

## THIS IS VENTILATION

Evita® V800

Evita® V600



# Our mission: Improving outcomes in Intensive Care



**41%** of patients who are artificially ventilated for at least 14 days, will survive the next year.<sup>1</sup>

As your specialist in acute care, we focus on reducing mortality rates in the ICU. Supporting patient outcome and increasing staff satisfaction in the ICU via connected technologies and services that help achieve therapeutic goals faster and safer is what drives us.

## AVOIDING ICU-ACQUIRED WEAKNESS

- Start the weaning process as early as possible to help reduce ventilation time.
- Encourage spontaneous breathing, which helps train of respiratory muscles and start early mobilisation activities.
- Improve sedation management and optimise patient interaction.

## AVOIDING COGNITIVE IMPAIRMENT

- Provide a comfortable and supportive environment that helps your patient feel calm and at ease.
- Turn the ICU into a healing environment and enable the patient to feel more comfortable in a family-friendly integrated surrounding.



## PREVENTION OF VALI / ARDS

- Protect the lung with personalised ventilation strategies.
- Support spontaneous breathing at any time to provide a seamless transition from controlled ventilation to patient contribution.
- Improve clinical results with decision supporting insights from multiple sources.

1) Damuth et al. Lancet Respir Med 2015





# All ventilation



Evita® V800



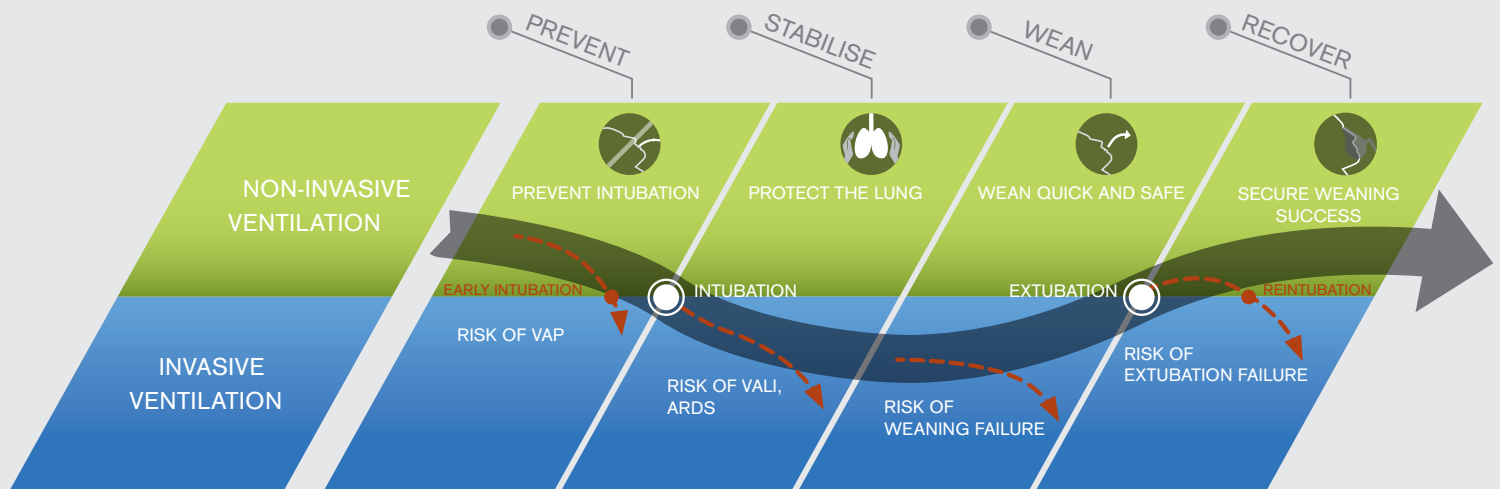
Evita® V600

## HIGH-END VENTILATION

Evita devices have supported you for over 25 years with high quality standards, the ability to configure and upgrade your machine, and advanced training and service concepts. Experience the next level of ventilator operation.

The Evita V800 and Evita V600 combine high performance ventilation with an aesthetic design enabling quick and safe operation. From the first onset of a lung protective ventilation till an integrated intensive care workplace that is patient-centred.

# strategies combined in one device



## RESPIRATION PATHWAY

As non-invasive as possible, as invasive as necessary: Discover the variability and diversity of our treatment tools for use along the respiration pathway. They enable you to administer protective mechanical ventilation therapy in your ICU.

### PREVENT

Avoiding intubation as long as possible helps to decrease the possibility of patients developing ventilator-associated-pneumonia (VAP).

### STABILISE

Stabilising your patient is crucial to protecting their lungs from potential conditions such as ventilator-associated lung injury (VALI), which could result in acute lung injury (ALI) or acute respiratory distress syndrome (ARDS).

### WEAN

Weaning your patient efficiently reduces incidences of ALI or ARDS.

### RECOVER

Ensuring successful weaning and avoiding reintubation improves your patient's recovery.

Learn more about the respiration pathway and understand the different strategies and treatment objectives for mechanical ventilation:  
[draeger.com/respiratorycare](http://draeger.com/respiratorycare)



# Clear user interface that guides you



## OPERATING PRINCIPLE

- Quick and safe to operate even in the most stressful situations due to intuitive menu access to both settings and your clinical data.
- All patient data, alarms and trends are fully recorded. Conveniently exported via USB interface.
- Switch between multiple view configurations with the touch of a finger.
- Step-by-step guidance leads you through every procedure.

## A BRILLIANT USER INTERFACE

- Easy to read and navigate thanks to our new colour concept and glass touch display.
- Safe and intuitive operation is supported by tablet-like operating system and easy access to sub menus.
- The 360° alarm light flashes in the colour of the corresponding alarm priority and is visible from every direction.



## PATIENT TRANSPORT

- No need to change the ventilator during patient transport.
- Operate the device in intra-hospital transport independently with gas and external power supply units.
- Utilise the bed coupling to safely transport the patient in the bed.

# Enabling early mobilisation



## EARLY MOBILISATION

Early mobilisation of the patient helps to decrease the possibility of delirium as well as the length of stay in the ICU. Moreover, studies show that the cost of care also decreases, and more importantly there is an improvement in the patient's functional independence upon discharge <sup>2), 3), 4)</sup>. This is why it's crucial to have flexible fitting devices that support individual mobilisation strategies for your patient.

2) Ely E.W. et al., Delirium in mechanically ventilated patients: validity and reliability of the confusion assessment method for the intensive care unit

3) Salluh J.I.F. et al., Outcome of delirium in critically ill patients: systematic review and meta-analysis

4) Kamdar B.B. et al., Joblessness and Lost Earnings after Acute Respiratory Distress Syndrome in a 1-Year National Multicenter Study



# Individualised lung protective ventilation



## LUNG PROTECTIVE VENTILATION

Our comprehensive treatment tools help support your lung protective ventilation strategy.

- The new Evita generation offers lung protective ventilation for adults, children and neonates: invasive, non-invasive and O<sub>2</sub>-therapy.
- Easily view the patient's respiratory status with advanced lung monitoring and diagnostic features, like Smart Pulmonary View or Low Flow manoeuvre.
- The new Evita ventilators in combination with the lung function monitor PulmoVista® 500 lets you visualise the adverse effects of mechanical ventilation.
- Tools like QuickSet® and PressureLink support a safe and helpful handling of recruitment manoeuvre. Breath-by-breath trends provide therapy decision support.
- When using PC-APRV with AutoRelease®, end expiratory lung volume and CO<sub>2</sub> removal are maintained at an optimal balance, even in the face of changing respiratory mechanics and expiratory flow patterns.
- Integrated CO<sub>2</sub> measurement (VCO<sub>2</sub>, VTCO<sub>2</sub>, Slope Phase 3, Vds/VTe) supports ventilation management and enhances patient safety.



# Quick and effective weaning

## A SYNCHRONISED PATH FOR QUICK AND EFFECTIVE WEANING.

- The automated clinical protocol SmartCare®/PS stabilises the patient's spontaneous breathing in a comfortable zone of normal ventilation and automatically reduces ventilatory support.
- Increased variability in spontaneous breathing through Variable Pressure Support (Variable PS) or Proportional Pressure Support (PPS) mimics the variability in normal breaths. The positive effects of this result in improved pulmonary function and a reduced risk of ventilator associated lung injury (VALI).
- AutoFlow® or Volume Guarantee maintain stable tidal volumes even when compliance, resistance and spontaneous respiration drive changes. It reduces the risk for overdistention and underinflation and protects the lung against hyper- and hypo-inflation.
- Automatic tube compensation (ATC®) compensates for artificial airway resistance and can be applied for all ventilation modes.
- Quick and easy assessment of the weaning progress with integrated tools like RSBi, P0.1 and NIF.



D-11157-2019

## up to 40%

SmartCare/PS® is the only ventilation mode that shortens weaning time<sup>5</sup> (up to 40%) and ICU stay.



5) F. Lellouche et al.; Am J respir Care Med Vol 174, 2006 + Cochrane Library 2013, Issue 6

# Connectivity and comprehensive services

## CONNECTIVITY

We envision a future of acute care where medical devices are connected as a system. Interoperability between different devices can help to avoid preventable medical errors and potentially serious inefficiencies.

The new standardised network protocol named SDC makes the safe and dynamic connectivity in the hospital possible which will allow the interoperability of medical devices in the future.

Our first step will be connectivity through CC300:

- Full HL7 data export to HIS from all devices: reliably exchange high-quality data in a standardised format between medical devices and EMR.
- Future-proof open connectivity: standardised and secure communication between medical devices with a high level of cyber security.



D-2652-2018

## 360° SERVICES FOR THE COMPLETE PRODUCT LIFECYCLE

To ensure the high performance of our ventilators along the entire lifecycle, we provide exclusive knowledge and skills when installing and maintaining Dräger systems tailored to the specific needs of your hospital. We offer service that goes way beyond classic device maintenance. It encompasses comprehensive services prior, during and after the installation of your purchased units:

- Product Service: e.g. device maintenance
- Professional Service: e.g. IT consulting and system integration
- Training on our products and services: e.g. application training
- Multivendor Service: maintenance for your entire medical equipment regardless of the manufacturer
- Digital Services: e.g. network-based services and analysis of device data (not all service products are available in every country)



D-111-2019

# Accessories

## that complement our new Evita family

For added comfort during ventilation, the NIV oronasal mask ClassicStar® plus features a soft and anatomically shaped silicone lip as the sealing interface to the patients' face. The mask is BPA- and PVC free.



D-10393-2016

The Dräger coaxial breathing circuit portfolio offers a flexible interface between the patient and Dräger device. To keep the risk of cross contamination to a minimum, the breathing circuits are single use. The hoses are PVC and latex free.



D-27583-2017

HI-Flow Star - nasal oxygen delivery system for adult patients. High-flow therapy can effectively deliver more oxygen to the patients than Venturi-based systems with a higher level comfort. In addition, it can help patients recover faster and avoid invasive respiratory therapy.<sup>6, 7</sup>



D-3002-2018

6) Nasal high-flow versus Venturi mask oxygen therapy after extubation. Effects on oxygenation, comfort, and clinical outcome, Maggiore SM, et al., Am J Respir Crit Care Med. 2014 Aug 1;190(3):282-8. doi: 10.1164/rccm.201402-0364OC.

7) Nasal high-flow oxygen therapy in patients with hypoxic resp. failure: effect on functional and subjective resp. parameters comp. to conventional oxygen therapy and non-invasive ventilation. Schwabbauer N, et al., BMC Anesthesiol. 2014 Aug 7;14:66. doi: 10.1186/1471-2253-14-66. eCollection 2014.

With Dräger's Set2go solutions we offer you totally customised sets consisting of an individual selection of single-patient-use accessories. Dräger Set2go makes using and ordering consumables and accessories much simpler for you. You just need one article number to get all the items in a single package and for your specific task.



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