



The BioZ Dx is the world's first ICG device with 12-lead diagnostic ECG, providing clinicians with the unique ability to assess electrical and mechanical cardiovascular status in one convenient platform.

Reliable, Accurate ECG Analysis

The world-class Philips 12-Lead Interpretive Algorithm was developed by the Advanced Algorithm Research Center (AARC) and uses sophisticated mathematical processes for interpreting ECG waveforms. Advanced features include:

- Average Representative Beat
- Advanced Pacemaker Pulse Detection & Paced Rhythm Classification
- Age- and Gender-Specific ECG Interpretation
- Pediatric ECG Analysis Capabilities
- Highly Accurate ST Elevation Acute Myocardial Infarction (STEMI) Detection

Easy Connection, Operation, and Storage

The ECG Patient Cable simply plugs into a connector port in the back of the BioZ Dx. When the system initializes, the operator selects whether they wish to perform an ECG or ICG test.

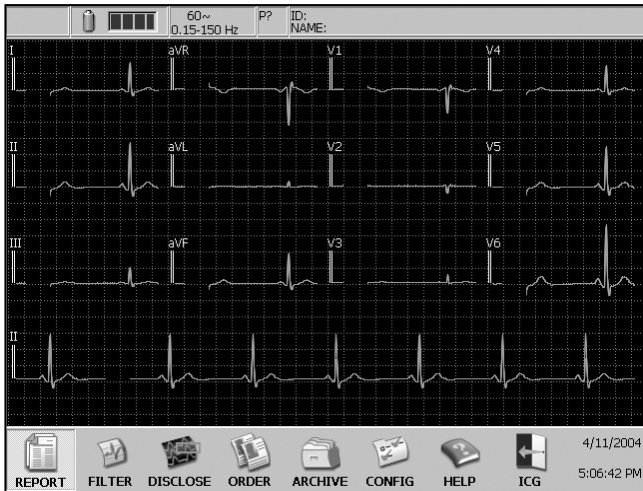
EMR (Electronic Medical Record) Interface

Stored patient ECG data is available in an HL-7 / XML format accessible by most EMR systems.

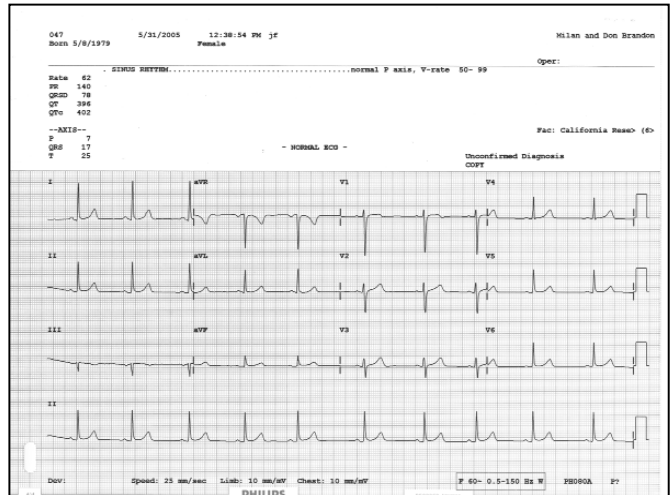
Reimbursement

As the ICG and ECG tests are still performed independently, the tests are reimbursed separately.

ECG Screen



ECG Report



ECG Interpretation

- The Philips 12-Lead Algorithm for interpretive analysis of the amplitudes, durations and morphologies of ECG waveforms and associated rhythm for adult and pediatric patients
- This clinically proven interpretation program provides configurable levels of interpretive, reason and severity statements that are printed on the ECG report

ECG Acquisition

- ECG signal acquisition of up to 12 leads for both adult and pediatric patients
- Real-time display, with patient name and ID
- Automatic and configurable pacemaker detection

ECG Quality Monitor

- Real-time ECG signal quality indicators provide instant user feedback on the location of loose or inoperable electrodes
- Color-coded waveforms indicate signal quality of each lead
- Artifact, AC, and low and high pass frequency filters

ECG Memory and Transfer

- The cardiograph provides storage memory for 150 ECGs, with easy transfer by optional modem, optional CF card, or optional LAN connection

Print Preview Capability

- Full-screen preview of ECG reports exactly as they appear when printed allows for quality assessment checks prior to printing

Technical Specifications

ECG Acquisition

- R/T (real-time) ECG (12 leads)
- AUTO (12 leads)
- RHYTHM (up to 12 leads)
- DISCLOSE (1 lead)

Signal Processing/Acquisition

Sampling Rate

- 2000 samples per second per electrode/lead
24-bit A/D conversion provides 5 μ V resolution

Auto Frequency Response

- 0.05-150 Hz, 0.15-150 Hz, 0.5-150 Hz, 0.05-100 Hz,
0.15-100 Hz, 0.5-100 Hz, 0.05-40 Hz, 0.15-40 Hz, 0.5-40 Hz

Rhythm Frequency Response

- 0.05-150 Hz, 0.15-150 Hz, 0.05-100 Hz, 0.15-100 Hz,
0.05-40 Hz, 0.15-40 Hz

Filters

- AC noise
- Artifact
- High and low pass

Printer Resolution

- High-resolution, integrated thermal printer
- 200 dpi (voltage axis) by 500 dpi (time axis) at 25 mm/sec

Report Formats

- 3x4 (1R, 3R)
- 6x2 (Standard, Cabrera)
- Rhythm (up to 12 selected leads plus Cabrera)
- 12-Lead Extended Measurements
- Disclose (1 minute of continuous waveform data for 1 selected lead)
- Pan-12 (Cabrera)
- 12x1 (Standard, Cabrera)

Battery Capacity/ Recharge

- Typically 40 ECGs on a single charge or 30 minutes of continuous rhythm recording
- No fail operation during ECG printing
- Charge for eight hours to full capacity

Network Connection (optional)

- 10 Base-T IEEE 802.3 Ethernet LAN card

FAX Capability

- Group 3, Class 1 or 2 fax modem protocol
- Support for PCMCIA fax modem

Modem (optional)

- V.90, K56flex, enhanced V.34, V.32bis, V.32, V.22bis and below

Barcode Reader

- Reads Code 39 Symbology

ECG Storage

- Storage for 150 ECGs
- 150 ECGs typical per 128 MB PCMCIA card (optional)

ECG File Formats

- XML and XML SVG, Stored at 500Hz

Safety & Performance

Meets the following requirements for Safety & Performance:

- IEC 60601-1: 1988 +A1:1991 +A2:1995
- IEC 60601-1-2: 2001
- IEC 60601-2-25: 1993 + A1:1999
- UL 2601-1:1997
- CAN/CSA-C22.2 No. 601.1-M90 S1:1994 B:1996
- AAMI EC11 1991
- CISPR11: 1997 + A1:1999 + A2:2002
- JIS T 1202: 1998

CardioDynamics

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