

Pleur-evac™ Sahara™ and Atrium™ Express™ Series Dry Suction/Dry Seal Feature Comparison Overview

Pleur-evac™ Sahara™ S-1100 Series



Atrium™ Express™ 4000 Series



SUCTION

Dry suction to -40 cm H₂0.

SUCTION SOURCE REQUIREMENTS

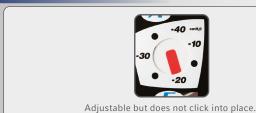
S-1100-08LF and S-1130-08LF: 6 LPM S-1102-08LF and S-1150-08LF: 16 LPM

-80 mmHg

SUCTION CONTROL



Clicks in place at prescribed level. Pre-set at -20 cm $\rm H_2O$.



SUCTION INDICATOR



Distinct "On/Off" Orange Float only visible when suction has reached prescribed level.

Variable bellows. Suction bellows will expand to the \triangle mark or beyond when suction is connected and operating at a regulator setting of -20 cmH₂0 or higher. If the bellows is expanded but less than \triangle mark, increase the suction source vacuum to -80 mmHg or higher. For regulator settings less than -20 cmH₂0, and visible bellows expansion, the window will confirm suction operation.



SEAL

One-way valve protection from atmospheric air without the addition of fluid. Fluid is for diagnostics only.

Patient is at no risk of exposure to atmospheric air after the thoracic catheter is attached to the unit.

PATIENT PROTECTION UPON TIP OVER

One-way valve protects the patient from atmospheric air in any orientation.

Suction ON: Yes Suction OFF: Yes

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AIR LEAK METER





FLUID MIGRATION UPON TIP OVER

Drainage can migrate among sections of the collection chamber. Fluid will remain in the unit.

COLLECTION CHAMBER

2500 ml

- 1 ml increments up to 100 ml, then 2 ml up to 200 ml
- Over 200 ml calibrations are in 5 ml increments

2100 ml

- 1 ml increments up to 100 ml, then 2 ml up to 200 ml
- Over 200 ml calibrations are in 10 ml increments

SPECIMEN SAMPLING

NEEDLELESS

Sample Port in patient tube.

NEEDLE

Not recommended

NEEDLE

20 gauge needle or smaller

INFANT UNIT

S-1130-08LF (1/2 ml increments up to 10 ml, 1 ml increments up to 20 ml, and 2 ml increments up to 200 ml)

No

DUAL UNIT

S-1102-08LF (1000/1000 ml)

4020 (1090/900 ml)

CONTINUOUS REINFUSION MODELS

S-1150-08LF (1700 ml; first 1050 ml recoverable for reinfusion)

4050 (1100/1000 ml)

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