

# INFIVISION ET 1000

## Electrical Impedance Tomography

### ✓ A quick assessment of diagnosis and treatment

Infivision ET1000 provides quick assessment and bedside pulmonary ventilation and perfusion, with intuitive imaging to assist doctors in making diagnosis and treatment plans, offering timely guidance.

### ✓ Continuously monitoring

Monitoring changes in the condition and treatment effects throughout the process ensures continuous safety assurance.

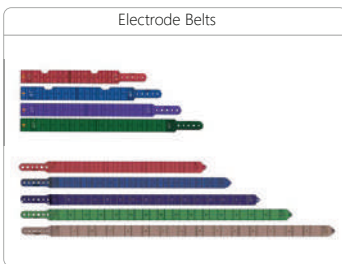
### ✓ Individualized respiratory management

Individualized and precise treatment can provide more direct and timely guidance for accelerating the recovery of patients.

### ✓ Easy to use

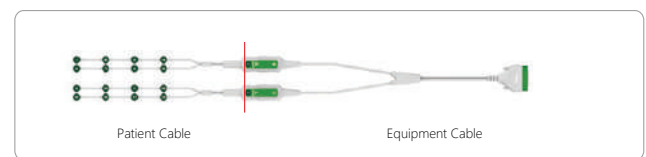
The belt is easy to position and operates with simplicity. Image acquisition is rapid and intuitive, facilitating clear and immediate interpretation by healthcare workers.

### Accessories



Electrode Belts Size	
Chest Circumference	Suggest Model
35.5~44.5cm	4XS
41.5~52.5cm	3XS
49~60 cm	2XS
57.5~72.5 cm	XS
70~85cm	SS
80~96 cm	S
92~110cm	M
106~127cm	L
124~150cm	XL

### Cables



**Exclusive Technology**  
The world's pioneer in pulse wave perfusion imaging, which is contrast agent free and completely non-invasive.

**Functional Imaging**  
Functional imaging assists health workers in observing changes in medical conditions by visualizing pulmonary ventilation and perfusion alterations.

**Real Time**  
To see the pulmonary functional changes without any delay.

**Beside**  
Safeguard stands next to the patients, saving both cost & time.

**Non-Invasive**  
Ensuring safety, minimizing risks and enhancing patient comfort.

**Portable Design**  
Ultra-portable, easy to carry, ideal for on-the-spot ICU use.

**Radiation Free**  
Eliminates the risks associated with radiation, ensuring patient well-being with repeated use.

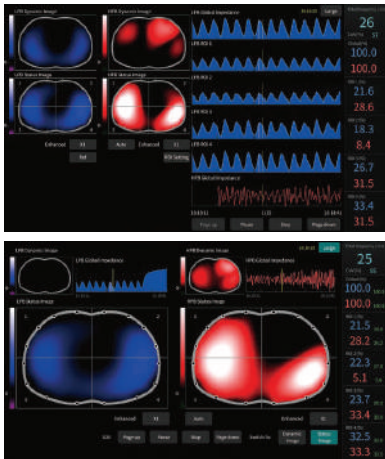
**Facilitating Research**  
Supports data export and empowers in-depth scientific research by providing specialized data analysis software (ETSA), enabling comprehensive study and innovation in medical science.



**ABABIL**  
PEOPLE | PASSION | PRODUCTS

## Diverse Analysis tools

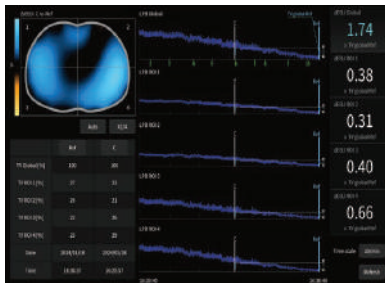
### Main View ( Main Veiw & Large Mode )



Provides several sections to help quickly assess key pulmonary function information which include:

- ✓ Continuous, dynamic images of ventilation and perfusion.
- ✓ Status images of overall and region-of-interest distribution of ventilation and perfusion.
- ✓ Display the numerical values or percentages for regional respiratory and perfusion impedance changes & display the ratio of the center of ventilation COV%.

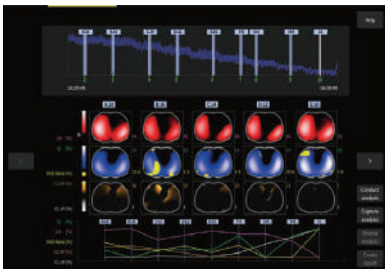
### ΔEELI View



This view is used to assess the changes of End Expiratory Lung Impedance ( $\Delta$ EELI) to

- ✓ Evaluate changes in  $\Delta$ End-expiratory lung volume ( $\Delta$ EELV) which reflect alterations in Functional Residual Capacity (FRC) (Ex-After modifying the Positive End-Expiratory Pressure (PEEP), applying recruitment maneuvers, or proning the patient).
- ✓ Aiding in the detection of possible recruitment of individual lung areas.
- ✓ Aiding in the detection of possible derecruitment of individual lung areas

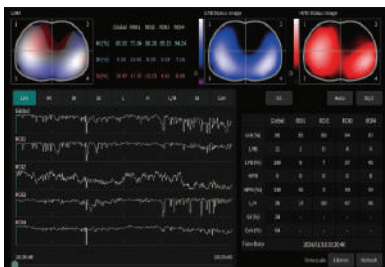
### Analysis View



Allows the analysis of regional compliance changes and delays in regional ventilation in addition to the evaluation of ventilation & perfusion distribution.

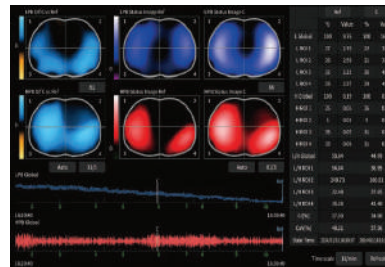
- ✓ Automatically evaluate progressive and regressive PEEP adjustments to identify the optimal PEEP that effectively balances between over-expansion and collapse.
- ✓ Evaluate the potential for lung recruitment.
- ✓ Shows the correlation degree between ventilation and perfusion, based on impedance variation status images.

### Match View



Facilitating research by giving more information such as MI (match index), DI (deadspace index), SI (shunt index) and related waveforms to observe and explore more.

### Trend View



Compares the respiratory and perfusion images corresponding to any two given time points to

- ✓ Help to identify possible overdistension.
- ✓ To detect the onset of derecruitment during PEEP titration.
- ✓ Identify ARDS patients' response to a recruitment maneuver.



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