



A8/A9

Anaesthesia Workstations

www.mindrayuk.com

mindray



Familiar and intuitive

With appreciation for established ways of working, the A8/A9 retains many traditional features while also introducing cutting-edge technologies which represents the future of anaesthesia.

With industry-leading tools to automate clinical interventions and maintain patient safety processes, the workstation delivers pioneering performance for broad patient populations.



Introducing the new standard in safety

Mindray's innovative electronic platform empowers clinicians to maintain a global overview of the patient's physical state and safety during the peri-operative period.

More time for patients

Designed with deep clinical insights of operating room workflows, the A8 and A9 user interface requires fewer user interactions, allowing maximum patient attention by clinicians.

Supporting your digital health aspirations

Providing flexible and seamless data integration, Mindray can help you meet your digital health objectives. Compatible with Mindray patient monitors and all leading third-party clinical information systems, our interoperable connectivity can help to enhance workflow efficiency and reduce list times.





Inadequate preoxygenation was observed in approximately 56% patients.^[1]

[1] *Ann Fr Anesth Reanim*, 33: e55-8 (2014)

Automatic Controlled Anaesthesia (ACA)

Available only on the A9, ACA is part of the new electronic platform that automatically adjusts the fresh gas and vaporiser output to quickly achieve the preset target of end-tidal agent and inspiratory oxygen concentration.

- Direct setting of the target EtAA and FiO₂ reduces user interaction of fresh gas and vaporiser settings.

- Delivery of fresh gas and agent is adjusted cycle by cycle to rapidly respond to changes in patient status, keeping a stable level of anaesthesia during surgery.

- Reduce cost by minimising the consumption of fresh gas and anaesthetic agents.



Extend the safe induction time

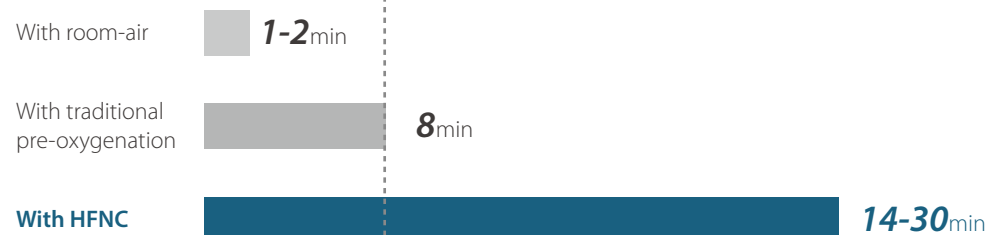
High Flow Nasal Cannula



High flow nasal cannula (HFNC) plays an important role in maintaining safe oxygen saturation of patients as it extends the safe apnoeic oxygenation time to 30 minutes during induction.

Available on both the A8 and A9, HFNC can help clinicians intubate more easily, especially for patients with difficult airway access or poor oxygen saturation.

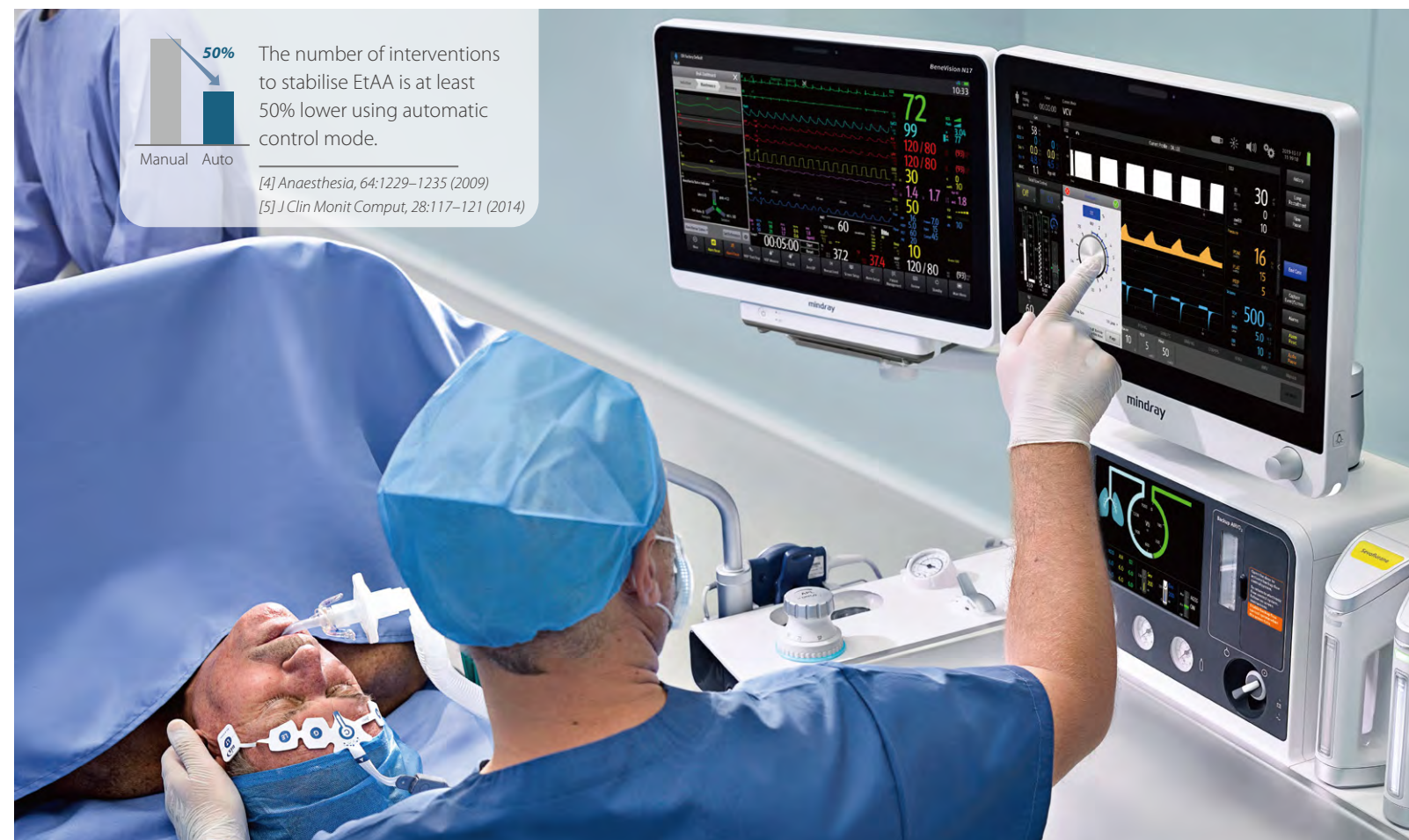
- Direct setting of total flow and O₂ concentration with maximum flow up to 100L/min
- Built-in design, no additional gas or power source helps save space in the theatre
- Quick start-up for emergency situations, to improve patient saturation instantly



The duration of apnoea without desaturation^{[2] [3]}

[2] *British Journal of Anaesthesia*, 118 (4): 610-7 (2017)

[3] *British Journal of Anaesthesia*, 115 (6): 827-48 (2015)



The number of interventions to stabilise EtAA is at least 50% lower using automatic control mode.

[4] *Anaesthesia*, 64:1229-1235 (2009)

[5] *J Clin Monit Comput*, 28:117-121 (2014)



Using desflurane for 1 hour is equivalent to 235-470 miles of driving.^[8]

[8] Anesth Analg. 111(1): 92-98 (2010)

Design your perfect workstation

Modular flexibility

The A8 and A9 Workstations have been built to work in harmony with other Mindray devices, including patient monitors, infusion pumps, ultrasound devices and clinical information systems.

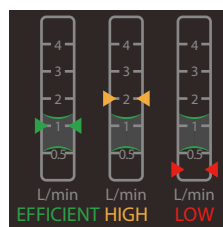


Greener, more sustainable clinical practice

The A8 and A9 Workstations employ anaesthetic gas reduction strategies during surgery to provide both environmental and economic benefits.

Optimiser

A series of clinical decision-support tools including Optimiser, AA Prediction and ACA, can advise clinicians of the lower fresh gas flow.



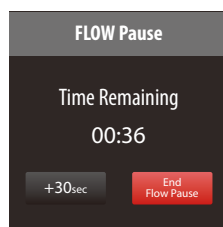
AA measurement

This helps the delivery of low flow anaesthesia by monitoring real-time anaesthetic agent consumption during and after surgery.

Fresh Gas+Agent Usage	
Start:	2019-11-21 9:42
End:	2019-11-21 14:42
SEV	100.0 ml
Iso	50.5 ml
O2	150.5 L
Air	150.5 L
N2O	0.0 L

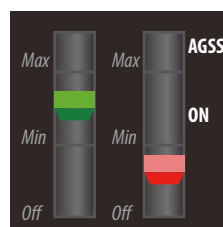
Flow Pause

Flow Pause prevents unnecessary leaks of anaesthetic gases into the operating room during intubation, suction and other operations.



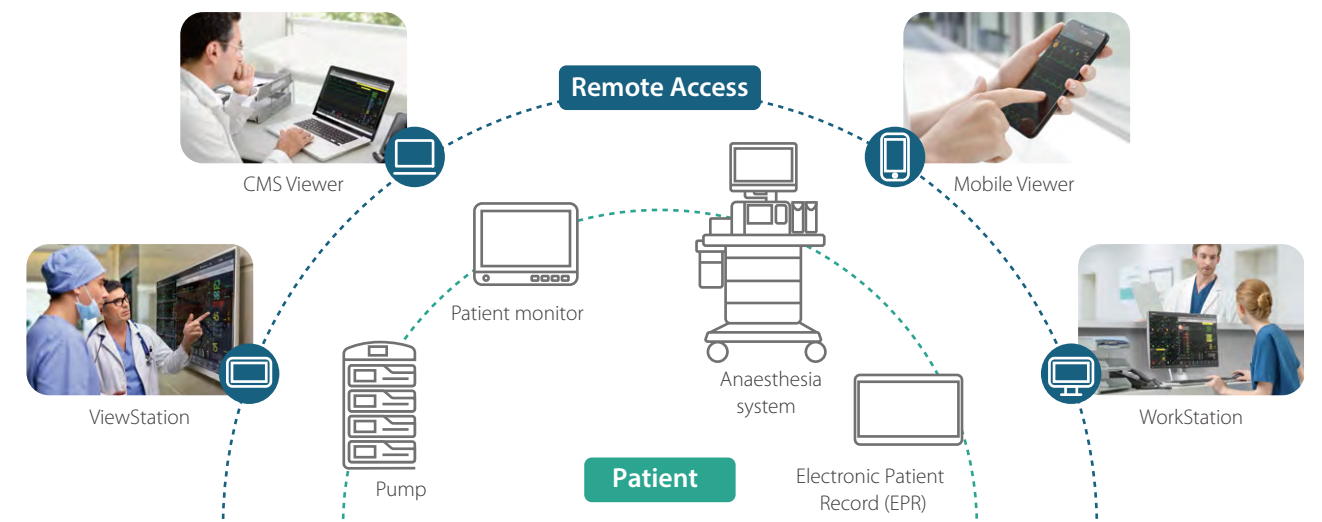
e-AGSS system

e-AGSS monitors the scavenging flow rate and indicates abnormalities; automatically switches off when in standby to reduce energy consumption.



Seamless integration and connectivity

Powerful yet flexible integration between Mindray clinical solutions and hospital information systems help make workflows simpler and safer. Interoperability is key to ensuring your digital health objectives can be met now and in the future. Protecting patients and healthcare technology investments.





Atelectasis may develop in nearly 90% of patients under general anaesthesia.^[6]

[6] British Journal of Anaesthesia 91 (1): 61-72 (2003)

Innovative breathing system for ICU-level ventilation

The A9 introduces the volume exchanger (VE) as an innovative breathing system that brings extremely accurate and reliable ventilation.

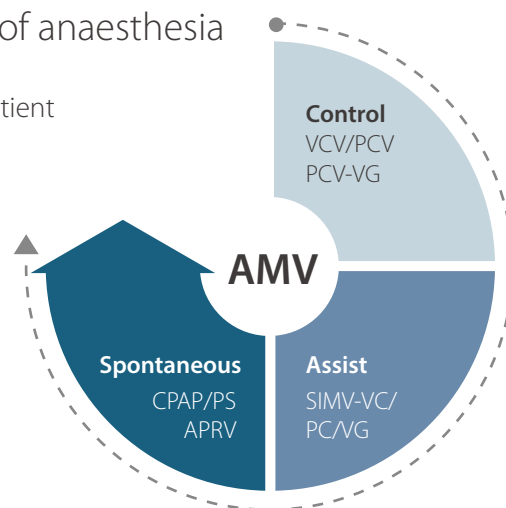
- Quick wash-in & wash-out by small system volume
- Precise ventilation for all patients, from adults to neonates with tidal volume down to 5 ml
- Clear visual status of the breathing system at every moment
- Less risk of malfunction with no moving components, providing superb reliability and a greater service life



Enjoy maximum performance through all stages of anaesthesia

The A8 and A9 offer various ventilation modes to meet different patient needs throughout the peri-operative period.

- Adaptive Minute Ventilation Mode (AMV) allows easy switchover between controlled and spontaneous ventilation without extra adjustment.



Protect against post-operative complications

Powerful, integrated ventilation toolkits support confident decision-making for protective ventilation, helping reduce post-operative complications and improve patient outcomes.



Transpulmonary pressure monitoring

Independent monitoring for oesophageal pressure, to support customised ventilation settings for individual patients.



Lung recruitment tool

Two optional manoeuvres: stepwise PEEP or sustained inflation.

Multiple criteria to evaluate recruitment effectiveness.

A scheduled recruitment manoeuvre can be performed automatically.



TV/IBW indicator

TV/IBW can be calculated as the TV changes, offering clinicians indications of appropriate tidal volume settings to avoid barotrauma.



Less is more

Automatic system check



Comprehensive

- Follows ASA guidelines
- Checks various parts automatically to ensure proper functioning



Fast

- All checks completed in 3.5 minutes
- Scheduled system check to save preparation time



Simple

- No manual intervention required during system check
- Graphic display of error correction



1-2s

As anaesthesiologists look at the monitor in 1- to 2-second glances, displays should be developed to optimize the information.^[7]

[7] Anesth Analg., 111 (3): 653-8 (2010)

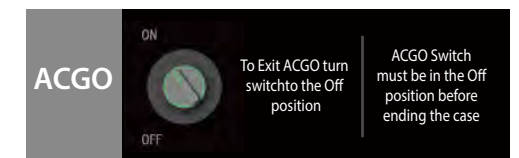
Individualised profiles for smarter working

Configuration profiles can be customised and loaded easily for different clinical scenarios or user requirements, including default values, screen layout and system configuration.



Clear system status indicators

- Real-time system status display to alert of malfunctions quickly
- Clear prompts for certain scenarios, to allow easy viewing of the current working mode



Illuminated workspace

- Illumination around APL valve in manual mode, to make the current working mode more obvious
- Lighting for workspace with adjustable angles and brightness





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