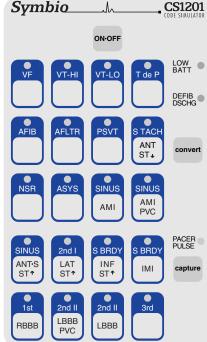
Controls and Indicators

The CS1201 Code Simulator is an easy to use training tool for practicing defibrillation, external pacing, and arrhythmia recognition. Connect directly to defib/pacer for safe simulation of cardioversion and electrical capture. The CS1201 generates fibrillations, tachycardias, and bradycardias, as well as ST segment and T wave abnormalities.



ON-OFF Press to power-on and to power-off. LOW BATT Red indicator illuminates when battery should be replaced. DEFIB DISCHG Green indicator illuminates for two seconds when discharge is delivered

seconds when discharge is delivered from defib set to 50J or more.

Simulate cardioversion by activating convert feature. CS1201 responds to defib discharge.

1

PACER	PACER PULSE
PULSE	Blinks off when pacer pulse is detected.
capture	capture

Press to select one of four pacing capture levels. Paced beats are simulated when capture occurs.

convert

The convert feature allows the simulator to convert automatically from one rhythm to another rhythm when a discharge is delivered from a defib set to 50J or more. To perform convert operation:

- 1. Press convert key. The indicator of the running rhythm pulses brighter.
- **2**. Press key of the rhythm to be activated after the defib discharge. This waveform's indicator flashes on and off.
- 3. Deliver discharge from defib set to 50J or more. The new rhythm is running.

To cancel a convert operation before it's completed, either press the convert key again, or press the key of the running rhythm. If a convert operation is started but not completed within two minutes, it will cancel automatically.

capture

The capture control allows you to select one of four pre-set pacing capture levels. Each level is indicated by the brightness of the PACER PULSE indicator. For each press of the capture key, the next higher capture level is selected. When level IV is reached, the next key press selects level I. At power-on, capture level I is selected automatically.

Capture Level	Capture occurs with pacer set at:	PACER PULSE Brightness
	65 to 70 mA	lowest
11	75 to 80 mA	
111	85 to 90 mA	
IV	95 to 100 mA	highest

Rhythms for Defibrillator Training

- VF Ventricular fibrillation.
- VT-HI Ventricular tachycardia. Wide QRS. Rate: 185. If simulator has CodeMaster or Heartstream pads connector, rate is 220.
- VT-LO Ventricular tachycardia. Wide QRS. Rate: 140.
- **T de P** Torsades de Pointes. Fluctuating QRS axis.
- **AFIB** Atrial fibrillation with rapid, varying ventricular response. Ventricular rate: 150.
- **AFLTR** Atrial flutter with 2:1 AV block. Ventricular rate: 150.
- **PSVT** SVT alternates with NSR, then remains in SVT. Rate: 213. PAC falls on T wave. Symmetric T wave inversion.
- S TACH
 Sinus tachycardia with anterior ST depression.

 ANT
 Rate: 120.

 ST +
- NSR Normal sinus rhythm. Rate: 72. Selected automatically at power-on.
- ASYS Asystole.

ST segment and T wave Abnormalities

- SINUSSinus rhythm with Acute AMI. Q waves in anterior leads.AMIST elevation. Rate: 72.
- SINUS Sinus rhythm with Acute AMI and PVCs. Q waves in AMI anterior leads. ST elevation. Rate: 72. PVC
- SINUS
 Sinus rhythm with antero-septal ST elevation.

 ANT•S
 Rate: 72.

 ST↑
 ST
- 2nd IMobitz type I second degree AV block (4:3) with
lateral ST elevation. Rate varies from 40 to 50.
- ST↑
- S BRDY Sinus bradycardia with inferior ST elevation. INF Rate: 40.
- ST↑
- S BRDY Sinus bradycardia with Q waves and ST elevation IMI in II, III, and aVF. Rate: 40.

- Rhythms for External Pacer Training
 - 1st Sinus rhythm with first degree AV block and right bundle branch block. Wide QRS. Rate: 60.
 2nd II Mobitz type II second degree AV block (4:3) with left bundle branch block and PVCs. Wide QRS.
 - **PVC** Rate varies from 32 to 65.
 - 2nd II Mobitz type II second degree AV block (4:3) with left bundle
 - **LBBB** branch block. Wide QRS. Rate varies from 37 to 50.
 - **3rd** Third degree AV block. Q waves in V2 V4, but normal ST segments. Wide QRS. Atrial rate: 60. Ventricular rate: 37.

Defibrillator Exercise

Connect simulator to defibrillator. For help, see **Getting Started**, page 5. **Exercise**: Convert VF to NSR.

at simulator:

2

- 1. Press VF key. VF indicator glows steadily. Confirm VF is displayed on monitor.
- 2. Press convert key. VF indicator pulses brighter.
- 3. Press **NSR** key. NSR indicator flashes on and off. VF indicator glows steadily again.
- at defibrillator:
- 4. Select 200J using **Energy Select** switch (1).
- 5. Press Charge button (2). Listen for charge ready tone.
- 6. Press Discharge button(s) (3).
- After discharge observe that: On monitor, NSR is displayed.
 At aimulator NSR indicator aloue steadily, and VE indicator.

At simulator, NSR indicator glows steadily, and VF indicator is off.





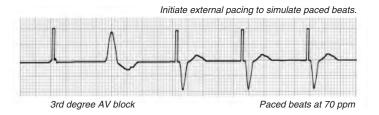
External Pacer Exercise

Connect simulator to external pacer. For help, see **Getting Started**, page 5. **Exercise:** Pace 3rd degree AV block at rate of 70 ppm. To simulate paced beats, pacer **Rate** must be greater than rate of selected rhythm, and pacer **Output** must be greater than simulator capture level.

- at simulator:
- 1. Press **3rd** key. Confirm 3rd degree AV block is displayed on monitor.
- 2. Press **capture** key once to select capture level II (75 to 80mA capture level). *at pacer:*
- 3. Select **Pacer On**. Verify sense markers are displayed with each R wave. (If not, press **ECG Size** button until R wave markers are observed.)

External Pacing Exercise (continued)

- 4. Select rate of 70 ppm using Rate control.
- 5. Press Start/Stop button to start pacing.
- 6. Using Output control, increase pacer current until you observe paced beats on monitor. Pacer current setting should be 75 to 80mA.



IBP Waveform Option

The IBP waveform option allows viewing of invasive blood pressure waveforms on an IBP monitor. CS1201s with this option have a blood pressure cable and connector attached to the end panel. When NSR is selected, blood pressure is approximately 120/80 mmHg. When either VF or Asystole are selected, blood pressure is zero. The remaining 17 rhythms have associated blood pressures that can be classified as hypertensive, hypotensive, or normotensive.

To zero your IBP monitor:

- 1. Connect monitor's IBP cable to the CS1201's IBP cable.
- 2. Power-on the CS1201.
- 3. Select ASYS.
- 4. Power-on the IBP monitor.

5. Complete zeroing procedure as described in your monitor's operating instructions.

Specifications

sensitivity: 5 microV/V/mmHg; input impedance: 301 ohms; output impedance: 1 ohm

Battery Saver Feature

The CS1201 powers-off automatically about 30 minutes after a key was last pressed, or after defib or pacer energy was last detected. This is normal operation.

- To allow simulator to remain powered-on after 30 minutes, follow these instructions:
- 1. Power-off simulator.
- 2. Press and hold down convert key, then press and release ON·OFF key. The simulator will power-on.
- 3. Observe the NSR indicator. When it flashes on and off, release convert key. NSR indicator continues to flash for about one second. The battery saver feature is now disabled. When the simulator is powered-off, it will return to normal battery saver operation.

Service

The CS1201 Code Simulator is warranted to be free of defects in material or workmanship for three years from date of purchase. If your simulator needs service, or if you have questions about its operation, please contact Symbio Corporation, or your authorized dealer.

Symbio Corporation 1600 NW Compton Drive Suite 120 Beaverton, OR 97006

voice: 503.748.2030 fax: 503.748.2031 www.symbiocorp.com **Getting Started**

4

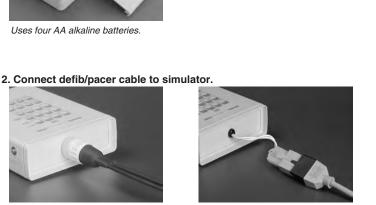
1. Install batteries.



Uses four AA alkaline batteries.

Be sure defibrillation cable is securely attached to simulator. Keep battery cover on during operation.

WARNING



Panel-mounted connector.



Panel-mounted connector.

3. Attach ECG cable to ECG snaps.



Limb Lead ECG snaps.

4. Press ON·OFF key to power-on simulator.





OPERATING INSTRUCTIONS

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9851-902

Free-hanging connector.

Free-hanging connector.



