

## SimCube Sample Readings

Different manufacturers, different models and sometimes even different software versions can give quite different readings, but the following are some average values obtained from a variety of devices.

Model	Systolic	Diastolic	Systolic STD Dev	Diastolic STD Dev
Alans 4410	128.7	77.7	3.0	3.7
Alans 4510	120.3	79.0	4.6	1.8
Colin BP8800C	116.8	78.0	1.3	1.2
Critikon 8700	118.3	78.9	2.8	3.0
Critikon 1846SX	117.0	79.0	0.7	0.0
CSI	123.0	82.0	N/A	N/A
Datascope Accutor	119.9	73.0	4.2	2.9
Datascope Passport	118.5	72.6	0.8	2.3
Draeger	119.7	79.0	0.6	1.0
Fukuda Denshi	118.6	78.5	0.5	0.4
GE Dash 3000	120.3	78.7	2.9	1.2
GE Pro200	107.0	82.6	2.9	4.0
GE Pro 400	113.1	73.6	5.0	5.2
GE Pro 400 V2	120.0	80.9	4.0	1.0
GE/Marquette Solar 8000	119.8	81.3	1.0	1.7
HP Merlin	113.0	74.0	3.1	4.3
HP Viridia	120.0	72.7	1.5	2.2
IVAC4200	118.5	82.0	0.7	1.4
J & J	117.0	79.0	N/A	N/A
Marquette Eagle	114.2	78.7	1.8	0.7
MDE E300	117.9	78.8	1.5	1.0
MDE Prism	119.0	82.6	1.2	0.7
Nihon Khoden	110.1	80.1	0.8	1.2
Philips Heart Smart	108.1	77.1	2.8	1.0
Philips Intelliview	119.7	80.7	1.2	4.2
Philips M8007	116.7	77.7	0.6	1.5
SpaceLabs 90369	114.9	78.3	0.9	0.8
Welch Allyn 52000	121.4	83.8	2.8	2.8
Welch Allyn VS	116.1	83.1	3.2	3.2

## SimCube NIBP Simulator Operator's Manual



PRONK TECHNOLOGIES

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### Contact Us

Sales:	800/609-9802
Technical Support:	800/541-9802 or 323/258-5100
FAX:	323/258-5817
Email:	<a href="mailto:sales@pronktech.com">sales@pronktech.com</a>
Web site:	<a href="http://www.pronktech.com">www.pronktech.com</a>

# SimCube Operation Instructions

Models SC-1, SC-2, SC-3, SC-4 and SC-5

## Introduction

SimCube is quick to set up, easy to use and ready to go where you need to be. Your SimCube comes with the following: The SimCube, a small 6VDC/2 amp power supply and at least one adapter. For information on other accessories visit our web site, [www.pronktech.com](http://www.pronktech.com).

## Getting Started

1. **Plug in the SimCube 6 VDC/2 amp power supply into an AC outlet.**
2. **Connect the power jack into the SimCube power receptacle.** Many power supplies use the same plug, and connecting the SimCube to the wrong power supply may damage it. Be sure the plug has a blue SimCube flag on it prior to connecting it to the SimCube.
3. **Wait for the power-up sequence to complete.** When complete the display will show 000.0. During power-up the SimCube will zero its pressure so vent the pressure port to atmosphere at this time. This step may take up to 15 seconds to complete.
4. **Select the desired mode by pressing the Yellow MODE button.** Each time the mode button is pressed the mode will be changed and the LED indicating the new mode will be lit. The NIBP and, if available, ECG, RESP, and IBP values corresponding to each mode are printed on the front panel next to the LED horizontally. For more detailed information on each mode, refer to each parameter section in this manual.
5. **For dynamic NIBP testing,** connect the SimCube in line with the monitor's cuff and hose as shown in Fig. 1. Different monitors will require different adapters. A variety of adapters are available from Pronk Technologies and each SimCube comes equipped with at least one adapter. In Neo mode use a neo cuff. Wrap cuff snugly around itself and place in area safe from accidental motion. Using a SimCube Cuff Jacket can improve reading capture and consistency. To use Cuff Jacket, wrap cuff as above and insert into the desired sleeve volume. Generally the smaller volume is best for most monitors.

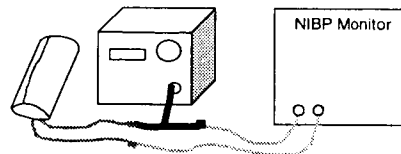


Fig. 1

6. **Start the NIBP reading on unit under test and wait for the reading to complete.**
7. **For static calibration, over pressure testing, and leak testing** connect the SimCube and a manual pump bulb in line with the monitor's cuff and hose as shown in Fig. 2. All SimCube models include a manometer for performing static calibration; some models include a Peak Detect mode for performing over pressure testing and some models include a Leak Test mode for performing leak tests.

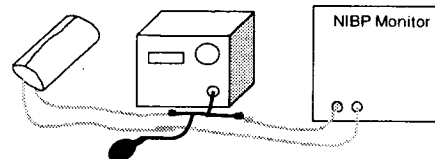


Fig. 2

8. **For IBP testing,** connect IBP extension cable supplied with SimCube and correct IBP adapter for the monitor under test to the SimCube. A variety of IBP adapters are available from Pronk Technologies. Select the '0' mmHg IBP simulation mode, zero the monitor, then select the desired simulation mode.
9. **For ECG and Respiration testing,** connect the ECG cable from the monitor under test to the SimCube. Snap locations are indicated on the side of the SimCube and shown in Fig. 3. For 12 lead simulation and/or when using large snap heads or alligator clips, it may be necessary to use Snap Extenders (P/N Adapt-E) on the center column ( V1-4) of snaps. Snap extenders are available from Pronk Technologies.

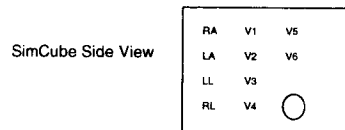


Fig. 3

## NIBP Detailed Information

Before you begin, make sure you have your SimCube setup as described in 'Getting Started'. Available Simulation Modes are described below. Refer to the front panel of your SimCube to determine which modes apply to your model.

- **NIBP Adult (120/80)**  
Simulates a patient with blood pressure of 120/80mmHg, heart rate of 70 bpm, mean pressure of 97mmHg, and pulse volume of 1 ml.
- **NIBP Neo (70/40)**  
Simulates a patient with blood pressure of 70/40mmHg, heart rate of 95 bpm, mean pressure of 51mmHg, and pulse volume of 0.25 ml. Requires use of a neo or pediatric cuff and the monitor under test should be placed in neonatal mode if available.
- **NIBP High (190/120)**  
Simulates a patient with blood pressure of 190/120mmHg, heart rate of 70 bpm, mean pressure of 142mmHg, and pulse volume of 1 ml.
- **NIBP Low (80/40) (SC-5 only)**  
Simulates a patient with blood pressure of 80/40mmHg, heart rate of 70 bpm, mean pressure of 58mmHg, and pulse volume of 1 ml.
- **NIBP Peak Detect / Over Pressure (SC-3, 4 & 5 only)**  
This mode is used to test the over pressure feature on patient monitors. The SimCube's readout will latch the highest pressure value sensed (in 1mmHg steps). When the input pressure has returned to 0 mmHg for 15 seconds the latched value is cleared. Typically the monitor must be placed into a test mode so that the software will not release the cuff pressure prior to the over pressure activating. The trigger point on the over pressure feature of many patient monitors can depend on the inflation rate so care should be taken to create an inflation rate which is similar to that produced by the monitor's pump with a typical cuff.
- **NIBP Manometer**  
**SC-1, SC-2, SC-3, and SC-4:** Static Manometer readout displays pressures from 0 to +480mmHg in 0.5mmHg steps. NIBP simulation is OFF.  
**SC-5:** Static Manometer readout displays pressures from -400 to +400mmHg in 0.1mmHg steps. NIBP simulation is OFF.

This mode can be used for performing static calibration of NIBP monitors. In many cases the monitor must be placed in a special test mode so that it will not release the cuff pressure.

- **NIBP Leak Test (SC-5 only)**

This mode is used for measuring leak rates in NIBP monitors, their cuff and their hoses. Until it detects that cuff inflation is complete, leak test mode will simply display the cuff pressure. Once cuff inflation completion is detected (less than 8mmHg change in a 5 second window) leak test mode will start its elapsed timer. When the elapsed timer reaches 15 seconds (to allow for initial pressure settling), the display will begin to cycle every 5 seconds, showing static pressure, indicated by P (in mmHg), leak rate, indicated by L (in mmHg per minute); and elapsed time (in Min:Sec). In many cases the monitor must be placed in a special test mode so that it will not release the cuff pressure.

## ECG/RESP Detailed Information

Before you begin, make sure you have your SimCube setup as described in 'Getting Started'. Available Simulation Modes are described below. Refer to the front panel of your SimCube to determine which modes apply to your model.

- **ECG/RESP rate simulation modes (SC-2, 4 & 5 only)**

These modes produce NSR ECG waveforms at the rate indicated on the front panel. Respiration rates are also on the front panel. ECG output is 1mV per cm, on Lead I.

- **ECG Arrhythmia Simulation mode (SC-5 only)**

The SimCube's arrhythmia mode is designed to allow you to quickly check that all the life critical ECG alarms on a patient monitor are properly configured. The mode consists of a single cardiac failure sequence: 90 seconds of normal beats interspersed with PVCs and Runs, followed by approximately 30 seconds of VTACH, followed by 30 seconds of VFIB, concluding with 30 seconds of asystole. When the sequence is complete it restarts. RESP value stays at 00bpm.

- **ECG Pacer (SC-2, 4 & 5 only)**

NSR ECG at 70 bpm with pacer signal. RESP output rate is 35bpm on SC-2 and SC-4 and 0bpm on SC-5. This mode is designed to allow testing of a monitor's pacer detection and artifact stripping circuitry.

- **ECG/RESP HR Seq/Alarm Test mode (SC-4 and SC-5 only)**

Paired ECG Heart rate and Respiration values will toggle every 30 seconds. ECG values: 30, 60, 90, 120, 45, 60, 160, 220. RESP values: 00, 30, 45, 60, 22, 30, 80, 110. This mode allows quick and complete testing of a monitor's cardiatch.

## IBP Detailed Information (SC-5 Only)

Before you begin, make sure you have your SimCube setup as described in 'Getting Started.' The IBP interface to the SimCube is a 6 pin mini DIN connector. For compact storage Pronk supplies a single long (6') extension cable with each SimCube, which can be used with a variety of short (4') adapter cables that are sold separately. A variety of adapter cables are available from Pronk Technologies as is information to allow you to fabricate your own cables from the extension cable and an IBP cable you may have on hand. Wiring is as follows: + Excit = pin 1, - Excit = pin 4, + Sig = pin 3, -Sig = pin 6, which should be compatible with most other mini DIN IBP simulator cables. Contact Pronk Technologies at 800/541-9802 for more information.

- **IBP Dynamic Modes**

The pressure values of dynamic IBP modes match those of the NIBP values associated with the same mode and are indicated by the arrow ← on the front panel in the IBP column pointing towards the NIBP column.

- **IBP 0**

Use this mode to simulate atmospheric pressure and zero your monitor.

- **IBP 100**

The IBP 100 Mode will simulate a static 100mmHg which can be used for calibration.

- **IBP 200**

The IBP 200 Mode will simulate a static 200mmHg which can be used for calibration.

- **IBP Step**

The Step Mode will step through the following static values for 30 seconds each, then repeat the sequence: 0, 25, 50, 100, 150, 200, 250mmHg. This allows for a quick but complete check of the IBP channel over its entire range.

## Battery Operation

SimCube models SC-3, SC-4 and SC-5 may be operated on battery power using the Battery Boost Option. The Battery Boost is integrated within a padded carrying case and allows the user to switch between AC power and four "AA" batteries. The SimCube can perform 100-200 NIBP simulation readings on a set of fresh batteries. The Battery Boost is designed to operate with alkaline batteries for simplicity and convenience. Because of this, while you can use rechargeable batteries, you will need to use an external charger to recharge these batteries.

### 1. CRITICAL OPERATION NOTES. PLEASE READ FIRST!

- **You may use NiMH rechargeable batteries, but the Battery Boost does not charge them. Rechargeable batteries must be charged outside of the SimCube.**
- **When the Battery Level indicator lamp is red your simulator may continue to operate, but values should not be trusted. Always confirm the Battery Level LED is green when doing a simulation on battery power.**
- **When your SimCube is not in use, switch the Battery Boost to the "Batt OFF" position to avoid draining your batteries.**

### 2. Installation

- a. Connect the gray power cable from the Battery Boost to your SimCube.
- b. Insert four "AA" batteries into the battery carriage.

Position the switch on the battery module to "Batt ON." The SimCube will power on.

### 3. Operation Guide

#### a. Battery Operation

Simply Install batteries (alkaline or rechargeable) into Battery Boost and switch to "Batt ON" position. When you are done using your SimCube switch to "Batt OFF". When Batt level LED changes from green to orange make sure you have a spare set of batteries on hand. When the Batt Level LED changes from orange to red change the batteries. The Batt Level LED will turn orange when approximately 25% battery life remains (about 50 readings). Always double check

that the switch is in the "Batt OFF" position when you are done using your SimCube; the numeric display on the SimCube is blanked under certain



conditions to conserve power so you cannot rely on that to indicate that the unit is off.

**b. AC Operation**

When AC power is available, simply plug the SimCube power supply into an AC outlet. The Battery Boost will automatically switch over and your batteries will not be drained regardless of the state of the Batt switch. The AC ON indicator lamp will light continuously while the AC power supply is connected to a viable AC outlet, but when AC power is disconnected and the battery is switched on the AC ON lamp may still emit a short flash every few seconds. During AC operation the Batt Level LED may not accurately reflect the state of the batteries.

**SimCube Troubleshooting Tips**

SYMPTOM	SOLUTION
Readings inconsistent or no reading at all	If using Battery Boost be sure the Batt On/Off switch is ON and Batt Level LED is green. If Level LED is Red or dark, replace batteries with fresh set.
Readings inconsistent, error message (C05) on Welch Allyn 52000	Reduce/Control cuff volume and movement by using Pronk Cuff Jacket Duo or inserting cuff inside 2" tube.
During NIBP simulation, monitor continually inflates cuff without reading	Check for leak in hose and cuff. Use standard adult size cuff only for adult and hyper modes. Use 3-4 fingers of space in center of cuff (or use Cuff Jacket Duo). Neo mode requires size 3 or 4 (8-13cm) cuff to be effective.
Alaris/IVAC 4410 does not get readings	This device calculates diastolic during inflation. Wait until it is done with its first inflation cycle; it will automatically restart inflation and will get reading.
IVAC 4200 does not get readings	The IVAC 4200 is primarily an auscultatory blood pressure monitor, in fact there is a microphone built into the cuff itself. However, these monitors also have an oscillometric algorithm and will get consistent readings if you remove the cuff from the hose and connect the hose directly to the SimCube.
Can't get RESP waveform on Datascope	Reconfigure snaps to the following: black lead to white RA, red lead to black LA and white lead to green RL.
Battery Boost Option does not charge batteries	This is also by design. In order to allow customers to use off the shelf alkaline batteries, no charge current is applied to the batteries being used.
Readings are always high/low on specific model/manufacture	Each model of monitor has a different algorithm for calculating NIBP values, therefore different models even from the same manufacturer can yield different results. Use the SimCube Sample Reading chart as a reference.
Respiration does not count	The amplitude of the respiration signal was carefully selected to ensure that monitors will not count if 60hz is present. Some monitors may require an adjustment to increase in resp size in order to get an accurate respiration rate.
SimCube won't read 0000 (shows ----) at power up	During power on initialization, SimCube auto zero's pressure itself. Therefore, vent circuit to atmosphere at power up and wait 15 seconds for auto zero to complete, signified by 0000 on display.
Can't connect 12 Leads to snaps	Order ECG snap extender, part number EXTEND.
Unable to resolve problem	Contact Pronk Technologies Technical Support at: (800) 541-9802

## Accessories (Prices subject to change without notice)

P/N	DESCRIPTION	PRICE (USD\$)
ADAPT-D	<b>DINAMAP/Critikon style:</b> A threaded screw-on connector, used on Critikon and MDE monitors.	40.00
ADAPT-M	<b>Marquette style:</b> A freely-rotating twist-on connector, used on GE/Marquette monitors.	40.00
ADAPT-Q	<b>Quick Disconnect:</b> A push-pull quick disconnect connector used on HP monitors.	40.00
ADAPT-L	<b>Luer:</b> A friction-based connector used on Spacelab monitors and most neonatal monitors.	40.00
EXTEND	<b>ECG Snap Extenders:</b> If using 12-lead clips instead of snaps to connect to the SimCube, a set of Snap Extenders is recommended.	40.00
ADAPT-B	<b>Bulb Adapter</b> - This hand bulb adapter is utilized in static calibration, as well as in Peak Detect Mode for SimCube models SC-3 and SC-4.	40.00
CASE	<b>Nylon Carrying Case</b> - When using the <b>SimCube</b> outside the shop, this padded nylon carrying case is recommended for added security and holds all your adapters nicely.	50.00
LARGE CASE	<b>Large Nylon Carrying Case</b> - This case is for use with the <b>SC-5</b> and all the accessories. It is large enough to hold all the IBP adapter cables, battery Module, NIBP adapters and more.	80.00
CUFF JACKET DUO	<b>Cuff Jacket</b> - Slide the NIBP cuff inside our patent-pending Cuff Jacket to create a controlled and repeatable cuff volume without the need for bulky mandrels. Use of the larger Cuff Jacket is suggested for optimum repeatability on most monitors. The small Cuff Jacket is required on a few older NIBP monitors such as Welch Allyn 52000 series.	40.00
IBP-EXTENSION	<b>IBP Extension Cable</b> - This six foot long extension cable allows you to use any of the interface cables below.	20.00
IBP-MERLIN	<b>IBP Interface Cable for Merlin</b> - This cable has a six pin mini-DIN to Merlin style connector. It is six inches long and works with the IBP-Extension cable.	80.00
IBP-DATASCOPE	<b>IBP Interface Cable for Datascope Monitors</b> - This cable is used to interface to Datascope monitors. It has a six pin mini-DIN to Datascope connector. It is six inches long and works with the IBP-Extension cable.	80.00
IBP-GE	<b>IBP Interface Cable for GE/Marquette Monitors</b> - This cable is used to interface with GE monitors. It has a six pin mini-DIN to GE style connector. It is six inches long and works with the IBP-Extension cable.	80.00
IBP-MDE	<b>IBP Interface Cable for MDE/Spacelabs</b> - This cable is used to interface with MDE and Spacelabs monitors. It has a six pin mini-DIN to MDE/Spacelabs style connector. It is six inches long and works with the IBP-Extension cable.	80.00

## Services (Prices subject to change without notice)

SERVICE ITEM NUMBER	DESCRIPTION	PRICE (USD\$)
SC-1/3 Upgrade Service	SC-1 to SC-3 Upgrade	150.00
SC-1/4 Upgrade Service	SC-1 to SC-4 Upgrade	450.00
SC-2/4 Upgrade Service	SC-2 to SC-4 Upgrade	150.00
SC-2/5 Upgrade Service	SC-2 to SC-5 Upgrade	900.00
SC-3/4 Upgrade Service	SC-3 to SC-4 Upgrade	300.00
SC-4/5 Upgrade Service	SC-4 to SC-5 Upgrade	750.00
Warranty-SC-1	Extended Warranty* - 1 year	96.00
Warranty-SC-2	Extended Warranty* - 1 year	112.00
Warranty-SC-3	Extended Warranty* - 1 year	104.00
Warranty-SC-4	Extended Warranty* - 1 year	120.00
Warranty-SC-5	Extended Warranty* - 1 year	140.00
Calibration Service SC-1 / SC-3	Full checkout and calibration incl. certification	100.00
Calibration Service SC-2 / SC-4 / SC-5	Full checkout and calibration incl. certification	120.00
Rejuvenation	SimCube Rejuvenation Service: - Complete checkout, calibration and certificate and multiple part replacement, depending on wear. - Boot replacement	283.00

\*Extended Warranty (up to 5 years total) may be purchased only at time of original sale or with purchase of Rejuvenation Service

## Warranty and Service Information

### SimCube Limited Warranty

The SimCube NIBP Simulator with optional ECG/Respiration and IBP feature is warranted against defects in materials and workmanship for a period of twelve (12) months from the date of shipment to the original purchaser. Warranty is valid only to the original buyer. Defective equipment should be returned freight prepaid to Pronk Technologies. Equipment returned with defective parts and assemblies shall be either repaired or replaced at the manufacturer's sole discretion. This warranty is not applicable if the unit has been opened, if repair has been attempted, if the unit has been damaged due to operation outside the environmental and power specifications for the product, or due to improper handling or use.

If any fault develops, notify Pronk Technologies (*see Returns and Repairs, below*) giving full details of the difficulty, and include the model and serial number of the device. Upon receipt of shipping instructions, forward the device prepaid and repairs will be made at the factory.

The foregoing warranty is in lieu of all other warranties expressed or implied, including but not limited to any implied warranty or merchantability, fitness or adequacy for any particular purpose or use. Pronk Technologies shall be liable only for repair or replacement of the SimCube NIBP Simulator and optional features. Pronk Technologies shall not be liable for any incidental or consequential damages.

### Order Cancellation and Refund Policy

You may return your item within 14 days of delivery for a full refund. We are unable to exchange items (however, if you received a defective or incorrect item, we will be happy to make an exchange). Item(s) returned for refund must be in its original condition, undamaged and with no missing parts, packed in its original packaging, and include both the original receipt and an RMA number.

We will notify you via e-mail or fax of your refund once we have received and processed the returned item. You can expect a refund in the same form of payment originally used for purchase within 7 to 14 business days of our receiving your return.

### Returns and Repairs

Please call Pronk Technologies' Service Department at 800-541-9802 to obtain a Return Merchandise Authorization (RMA) number and the shipping address. Returns should be packaged securely in the original packaging materials. The RMA number should be clearly marked on the packaging. If the return is for a new item and is a result of our error, we will make arrangements for payment of return shipping. Otherwise, items should be returned freight prepaid to Pronk Technologies.

## Optimizing Simulation Results With Your SimCube Oscillometric NIBP Simulator

by Karl Ruitler, PRONK TECHNOLOGIES INC

### Introduction

The SimCube NIBP simulator provides accurate NIBP simulation in an amazingly convenient, rugged, and affordable package. As you use your simulator on various patient monitors it is important to understand what sort of results to expect, what they mean, and how to optimize them.

### NIBP Device Accuracy

The accuracy of NIBP devices is governed by an AAMI standard (SP-10). This standard specifies two different types of accuracy: static and dynamic.

The static accuracy represents the accuracy with which the internal pressure gauge in the device can measure cuff pressure and it is required to be within  $\pm 3\text{mmHg}$  or  $\pm 2\%$ , whichever is greater. The static accuracy of the device can be easily checked by placing the monitor in cal or check mode and verifying the accuracy against the SimCube's manometer mode.

The dynamic accuracy represents the accuracy of the device in taking actual readings on patients, and it is specified in a relatively vague way. The AAMI specification calls for automated (device) readings to be taken on a large group of patients meeting certain criteria and the results to be compared with manual readings taken by nurses on the same patients. The manual and automatic readings are then compared statistically.

To be acceptable under the standard the mean error on systolic and diastolic readings must be no more than  $5\text{mmHg}$  and the standard deviation of the error must be no more than  $8\text{mmHg}$ .

What this means is that, under the specification, roughly 68% of all patients must be within  $13\text{mmHg}$  of the manual readings, but 5% might be only within  $21\text{mmHg}$  and 1% might be as far out as  $29\text{mmHg}$ . While these

specifications may seem very loose they can be quite difficult to meet.

The errors in the readings come from several basic sources:

1. Patient to Patient Physiological Variations: Different patients have different arterial pulse shapes, arterial compliance, flesh rigidity and other factors which simply make the BP cuff respond differently. The oscillometric signal is complex and changes not only in size but in shape with cuff pressure and it is simply slightly different from patient to patient. Additionally, a patient's actual BP values are often not perfectly stable, but change over time, often during a reading or a series of readings.
2. Extrinsic Noise: During the testing process patients may be moving or talking. The signal to noise ratio on the oscillometric signal is never very good and it does not take very much additional noise to affect readings.
3. Intrinsic Noise: Even on a perfectly still patient with perfectly static blood pressure there would still be significant reading to reading variations. The biggest factor on this is sampling error introduced by the cuff pressure bleed rate or step size. It is no accident that step-down NIBP monitors step in  $8\text{mmHg}$  steps and the standard deviation of the error is specified at  $8\text{mmHg}$ . In addition to this both bleeding and stepping introduce pneumatic noise which can affect the oscillometric signal.

### NIBP Device Differences

In manual NIBP readings there is a published AHA standard for how the readings should be performed. In practice the process is somewhat subjective, but at least there is the intent of uniformity.

With automated NIBP readings the situation is quite different. The first companies in the Oscillometric market patented their



technology and tried to exert some control on the market by aggressively pursuing patent litigation. The result of this was not that they were able to keep any other manufacturers out of the market, but rather that all manufacturers have been legally forced to use slightly different methods. Key differences in these methods include:

1. Different cut-off frequencies for the AC channel high pass and low pass filters.
2. Different metrics for measuring pulse size.
3. Different methods for averaging pulse size.
4. Different methods for finding the peak of the pulse size envelope.
5. Different methods for determining average cuff pressure on a given pressure step.
6. Different methods and coefficients for extracting systolic and diastolic pressure from the pulse size envelope.
7. Different methods of controlling cuff pressure such as step down, step up, bleed down, and bleed up.

Since the oscillometric signal is complex and different for different patients these design differences can lead to identical results on some patients and quite different results on others.

In addition to the design differences several other factors lead to differences in readings between manufacturers:

1. Every manufacturer has adjusted their system based on the data they measured on their test patient group. Of course, they used different test patient groups. In theory the groups are large enough that they should be statistically identical, but in practice they can still give different results.
2. Every manufacturer has adjusted their system based on data which was measured by the nurses they used to generate the manual values for comparison. Of course, they used different nurses. In theory the nurses are all using the standard method, but in practice the process is still subjective and different nurses get slightly different results.

The end result of these differences is that the various devices do yield similar but slightly different results on the average, and on any

specific patient the results can be quite different.

### SimCube Simulation Results

The SimCube uses a simple yet effective mechanism along with a sophisticated variable pulse shape approach to deliver accurate, repeatable NIBP simulation. Simulations can easily yield values within 10% of their labeled values and with careful setup this can usually be lowered to 5% or better. The following table shows values obtainable with careful setup:

ADULT MODE (120/80)			
Vendor	Reading1	Reading2	Reading3
MDE	120/81	119/81	121/81
HP	121/79	122/80	121/80
Critikon	126/82	119/83	120/84
Datascope	119/76	120/75	118/75
CSI	122/78	123/77	122/77

NEO MODE (70/40)			
Vendor	Reading1	Reading2	Reading3
MDE	68/42	67/38	67/43
HP	68/38	67/36	67/38
Critikon	71/42	70/42	71/45

HYPERTENSIVE MODE (190/120)			
Vendor	Reading1	Reading2	Reading3
MDE	187/117	187/118	187/117
HP	206/124	200/128	199/124
Critikon	189/116	190/118	184/120
Datascope	185/106	187/106	186/106
CSI	197/106	197/111	195/109

Notes:

1. These results were obtained with SimCube 1.5 software. We are constantly improving the product so future software versions may give slightly different results.
2. These results represent data taken from specific models of these manufacturer's products. We normally expect a given manufacturer's results to be pretty consistent across their product line, but different models and even different software revisions may give different results. For example an HP OmniCare with software E.0.1 reads adult mode diastolic about 10mmHg lower than a HP Merin with software 17.52.
3. The readings shown are actual random samples, but they do not necessarily reflect worst case.
4. MDE = Escort II SW 4.2.0, HP = Merin SW 17.52, Critikon = Vitalnet 2200, Datascope = Accutorr 3, CIS = 506DXNT

### Optimizing Your Simulations

The following techniques will help you obtain the best possible simulation results.

1. **Cuff Size Selection.** Many vendors are immune to variations in cuff size, but some are not. For example we find that some Datascope Accutorr monitors produce systolic values about 2mmHg higher and diastolic values about 6mmHg higher with a 400ml cuff volume rather than a 200ml cuff volume, while some Critikon monitors show about a 6mmHg drop in systolic values when changing to the 400ml cuff volume. We recommend using something close to a 400ml cuff volume for adult mode simulation. This can be achieved by wrapping an adult cuff on itself to form a cylinder approximately 3 inches in diameter. If you want to quantify the volume of a rolled cuff you can do this by injecting a measured amount of air into an unrolled, empty cuff using a syringe and a check valve. Once you have injected the desired amount of air, roll the cuff tightly. SimCube adult mode simulation will

normally work with a broad range of test volumes, but with smaller test volumes you may see more vendor to vendor reading differences.

2. **Be prepared to throw out the first reading.** We find that some vendors sometimes produce a first reading that is substantially different than later readings.
3. **Take an average of several readings.** We suggest using a minimum of 3 to 5 readings.
4. **Make sure there are no leaks.** You can usually see leaks just by watching the SimCube manometer during the reading. On step down systems the cuff pressure may normally drop a bit during the first few steps, but after a few steps it should be flat or even rise slightly during the step. This is because the air in the cuff is cooled by the rapid step deflation and warms up again during the step holding period causing the pressure to rise slightly. A leak on a step down system will appear as drop in pressure on all steps. Bleed down systems should normally bleed at about 2 to 6mmHg per second. A leak on a bleed down system will appear as a faster than normal bleed rate. Since the SimCube's NIBP simulation creates pulses which are several mmHg in size it is easiest to check for leaks with the SimCube in manometer mode. Be sure to watch for leaks on the SimCube's manometer rather than the monitor's cuff pressure display as the SimCube has a much faster sample rate and display update rate than most NIBP monitors.

5. **Make sure the monitor is in calibration.** On monitors with quickly updating cuff pressure displays you can do a rough cal check by simply placing the SimCube on top of the monitor, placing the SimCube in manometer mode, and starting a reading. The two pressure gauges should track tightly, although the monitor's display may be noticeably delayed. On some monitors, however, the displayed pressure may represent the intended pressure for the pressure step rather than the actual

pressure. If this is the case you cannot use this method.

### Neo Mode Simulation Setup

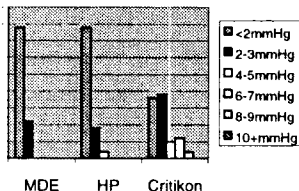
In a neonatal NIBP setup the patient cuff may represent just a few ml of volume, while the patient hose may represent 50 ml or more of volume. Since the SimCube operates by pulse volume (about 1/4 ml at peak in neo mode) the pressure pulses can be much larger on single lumen than on dual lumen systems. Some single lumen systems do not have enough dynamic range to reliably capture the pulses produced by the SimCube with a #1 neo cuff. While we have had good results with a #2 neo cuff, we recommend using a loosely wrapped #3 neo cuff for neonatal simulation on single lumen systems. Dual lumen systems should work reliably with a #1 neo cuff.

Due to the reduced pulse size of our neonatal simulation many monitors will not be able take readings on this simulation if the monitor is in adult mode or if you are using an adult cuff. We strongly recommend using a neonatal cuff and placing the monitor in neonatal mode. However, if you do not have access to a neonatal cuff, any volume in the range to 15 to 75ml will work with most monitors. This can be achieved with an infant cuff or, in some cases, with a tightly rolled child cuff. Also, a length of tubing can be used. A rough but handy approximation is that a 1 inch length of 1/8 inch I.D. tubing is around 1ml in volume.

### Reading to Reading Variations

Even with the best setup there is still variation from reading to reading. Sometimes a reading will be produced which is quite far off target and it is difficult to know if this represents a problem with the monitor or not. The AAMI spec says that 1% of readings can be as much as 29mmHg off, but under simulation, and using the techniques we have described you should see much less than that. The following chart shows some typical error distributions. These represent the difference from 120mmHg systolic using SimCube's adult

mode with a 400ml Cuff, discarding the first reading, for 50 readings. On some monitors systolic and diastolic have similar error distributions, while on others they are quite different.



### About The Author

Karl Rutter has been an engineer, a manager, and a director at a Los Angeles-based, medical device manufacturer where he designed a NIBP algorithm which is in use in tens of thousands of units worldwide. This algorithm has been shown by competing manufacturers to be one of the most consistent and noise-immune on the market. In 2003 he helped to found Pronk Technologies Inc, which bases its product line on the concept that biomedical engineers do important work and they should have really good tools. He was the lead engineer on the SimCube product.

### More Info

More information about the SimCube and NIBP simulation can be found:

On the Web at: [www.pronktech.com](http://www.pronktech.com)  
By email at: [sales@pronktech.com](mailto:sales@pronktech.com)  
By phone at: (800) 609-9802