

User manual v 2.0 EMG-USB2

Multichannel Bioelectrical Signal Amplifier



 \triangle Read this manual carefully before using the EMG-USB2 amplifier.





INDEX

1. GENERAL DESCRIPTIONpag.	5
2. EMG-USB2 KIT CONTENTpag.	6
3. END USERS pag. Contraindications pag. Side effects pag.	6 6 6
4. SAFETY CAUTIONS AND OTHER WARNINGSpag.	7
5. SYMBOLS USED ON EMG-USB2 AND IN THE USER MANUALpag.	9
6. TECHNICAL SPECIFICATIONS pag.	10
7. DETAILED DESCRIPTION pag.	12
FRONT PANELpag.Single input connectors: IN 1÷4pag.Multiple input connectors: MULTIPLE IN 1÷3pag.PATIENT REF connectorpag.DRL IN connectorpag.DRL OUT connectorpag.Liquid crystal display and keypadpag.REAR PANELpag.Power supply socketpag.Power supply switchpag.Fuse boxpag.Fanpag.USB connectorpag.AUXILIARY INPUTS connectorspag.TRIGGER connectorpag.ANALOG OUTPUT connectorpag.	12 12 13 13 13 14 14 15 15 16 16 17 17 17
8. USE OF EMG-USB2 pag.	18
EMG-USB2 CONFIGURATIONpag.Detection Modepag.Amplification gainpag.High pass and Low pass filterspag.Analog out settingpag.Global Settingspag.Backlight managementpag.Firmware upgradepag.	22
CONNECTION SETUPpag.	23
PATIENT CONNECTIONpag.	24
9. TROUBLESHOOTINGpag.	27
10. EMG-USB2 MAINTENANCE AND STORAGEpag.	28
11. TECHNICAL CHARACTERISTICSpag.	29
12. WARRANTY	





1. GENERAL DESCRIPTION

The EMG-USB2 is a multichannel amplifier for bioelectrical signals. It can detect surface electromyographic (sEMG) signals, intramuscular electromyographic (iEMG) signals, electroencephalographic (EEG) signals and electrocardiographic (ECG) signals.

The EMG-USB2 allows the detection and recording of the electric signals generated by human body. The signals acquired by the instrument are amplified, filtered, digitally converted and then transferred to a PC, via an USB interface, for real-time visualization and storage. A freeware software called OT BioLab has been designed by OT Bioelettronica and is available for download on the website www.otbioelettronica.it, under the download page.

The EMG-USB2 is a research instrument designed for clinical research carried out by qualified researchers. EMG-USB2 has been developed by the cooperation between OT Bioelettronica and EMG & MOTOR UNIT LABORATORY of Aalborg University.

The EMG-USB2 is a modular system. It can amplify from 16 up to 256 bioelectrical channels, in modules of 16 channels per board installed. The number of amplifier boards installed in the system determines the total number of channels.

Several configurations of electrodes are possible by means of a number of cable adapters that allow splitting the 7 amplifier inputs (16 channels for inputs: IN1, IN2, IN3 and IN4; 64 channels for inputs: MULTIPLE IN1, MULTIPLEIN2 and MULTIPLE IN3).

EMG-USB2 allow to acquire, in any configuration, 16 additional signals on the auxiliary inputs (AUX-IN). The signals can be generated by others amplifiers (e.g. force, torque, angle, position or trigger signals) that do not need an optical insulation.

Custom amplification boards can be realized on user request to allow acquisition of other biological and non-biological signals (MMG, force, etc.).

The EMG-USB2 instrument is completely safe for the patient. The safety is achieved by means of medical grade electrical insulation of all the circuitry connected to the patient.

This user manual refers to all hardware versions of the instrument.



2. EMG-USB KIT CONTENT

- 1 multichannel amplifier EMG-USB2
- 1 to 7 cable adapters to connect electrodes to the amplifier (depending on the number of channels installed into the amplifier and on the customer request);
- 1 conductive cream package;
- 3 reference straps;
- Arrays and matrix of electrodes of different sizes, depending on the customer request;
- 1 EMG-USB2 user manual.

3. END USER

EMG-USB2 multichannel amplifier allows invasive and non invasive recording of biopotentials (iEMG, sEMG, EEG, ECG) detected by superficial and intramuscular electrode.

In case of sEMG, EEG and ECG recordings the end user must be familiar with the technique and received a proper training in EMG or EEG or ECG detection and interpretation.

The detection of iEMG signals is subjected to the insertion of needles or wires into the muscle and must be supervised by trained medical staff.

Contraindications

EMG-USB2 has no particular contraindications when used jointly with personal computers, provided that all the electrical devices connected to it and the power line comply with safety rules and standards concerning grounding and leakage currents.

Side effects

In case of sEMG, EEG or ECG, no significant side effects are known. The materials used for manufacturing all the parts in contact with the patient are biocompatible. Possible slight cutaneous allergic reactions (e.g. skin reddening) are reduced to a minimum during short duration of bioelectrical signal acquisitions.

In case of iEMG, the needles or wires used to detect the signals must be sterilized. No significant side effects are known.



4. SAFETY CAUTIONS AND OTHER WARNINGS

The use of the multichannel EMG-USB2 amplifier is **absolutely forbidden** in the following conditions:

- While other monitoring devices are in use with the patient.
- While electro surgery equipment, short waves or microwaves therapy devices are used.
- By mentally impaired people.
- Whenever the equipment is damaged.
- In proximity of inflammable substances (especially inflammable liquids and gases) or in environments with high concentration of oxygen.
- On patients carrying life-supporting equipment that might be adversely affected by electromagnetic interferences, such as pacemakers, etc.

The following cautions should be observed:

- The detection of iEMG signals must be supervised by trained medical staff.
- Only use electrodes supplied by the manufacturer: EMG-USB2 is guaranteed to achieve tested performance only if used with electrodes supplied by the manufacturer.
- Contact the manufacturer immediately if extraneous materials permeate into the device (liquids, powders, etc.). In case of hard shocks suffered by the EMG-USB2 (like a drop to the floor, etc.), verify that no crack or any other kind of damage of the box resulted from the shock. In case of doubt, please contact the manufacturer.
- The EMG-USB2 is subject to electromagnetic interference that is not dangerous for the patient (such as electrostatic or electromagnetic interference generated by electrical motors and other sources). This interference may affect the measurements of the physiological variables derived from the EMG or EEG signals. These measurements are not meant to be used for diagnostic purposes, and thus these signal alterations cannot be dangerous for the patient, please always take into account the presence of noise in your signal processing tasks and evaluations.
- Before making any measurement, it is mandatory to check the quality of the grounding of the
 power line to which the EMG-USB2 is connected. The use of electrical devices with
 grounding connections not compliant with safety standards represents a high risk
 for the patient and the operator.
- The connection between EMG-USB2 and other electrical devices (e.g. a PC) must be done in compliance with the European standard EN 60601-1-1 on medical devices.



- Always use the EMG-USB2 with a PC manufactured in compliance with the European standards EN 60950 (safety standard for information technology devices), EN 55022 (EMC standard) and EN 55024 (immunity standard).
- Electrical motors and other electrical devices (relay, remote control switch, neon lights, etc.)
 near the EMG-USB2 electromyograph can be a source of electromagnetic interference that disturbs the amplifier. The presence of such electromagnetic fields is not dangerous for the patient, but can alter the bioelectrical signals and cause unreliable measurements.
- The use of the EMG-USB2 is restricted to skilled personnel.
- Incorrect measurements can arise when unskilled personnel use the device in presence of strong sources electromagnetic interference (e.g. strong electromagnetic fields). The presence of interference in the signals is easily recognised by skilled personnel.
- EMG-USB2 is not designed to be portable equipment. Should it be necessary to move the EMG-USB2 electromyograph, it must be properly packaged to avoid typical vibrations and shocks arising from transportations. Vibrations could cause the release of metallic particles inside the appliance, such as screws, nuts and bolts, that could compromise the safety of the patient and the integrity of the appliance.



5. SYMBOLS USED ON EMG-USB2 AND IN THE USER MANUAL

\uparrow	Class BF for circuitry applied to patient.		
\triangle	Read carefully the instruction remarks before use.		
4	Dangerous voltage level, power line voltage.		
	Multifunction keys to select the parameter to be modified.		
	Multifunction keys to modify the selected parameter value.		
	Input selection keys, indicated as Previous INPUT and Next INPUT. They can be used to select the group of channels related to an IN and a MULTIPLE IN connector.		
OK	Multifunction key to enter the selected parameter value.		
\rightarrow	Signals input.		
$\longrightarrow\!$	Signals output.		
1 0	Power on (I): switch on power line voltage supply. Power off (O): switch off power line voltage supply.		



6. TECHNICAL SPECIFICATIONS

EMG-USB2 is an optically and galvanically insulated device designed to guarantee a high safety level for the patient and the operator in all operating conditions. The optical and galvanic insulation separates the circuitry connected to the patient from the circuitry connected to external non-medical devices, such as the PC used for data acquisition and user interface. An embedded circuitry, called Driven Right Leg (DRL) circuitry, is available to reduce common mode voltage noise arising from electrical interference from the power line. The DRL is particularly useful in monopolar acquisition mode.

Table 1 shows an example of possible probes configurations with the available versions of the EMG-USB2.

Device configuration	Example of probes configuration
256 channels	four 16 channel probes and three 64 channel probes
128 channels	four 16 channel probes and one 64 channel probe
64 channels	four 16 channel probes
16 channels	one 16 channel probe

TAB. 1: Examples of probes configurations with EMG-USB2 amplifier.

As shown in the examples, it is possible to simultaneously acquire signals with different probes. This is necessary when signals from different muscles need to be recorded at the same time or when EEG and EMG has to be recorded together.

Using the front panel keypad, it is possible to assign a gain value to each probe. When the signals are detected from different sources, it can be necessary to set different gain levels for each probe to exploit the full range of the A/D converter and obtain the best possible recording of the signal.



EMG-USB2 technical specifications are shown in TAB. 2.

Amplification channels (IN1÷4 and MULTIPLE IN 1÷3)			
Selectable gain OFF, 100, 200, 500, 1000, 2000, 5000, 10000 V/V			
High pass filter: 3, 10, 100, 200 Hz Low pass filter: 130, 500, 900, 4400Hz			
Maximum input range	50 mV _{PP}		
Noise level referred to input	< 4 μV _{RMS}		
Input impedance	> 10 ¹¹ Ω		
CMRR	> 95 dB		
Output range	0 ÷ 5 V		
Insulation voltage	4.000 V _{DC}		
Auxiliary channels (AUX-IN 1÷16)			
Input range	Input range ± 5 V		
Bandwidth	Channels are not filtered		
Gain	0.5 V/V		
Input impedance	200 kΩ		
A/D converter input dynamics	0 ÷ 5 V		
	Data conversion		
A/D converter resolution	12 bit		
Data transfer to PC	USB2 interface		
Selectable sample frequency	lectable sample frequency 512, 2048, 4096, 10240 Hz		

TAB. 2: EMG-USB2 technical specification



7. DETAILED DESCRIPTION

FRONT PANEL

FIG. 1 shows controls, indicators and connectors present on the front panel of the EMG-USB2 and described in the following sections.

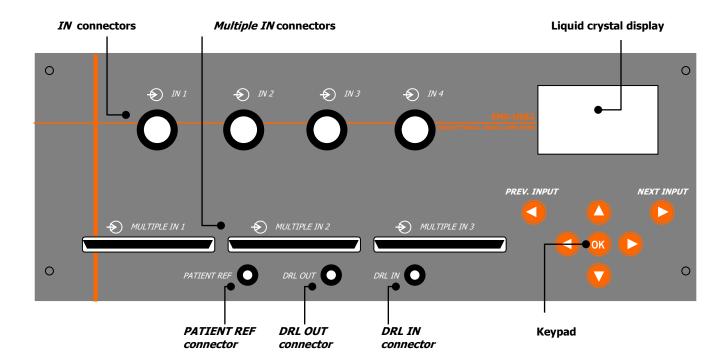


FIG. 1: EMG-USB2 front panel

Single input connectors: IN 1÷4

Each of the single input connectors provide the input to 16 amplification channels. These inputs allows the connection of different type of adapters. The adapters are active device that are used to interface one or more electrode arrays or matrixes to the amplifier. For sEMG are available different type of adapters that allow the connection of one 16-electrode array, or two 8-electrode arrays or four 4-electrode. For a complete list of available adapters refer to the website: www.otbioelettronica.it



Multiple input connectors: MULTIPLE IN 1÷3

Each of the multiple input connectors provide the input to 64 amplification channels. For sEMG it is available one adapter for the connection of a 64 electrode matrix.

PATIENT REF connector

The *PATIENT REF* connector is used to connects the EMG-USB2 reference point of the amplifier to the patient. The reference point must be connected to a point on the patient's body without myoelectric activity (e.g. the ankle or the wrist) using the supplied ground strip. The strip must be wet with water to ensure a good electric contact with the patient.

riangle REMARK: failure in connecting this electrode prevents the correct acquisition of the EMG signal.

DRL IN connector

The *DRL IN* has a double function, it is the input of the interference reduction circuitry DRL and one input of each EMG-USB2 amplification chain, when in *floating monopolar* mode.

In case of high levels of electromagnetic interference, it may be necessary to activate the DRL noise reduction circuitry. To activate the DRL noise reduction circuitry a ground strip must be connected to the patient at a point with no bioelectrical activity (wrist or ankle). Using the provided cable, the strip must be connected to the *DRL IN* connector. An additional ground strip must be connected at a point with no bioelectrical activity on the patient and, using the provided cable, to the *DRL OUT* connector.

When using the *floating monopolar* detection mode (Mode: Float. Monop.) the DRL IN is also one of the two inputs of all EMG-USB2 first stages. Thus, when the amplifier is in this mode, it is mandatory to connect the patient to this input. A ground strip must be wet with water to ensure a good electric contact with the patient and has to be connected to a point on the patient's body without bioelectrical activity (e.g. the ankle or the wrist) and, using the provided cable, to the DRL IN connector.

It is very important that the two strips connected to PATIENT REF and DRL IN connectors input **do not touch each other**.

AREMARK: failure in connecting this electrode prevents the correct acquisition of the EMG signal in floating monopolar mode (MODE: Float. Monop.).



DRL OUT connector

The *DRL OUT* is the output of the DRL interference reduction circuitry. The *DRL OUT* should be connected with the provided cable to a ground strip. The strip has to be wet to ensure a good electric contact with the patient. It is not strictly required to connect this strip at a point without bioelectrical activity, whereas this is strictly required for *DRL IN* and *PATIENT REF*.

REMARK: failure in connecting this electrode prevents the correct acquisition of biopotentials in case of high levels of electromagnetic interference.

Liquid crystal display and keypad

The liquid crystal display is turned on when the EMG-USB2 amplifier is switched on. After an introducing screen-shot, the EMG-USB2 settings are presented as shown in FIG. 2.

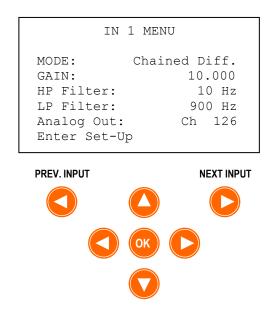


FIG. 2: Liquid crystal display screen-shot example displaying the IN 1 menu

This user interface give the access to all the instrument parameters. Refer to the *EMG-USB2 CONFIGUARTION* section for detail about instrument settings.



REAR PANEL

Figure 3 shows the connectors on the rear panel of EMG-USB2 described in the following sections.

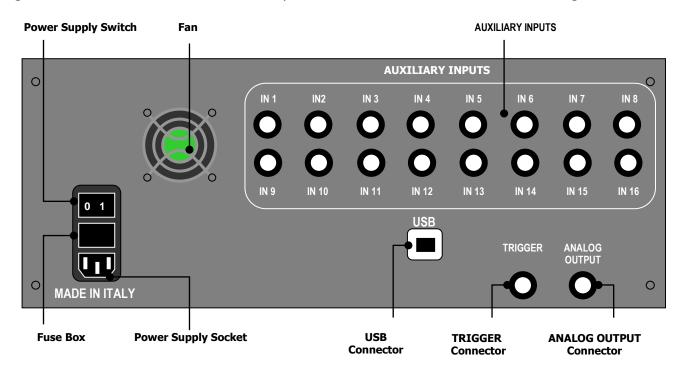


FIG. 3: EMG-USB2 rear panel view

Power supply socket

The EMG-USB2 must be connected to the power line socket only with the supplied cable. Ensure that the wall socket is properly grounded.

DANGER: the use of extension cords, multiple sockets or adapters can impair the performance of the EMG-USB2. Connection to sockets without proper grounding (e.g. lacking the "earth" conductor) or with bad quality grounding can impair the performance of the EMG-USB2 and cause a potential risk for the patient and the operator.

Power Supply Switch

The Power Supply Switch turns on/off the EMG-USB2. The switch position I turns the EMG-USB2 on; the switch position **O** turns it off.

The Power Supply Switch breaks both the power line wires to improve the safety. When the EMG-USB2 amplifier is not in use, turn it off by this switch.



Fuse Box

In the same block of the power supply switch and the power supply connector there is a sliding box with one fuse for each power line wire. For proper operation both fuses must conduct electricity. A cover opening fuse breakdown indicates excessive current absorption and usually is a symptom of something seriously burnt. Have the EMG-USB2 properly checked by qualified personnel before replacing the fuses. Replacing the broken fuses may not restore the EMG-USB2 to its original integrity without a careful diagnosis of the causes that made the fuses burn out. The anomaly may have rendered the device no longer compliant with the safety standards. Should it be necessary, in any case replace the fuses with others of the same type. Fuse type is indicated on the rear ID label.

⚠ DANGER: Replacing the fuse with other fuse types can be very dangerous for patient and the operator.

Fan

The fan on the rear panel cools the internal circuitry of the instrument. The airflow to avoid amplifier overheating enters the EMG-USB2 from the slits on the bottom panel and exits through the fan. The following cautions must be observed:

- Ensure to leave at least 8 cm of clear space behind the EMG-USB2 to ensure a suitable airflow.
- Do not obstruct the slits on the bottom panel.
- Do not stop the fan.
- Do not obstruct the grid on the rear panel (see FIG. 4).
- ⚠ REMARK: blocking the airflow can cause overheating and device breakdown. Ensure that the fan rotate freely and that nothing obstructs or blocks it.

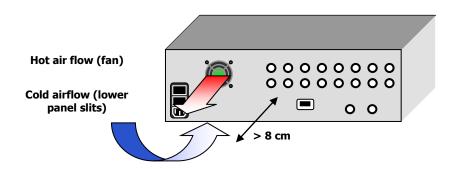


FIG. 4 Airflow and minimum required space behind the device



USB connector

Connect the PC by means of a standard A-B USB cable to this connector.

AUXILIARY INPUTS connectors

These BNC type connectors can be used to acquire external amplified signals, in the range \pm 5 V, together with the bioelectrical signals. The sixteen auxiliary inputs work even if no other inputs of the front panel are used. Thus, the EMG-USB2 can be used as an sixteen channels USB acquisition board. To properly set and acquire these channels refer to the OT BioLab user manual.

TRIGGER connector

This BNC type connector can have different function that can be select from the different software version.

TRIGGER connector can be set as an INPUT and used to start the data transfer by means of an external TTL signal $(0\div5V)$.

TRIGGER connector can be set as an OUTPUT and provide a square waveform to synchronize the EMG-USB2 with other devices.

ANALOG OUTPUT connector

This BNC type connector outputs one of the amplified and filtered signals (refer to the Analog out setting) over the insulation barrier for safety connection to others instruments. The output range is $0 \div 5V$ and the bandwidth range from DC to 4100 Hz with a first order low pass filter acting as a post DAC filter.

A possible use of this output is to provide the input to an audio amplifier to play the EMG signal. The signal can also be sent to other instruments to provide some kind of biofeedback or synchronization. The OT Bioelettronica is available to design any kind of adapter or instrument to manage this output on request.

REMARK: the analog signals is available only after the EMG-USB2 has been connected to the PC by means of a USB cable and the signal visualization has been started on OT BioLab.



8. USE OF EMG-USB2 EMG-USB2 CONFIGURATION

The embedded keypad and the display on the front panel of EMG-USB2, allow the operator to change the settings of the amplifier as explained in the following instructions:

- Using PREV. INPUT and NEXT INPUT keys it is possible to browse the inputs menu.
- lacksquare Move the selection to the desired parameter using lacksquare and lacksquare keys.
- Press of to confirm the parameter selection; only the parameter will be negative displayed to indicate that it is possible to change the value of the selected parameter.
- Scroll the available options and select the desired value using the and keys.
- Press or to confirm the new value.

Selecting the option *Enter Set-Up* the instrument give access to the Set-Up menu where it is possible to set additional parameters.

All the settings are send to the PC at the end of each acquisition and the settings are stored together with the signals by OT BioLab. For further details refer to the OT BioLab user manual.

When the EMG-USB2 is switched off the settings are stored into an internal memory and are reloaded when the instrument is switched on again.

A complete description of the parameters and settings can be found in the following sections.

Detection Mode

EMG-USB2 feature different detection modalities. The detection mode is displayed in the first line of every input menu and is common to all the amplifier channels. In table 3 are listed and described all the available options. To better understand how the different mode works, it is important to remember that each input of the amplifier manages 16 signals (in case of IN $1\div4$) or 64 signals (in case of MULTIPLE IN $1\div3$) from the adapters. Each channel amplify the difference between two signals.



Parameter	Available options	Description	
MODE	Chained Diff.	It is a single differential mode. Each channel amplify the difference between a subsequent signals of each input. The last channel of each input is obtained as difference between the last signal of the same input and the first signal of the subsequent input. For example, in this mode, the channel 16 is obtained as difference between the signal 16 (last signal of IN 1) and the signal 17 (first signal of IN 2). This mode have to be used when connecting an electrode matrix or an array to several input.	
	Looped Diff.	It is a single differential mode. Each channel amplify the difference between a signal and the subsequent one. The last channel of each input is obtained as difference between the last signal and the first signal of the same input. For example, in this mode, the channel 16 is obtained as difference between the signal 16 (last signal of IN 1) and the signal 1 (first signal of IN 1). This mode have to be used when connecting a rectal probe.	
	Float. Monop.	All the channel makes the difference between the corresponding input signal and the signal at the <i>DRL IN</i> connector. The DRL IN must be connected, by means of a ground strip to a point on the body patient without bioelectrica activity. This is a monopolar detection since all the channels are referred to the same potential present at DRL IN. This mode can be used with standard adapters to detect signals in monopolar mode.	
	Refer. Monop.	All the channel makes the difference between the corresponding input signal and the reference point of the amplifier. This mode can be used jointly with adapter with suffix M5. This kind of adapters are specially designed to reduce interferences in monopolar detection.	
	Bipolar	This modality require special adapters that allow the signals detection from electrode pairs as standard bipolar EMG.	
	Hybrid	This mode can be used when different type of adapters are used together. In this condition the detection mode in not forced by the instrument but depend on the type of adapter used.	

TAB. 3: Detection mode details



Amplification Gain

The amplification gain for each input can be set by the user. Indication of the gain settings are displayed at the second line of every input menu. The gain by default can be different for each amplifier input. Browsing the different input menus, by means of and NEXT INPUT keys, it is possible to see all the different gains. PREV. INPUT

Activating the *Global Settings* configuration (Refer to the Set-Up menu), the gain of all inputs is force to be equal. In this case, browsing the different input menus, all the input will display the same gain value than can be modified in any input menu.

In table 4 are listed all the available gains.

Parameter	Available options	Description
	OFF	The corresponding input is turned OFF
GAIN	100	All the signals related to the corresponding input are amplified by respective the factor. In case of EMG recordings lower values can be used during high level contractions or during electrically elicited contractions. Higher values are suggested when recording from deep muscles or during low level contractions.
	200	
	500	
	1.000	
	2.000	
	5.000	
	10.000	

TAB. 4: Amplification gain description

High pass and Low pass filters

The bandwidth for each input can be set by the user. Indication of the filters settings are displayed at the third and fourth line of every input menu. The filters by default can be different for each amplifier input. Browsing the different input menus, by means of PREV. INPUT and NEXT INPUT keys, it is possible to see all the different cut off frequencies.

Activating the *Global Settings* configuration (Refer to the Set-Up menu), the cut off frequencies of all inputs are force to be equal. In this case, browsing the different input menus, all the input will display the same High pass and Low pass values than can be modified in any input menu.

In table 5 are listed all the available cut off frequencies.



Parameter	Available options	Description
	3 Hz	
HP Filter	10 Hz	
	100 Hz	All the signals related to the corresponding input are high pass filtered and low pass filtered with the 3 dB cut off frequency displayed. It is up to the user
	200 Hz	to select the correct filters value for the conditioning of the desired signals.
LP Filter	130 Hz	OT BioLab, in any case provide a warning when the cut off frequencies do not respect standard values for a given type of signal. Refer to the OT BioLab user manual for further details.
	500 Hz	
	900 Hz	
	4.4 kHz	

TAB. 5: Selectable filters description

Analog out setting

The EMG-USB2 features an analog output (refer to the details of the rear panel of the instrument) where can be sent one of the signals filtered and amplified by the available channels. This signal is internally sampled at 10240 Hz and converted in digital form, cross the insulation barrier and then is re-converted in an analog signal. The output of the digital to analog converter is filtered with a 4100 Hz low pass first order filter to remove the staircase shape on the output signal.

The user can choose the channel to be sent at the analog output from any Input menus.

REMARK: even if any of the 256 channels can be selected, only the signals sent to the PC through the USB (refer to the OT BioLab manual) are useful signals. A flat line is generated by the analog output when a channel not sent to the PC is selected.

Global Settings

To simplify the gains and filters setting, it is possible to force the gain, high pass filters and low pass filters to be equal across all inputs. This can be done entering in the Set-Up menu and then modifying the *Global Settings* in the ON condition. When the *Global Settings* is activated it is possible to modify the parameter from any input menu and the changes will be applied to any other input.



Backlight management

In the Set-Up menu it is possible to manage the display backlight. In table 6 are listed and explained all the available option.

Parameter	Available options	Description	
Backlight time	OFF	The display backlight is always turned off	
	5 s		
	10 s	The display backlight is turned on when any keys of the front panel in pressed is automatically turned off after the corresponding time	
	15 s	- pressed is determined on after the corresponding time	
	ON	The display backlight is always turned on	

TAB. 6: Display backlight management option

Firmware upgrade

Using OT BioLab it is possible to upgrade the instrument firmware. What can be upgraded using this procedure is the firmware loaded in the microcontroller that manage the EMG-USB2 user interface (display and keypad) and amplification parameters.

To upgrade the firmware it is necessary obtain a valid upgrade file and transfer it using a special feature of OT BioLab. Refer to OT BioLab user manual for further details.



CONNECTIONS SETUP

Before performing any measure it is necessary to set up all the instrumentation; this operation has to be done keeping the equipment turned off. Be careful to connect all the cables properly to the respective plugs and sockets.

To set up correctly the electromyograph follow the instructions hereinafter (FIG. 5):

- Make sure that the PC used with the electromyograph is turned off.
- Make sure that the EMG-USB2 power on switch is set in "O" position.
- Connect the USB port, placed on the EMG-USB2 rear panel, to one of the PC USB port by means of an A-B USB cable.
- Connect the EMG-USB2 power supply connector, placed on the rear panel, to a 90÷260 V_{AC}, 50÷60 Hz power line supply voltage using the provided cable.

DANGER: the use of extension lead, multiple sockets or adapters can deteriorate the device performances. Connection to sockets lacking in the ground conductor ("earth" conductor) or with a bad quality of this connection can deteriorate the device performances and cause a potential risk for patient and operator.

- Turn on the PC (desktop computer or notebook).
- Install the OT BioLab software following the instructions reported on the respective user manual.

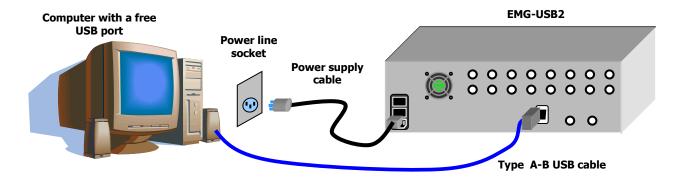


FIG. 5: Standard set up of the electromyograph



PATIENT CONNECTION

After the correct installation of the electromyograph and after verifying that it works properly, it is possible to connect the sensors to patient in order to perform a biopotential recording. Follow the instructions listed below:

- For each input, select the suitable adapter for the measurement to perform and plug it into one of the the *IN* or *MULTIPLE IN* connectors.
- Connect the adapters, the electrodes arrays or matrix, the wires or needles or standard electrode suitable for the desired application.
- Connect a patient ground strip to *PATIENT REF* plug with the enclosed cable. The strip has to be wet with water to assure a good electric contact with the patient and has to be connected on a point without any bioelectrical activity (e.g. the ankle or the wrist, FIG. 6).

 $ilde{m{ ext{$\Lambda$}}}$ REMARK: the lack of this connection prevents the correct acquisition of the EMG signal.

Figures 6, 7, 8 and 9 show some connections example to acquirebioelectrical signals in different modalities available using EMG-USB2.

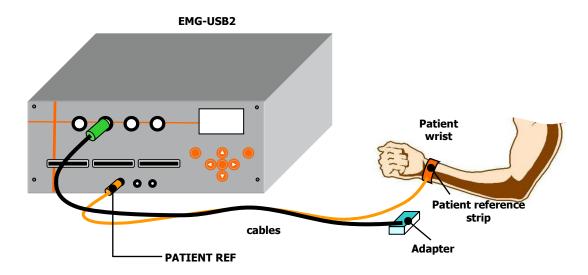


FIG. 6: Patient connection diagram for signal acquisition in differential modalities

(Mode: Chained Diff. or Looped Diff.)



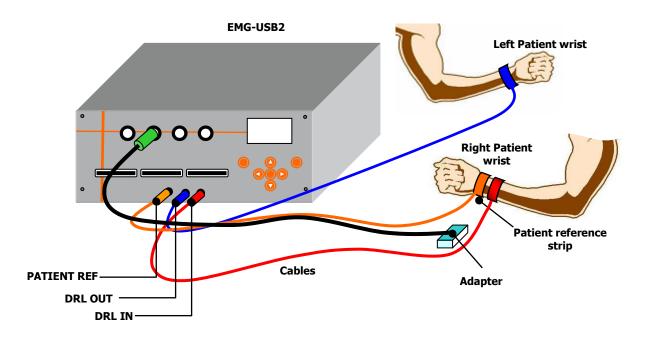


FIG. 7: Patient connection diagram for signal acquisition in floating monopolar modality (Mode: Float. Monop.).

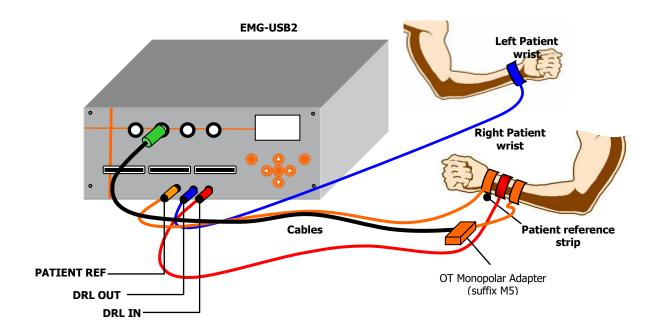


FIG. 8: Patient connection diagram for signal acquisition in referred monopolar modality (Mode: Refer. Monop.).



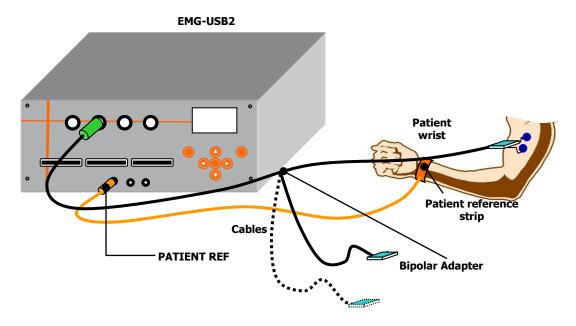


FIG. 9: Patient connection diagram for signal acquisition in bipolar modality (Mode: Bipolar).



9. TROUBLESHOOTING

This section describes the most common problems that may be found by EMG-USB2 users, with some suggestions to solve them.

For problems not described in this section contact the Technical Support Service of OT Bioelettronica.

GENERAL PROBLEMS			
Problem	Possible cause	Solution	
	Power supply switched off	Turn to "I" the power supply switch.	
The electromyograph does not turn on	Power supply cable is not inserted properly in the amplifier or into the wall socket	Check the power supply cable and the socket connection	
	Breakdown of the fuses	Contact the Technical Support Service of OT Bioelettronica	
The instrument turns on, but the characters are not shown properly on the display Ambient temperature is too low		Wait that the electromyograph warms up	

TAB. 7: Troubleshooting of the general problem that can occur using the EMG-USB2



10. EMG-USB2 MAINTENANCE AND STORAGE

EMG-USB2 has to be used in the following ambient conditions:

Temperature: from 0°C to +40°C

Maximum relative humidity: 75%

Atmospheric pressure: from 700 hPa to 1060 hPa

It is recommended to turn off the EMG-USB2 at the end of each measurement session, and to remove all the cables and connections. The EMG-USB2 should be stored with all the enclosed accessories on a safe desk far from all the situations listed in the section *Warnings*.

EMG-USB2 should be stored in the following ambient conditions:

Temperature: from -20°C to +40°C

Maximum relative humidity: 75%

Atmospheric pressure: from 700 hPa to 1060 hPa

Cleaning: use only a dry cloth to clean the device.

It is recommended to plan a device check every 24 months with the manufacturer. The EMG-USB2 should be repaired by the manufacturer only. Every repair executed by unauthorized personnel will be considered as a device violation voids the manufacturer's warranty.

Disposal

The device and the accessories should be disposed in compliance with the relative standards in special equipped areas or with special waste.



11. TECHNICAL CHARACTERISTICS

Model: EMG-USB2

Risk class: IIa in compliance with the standard 93/42/CEE.

Insulation class: BF type applied part, in compliance with the European standard EN 60601-1.

Classification: - class I, about the protection from indirect contact.

- IP20, about the penetration of fluids and dust; device not protected.

Case: painted metallic case.

Power supply: voltage from 90Vac to 260Vac \pm 10%, frequency from 47 to 400Hz.

Consumption: 30 W.

Limitations: the device is not suitable for use in environments with high oxygen

concentration and/or flammable fluids and/or gases; do not use with

electro-surgery or short wave/microwave therapy equipment.

Working conditions: device suitable for continuative work.

Protections: 2 x 1,6A fuses.

Input channels: up to 272 independent

Amplifier: Maximum input range: 50 mV_{PP}

Bandwidth: $3 \div 4400 \text{ Hz}$

Total noise (RTI) $< 4\mu V_{RMS}$ (monopolar)

 $< 1 \mu V_{RMS}$ (differential)

Selectable gain: 100, 200, 500,

1000, 2000, 5000,

10000

Input impedance $> 10^{11}\Omega$ on the entire bandwidth

CMRR > 95 dB

Visualization: graphic LCD 128x64 pixel display.

Commands: 7 keys protected by polycarbonate membrane.

Dimensions: 350 x 271 x 120 mm

Weight: 3 Kg.



12. WARRANTY

EMG-USB2 is covered by a 24 months warranty starting from the purchasing date of the electronic parts.

Connection cables are covered by a 24 months warranty.

The warranty is void in case of device violation or in case of intervention from unauthorized staff. Warranty conditions are reported hereinafter.

Warranty conditions

- 1. The warranty lasts 24 months on the electronic parts. Warranty is provided by the manufacturer.
- 2. The warranty covers only device damages that cause malfunctioning. The product must have the same serial number indicated on this certificate, or the warranty is released.
- 3. The warranty covers only the cost of repair or substitutions of defective components, including the costs of labour.
- 4. The warranty is void in case of damages caused by negligence, use not compliant with the instructions supplied, unauthorized repairs and accidental circumstances, especially for the external part.
- 5. The warranty is void with damages caused by incorrect power supply.
- 6. The warranty is not applied on all the parts subject to wear and tear.
- 7. The warranty does not include the shipment costs.
- 8. After 24 months the warranty is released. All the substituted parts, the labour costs and the shipment costs will be charged to the purchaser according to the rates in force.



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