Anterior Rhinomanometry (Option)
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Screen and Printer Report
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Contact us for detailed information.
MasterScreen™ IOS - Quick, Precise and Independent of Cooperation

High-end, informative Impulse Oscillometry System (IOS)

Early diagnosis and screening require an objective and sensitive method that can be easily performed at any location and is independent of patient cooperation. MasterScreen™ IOS allows you to determine Respiratory Impedance with low technical expenditure and reliably measures the central and peripheral airways.

The system is especially suited for use in the field of pneumology, pediatrics, geriatrics and occupational medicine because only a few normal breaths are required for a complete test. Children from the age of two or three years can already be tested. Should an artifact appear during the measurement, it can be simply deleted later by using the re-extant function. A high quality of diagnosis is ensured by various, graphically oriented interpretation concepts.

Practical & Scientific - Convincing in Every Respect

The informative graphic display of the respiratory obstruction on the basis of a lung-rows model is user-friendly. Results are then suitably converted by the comprehensive spectrum of analytically relevant parameters into an easy-to-comprehend visual overview of the results, differentiated into central and peripheral airways.

And last but not least, MasterScreen™ IOS is fast. Within less than one minute, the system provides exact and reliable results.

Advantages at a glance:
- Quick and low-cost noninvasive determination of Respiratory Impedance with low technical expenditure
- Differentiation between proximal (central airways) and distal components of the respiratory tract.
- Measurement of respiratory signals but from the pressure-flow relationship of artificial impulse-shaped test signals which are produced by an external generator (external power source).
- The advantage is the high degree of reproducibility and the incomparably high amount of data which allows for a thorough differentiation of lung function.

The Principle is Easy and Safe

As a characteristic feature of Impulse Oscillometry pulmonary impedance is not derived from the respiratory signals but from the pressure-flow relationship of artificial impulse-shaped test signals which are produced by an external generator (external power source).

The principle is easy. An external generator produces artificial impulse-shaped test signals which are superimposed on the patient's respiratory tidal breathing waveform. While the patient inspires ambient air via a mouthpiece, pneumotach and terminating resistance. In the pneumotach, flow and pressure are determined simultaneously. The required respiratory impedance of the lung-rows system is based on these two signals which have a frequency range of 0 to 100 Hz.

The Spirometry Program „Spirometry“ and candle animation

Flexible and Mobile

For outpatient application, MasterScreen™ IOS can also be used in combination with a notebook computer. Installations onto a few minutes and Respiratory Impedance can be measured whenever and wherever you want.

MasterScreen™™ IOS differentiates between proximal and distal components of the respiratory tract. This important feature follows for early detection and airway impairment of the so-called small airways. Additionally, the effect of drugs in different sites of the lung can be determined.

The System is especially suited for use in the field of pneumology, pediatrics, geriatrics, and occupational medicine because only a few normal breaths are required for a complete test. Children from the age of two or three years can already be tested.
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The informative graphic display of the respiratory obstruction on the basis of a lung-thorax model is user-friendly. Researchers will be convinced by the comprehensive spectrum of analytically relevant parameters and reliably measures the central and peripheral airways.

And last but not least, MasterScreen™ IOS is fast. Within less than one minute, the system provides exact and reliable results.

Advantages at a glance:

- Quick and low-cost noninvasive determination of Respiratory Impedance with low technical expenditure
- Differentiation between proximal (central airways) and distal components of the respiratory tract
- Sensitive detection and differentiation of extrathoracic artifacts in the respiratory system
- Save method for differentiation between trapped air or obstructive bronchospasm
- Recorded parameters provide valuable information for early diagnosis of pulmonary diseases
- Graphic interpretation of the results on the basis of a lung-thorax model
- Bronchial Challenge

Precise Differentiation of Breathing Mechanics

MasterScreen™ IOS differentiates between proximal and distal components of the respiratory tract. This important feature follows for early detection and differentiation of pathologic impairments of the so-called small airways. Additionally, the effect of drugs in different sites of the lung can be determined.

The Principle is Easy and Safe

As a characteristic feature of Impulse Oscillometry pulmonary impedance is not derived from the respiratory signals but from the pressure-flow relationship of artificial impulse-shaped test signals which are produced by an external generator (external power source). The advantage is the high degree of reproducibility and the incomparably high amount of data which allows for a thorough differentiation of lung function.

Flexible and Mobile

For outpatient application, MasterScreen™ IOS can also be used in combination with a notebook computer. Installations take only a few minutes and Respiratory Impedance can be measured whenever and wherever you want.

Modular Design

Just like all MasterScreens, MasterScreen™ IOS can be adjusted to your needs and is an ideal basic system for a universal lung function lab.

The principle is easy. An external generator produces impulse-shaped test signals which are superimposed on the patient’s respiratory tidal breathing waveform while the patient inhales ambient air via a mouthpiece, pneumotach and terminating resistance. In the pneumotach, flow and pressure are determined simultaneously. The required respiratory impedance of the lung-thorax system is based on these two signals which have a frequency range of 0 to 100 Hz.

Internationally standardised method for lung function testing

The Spirometry program for recording and assessment of the Flow/Volumes and Flow/Time trends is included in the delivery of your MasterScreen™ IOS. This is sophisticated and precise application includes independent Flow and Forced Spirometry measurements, pre/post evaluation and an animation program for children.
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High-end, informative Impulse Oscillometry System (IOS)

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- Differentiation between proximal (central airways) and distal components of the respiratory tract
- Sensitive detection and differentiation of extrathoracic versus intrathoracic disease
- Save method for differentiation between trapped air or respiratory collapse and obstruction
- Recorded parameters provide valuable information for early diagnosis of pulmonary diseases
- Graphic interpretation of the results on the basis of a simple lung-thorax model
- Spirometry/Flow-Volume program

Precise Differentiation of Breathing Mechanics

MasterScreen™ IOS differentiates between proximal and distal components of the respiratory tract. This important feature follows for early detection and airway dilation of the so-called small airways. Additionally, the effect of drugs in different sites of the lung can be determined.

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Module Design

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Bronschal Challenge

Add an APS nebulizer to the IOS to perform provocational measurements. The highly-exact APS system provides a stable nebulizer performance, precise dosage and optimal drug administration with phase controlled inhalation. A flexible observation program controls the test sequence and supports trend control and assessment.

The principle is easy. An external generator produces impulse-shaped test signals which are superimposed on the patient's respiratory tidal breathing waveform while the patient inhales ambient air via a mouthpiece, pneumotach and terminating resistance. In the pneumotach, flow and pressure are determined simultaneously. The required respiratory impedance of the lung-thorax system is based on these two signals which have a frequency range of 0 to 100 Hz.
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