

Dtae-30th May 2018

TO WHOM IT MAY CONCERN

This is to certify that we Laerdal Medical are the only manufactures for an advanced wireless controlled Premature Anne, a realistically proportioned 25-week preterm manikin developed in collaboration with the American Academy of Paediatrics (AAP). Premature Anne model 295-00050 is designed to facilitate the training of healthcare professionals in the initiation of proper care and resuscitation of preterm infant

These realistic simulations will help to strengthen the learner's ability to assess, diagnose and treat preterm infants as part of a team with the help of clinical feedback and simulates physiological parameters including wave form and value display for HR, ECG, SpO2, BP, RR, Temperature, etCO2, as in a real patient monitor

It has inbuilt 08 Nos Neonatal Resuscitation Program scenarios designed for the resuscitation of a 25-week old new-born:

- 1. Positive-Pressure Ventilation and Continuous Positive Airway Pressure (CPAP)
- 2. Positive-Pressure Ventilation and Endotracheal Intubation
- 3. Positive-Pressure Ventilation, Endotracheal Intubation, and Chest Compressions
- 4. Positive-Pressure Ventilation, Endotracheal Intubation, Chest Compressions, & Medication
- 5. CPAP, Oxygen Management, and Orogastric Tube
- 6. Positive-Pressure Ventilation, CPAP, Intubation, and Surfactant Administration
- 7. Intubation, Chest Compressions and Umbilical Vessel Catheter Placement: Ethics and Care at the End of Life
- 8. Resuscitation of 25-Week New-born Twins

Airway Features

Anatomically accurate, realistic airway
ET tube insertion
Sellick Manoeuvre
Positive Pressure Ventilation
Right mainstem intubation
Suctioning
OG/NG tube insertion

Vascular Access

Patent, cuttable umbilicus with venous and arterial access for bolus or infusion
Simulated blood flashback upon cannulation of umbilical vein
Peripheral IV access (dry ports

Breathing Features

Bilateral and unilateral chest rise and fall with mechanical ventilation
Cyanosis
Unilateral chest movement (right mainstem intubation) with mechanical ventilation
Cardiac

Realistic Compressions

Sounds

Auscultation of lung sounds during ventilation Heart sounds Vocal sounds

The Manikin Skin be should realistic and made of polyvinylchloride (PVC), without rubber content two manikin along two bag valve masks

1. The manikin should be able to withstand High Temperature (50°C).

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- 2. The Manikin Should have Natural obstruction of the airway that allow students to learn the important technique of opening the airway.
- 3. The manikin should Head tilt/chin lift and jaw thrust should allow students to practice correctly all maneuvers necessary when resuscitating a real patient.
- 4. The Manikin should have Realistic chest compliance so that students can experience the proper technique required for chest compressions on infants.
- 5. The manikin should have visible chest raise during ventilation.
- 6. The Manikin should allow Foreign-body airway obstruction feature to practice the release of a foreign-body obstruction through back blows and chest-thrust techniques
- 7. The manikin should have Economical disposable airways for quick and easy clean up.
- 8. The Manikin should have Removable and reusable faces for convenient and affordable maintenance. Demonstration at office.

Infant airway trainer

- Realistic anatomy of the tongue, oropharynx, epiglottis, larynx, vocal cords, and trachea
- Practicing of oral and nasal intubation
- Practicing use of LMA (Laryngeal Mask Airway)
- Correct tube placement can be checked by practical inflation test
- Ability to perform bag-mask ventilation
- Ability to perform Sellick manoeuvre
- Realistic tissue simulation

We also confirm that the said product with its published specifications is not manufactured by any other manufacturer in the world'

We are pleased to confirm that M/S. DIVINESURGITECH HAVING OFFICE AT B - 369, SUDERSHAN PARK MOTI NAGAR NEW DELHI - I 10015 is our Distributor.

Authorized Signatory

Manohar Rawat Sale and Solution Developer

For LAERDAL MEDICAL INDIA PVT.LTD.

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