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作者(Originator): 张妞 (zhangniu) 2023-08-16 15:44:30

审核人(Reviewers): 魏 丹莉 (weidanli) 2023-08-16 18:39:00

审核人(Reviewers): 黄 炜乐 (huangweile) 2023-08-17 15:24:42

批准人(Approvers): 谢宇(xieyu) 2023-08-22 17:32:13

批准人(Approvers): 肖 文聪 (xiaowencong) 2023-08-22 15:44:03

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SE-301 Electrocardiograph Version 1.9

User Manual



About this Manual

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Release Date: Aug. 2023

Statement

This manual will help you understand the operation and maintenance of the product better. It is

reminded that the product shall be used strictly complying with this manual. User's operation

failing to comply with this manual may result in malfunction or accident for which the

manufacturer. (hereinafter called the manufacturer) cannot be held liable.

The manufacturer owns the copyrights of this manual. Without prior written consent of the

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such as technical information and patent information are contained in this manual, the user shall

not disclose such information to any irrelevant third party.

The user shall understand that nothing in this manual grants him, expressly or implicitly, any

right or license to use any of the intellectual properties of the manufacturer.

The manufacturer holds the rights to modify, update, and ultimately explain this manual.

Product Information

Product Name: Electrocardiograph

Model: SE-301

Responsibility of the Manufacturer

The manufacturer only considers itself responsible for any effect on safety, reliability and

performance of the equipment if:

Assembly operations, extensions, re-adjustments, modifications or repairs are carried out by

persons authorized by the manufacturer, and

The electrical installation of the relevant room complies with national standards, and

Ι

The instrument is used in accordance with the instructions for use.

Terms Used in this Manual

This guide is designed to give key concepts on safety precautions.

WARNING

A WARNING label advises against certain actions or situations that could result in personal injury or death.

CAUTION

A CAUTION label advises against actions or situations that could damage equipment, produce inaccurate data, or invalidate a procedure.

NOTE

A **NOTE** provides useful information regarding a function or a procedure.

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Chapter 1 Safety Guidance

This chapter provides important safety information related to the use of the 3-Channel Electrocardiograph.

1.1 Indications for Use/Intended Use

The intended use of the 3-Channel Electrocardiograph is to acquire ECG signals from adult and pediatric patients (beginning at birth through 21 years of age) through body surface ECG electrodes. The electrocardiograph is intended to be used only in hospitals or healthcare facilities by doctors and trained healthcare professionals. The cardiogram recorded by the 3-Channel Electrocardiograph can help users to analyze and diagnose heart disease. However the ECG with measurements and interpretive statements is offered to clinicians on an advisory basis only.

WARNING

- 1. This equipment is not designed for intracardiac use or direct cardiac application.
- 2. This equipment is not intended for home use.
- 3. This equipment is not intended for treatment or monitoring.
- 4. This equipment is intended for use on adult and pediatric patients only.
- 5. The results given by the equipment should be examined based on the overall clinical condition of the patient, and they can not substitute for regular checking.

1.2 Warnings and Cautions

In order to use the electrocardiograph safely and effectively, and avoid possible dangers caused by improper operations, please read through the user manual and be sure to be familiar with all functions of the equipment and proper operation procedures before use.

Please pay more attention to the following warning and caution information.

1.2.1 Safety Warnings

- The electrocardiograph is provided for the use of qualified physicians or personnel professionally trained. They should be familiar with the contents of this user manual before operation.
- 2. Only qualified service engineers can install this equipment, and only service engineers authorized by the manufacturer can open the shell. Otherwise, safety hazards may happen.
- 3. The EQUIPMENT is protected against malfunction caused by electrosurgery.
- 4. **EXPLOSION HAZARD** Do not use the electrocardiograph in the presence of flammable anesthetic mixture with oxygen or other flammable agents.
- 5. **SHOCK HAZARD** The power receptacle must be a hospital grade grounded outlet. Never try to adapt the three-prong plug to fit a two-slot outlet.
- 6. If the integrity of the external protective conductor is in doubt, the equipment should be operated by using the built-in rechargeable battery.
- 7. Do not use this equipment in the presence of high static electricity or high voltage equipment which may generate sparks.
- 8. Only the patient cable and other accessories supplied by the manufacturer can be used. Or else, the performance and electric shock protection can not be guaranteed.
- 9. The use of patient cable and other accessories not supplied by the manufacturer may result in increased emissions or decreased immunity of the equipment.
- 10. The electrocardiograph has been safety tested with the recommended accessories, peripherals, and leads, and no hazard is found when the electrocardiograph is operated with cardiac pacemakers or other stimulators.
- 11. Make sure that all electrodes are connected to the patient correctly before operation.
- 12. Ensure that the conductive parts of electrodes and associated connectors, including neutral electrode, do not come into contact with earth or any other conducting objects.

- 13. To avoid a polarization or DC offset voltage, use non-polarizing electrodes(which will not form a DC offset voltage when subjected to a DC current) such as silver/silver-chloride types if there is a situation where there is a likelihood that a defibrillation procedure will be necessary.
- 14. There is no danger for patients with pacemakers. However, if a pacemaker is used, the results given by the equipment may be invalid, or lose the clinical significance.
- 15. Disposable electrodes must be used during defibrillation.
- 16. Electrodes of dissimilar metals should not be used; it may cause a high polarization voltage.
- 17. The disposable electrodes can only be used for one time.
- 18. Do not touch the patient, bed, table or the equipment while using the ECG together with a defibrillator.
- 19. Do not touch accessible parts of electrical equipment and the patient simultaneously.
- 20. The use of equipment that applies high frequency voltages to the patient (including electrosurgical equipment and some respiration transducers) is not supported and may produce undesired results. Disconnect the patient data cable from the electrocardiograph, or detach the leads from the patient prior to performing any procedure that uses high frequency surgical equipment.
- 21. If WIFI technology is used, in order to maintain compliance with the FCC RF exposure guidelines, the wireless should be installed and operated with a minimum distance of 20cm between the radiator and the human body. Use the supplied antenna only. There should be no shield in or around the room where WIFI is used.
- 22. Fix attention on the examination to avoid missing important ECG waves.
- 23. SHOCK HAZARD Don't connect non-medical electrical equipment, which has been supplied as a part of the system, directly to the wall outlet when the non-medical equipment is intended to be supplied by a multiple portable socket-outlet with an isolation transformer.
- 24. **SHOCK HAZARD** Don't connect electrical equipment, which has not been supplied as a part of the system, to the multiple portable socket-outlet supplying the system.

- 25. Do not connect any equipment or accessories that are not approved by the manufacturer or that are not IEC/EN 60601-1 approved to the electrocardiograph. The operation or use of non-approved equipment or accessories with the electrocardiograph is not tested or supported, and electrocardiograph operation and safety are not guaranteed.
- 26. Any non-medical equipment (such as the external printer) is not allowed to be used within the patient vicinity (1.5m/6ft.).
- 27. Multiple portable socket-outlets shall not be placed on the floor.
- 28. Do not use the additional multiple portable socket-outlet or extension cord in the medical electrical system, unless it's specified as part of the system by manufacturer. And the multiple portable socket-outlets provided with the system shall only be used for supplying power to equipment which is intended to form part of the system.
- 29. Accessory equipment connected to the analog and digital interfaces must be certified according to the respective IEC/EN standards (e.g. IEC/EN 60950 for data processing equipment and IEC/EN 60601-1 for medical equipment). Furthermore all configurations shall comply with the valid version of the standard IEC/EN 60601-1. Therefore anybody, who connects additional equipment to the signal input or output connector to configure a medical system, must make sure that it complies with the requirements of the valid version of the system standard IEC/EN 60601-1. If in doubt, consult our technical service department or your local distributor.
- 30. Connecting any accessory (such as external printer) or other device (such as the computer) to this electrocardiograph makes a medical system. In that case, additional safety measures should be taken during installation of the system, and the system shall provide:
 - a) Within the patient environment, a level of safety comparable to that provided by medical electrical equipment complying with IEC/EN 60601-1, and
 - b) Outside the patient environment, the level of safety appropriate for non-medical electrical equipment complying with other IEC or ISO safety standards.
- 31. All the accessories connected to system must be installed outside the patient vicinity, if they do not meet the requirement of IEC/EN 60601-1.

- 32. If multiple instruments are connected to a patient, the sum of the leakage currents may exceed the limits given in the IEC/EN 60601-1 and may pose a safety hazard. Consult your service personnel.
- 33. The potential equalization conductor can be connected to that of other equipment when necessary, to make sure that all these devices are connected to the potential equalization bus bar of the electrical installation.
- 34. The electrocardiograph shall not be serviced or maintained while in use with a patient.
- 35. The appliance coupler or mains plug is used as isolation means from supply mains. Position the electrocardiograph in a location where the operator can easily access the disconnection device.
- 36. The medical electrical equipment needs to be installed and put into service according to Appendix 2 EMC Information.
- 37. The equipment should not be used adjacent to or stacked with other equipment, refer to the recommended separation distances provided in Appendix 2 EMC Information.
- 38. Portable and mobile RF communications equipment can affect medical electrical equipment, refer to the recommended separation distances provided in Appendix 2 EMC Information.
- 39. Assembly of the electrocardiograph and modifications during actual service life shall be evaluated based on the requirements of IEC60601-1.
- 40. The device is MR unsafe. It is not intended for use in an MRI environment.
- 41. Magnetic and electrical fields are capable of interfering with the proper performance of the device. For this reason make sure that all external devices operated in the vicinity of the device comply with the relevant EMC requirements. X-ray equipment or MRI devices are a possible source of interference as they may emit higher levels of electromagnetic radiation.

1.2.2 Lithium Battery Care Warnings

- Improper operation may cause the lithium battery (hereinafter called battery) to be hot, ignited or exploded, and it may lead to the declination of the battery capacity. It is necessary to read the user manual carefully and pay more attention to warning messages.
- 2. Only qualified service engineer authorized by the manufacturer can open the battery compartment and replace the battery, and batteries of the same model and specification as manufacturer configuration should be used.
- 3. **DANGER OF EXPLOSION** -- Do not reverse the anode and the cathode when installing the battery.
- 4. Do not heat or splash the battery or throw it into fire or water.
- 5. Do not destroy the battery; Do not pierce battery with a sharp object such as a needle; Do not hit with a hammer, step on or throw or drop to cause strong shock; Do not disassemble or modify the battery.
- 6. When leakage or foul smell is found, stop using the battery immediately. If your skin or cloth comes into contact with the leakage liquid, cleanse it with clean water at once. If the leakage liquid splashes into your eyes, do not wipe them. Irrigate them with clean water first and go to see a doctor immediately.
- 7. Properly dispose of or recycle the depleted battery according to local regulations.
- 8. Only when the device is off can the battery be installed or removed.
- 9. Remove the battery from the electrocardiograph when the electrocardiograph is not used for a long time.
- 10. If the battery is stored alone and not used for a long time, we recommend that the battery should be charged at least once every 6 months to prevent over-discharge.

1.2.3 General Cautions

CAUTION

- 1. Federal (U.S.) law restricts this device to sale by or on the order of a physician.
- 2. Avoid liquid splash and excessive temperature. The temperature must be kept between 5 °C and 40 °C during operation, and it should be kept between -20 °C and 55 °C during transportation and storage.
- 3. Do not use the equipment in a dusty environment with bad ventilation or in the presence of corrosive.
- 4. Make sure that there is no intense electromagnetic interference source around the equipment, such as radio transmitters, mobile phones etc. Attention: large medical electrical equipment such as electrosurgical equipment, radiological equipment and magnetic resonance imaging equipment is likely to bring electromagnetic interference.
- 5. Ruptured fuse must only be replaced with that of the same type and rating as the original.
- 6. The device and accessories are to be disposed of according to local regulations after their useful lives. Alternatively, they can be returned to the dealer or the manufacturer for recycling or proper disposal. Batteries are hazardous waste. Do NOT dispose of them together with house-hold garbage. At the end of their lives hand the batteries over to the applicable collection points for the recycling of waste batteries. For more detailed information about recycling of this product or battery, please contact your local Civic Office, or the shop where you purchased the product.
- 7. Before use, the equipment, the patient cable and electrodes should be checked. Replace them if there is any evident defectiveness or aging which may impair the safety or the performance. Make sure that the equipment is in proper working condition.

1.3 List of Symbols

No.	Symbol	Description
1	-	DEFIBRILLATION-PROOF TYPE CF APPLIED PART

2	\triangle	Caution
3	∏i	Operating instructions
4	\Rightarrow	Equipotential grounding
5	ċ/ ⊚	Power key
6	PRINT/STOP	Print/Stop key
7	PRESS	Casing Button
8	£\$	General symbol for recovery/recyclable
9	P/N	Part Number
10	SN	SERIAL NUMBER
11	~~	Date of manufacture
12	•••	MANUFACTURER
13	EC REP	AUTHORISED REPRESENTATIVE IN THE EUROPEAN COMMUNITY
14	C € ₀₁₂₃	CE marking
15	A	Disposal method
16	[A	SD card slot
17	•<	USB socket
18	~ 몸	Net port

19	19V 	Power adapter port
20	Rx Only	Caution: Federal (U.S.) law restricts this device to sale by or on the order of a physician
21		Refer to User Manual (Background: Blue; Symbol: White)
22		Warning (Background: Yellow; Symbol&Outline: Black)
23*	FCC ID: SMQSE301EDAN	Federal Communications Commission: FCC ID: SMQSE301EDAN
24*	((<u>(</u>)))	Non- ionizing electromagnetic radiation
25	INR	MR Unsafe–Keep away from magnetic resonance imaging (MRI) equipment
26	ETL CLASSIFIED C Layes Us Intertek 4005997	Conforms to UL Std. 60601-1, IEC Std. 60601-2-25 Certified to CSA Std. C22.2 No 601.1,CSA Std. C22.2 No 60601-2-25
27	MD	Medical device
28	UDI	Unique Device Identifier

NOTE:

- 1. * Applicable to the Electrocardiograph configured with WIFI or 4G module.
- 2. For details about buttons of the keyboard, refer to Chapter 2.
- 3. The user manual is printed in black and white.

Chapter 2 Introduction

SE-301 3-channel electrocardiograph gathers ECG signals of 12 leads simultaneously. It displays the operation menu, ECG parameters as well as electrocardiograms.

3-channel ECG waves can be viewed on the LCD screen and printed out by using a high-quality thermal recorder.

The AUTO, MANU, RHYT, and R-R modes can be chosen freely.

SE-301 can be powered by the mains supply or a built-in rechargeable lithium battery. WIFI and 4G are configurable for SE-301. With a 32-bit processor and a large-capacity memorizer, SE-301 has advanced performance and high reliability.

Configuration: main unit, power cord, earth wire, patient cable, electrodes, and lithium battery

2.1 Top Panel

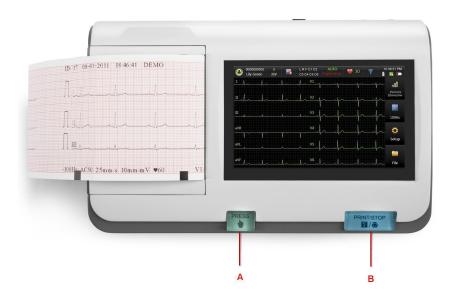


Figure 2-1 SE-301

No.	Description
А	Press to release the recorder casing
В	Press to start/stop ECG sampling

2.2 Bottom Panel

The silk screen on the battery compartment indicates the rated voltage.



4G SIM card can be inserted after taking out the battery, as shown on the picture above.

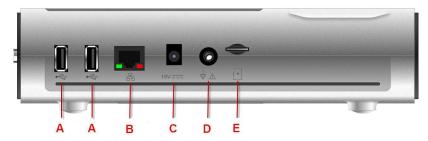
NOTE: The 4G function is currently not available in the U.S.

2.3 Right Panel



No.	Description	
А	Patient cable socket	
	Power key (Long press: switch on/off; short press: sleep mode)	
В	Color when using the mains supply: Green	
	Color when using built-in battery: Blue	
	Color when recharging: Orange	

2.4 Back Panel



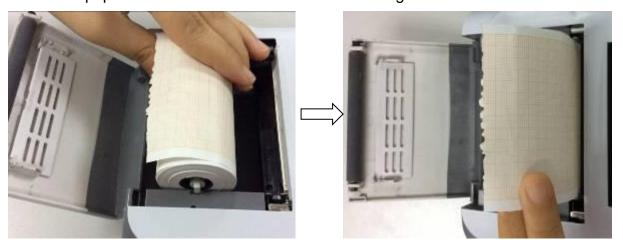
No.	Description	No.	Description
Α	USB socket	D	Equipotential grounding
В	Net port	E	SD card slot
С	Power adapter port	-	-

Chapter 3 Operation Preparations

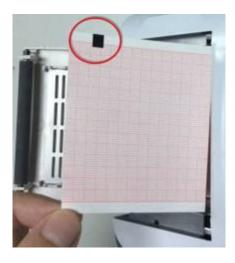
3.1 Loading/Replacing Recorder Paper

NOTE:

- 1. When the folded thermal paper is used, the paper roller is unnecessary and must be taken out.
- 2. The grid side of the paper should face the thermal print head, and the black marker on the paper should face the black marker detecting area.



Loading/Replacing Process of Rolled Thermal Paper



Loading/Replacing Process of Folded Thermal Paper

3.2 Preparing the Patient

3.2.1 Instructing the Patient

Before attaching the electrodes, greet the patient and explain the procedure. Explaining the procedure decreases the patient's anxiety. Reassure the patient that the procedure is painless. Privacy is important for relaxation. When possible, prepare the patient in a quiet room or area where others can't see the patient. Make sure that the patient is comfortable. The more relaxed the patient is, the less the ECG will be affected by noise.

3.2.2 Cleaning the Skin

Thorough skin preparation is very important. The skin is a poor conductor of electricity and frequently creates artifact that distorts the ECG signal. By performing methodical skin preparation, you can greatly reduce the possibility of the noise caused by muscle tremor and baseline drift, ensuring high-quality ECG waves. There is natural resistance on the skin surface due to dry, dead epidermal cells, oils and dirt.

To clean the skin

- 1. Shave hair from electrode sites, if necessary. Excessive hair prevents a good connection.
- 2. Wash the area thoroughly with soap and water.
- 3. Dry the skin with a gauze pad to increase capillary blood flow to the tissues and to remove the dead, dry skin cells and oils.

3.3 Connecting the Patient Cable to the Electrocardiograph and Electrodes



WARNING

The performance and electric shock protection can be guaranteed only if original patient cable and electrodes of the manufacturer are used.

1. Connecting the Patient Cable to the Electrocardiograph

Connect the patient cable to the patient cable socket on the right side of the main unit, and then secure them with two screws.

2. Connecting the Patient Cable to Electrodes

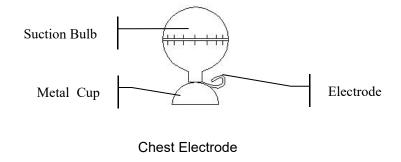
Align all lead wires of the patient cable to avoid twisting, and connect the lead wires to the corresponding electrodes according to the colors and identifiers. Firmly attach them.

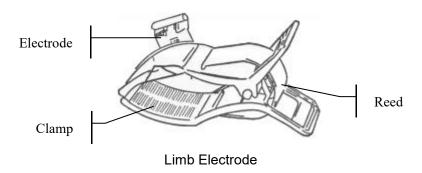
3.4 Attaching Electrodes to the Patient

There are two types of electrode for you to choose, one is the reusable electrodes, and the other is the disposable electrodes. The uses of the two types of electrode are as shown below:

3.4.1 Reusable Electrodes

Reusable Electrodes is divided into Limb electrode and Chest Electrode, as the following figure shows:



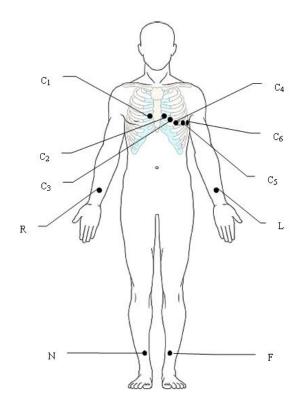


The identifiers and color codes of electrodes used comply with IEC/EN requirements. In order to avoid incorrect connections, the electrode identifiers and color codes are specified in Table 4-1. Moreover the equivalent codes according to American requirements are given in Table 4-1 too.

Table 3-1 Electrodes and Their identifiers and color codes

	European		Ame	erican
Electrodes	Identifier	Color code	Identifier	Color code
Right arm	R	Red	RA	White
Left arm	L	Yellow	LA	Black
Right leg	N or RF	Black	RL	Green
Left leg	F	Green	LL	Red
Chest 1	C1	White/red	V1	Brown/red
Chest 2	C2	White/yellow	V2	Brown/yellow
Chest 3	C3	White/green	V3	Brown/green
Chest 4	C4	White/brown	V4	Brown/blue
Chest 5	C5	White/black	V5	Brown/orange
Chest 6	C6	White/violet	V6	Brown/violet

As the following figure shows, the positions of chest electrodes on the body surface are



- C1: Fourth intercostal space at the right border of the sternum
- C2: Fourth intercostal space at the left border of the sternum
- C3: Fifth rib between C2 and C4
- C4: Fifth intercostal space on the left midclavicular line
- C5: Left anterior axillary line at the horizontal level of C4
- C6: Left midaxillary line at the horizontal level of C4

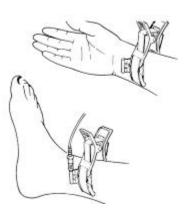
Chest Electrode Connection:

- 1) Ensure that the electrodes are clean;
- 2) Align all lead wires of the patient cable to avoid twisting, and connect the lead wires to the corresponding electrodes according to the colors and identifiers;
- 3) Clean the electrode area on the chest surface with 75% alcohol;
- 4) Daub the round area of 25mm in diameter on each electrode site with gel evenly;
- 5) Place a small amount of gel on the brim of chest electrode's metal cup;
- 6) Place the electrode on the chest electrode site and squeeze the suction bulb. Unclench it and the electrode is adsorbed on the chest;
- 7) Attach all chest electrodes in the same way.

NOTE: Long-time measurement with a strong negative pressure on the suction bulb may cause reddening of the skin. When using the electrode on small children or patients with delicate skin, squeeze the suction ball lightly.

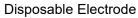
Limb Electrode Connection:

- 2) Ensure that the electrodes are clean;
- Align all lead wires of the patient cable to avoid twisting, and connect the lead wires to the corresponding electrodes according to the colors and identifiers;
- 4) Clean the electrode area which is a short distance above the ankle or the wrist with alcohol;
- 5) Daub the electrode area on the limb with gel evenly;
- 6) Place a small amount of gel on the metal part of the limb electrode clamp;
- 7) Connect the electrode to the limb, and make sure that the metal part is placed on the electrode area above the ankle or the wrist;
- 8) Attach all limb electrodes in the same way.



3.4.2 Disposable Electrodes







Clip/Snap/Banana Socket Adaptor

Disposable electrode must be used together with the clip/snap/banana socket adaptor.

The electrodes' positions on body surface are as the following table and figures:

American label	European label	Electrode placement
RA	R	Right deltoid
LA	L	Left deltoid
RL	N or RF	Above right ankle (Alternate placement, upper leg as close to torso as possible)
LL	F	Above left ankle (Alternate placement, upper leg as close to torso as possible)
V1	C1	Fourth intercostals space at right border of sternum
V2	C2	Fourth intercostals space at left border of sternum
V3	C3	Fifth rib between V2 and V4
V4	C4	Fifth intercostals space on left midclavicular line
V5	C5	Left anterior axillary line at the horizontal level of V4
V6	C6	Left midaxillary line at the horizontal level of V4

Disposable Electrode connection

- 1) Align all lead wires of the patient cable to avoid twisting, and connect the clip/snap/banana socket adaptors to the lead wires.
- 2) Clean the electrode areas on the body surface with 75% alcohol.
- 3) Attach the disposable electrodes to the electrode positions on body surface.
- 4) Clip the disposable electrodes with the clip/snap/banana socket adaptors.

The quality of ECG waveform will be affected by the contacting resistance between the patient and the electrode. In order to get a high-quality ECG, the skin-electrode resistance must be minimized when you attach electrodes to patients.

CAUTION

The disposable electrodes can only be used for one time.

WARNING

- 1. Make sure that all electrodes are connected to the patient correctly before operation.
- Make sure that the conductive parts of electrodes and associated connectors, including neutral electrode, do not come in contact with earth or any other conducting objects.

3.5 Inspection Before Power On

In order to avoid safety hazards and get good ECG records, the following inspection procedure is recommended before power-on and operation.

1) Environment:

- Make sure that there is no electromagnetic interference source around the equipment, especially large medical electrical equipment such as electrosurgical equipment, radiological equipment, magnetic resonance imaging equipment etc. Switch off these devices when necessary.
- ♦ Keep the examination room warm to avoid muscle action voltages in ECG signals caused by cold.

2) Power Supply:

- If the mains supply is used, please check whether the power cord is connected to the unit well. The grounded three-phase outlet should be used.
- When the battery capacity is low, recharge the battery before use.

3) Patient Cable:

Check whether the patient cable is connected to the unit firmly, and keep it far away from the power cord.

4) Electrodes:

- ♦ Check whether all electrodes are connected to lead wires of the patient cable correctly.
- Ensure that the chest electrodes do not contact.

5) Recorder Paper:

• Ensure that there is enough recorder paper loaded correctly.

6) Patient:

- ♦ The patient should not come into contact with conducting objects such as earth, metal parts etc.
- Ensure the patient is warm and relaxed, and breathe calmly.

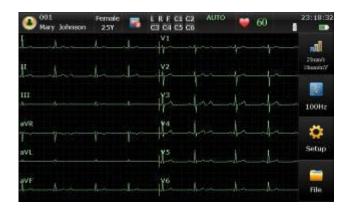
WARNING

The electrocardiograph is provided for the use of qualified physicians or personnel professionally trained, and they should be familiar with the contents of this user manual before operation.

Chapter 4 Sampling and Printing ECG

4.1 Entering Patient Information

4.1.1 Entering Patient Information Manually



On the main screen, the following information is displayed: patient information, system hints, heart rate, waveforms, current time, battery capacity, WIFI/4G signal (configurable), and functional keys.

Click the patient symbol to enter the patient information window, enter the patient information, or you can configure the patient information items in system setup first.

Item	Description
Pacemaker	Select Yes to detect very small pacemaker pulses. However, when Pacemaker is set to Yes , the system is very sensitive, and should not be close to equipment emitting high frequency radiation. High frequency radiation can interfere with pacemaker pulse detection and normal ECG acquisition.
	NOTE: Pacemaker is recommended to be set to No unless it is known that the majority of the electrocardiograph usage will be on patients with pacemakers.

NOTE:

- 1. The patient information cannot be set or changed during the printing course.
- 2. The lead notation area may cut the peaks of the waveform in display when the peak goes through the lead notation during changing the HR value on the main screen correspondingly, but the rest of the waveform is displayed normally. Therefore, this does not affect the user's normal judgment.

4.1.2 Entering Patient Information by Acquiring Orders

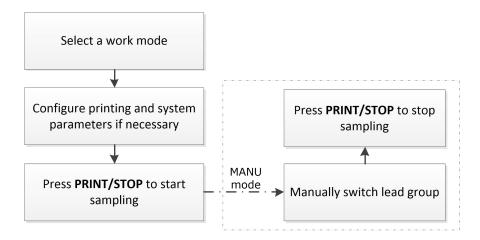
NOTE: To use the order function, the data management software (DMS) of the manufacturer must be installed in the PC.

Operation procedures are as follows:

- 1. Connect the electrocardiograph to the PC through the network.
- 2. Log into the DMS.
- 3. Set Remote IP, Local IP, Gateway and Subnet Mask in the Transmission Setup window.
- 4. Click the patient symbol on the main screen to open the patient information window, and then click **Order** to open the **Order** screen.
- 5. Click **Load** to download order records from the server.
- 6. Select an order and click **Examine** to enter the presampling screen.

4.2 Printing ECG Reports

The operation procedure is as follows:



NOTE:

- 1. The printing mode cannot be changed during the printing course. Stop printing reports before changing the printing mode.
- 2. In the MANU mode, press the 1mV/COPY key to print out 1mV mark in the ECG reports
- 3. When switching from the system setting or file management screen to the main screen, the heart rate value will be shown after a 3-second delay for calculation. If

you print immediately, the heart rate value will be 0 on the printed report while the value in the diagnosis area is normal. In this case, please wait more than 3 seconds before printing.

Chapter 5 Managing ECG Records

If you want to save the ECG records, you should set the **Auto Save** to **To ECG** or **Ext. Memory**. The default value is **To ECG**. Then the ECG records will be saved in the File Manager or in the external memory automatically.

Click File on the main screen to enter the file manager screen.



The File Manager allows records to be stored, deleted, printed and transmitted. When there is no space for more records to be stored in the File Manager, the message *MemFull* will be displayed.

5.1 Transmitting ECG Records to the PC

NOTE: To transmit ECG records to the PC, data management software (DMS) of the manufacturer (Smart ECG Viewer or SE-1515) must be installed in the PC. You should log into the DMS before the transmission.

5.1.1 Transmitting ECG Records through the Network

Connect the PC to the electrocardiograph with an Ethernet cable recommended by the manufacturer.

• Auto Transmission:

- 1. Choose **Setup** > **Transmission** to enter the Transmission Setup window.
- 2. Set Auto Transmission to On and set Transmission mode to Ethernet.
- 3. Set the **Server IP** to the IP of the DMS.

- 4. Set the first three numbers of the **Local IP** according to the first three numbers of the IP of the DMS. The last number of the **Local IP** item can be set at random, but it can't be the same as the last number of the IP of the DMS.
- 5. In the **AUTO** or **RHYT** mode, ECG data can be transmitted through the net automatically after an ECG report is printed out.

• Manual Transmission:

- 1. Choose **Setup** > **Transmission** to enter the Transmission Setup window.
- 2. Set Auto Transmission to Off and set Transmission mode to Ethernet.
- 3. For IP address setting, refer to step 3 and 4 for auto transmission.
- 4. To transmit all the data files to the PC, choose **More** > **Trans All** in the file management window.

To transmit a single file, select it and click **Trans**.

NOTE: The transmission process is long, and please be patient to wait.

5.1.2 Transmitting ECG Records through WIFI/4G Network (Configurable)

If the WIFI module or 4G SIM card is configured, ECG records can also be transmitted through WIFI/4G network.

WARNING

This device complies with Part 15 of the FCC Rules. Operation is subject to the following two conditions:

- 1) this device may not cause harmful interference, and
- 2) this device must accept any interference received, including interference that may cause undesired operation.

NOTE:

- 1. This equipment has been tested and found to comply with the limits for a Class B digital device, pursuant to part 15 of the FCC Rules. These limits are designed to provide reasonable protection against harmful interference in a residential installation. This equipment generates, uses and can radiate radio frequency energy and, if not installed and used in accordance with the instructions, may cause harmful interference to radio communications. However, there is no guarantee that interference will not occur in a particular installation. If this equipment does cause harmful interference to radio or television reception, which can be determined by turning the equipment off and on, the user is encouraged to try to correct the interference by one or more of the following measures:
 - Reorient or relocate the receiving antenna.
 - Increase the separation between the equipment and receiver.
 - Connect the equipment into an outlet on a circuit different from that to which the receiver is connected.
 - Consult the dealer or an experienced radio/TV technician for help.
- 2. Any changes or modifications to this unit not expressly approved by the party responsible for compliance could void the user's authority to operate the equipment.

5.2 Copying ECG Records between the ECG Machine and External Memory

- 1. Connect the external memory to the electrocardiograph.
- 2. Click **File** to open the File Manager screen.
- 3. Choose **More > Trans All**, and click **OK**, all the records will be transmitted to the external memory automatically.
 - During the transmission, if something wrong happens, the electrocardiograph will give the error information. Then you should check whether the external memory is connected to the electrocardiograph well.
- 4. If you want to import records from the **ECGDATA** folder of the external memory to the electrocardiograph, click the **Import** button, the extended-name of imported records should be ".dat".

NOTE: To import records from the external memory to the electrocardiograph, there should be some records in the folder named ECGDATA in the external memory. The folder name ECGDATA must be capital letters. You should not change the name of records in the **ECGDATA** folder.

5. If you want to export only one record, choose the patient record in the table and click **Export**.

NOTE:

- 1. The transmission process is long, please be patient to wait.
- 2. During the transmission, the external memory should not be pulled out.
- 3. Only FAT or FAT32 format can be used when formatting the external memory.
- 4. The storage of the external memory should not exceed 16G.

5.3 Deleting Patient Records

- 1. Open the File Manager screen.
- 2. If you want to delete all the records, click **More** and select the **Del All** button, and then click **OK**.
- 3. If you want to delete a record, choose the patient record in the table, and then click the delete symbol on the top.

5.4 Printing a Patient Record in the File Manager

screen

- 1. Open the File Manager screen.
- 2. If you want to print the patient record, choose the patient record in the list, and then press **PRINT/STOP**.

NOTE: If you use USB printer to print the patient record, when the **PRINT/STOP** key is pressed, the electrocardiograph begins to analyze data. Then the USB printer begins to print the ECG record after 8 seconds.

Chapter 6 Settings

Click **Setup** on the main screen to display the **System Setup** screen.

NOTE: The underlined values are system default values.

6.1 Work Mode

Item	Description
Sampling Mode (Only available in	Choose from: Pre-Sample, Real-time Sample, Triggered Sample, and Periodic Sample.
the AUTO mode)	Select Pre-Sample , 10s ECG data sampled before pressing the PRINT/STOP key will be printed out.
	NOTE: When Sampling Mode is set to Pre-Sample, if you press the PRINT/STOP key before the electrocardiograph samples for 10s, the recorder will not respond.
Periodic Sample	Duration can be set to a value between 0-60 min. The default value is 60
Setup	min.
	Interval can be set to a value of 0-60 min. The default value is 1 min.
	This interval must be shorter than the periodic sample duration.
Display Mode	Choose from: 3×4+1R, 6×2, and 6×2+1R
Preview	When enabled, you can preview AUTO or RHYT data after sampling.
Auto Arrhythmia Detection	When enabled, if arrhythmia is detected in the AUTO mode, a hint will pop up to ask you whether to print an extra rhythm report after the 12-lead ECG report.

6.2 Filter

Item	Description
AC Filter	Choose from: <u>On</u> or Off
	AC filter is used to suppress interference of AC power supply.
	NOTE: AC frequency can be set to 50Hz or 60Hz on the Advanced Setup
	screen according to local mains supply specifications.

DFT Filter	Choose from: 0.01Hz, 0.05Hz , 0.32Hz , or <u>0.67Hz</u>
	DFT Filter greatly reduces the baseline fluctuations without affecting the ECG
	signals. The purpose of this filter is to keep the ECG signals on the baseline of
	the printout.
	The set value is the low limit of the frequency range.
EMG Filter	The cutoff frequency can be set to 25Hz , 35Hz , 45Hz or <u>Off</u>
	EMG Filter suppresses disturbance caused by strong muscle tremor.
Lowpass Filter	The cutoff frequency can be set to 75Hz , 100Hz , 150Hz , 270Hz or 300Hz
	Lowpass Filter restricts the bandwidth of input signals.
	All the input signals whose frequency is higher than the set cutoff frequency will
	be attenuated.
	NOTE: Only when EMG Filter is set to Off, can the setting of Lowpass Filter
	be effective.

NOTE: To pass the distortion test, the electrocardiograph has to be configured with the highest bandwidth in filter settings. Otherwise, ECG signal may be distorted.

6.3 Record Info Setup

6.3.1 Setup 1

Item	Description
Print Out	Choose from: <u>On</u> , Off
	Select Off to disable the print function in the AUTO or RHYT mode.
Speed	Choose from: 5mm/s, 6.25mm/s, 10mm/s, 12.5mm/s, <u>25mm/s</u> and 50mm/s
	NOTE: The speed is corresponding with the work mode.
Gain	Choose from: 1.25mm/mV, 2.5mm/mV , 5mm/mV , 10mm/mV , 20mm/mV , 10/5mm/mV and 20/10mm/mV
	10/5mm/mV means that the gain of limb leads is set to 10mm/mV , while the gain of chest leads is set to 5mm/mV .

Auto Record	When using the thermal recorder, choose from:		
Style	3×4, 3×4+1R, 3×2+2×3		
	When using a USB printer, choose from:		
	3×4, 3×4+1R, 3×4+3R, 6×2, 6×2+1R or 12×1		
Sample Time	Set the sampling duration.		
Prompt	Choose from: Unconfirmed and Report Confirm.		
	Select Unconfirmed, Unconfirmed Report will be printed in the ECG reports.		
	Select Report Confirm, the physician's name will be printed in the ECG reports if it is		
	input in the Patient Information window.		
Record	Choose from: <u>Sequential</u> or Synchronous		
Sequence	Select Sequential , the lead group is printed one by one in a certain sequence. The		
	start time of a lead group is just the end time of the previous lead group.		
	Select Synchronous , the lead group is printed one by one in a certain sequence. All		
	leads are printed with the same start time.		
AGC	AGC means auto gain control.		
	Choose from: On or <u>Off</u>		
	Select On , the gain can be automatically adjusted according to actual signals.		
Record	Choose from: Short (2.5s), Medium (5s) and Long (10s)		
Length	NOTE:		
	1. It's configurable only when Record Device is set to Thermal , Record Sequence to Sequential , Sample Time to 10s , and Auto Record Style to 3 ×		
	2+2×3 or 3×4.		
	2. The device acquires ECG signals from patients undergoing short-term resting test. The time range can be 2.5s, 5s or 10s.		

Record Device

Choose from: **Thermal**, **HPM401/2035**, **HP1106/1020P**, **HP1106/1020P**, **HP4729/3638**, **HPM202D/M403d**, and **HP3638/4729**.

You should connect the corresponding USB printer to the electrocardiograph before printing with the selected record device.

WARNING

If the printer used is not the type listed above, additional safety measures (such as applying an isolation transformer to supply the medical system) should be taken when the safety of the medical system has not been evaluated. If in doubt, consult our technical service department or your local distributor.

CAUTION

It is forbidden to connect or disconnect an external memory or a USB printer during the transmission course.

NOTE:

- During the USB printing course, pressing the PRINT/STOP key again cannot stop printing ECG reports.
- 2. USB printing is ineffective in the AUTO mode and RHYT mode.
- Make sure that paper is installed in the USB printer before printing. Error may occur if no paper is loaded in the USB Printer.
- 4. Make sure the type of USB printer connected matches the type you choose in the Record Device. Error may occur if the USB printer type is not matched.

Manual Style

Choose from 3 channels and 1 channels

Select a style to print the ECG waves in the manual mode.

Rhythm

Choose from: Save Paper or Quickly

Record Mode

Select **Save Paper**, 10s after pressing the **PRINT/STOP** key on the main screen, an ECG report is printed in the RHYT mode.

Select **Quickly**, pressing the **PRINT/STOP** key on the main screen to begin printing an ECG report immediately in the RHYT mode.

Paper Marker

Paper Marker is used to identify the start point of each page of the recorder paper.

Choose from: Yes or No

Select **Yes** if the paper with black markers on the bottom is used, and the device can identify the start point of each page of the recorder paper while printing ECG reports.

WARNING

Under some extreme circumstance, for example the input signal is 5mV which is almost impossible during clinical application, the AGC function may adjust the gain (sensitivity) to an inappropriate value which cause overlap or gap between waveforms. Besides, you can adjust the sensitivity manually to get a better display.

6.3.2 Setup 2

Item	Description	
Measure	Choose from: On or Off	
	When it is set to On , the Measure information will be printed in the ECG report.	
Analysis	Choose from: <u>On</u> or Off	
	When it is set to On , the Analysis information will be printed in the ECG report.	
Template	Choose from: On or <u>Off</u>	
	When it is set to Off , the template will not be printed in the ECG report	
Position	Choose from: On or <u>Off</u>	
Marker	When it is set to Off, the template printed in the ECG report will not have position	
	marker.	
Minnesota	Choose from: <u>On</u> or Off	
Code	When it is set to On , the Minnesota Code will be printed in the ECG report.	
Device No.	Choose from: <u>On</u> or Off	
	When it is set to On , the Device No. will be printed in the ECG report.	
Baseline	Choose from: <u>Horizontal</u> , Auto or Off	
Adjustment	Select Horizontal, the baselines of the lead groups are adjusted simultaneously, and	
	the baselines of the leads in the same row are on the same line.	
	Select Auto , the baselines of the lead groups are adjusted respectively.	
	Select Off , the baselines of the lead groups are adjusted equally in the ECG reports.	
Grid of	Choose from: On or Off	
Report	When it is set to On , the grid will be printed while printing ECG reports with the	
	thermal recorder or USB printer.	

6.4 Patient Information Setup

Item	Description
ID	Choose from: <u>Auto</u> , Time or Manual
ID Hint	Choose from: On or Off
	In the AUTO or RHYT mode, when ID is set to Manual and ID Hint is set to On ,
	if you do not input the patient ID before pressing the PRINT/STOP key, a hint will
	pop up to remind you to input the patient ID.
Age	Choose from: <u>Age</u> , D.O.B or Age Group
H/W Unit	Choose from: <u>cm/kg</u> or inch/lb
BP Unit	Choose from: mmHg or kPa
PatInfo Refreshed	Choose from: <u>On</u> or Off
	Select On, the patient information will be refreshed after the ECG report is
	printed out and all the leads are off.
Order Acquired	Choose from: On or <u>Off</u>
	Select On, the Order item will be displayed in the Patient Information window
	and you can acquire orders by clicking it.
User-defined	Add new items.
First/Last Name	Choose from: On or Off
	When it is set to On , patient name will be divided into first name and last name.
Other patient options	Select information to be displayed in the Patient Information window.
Pacemaker	Select to detect very small pacemaker pulses. However, when Pacemaker is
	selected, the system is very sensitive, and should not be close to equipment
	emitting high frequency radiation. High frequency radiation can interfere with
	pacemaker pulse detection and normal ECG acquisition.
	NOTE: Pacemaker is recommended to be disabled unless it is known that the majority of the electrocardiograph usage will be on patients with pacemakers.

6.5 Transmission Setup

NOTE:

- 1. To transmit ECG data to the PC, the DMS produced of the manufacturer must be installed in the PC. You should log into the DMS before transmission.
- 2. If the power supply suddenly breakdown during data storage or transmission, file system error may occur. In this case, the file system should be formatted.

6.5.1 Basic Setup

Item	Description	
Device No.	Enter Device No., it should be within 7 ASCII characters.	
Auto	Choose from: On or Off	
Transmission	Select On , ECG data will be transmitted automatically after an ECG report is printed out in the AUTO or RHYT mode.	
Transmission Mode	Choose from: <u>Ethernet</u> , Wireless or Mobile Network.	
FTP Information	Enter data in the FTP Path, FTP User Name textboxes.	
IP Addresses	Set Server IP, Local IP, Set Gateway, Set Subnet Mask	
	For details, please refer to Section 5.1: "Transmitting ECG Records to the PC".	

6.5.2 WIFI Setup (Configurable)

Item	Description
Auto Get IP	Select this item, addresses of Local IP , Gateway and Subnet Mask will be acquired automatically after the wireless network is connected successfully.
	NOTE:
	 Only if WIFI is disabled, can Auto Get IP option be available.
	2. To use Auto Get IP , DHCP function needs to be enabled on the router.
View MAC Address	View the MAC address of the WIFI module.

6.6 Lead Setup

Item	Description				
Rhythm	Choose from: I, II, III, aVR, aVL, aVF, V1, V2, V3, V4, V5, or V6, the default				
Lead1/2/3	NOTE: Rhythm Lead 1/2/3 must be different from each other.				
Lead Sequence	Choose from: Standard or Cabrera				
	Lead Sequence	Lead group 1	Lead group 2	Lead group 3	Lead group 4
	Standard	I, II, III	aVR, aVL, aVF	V1, V2, V3	V4, V5, V6
	Cabrera	aVL, I, -aVR	II, aVF, III	V1, V2, V3	V4, V5, V6
Lead off hint	When it is set to On and lead off waves are detected in the presampled waves, a lead				
	off hint message will be displayed.				

6.7 File Setup

Item	De	scription		
Auto Save	Ch	pose from: Off, <u>To ECG</u> or Ext. Memory		
	Select Off , ECG data will not be saved.			
Select To ECG , ECG data in the AUTO or RHYT mode will be saved in th automatically.		lect To ECG , ECG data in the AUTO or RHYT mode will be saved in the ECG tomatically.		
	Select Ext. Memory, ECG data in the AUTO or RHYT mode will be automatical			
	saved to the directory of ECGDATA\ECG-X\Store\Examination Date of the external			
	me	memory after an ECG report is printed out.		
	NC	DTE:		
	1.	Please insert the external memory recommended by the manufacturer. Please set the format to FAT or FAT32 when formatting the external memory.		
	2.	X in the directory of <i>ECGDATA\ECG-X\Store\Examination Date</i> can be set in		
		the Device No. textbox in the Transmission Setup window.		

File Format	Choose from: <u>DAT</u> , PDF, SCP, FDA-XML and DICOM		
	To select SCP/FDA-XML/DICOM, you should first activate the		
	SCP/FDA-XML/DICOM function on the Advanced Setup screen. For details, please contact the manufacturer or the local distributor.		
Del. After	Choose from: On or Off		
Trans. Or Export	Select On , the files will be automatically deleted from the File Manager screen after they are transmitted to the PC or exported to the external memory.		
Replace	Choose from: On Off		
When	Select On , if the number of stored files reaches 800, the files will replace the earliest		
Memory Full	one automatically.		

6.8 Date&Time Setup

NOTE: Please set DATE&TIME correctly when it's the first time you use the electrocardiograph.

Item	Description
Date Mode	Choose from: <u>DD-MM-YYYY</u> , MM-DD-YYYY or YYYY-MM-DD
Time Mode	Choose from: <u>24 Hours</u> or 12 Hours
Date&Time	Enter the current date and time displayed on the main screen and in the ECG reports.
Power off time	Set to 0-120 This function is only available when the electrocardiograph is powered by using the mains supply.
LCD off time	Set to 0-120

6.9 System Maintenance

- Import/export the system settings, backup the settings, or load the backup settings
- Load factory settings
- Set the password to access system settings

6.10 Other Setup

Item	Description	
Institution	Input the institution name manually within 40 ASCII characters.	
	NOTE: The total number of supported characters may be fewer if special Latin characters are entered.	
Grid	When enabled, the waveforms on the main screen will be displayed with a background grid.	
Language	Select the language displayed on the main screen and in the ECG reports.	
Key Volume	When enabled, the electrocardiograph gives a short sound when you press keys.	
Hint Volume	When enabled, the electrocardiograph gives a sound when a hint such as <i>Lead Off</i> , <i>Overload</i> , <i>Battery Weak</i> etc. is displayed.	
QRS Volume	When enabled, the electrocardiograph gives a sound when an R wave is detected.	
Notify Volume	When enabled, the electrocardiograph gives a sound after ECG report is printed.	

6.11 Advanced Setup

View the device information, perform system test, etc.

Activate purchased advanced functions.

Item	Description
Demo Setup	Choose from: Normal , abnormal or <u>Off</u>
	When it is set to Normal , the main screen will display demo of normal ECG signal.

Chapter 7 Error Messages

Error messages provided by SE-301 and the corresponding causes are listed in Table 10-1.

Table 7–1 Error Messages and Causes

Error Message	Causes
Lead off	Electrodes fall off the patient or the patient cable falls off the unit.
Paper?	Recorder paper runs out or is not loaded.
PaperErr	The system doesn't detect any black signs while the paper style is set as "Folded" on the System Setup Screen.
BAT WEAK	The built-in battery is weak.
Demo	The system is in the demonstration mode.
Sampling/Analyzing/R ecording	ECG signals are being sampled / analyzed / recorded.
Transmitting	ECG data is being transmitted from the electrocardiograph to the PC through the net or serial cable in the AUTO or RHYT mode.
Transmitting fails!	Transmitting ECG data fails.
MemoryFull	There is no space for saving more records.
USB Printer / USB Scanner	An external USB printer or a bar code reader is connected to the USB interface.

Chapter 8 Troubleshooting

1) Operating Problems

- Q1: I want to save the ECG data without any printing, could it be possible?
- A1: Yes, in the Record Info setup, set **Print Out** to **Off**. In the same way, if the transmission settings have been configured, the ECG data could be transmitted to the PC without printing.

2) Printing Problems

- Q1: There was double impression in printing when I printed ECG reports by using an ink-jet printer. What's wrong with it?
- A1: It may be the result of the coexisting black and color ink cartridges. Taking out the color ink cartridge may solve the problem.
- Q2: I was encountered with paper-jam, what was I supposed to do?
- A2: If it happened for the first time, it might be the result of an inappropriate placement of the paper. In this case, please open the paper casing, pull the paper out of the paper tray, tear the pages with rumples, and then put the paper in the paper tray again, adjust the position of the paper carefully and close the casing.
- Q3: The hint PaperErr is displayed on the screen, what should I do?
- A3: Check if the paper maker setting is right or might be the result of unsuccessful detection of the black markers, first open the paper casing so as to clear the error information, and then check whether the black marker is on the top of the paper. Reload the paper in the paper tray. If it doesn't work, change the paper.
 - If the problem still exists, please contact the manufacturer or the local distributor for further disposal.
- Q4: The hint Paper? is displayed on the screen, what should I do?
- A4: Check whether the paper runs out, or the black marker is just facing the black maker detection window on the thermal printing head.
 - Reload the paper in the paper tray, close the paper casing firmly. If the problem still exists, please contact the manufacturer or the local distributor for further disposal.
- Q5: I pressed the **PRINT/STOP** key, but the ECG didn't start printing, what's wrong with it?
- A5: Please check whether there is any error information displayed on the screen.

If the hint *Paper?* or *PaperErr* is shown on the screen, please deal with it according to the above-mentioned measures.

If the hint *Transfer* is shown on the screen, which means that the ECG is transmitting the data to the PC, please wait a few seconds. You can start the printing after the data has been transmitted.

If the problem still exists, please contact the manufacturer or the local distributor for further disposal.

3) Transmitting Problems

- Q1: The ECG doesn't respond to any keys after a long time of transmitting. It transmits nothing for there is no new data appearing on the interface of the PC software. What should I do?
- A1: Some error may occur during the transmission course, for example, the connection between the ECG and the net cable may loosen. In this case, please restart the ECG. If it doesn't work, please restart the PC.

If the problem still exists, please contact the manufacturer or the local distributor for further disposal.

4) Main Unit Problems

- Q1: I was doing the examination when the machine suddenly gave out a sound and displayed the hint *Lead Off*. What should I do?
- A1: The leads are not connected well. Please check whether the electrodes are connected to the patient skin well, and then make sure that the patient cable socket is connected to the patient cable firmly.
 - If none of the above-mentioned measures take effect, please contact the manufacturer or the local distributor for further disposal.
- Q2: The touch screen is not sensitive after restoring to factory defaults. What should I do?
- A2: Hold down the PRINT/STOP key while switching on the electrocardiograph, the system will enter the touch screen calibration screen. Operate as indicated on the screen.

Chapter 9 Cleaning, Care and Maintenance

Use only the manufacturer-approved substances and methods listed in this chapter to clean or disinfect your equipment. Warranty does not cover damage caused by using unapproved substances or methods.

The manufacturer has validated the cleaning and disinfection instructions provided in this User Manual. It is the responsibility of the healthcare professional to ensure that the instructions are followed so as to ensure adequate cleaning and disinfection.

9.1 General Points

Keep your electrocardiograph and accessories free of dust and dirt. To prevent the device from damage, please follow the instructions:

- Use only the recommended cleaning agents and disinfectants listed in this manual. Others
 may cause damage (not covered by warranty), reduce product lifetime or cause safety
 hazards.
- Always dilute according to the manufacturer's instructions.
- Unless otherwise specified, do not immerse any part of the equipment or any accessories in liquid.
- Do not pour liquid onto the equipment.
- Do not allow liquid to enter the case.
- Never use abrasive material (such as steel wool or silver polish).
- Inspect the electrocardiograph and reusable accessories after they are cleaned and disinfected.

CAUTION

- 1. If you spill liquid on the equipment or accessories, or they are accidentally immersed in liquid, contact your service personnel or the manufacturer's service engineer.
- 2. The equipment is chemically resistant to most cleaning agents, disinfectants and non-caustic detergents used in hospital, but cleaning agents or disinfectants that are not listed in this manual are not recommended. For example, didecyl dimethyl ammonium bromide, which contains quaternary ammonium salt, may corrode the equipment and accessories.

9.2 Cleaning

If the equipment or accessory has been in contact with the patient, then cleaning and disinfection is required after each use.

The validated cleaning agents for cleaning the electrocardiograph and patient cable are:

- Mild near neutral detergent
- Ethanol (75%)
- Isopropanol (70%)

The validated cleaning agent for cleaning the reusable electrodes is:

Mild near neutral detergent

Cleaning agents should be applied or removed using a clean, soft, non-abrasive cloth or paper towel.

9.2.1 Cleaning the Main Unit

WARNING

Turn off the power before cleaning. The mains supply must be switched off if it is used.

- 1. Switch off the main unit and disconnect it from the power cord.
- 2. Wipe the exterior surface of the equipment using a soft cloth dampened with the cleaning solution until no visible contaminants remain.
- 3. Wipe off the cleaning solution with a fresh cloth or towel dampened with tap water after cleaning until no visible cleaning agent remains.
- 4. Dry the main unit in a ventilated and cool place.

9.2.2 Cleaning the Patient Cable

- 1. Wipe the patient cable with a soft cloth dampened with the cleaning solution until no visible contaminants remain.
- 2. Wipe off the cleaning solution with a fresh cloth or towel dampened with tap water after cleaning until no visible cleaning agent remains.
- 3. Wipe off with a dry cloth to remove residual moisture.
- 4. Leave the patient cable to air dry.

CAUTION

Any remainder of cleaning solution should be removed from the main unit and the patient cable after cleaning.

9.2.3 Cleaning the Reusable Electrodes

- 1. Wipe off with a soft cloth to remove residual gel.
- 2. Wipe the suction bulbs of chest electrodes and the clamps of limb electrodes with a soft cloth dampened with the cleaning solution until no visible contaminants remain.
- 3. Wipe off the cleaning solution with a fresh cloth or towel dampened with tap water after cleaning until no visible cleaning agent remains.
- 4. Wipe off with a dry cloth to remove residual moisture.
- 5. Leave the suction bulbs and clamps to air dry.

9.3 Disinfection

To avoid permanent damage to the equipment, it is recommended that disinfection is performed only when it is considered as necessary according to your hospital's regulations.

Clean the equipment and reusable accessories before they are disinfected. The validated disinfectants for disinfecting the electrocardiograph and patient cable are:

- Ethanol (75%)
- Isopropanol (70%)

The validated disinfectant for disinfecting the reusable electrodes is:

• Isopropanol (70%)

If Ethanol or Isopropanol is used for both cleaning and disinfecting, then a new cloth is required to be used for the disinfection step.

CAUTION

- 1. Do not use high-temperature, high-pressure vapour or ionizing radiation as disinfection methods.
- 2. Do not use chloric disinfectant such as chloride, sodium hypochlorite etc.
- Clean and disinfect reusable electrodes after each use.

9.3.1 Disinfecting the Main Unit

WARNING

Turn off the power before disinfection. The mains supply must be switched off if it is used.

- 1. Switch off the main unit and disconnect it from the power cord.
- 2. Wipe the exterior surface of the equipment using a soft cloth dampened with the disinfectant solution.
- 3. Wipe off the disinfectant solution with a dry cloth after disinfection if necessary.
- 4. Dry the main unit for at least 30 minutes in a ventilated and cool place.

9.3.2 Disinfecting the Patient Cable

- 1. Wipe the patient cable with a soft cloth dampened with the disinfectant solution.
- 2. Wipe off the disinfectant solution with a dry cloth after disinfection.
- 3. Leave the patient cable to air dry for at least 30 minutes.

9.3.3 Disinfecting the Reusable Electrodes

- 1. Wipe the suction bulbs of chest electrodes and the clamps of limb electrodes with a soft cloth dampened with the disinfectant solution.
- 2. Wipe off the disinfectant solution with a dry cloth after disinfection.
- 3. Leave the suction bulbs and clamps to air dry for at least 30 minutes.

9.4 Care and Maintenance

9.4.1 Recharge and Replacement of Battery

1) Capacity Identification

The battery capacity can be identified according to the battery symbol in the top right corner of the LCD screen.



Capacity is from full to empty.

2) Recharge

SE-301 is equipped with the recharge control circuit together with the built-in rechargeable lithium battery. When the unit is connected to the mains supply, the battery will be recharged automatically. During the recharging course, the battery symbol flashes in the top right corner of the LCD screen. When the battery capacity is full, the symbol stops flashing.

Because of the capacity consumption during the storage and transport course, the battery capacity is not full when it is used for the first time. Battery recharge should be considered before the first use.

NOTE: If the battery has not been used for more than two months, it should be recharged before use.

3) Replacement

When the useful life of the battery is over, or foul smell and leakage are found, please contact the manufacturer or the local distributor for replacement.

WARNING

- Only qualified service engineer authorized by the manufacturer can open the battery compartment and replace the battery, and the battery of the same model and specification provided by the manufacturer must be used.
- 2. Danger of explosion -- Do not reverse the anode and the cathode when installing the battery.
- 3. Remove the battery from the electrocardiograph when the electrocardiograph is not used for a long time.
- 4. If the battery is stored alone and not used for a long time, we recommend that the battery should be charged at least once every 6 months to prevent overdischarge.
- 5. When the battery's useful life is over, contact the manufacturer or the local distributor for disposal or dispose of the battery according to local regulations.

9.4.2 Recorder Paper

NOTE: Recorder paper provided by the manufacturer should be used. Other paper may shorten the life of the thermal print head. And the deteriorated print head may lead to illegible ECG reports and block the advance of paper.

Storage Requirements:

• Recorder paper should be stored in a dry, dark and cool area, avoiding excessive

temperature, humidity and sunshine.

- Do not put the recorder paper under fluorescence for a long time.
- ♦ Make sure that there is no polyvinyl chloride or other chemicals in the storage environment, which will lead to color change of the paper.
- Do not overlap the recorded paper for a long time, or else the ECG reports may trans-print each other.

9.4.3 Maintenance of the Main Unit, the Patient Cable and

Electrodes

The following safety checks should be performed at least every 12 months by a qualified person who has adequate training, knowledge, and practical experience to perform these tests.

- a) Inspect the equipment and accessories for mechanical and functional damage.
- b) Inspect the safety related labels for legibility.
- c) Inspect the fuse to verify compliance with rated current and breaking characteristics.
- d) Verify the device functions properly as described in the instructions for use.
- e) Test the protection earth resistance according to IEC/EN 60601-1: Limit: 0.10hm.
- f) Test the earth leakage current according to IEC/EN 60601-1: Limit: NC 500 μA , SFC $1000 \mu A$.
- g) Test the enclosure leakage current according to IEC/EN 60601-1: Limit: NC 100μA, SFC 500μA.
- h) Test the patient leakage current according to IEC/EN 60601-1: Limit: NC a.c. 10μA, d.c. 10μA; SFC a.c. 50μA, d.c. 50μA.
- i) Test the patient auxiliary current according to IEC/EN 60601-1: Limit: NC a.c. 10μA, d.c. 10μA; SFC a.c. 50μA, d.c. 50μA.
- j) Test the patient leakage current under single fault condition with mains voltage on the applied part according to IEC/EN 60601-1: Limit: 50μA (CF).
- k) Test the essential performance according to IEC/EN 60601-2-25, or methods recommended by the hospital or local distributor.

The leakage current should never exceed the limit. The data should be recorded in an equipment log. If the device is not functioning properly or fails any of the above tests, the device has to be repaired.

WARNING

Failure on the part of the responsible individual hospital or institution employing this equipment to implement a satisfactory maintenance schedule may cause undue equipment failures and possible health hazards.

1) Main Unit

- Avoid excessive temperature, sunshine, humidity or dirt.
- Put the dustproof coat on the main unit after use and prevent shaking it violently when moving it to another place.
- Prevent any liquid from seeping into the equipment, otherwise the safety and performance of the electrocardiograph can not be guaranteed.

2) Patient Cable

- Integrity of the patient cable, including the main cable and lead wires, should be checked regularly. Make sure that it is conductible.
- ♦ Do not drag or twist the patient cable with excessive stress while using it. Hold the connector plug instead of the cable when connecting or disconnecting the patient cable.
- Align the patient cable to avoid twisting, knotting or crooking in a closed angle while using it.
- Store the lead wires in a big wheel to prevent any people from stumbling.
- Once damage or aging of the patient cable is found, replace it with a new one immediately.

3) Electrodes

- Electrodes must be cleansed after use and make sure there is no remainder gel on them.
- Keep suction bulbs of chest electrodes away from sunshine and excessive temperature.
- After long-term use, the surfaces of electrodes will be oxidized because of erosion and other causes. By this time, electrodes should be replaced to achieve high-quality ECG records.

CAUTION

The device and accessories are to be disposed of according to local regulations after their useful lives. Alternatively, they can be returned to the dealer or the manufacturer for recycling or proper disposal.

Chapter 10 Accessories

WARNING

Only the patient cable and other accessories supplied by the manufacturer can be used. Or else, the performance and electric shock protection cannot be guaranteed.

Table 10-1 Accessories List

Accessory	Part Number	
Power cord (IEC)	01.13.036638	
Power cord(AHA)	01.13.037122	
	01.57.107402	
Detient Cable (ICC)	01.57.107581	
Patient Cable (IEC)	01.57.107583	
	01.57.471613	
	01.57.110375	
Detient Cable (ALIA)	01.57.107582	
Patient Cable (AHA)	01.57.107584	
	01.57.471614	
Adult Chest electrodes	01.57.040163	
Adult Limb electrodes	01.57.040162	
Pediatric Chest Electrodes	01.57.040168	
Pediatric Limb Electrodes	01.57.040169	
Disposable Resting Snap Electrodes	01.57.471858	
Disposable Resting Snap Electrodes	01.57.471859	
Disposable Resting Tab Electrodes	01.57.471863	
Paper roller	01.51.19993	
Thermal Decembing Device	01.57.78076	
Thermal Recording Paper	01.57.78079	

Rechargeable Li-ion Battery	21.21.064149	
Snap/Banana Socket Adapters	01.57.471864	
Clip/Snap/Banana Socket Adaptors	01.57.040172	
Net Cable	01.13.20096	
Grounding Wire	01.13.114214	
U Disk	01.18.052275	
Micro SD card	01.17.052452	

SE-301 and accessories are available by contacting the manufacturer or your local distributor.

NOTE:

- 1. The adult chest electrodes, adult limb electrodes, pediatric chest electrodes and pediatric limb electrodes are not available in the U.S.
- 2. The part name may vary depending on context, but the part number is constant.

Chapter 11 Warranty and Service

11.1 Warranty

The manufacturer warrants that the manufacturer's products meet the labeled specifications of the products and will be free from defects in materials and workmanship that occur within warranty period.

The warranty is void in cases of:

Damage caused by mishandling during shipping.

Subsequent damage caused by improper use or maintenance.

Damage caused by alteration or repair by anyone not authorized by the manufacturer.

Damage caused by accidents.

Replacement or removal of serial number label and manufacture label.

If a product covered by this warranty is determined to be defective because of defective materials, components, or workmanship, and the warranty claim is made within the warranty period, the manufacturer will, at its discretion, repair or replace the defective part(s) free of charge. The manufacturer will not provide a substitute product for use when the defective product is being repaired.

11.2 Contact information

If you have any question about maintenance, technical specifications or malfunctions of devices, contact your local distributor.

Appendix 1 Technical Specifications

A1.1 Safety Specifications

		IEC 60601-1:2015+A1:2012+A2:2020	
		EN 60601-1:2006/A1:2013	
Comply with:		IEC 60601-1-2:2014+A1:2020	
		EN 60601-1-2:2015	
		IEC/EN 60601-2-25	
Anti-electric-shock type:		Class I with internal power supply	
Anti-electric-shock degree:		Type CF	
Degree of protection against harmful ingress of water:		Ordinary equipment (Sealed equipment without liquid proof)	
Disinfection/sterilization method:		Refer to the user manual for details	
Degree of safety of application in the presence of flammable gas:		Equipment not suitable for use in the presence of flammable gas	
Working mode:		Continuous operation	
EMC:		CISPR 11 Group 1, Class A	
Deticint I calcana Cumant	NC	<10μA (AC) / <10μA (DC)	
Patient Leakage Current: SFC		<50μA (AC) / <50μA (DC)	
Patient Auxiliary Current: SFC		<10μA (AC) / <10μA (DC)	
		<50μA (AC) / <50μA (DC)	

A1.2 Environment Specifications

	Transport & Storage	Working
Temperature:	-20°C (-4°F) ~ +55°C (+131°F)	+5°C (+41°F) ~ +40°C (+104°F)
D 1 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	15%RH ~ 95%RH	15%RH ~ 95%RH
Relative Humidity:	Non-Condensing	Non-Condensing
Atmospheric Pressure:	70kPa ~ 106kPa	70kPa ~ 106kPa

A1.3 Physical Specifications

Dimensions	224 mm×143 mm×54 mm, ±2 mm
Weight	< 1kg (Excluding recorder paper and battery)
Display	5", 800×480 LCD Screen

A1.4 Power Supply Specifications

	Operating voltage =100V-240V~	
Mains Supply:	Operating frequency = 50Hz / 60Hz	
	Power adapter output voltage: 19V, 2A	
	Rated voltage = 14.8V	
Built-in Lithium Battery Pack:	Rated capacity = 2500mAh	
	When the battery is fully charged, the 3-channel electrocardiograph can work normally about 8.5 hours. It can continuously record about 5 hours in Manual mode, and record at least 500 reports at most in the AUTO mode.	
	Necessary Charge time: ≤ 3.5 hours	
	Cycle life ≥ 300 times	

A1.5 Performance Specifications

Recording			
Recorder:	Thermal dot-matrix recorder		
Drinting Donaity	8 dots per mm / 200 dots per inch (amplitude axes)		
Printing Density 40 dots per mm / 1000 dots per inch (time axes, @ 25 mm			
December December	Folded thermal paper, 80mm×70mm×200pages		
Recorder Paper:	Rolled thermal paper, 80mm×20m		
Effective Width:	72mm		
D 0 1	5mm/s, 6.25mm/s, 10mm/s, 12.5mm/s, 25mm/s, 50mm/s		
Paper Speed:	(±3%)		

Accuracy of data:	±5% (x-axis), ±5%(y-axis)		
HR Recognition			
Technique:	Peak-Peak Detection		
HR Range:	30 bpm ~ 300 bpm		
Accuracy:	±1 bpm		
ECG Unit			
Leads:	Standard 12 leads		
Acquisition Mode:	simultaneously 12 leads		
A/D:	24bits		
Resolution:	0.1575 μV/LSB		
Time Constant:	≥3.2s		
Frequency Response:	0.01Hz ~ 300Hz (-3dB)		
Sensitivity:	2.5mm/mV, 5mm/mV, 10mm/mV, 20mm/mV, 10/5mm/mV, 20/10mm/mV, AGC		
Input Impedance:	≥50MΩ(10Hz)		
Input Circuit Current:	≤0.01µA		
*D-61	Defibrillation voltage: ±5 kV		
*Defibrillation protection	Recovery time after defibrillation: < 5s		
*Amplitude measurements	Fulfil the subclause 201.12.1.101 of IEC60601-2-25:2011		
Input Voltage Range	≤±5 mVpp		
Calibration Voltage:	1mV±3%		
DC Offset Voltage:	±600mV		
Minimum Amplitude:	20 μVp-p		
Noise:	≤12.5µVp-p		
Multi-channel Crosstalk	≤0.5mm		
*Eiltor	AC Filter: On / Off		
*Filter	DFT Filter: 0.01Hz, 0.05Hz, 0.32Hz, or 0.67Hz		

	EMG Filter: 25Hz / 35Hz / 45Hz / OFF	
	ENIG FIILEL. 25HZ / 35HZ / 45HZ / OFF	
	LOWPASS Filter:300Hz / 270Hz / 150Hz / 100Hz / 75Hz	
CMRR	≥140dB (AC: ON)	
J	≥110dB (AC: Off)	
Sampling Frequency	16,000/sec/channel	
Pacemaker Detection		
Amplitude	±2mV ~ ±700mV	
Width	0.1ms ~ 2.0ms	
Sampling Frequency	16,000/sec/channel	
WIFI (Configurable)		
Transmitting Frequency	2.4GHz	
Frequency Band	2.400 ~ 2.500GHz (2.4 GHz ISM band)	
Mandadation Tons	OFDM with BPSK, QPSK, 16-QAM, and 64-QAM	
Modulation Type	802.11b with CCK and DSSS	
	17 dBm for 802.11b DSSS	
Transmitting Power	17 dBm for 802.11b CCK	
	15 dBm for 802.11g/n OFDM	
4G (Configurable)		
	FDD LTE: Band 1, Band 2, Band 3, Band 4, Band 5, Band 7,	
	Band 8, Band 20, all bands with diversity	
Bands	WCDMA/HSDPA/HSUPA/HSPA+:Band 1, Band 2, Band 5,	
	Band 8, all bands with diversity	
	GSM/GPRS/EDGE: 850 MHz/900MHz/1800 MHz/1900 MHz	
Ĺ	I	

GPRS: UL 85.6 kbit/s; DL 85.6 kbit/s

EDGE: UL 236.8 kbit/s; DL 236.8 kbit/s

WCDMA CS: UL 64 kbit/s; DL 64 kbit/s

WCDMA PS: UL 384 kbit/s; DL 384 kbit/s

HSPA+: UL 5.76 Mbit/s; DL 21.6 Mbit/s

DC-HSPA+: UL 5.76 Mbit/s; DL 42 Mbit/s

LTE FDD: UL 50 Mbit/s; DL 150 Mbit/s@20M BW cat4

NOTE:

- 1. *Indicates the essential performance of this device.
- 2. Operation of the equipment below the minimum amplitude may cause inaccurate results.

Appendix 2 EMC Information

Electromagnetic emissions

Guidance and manufacture's declaration – electromagnetic emission

The Electrocardiograph is intended for use in the electromagnetic environment specified below. The user of the Electrocardiograph should assure that it is used in such an environment.

Emission test	Compliance	Electromagnetic environment – guidance
RF emissions CISPR 11	Group 1	The Electrocardiograph uses RF energy only for its internal function. Therefore, its RF emissions are very low and are not likely to cause any interference in nearby electronic equipment.
RF emission CISPR 11	Class A	The Electrocardiograph is suitable for use in all establishments other than domestic and those
Harmonic emissions IEC/EN 61000-3-2	Class A	directly connected to the public low-voltage power supply network that supplies building
Voltage fluctuations/ flicker emissions IEC/EN 61000-3-3	Complies	used for domestic purposes.

Electromagnetic immunity

Guidance and manufacture's declaration - electromagnetic immunity

The Electrocardiograph is intended for use in the electromagnetic environment specified below. The user of Electrocardiograph should assure that it is used in such an environment.

Immunity test	IEC/EN 60601 test level	Compliance level	Electromagnetic environment - guidance
Electrostatic discharge (ESD)	±8 kV contact	±8 kV contact	Floors should be wood,
IEC/EN	±15 kV air	±15 kV air	concrete or ceramic tile. If floor are covered with
61000-4-2			synthetic material, the relative humidity should be
			at least 30%.

Electrical fast	±2 kV for power supply	±2 kV for power supply	Mains power quality should
transient/burst	lines	lines	be that of a typical
IEC/EN			commercial or hospital
61000-4-4			environment.
			environinent.
Surge	±1 kV line to line	±1 kV line to line	Mains power quality should
IEC/EN	±2 kV line to ground	±2 kV line to ground	be that of a typical
61000-4-5			commercial or hospital
N/ II			environment.
Voltage dips,	0 % U _{T;} 0.5 cycle	0 % U _{T;} 0.5 cycle	Mains power quality should
short interruptions and	At 0°, 45°, 90°, 135°,	At 0°, 45°, 90°, 135°,	be that of a typical commercial or hospital
voltage variations	180°, 225°, 270° and	180°, 225°, 270° and	environment. If the user of
on power supply	315°	315°	the Electrocardiograph
input lines			requires continued
IEC/EN	0.0/ 11 4	0.0/ 11 4	operation during power
61000-4-11	0 % U _T ; 1 cycle	0 % U _T ; 1 cycle	mains interruptions, it is
	and 70 % U _T ; 25/30	and 70 % U _T ; 25/30	recommended that the
	cycles)	cycles)	Electrocardiograph be
	Single phase: at 0°	Single phase: at 0°	powered from an
	enigio priado: at o	enigio priado: at o	uninterruptible power
	0 % U _T ; 250/300 cycle	0 % U _T ; 250/300 cycle	supply or a battery.
IMMUNITY to	65A/m,	65A/m,	
proximity	Modulation: Pulse	Modulation: Pulse	
magnetic field	modulation, 2.1KHz	modulation, 2.1KHz	
	Test	Test	
	frequency:134.2KHz;	frequency:134.2KHz;	
	7.5A/m, Modulation: Pulse	7.5A/m, Modulation: Pulse	1
	modulation, 50KHz	modulation, 50KHz	
	Test	Test	
	frequency:13.56MHz;	frequency:13.56MHz;	
	,	,	
Power frequency	30 A/m	30 A/m	Power frequency magnetic
(50Hz/60Hz)			fields should be at levels
magnetic field			characteristic of a typical
IEC/EN			location in a typical
61000-4-8			commercial or hospital
	o o maine valtage pries to	application of the test le	environment.
NOTE U _T is the a.c. mains voltage prior to application of the test level.			

Electromagnetic immunity

Guidance and manufacture's declaration - electromagnetic immunity

The Electrocardiograph is intended for use in the electromagnetic environment specified below. The customer or the user of Electrocardiograph should assure that it is used in such an environment.

Immunity to a	IEC/EN 60601 test	Compliance	Electromagnetic environment -
Immunity test	level	level	guidance
			Portable and mobile RF communications equipment should be used no closer to any part of the electrocardiograph, including cables, than the recommended separation distance calculated from the equation applicable to the frequency of the transmitter. Recommended separation distance
Conducted RF IEC/EN	3 V _{rms}	$3V_{rms}$	$d = 1.2\sqrt{P}$
61000-4-6	150 kHz to 80 MHz	150 kHz to	
	6Vrms ^{c)} in ISM bands	80 MHz	
	between	6Vrms ^{c)} in	
	0.15 MHz and 80 MHz	ISM bands	
		between	
		0.15 MHz	
		and 80 MHz	_
Radiated RF	3 V/m	3 V/m	$d = 1.2\sqrt{P}$ 80 MHz to 800 MHz
IEC/EN 61000-4-3	80 MHz to 2.7 GHz	80 MHz to	$d = 2.3\sqrt{P}$ 800 MHz to 2.7 GHz
01000-4-3		2.7 GHz	$d = 6\sqrt{P} / E$ at RF wireless
			communications equipment bands
			(Portable RF communications equipment
			(including peripherals such as antenna
			cables and external antennas) should be used no closer than 30 cm (12 inches) to
			any part of the electrocardiograph,
			including cables specified by the
			manufacturer). Where <i>P</i> is the maximum output power rating of the transmitter in watts (W) according to the transmitter manufacturer and <i>d</i> is the recommended separation distance in metres (m). Field strengths from fixed RF transmitters, as determined by an electromagnetic site survey, ^a should be less than the compliance level in each frequency range. ^b

Interference may occur in the vicinity of equipment marked with the following symbol:



NOTE 1 At 80 MHz and 800 MHz, the higher frequency range applies.

NOTE 2 These guidelines may not apply in all situations. Electromagnetic propagation is affected by absorption and reflection from structures, objects and people.

- Field strengths from fixed transmitters, such as base stations for radio (cellular/cordless) telephones and land mobile radios, amateur radio, AM and FM radio broadcast and TV broadcast cannot be predicted theoretically with accuracy. To assess the electromagnetic environment due to fixed RF transmitters, an electromagnetic site survey should be considered. If the measured field strength in the location in which the Electrocardiograph is used exceeds the applicable RF compliance level above, the Electrocardiograph should be observed to verify normal operation. If abnormal performance is observed, additional measures may be necessary, such as reorienting or relocating the Electrocardiograph.
- b Over the frequency range 150 kHz to 80 MHz, field strengths should be less than 3 V/m.
- The ISM (industrial, scientific and medical) bands between 0.15 MHz and 80 MHz are 6.765 MHz to 6.795 MHz; 13.553 MHz to 13.567 MHz; 26.957 MHz to 27.283 MHz; and 40.66 MHz to 40.70 MHz. The amateur radio bands between 0.15 MHz and 80 MHz are 1.8 MHz to 2.0 MHz, 3.5 MHz to 4.0 MHz, 5.3 MHz to 5.4 MHz, 7 MHz to 7.3 MHz, 10.1 MHz to 10.15 MHz, 14 MHz to 14.2 MHz, 18.07 MHz to 18.17 MHz, 21.0 MHz to 21.4 MHz, 24.89 MHz to 24.99 MHz, 28.0 MHz to 29.7 MHz and 50.0 MHz to 54.0 MHz.

Test specifications for ENCLOSURE PORT IMMUNITY to RF wireless communications equipment

Test	D				D'. (IMMUNITY
Frequency	Brand ^{a)}	Service ^{a)}	Modulation _{b)}	Maximum	Distance	TEST
(MHz)	(MHz)		3,	Power(W)	(m)	LEVEL (V/m)
			Pulse			, ,
385	380-390	TETRA 400	modulation ^{b)}	1.8	0.3	27
			18Hz			
450	430-470	GMRS 460, FRS 460	FM ^{C)}			
			±5 kHz	2	0.3	28
			deviation			

			1kHz sine			
710		LTE Brand 13,	Pulse			
745	704-787		modulation ^{b)}	0.2	0.3	9
780			217 Hz			
810		GSM				
870		800/900,TETRA	Pulse	2	0.3	28
	800-960	800, iDEN 820,	modulation ^{b)}			
930		CDMA 850, LTE	18 Hz			
		Band 5				
1720		GSM 1800;		2	0.3	28
1845	1700-1990	CDMA 1900;	Pulse modulation ^{b)} 217 Hz			
		GSM 1900;				
1970		DECT; LTE				
1970		Band 1, 3, 4,25;				
		UMTS				
	2400-2570	Bluetooth,				
		WLAN,802.11	Pulse	2		28
2450		b/g/n, RFID	modulation ^{b)}		0.3	
		2450, LTE	217 Hz			
		Brand 7				
5240		WI AN 902 44	Pulse			
5500	5100-5800	100-5800 WLAN 802.11	modulation ^{b)}	0.2	0.3	9
5785	- a/n		217 Hz			

Note: If necessary to achieve the IMMUNITY TEST LEVEL, the distance between the transmitting antenna and the ME EQUIPMENT or ME SYSTEM maybe reduce to 1m. The 1 m test distance is permitted by IEC 61000-4-3.

- a) For some services, only the uplink frequencies are included.
- b) The carrier shall be modulated using a 50% duty cycle square wave signal.
- c) As an alternative FM modulation, 50% pulse modulation at 18 Hz may be used because while it does not represent actual modulation, it would be worst case.

Recommended separation distances between portable and mobile RF communications equipment and the EQUIPMENT or SYSTEM

Recommended separation distances between portable and mobile RF communications equipment and electrocardiograph

The electrocardiograph is intended for use in an electromagnetic environment in which radiated RF disturbances are controlled. The customer or the user of the electrocardiograph can help prevent electromagnetic interference by maintaining a minimum distance between portable and mobile RF communications equipment (transmitters) and the electrocardiograph as recommended below, according to the maximum output power of the communications equipment.

Rated maximum	Separation distance according to frequency of transmitter			
output power of	(m)			
transmitter	150 kHz to 80 MHz	80 MHz to 800 MHz	800 MHz to 2.7 GHz	
(W)	$d = 1.2\sqrt{P}$	$d = 1.2\sqrt{P}$	$d = 2.3\sqrt{P}$	
0.01	0.12	0.12	0.23	
0.1	0.38	0.38	0.73	
1	1.2	1.2	2.3	
10	3.8	3.8	7.3	
100	12	12	23	

For transmitters rated at a maximum output power not listed above, the recommended separation distance d in meters (m) can be estimated using the equation applicable to the frequency of the transmitter, where P is the maximum output power rating of the transmitter in watts (W) according to the transmitter manufacturer.

NOTE 1 At 80 MHz and 800 MHz, the separation distance for the higher frequency range applies.

NOTE 2 These guidelines may not apply in all situations. Electromagnetic propagation is affected by absorption and reflection from structures, objects and people.

Appendix 3 Abbreviation

Abbr	English
ВР	Blood Pressure
ECG	Electrocardiogram/Electrocardiograph
HR	Heart Rate
aVF	Left Foot Augmented Lead
aVL	Left Arm Augmented Lead
aVR	Right Arm Augmented Lead
LA	Left Arm
LL	Left Leg
RA	Right Arm
RL	Right Leg
ID	Identification
AC	Alternating Current
USB	Universal Serial Bus
AGC	Auto Gain Control
NC	Normal Condition
SFC	Single Fault Condition

P/N: 01.54.456811

MPN: 01.54.456811019





EC REPRESENTATIVE

Shanghai International Holding Corp. GmbH (Europe) Eiffestrasse 80, 20537 Hamburg Germany

TEL: +49-40-2513175 FAX: +49-40-255726

E-mail: shholding@hotmail.com

EDAN INSTRUMENTS, INC.

#15 Jinhui Road, Jinsha Community, Kengzi Sub-District

Pingshan District, 518122 Shenzhen, P.R.China

Email: info@edan.com

TEL: +86-755-2689 8326 FAX: +86-755-2689 8330