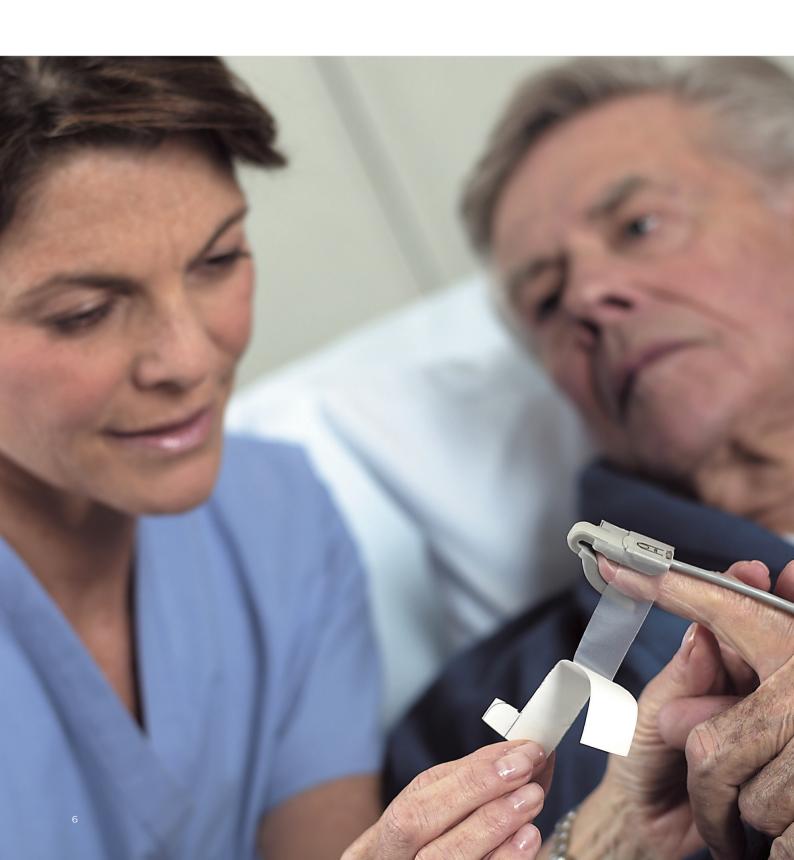
### Radiology – MRI

Nonferrous cables

Invivo Quick Connect or grip sensors Discover how Philips medical supplies and sensors can help you unlock the full value of your clinical monitoring systems at www.philips.com/supplies

<sup>\*</sup> The Philips Nasal Alar SpO, Sensor may not be available all geographies. Please check with your Philips representative for complete portfolio availability.

# Our versatile portfolio, your peace of mind



When choosing a sensor, you consider many variables, including patient size (neonatal, infant, pediatric or adult), diagnosis (injury, illness or infection), patient state (well or poorly perfused, ambulatory or sedentary), and location (emergency, surgery, intensive care or general ward). Concerns about cross-contamination and cost will also impact sensor choice.



### Extra comfort

Single patient use clip and VELCRO brand fastener wrap sensors accommodate patients who require a single patient use sensor and who are in the hospital for longer stays. They are comfortable and use little or no adhesive to hold them in place.



#### Accurate measurement in poorly perfused patients

Because poorly perfused, centralized or hypovolemic patients have decreased blood flow to extremities, measurement with traditional adhesive sensors can be challenging. Ear and alar sensors support more consistent SpO<sub>2</sub> measurement in these difficult cases.



#### **Portable oximetry**

Clip sensors allow quick and easy spot-checking of patients who do not need constant pulse oximetry monitoring.



Research has shown that the alar sensor showed lower prevalence of pressure injury than forehead sensors over five days of sensor use. The alar sensor provides easy accessibility and is ideal for patients with diminished peripheral blood flow, as well as those who might easily displace digit sensors, or when accessibility is limited (for example, during surgery).





#### **Built to last**

Silicone glove or wrap sensors offer a durable, multi-patient option that can be used for patients in the hospital for longer stays. Reusable sensors come with warranties of up to 18 months.



1. Compared to forehead sensors. Schallom M, Prentice D, Sona C, Mazuski J. Comparison of nasal and forehead oximetry accuracy and pressure injury in critically ill patients. Critical Care Medicine. 2015;44:12(Suppl.).

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