



Product Code	29516
Unit of sale	1 pc
Minimum order	1
Type	Medical device
Class	II B

RDM (NSIS)	2870700
CND	Z12080103
EAN/UPC	8023279295160

## Description

### FC1400 SINGLE FOETAL MONITOR

Antepartum foetal monitor to measure Foetal Heart Rate (FHR), degree of material uterine contraction (UA: Uterine Activity), foetal movements (FM)

#### Superior data display

- 7" full touch screen colour TFT LCD (800x480)
- 2 display modes: graphic and text modes
- 72 hours of memory capacity

#### Extreme data accuracy and access

- high-accuracy and wide detection area
- easy on-screen scrolling function
- durable watertight probes, 1 MHz to minimize broken FHR waveforms even if the fetus moves

#### Printout

- CTG interpretation report
- both standard and A4 size paper usable
- normal fax paper usable

#### Other advantages

- Wi-Fi central monitoring up to 16 beds (Option)
- PC compatible
- internal battery lasting 2-hours (Option)
- power adapter 100-240 V, 50-60 Hz
- multilingual internal software: GB, FR, IT, ES, PT, DE, PL, RO, RU, CZ, HU, BG, TR, KR, CN.

Recommended after week 30.

## Technical Specifications

Dimensions 296x97.5x305.5 mm - Approx. 2.9kg

Display 7" TFT Wide LCD screen (800x480)

Thermal array printer: print speed: 1, 2, 3 cm/min (real time) / paper feeding function

Power input: 100-240 V, 1.5-0.7 A, 50-60 Hz / output: +18 V = 2.8 A

Li-ion battery (option) 4 hours (charging) - 2 hours (discharging)

External link LAN, Wi-Fi, USB memory

#### Foetal heart rate

input signal: ultrasound pulsed doppler

ultrasound frequency: 1.0 Mhz, 975 Khz

ultrasound power: <10 mW/cm<sup>2</sup>

FHR detection method: autocorrelation

FHR range: 50-210 bpm  $\pm$ 1 bpm (120-160)

Foetal movement measurement detection source: ultrasound pulsed doppler, event marker

Uterine contraction

input source: external transducer

reference control: one touch switch, auto zeroing

measurement range: 0-99

Auto CTG analysis

average baseline FHR

number of TOCO

number of acceleration

number of deceleration

late deceleration

early deceleration

variable deceleration

high episode

low episode

short term variability

signal loss