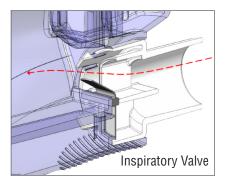
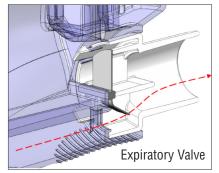
# Small Design, Big Results

AeroChamber mini™ Holding Chamber (HC)



Canister Adapter **Inhalation Channel** Endotracheal/Tracheal Canister Port **Tube Connector** Wye Connector Anti-Static Chamber **Exhalation Channel** 





The *AeroChamber mini*™ HC is a unique device designed to deliver pMDI aerosols to patients in conjunction with:

- mechanical ventilation
- manual resuscitation bag
- standard aerosol resuscitation mask

## **Anti-Static Chamber**

The *AeroChamber mini*™ HC is comprised of an anti-static, dual chamber design. The patented exhalation channel has a one way valve that preserves aerosol dose and minimizes dead space.

Designed with the patient in mind The *AeroDock*™ canister port makes the AeroChamber mini™ HC a device designed to accept standard pMDIs as well as those with integrated dose counters. The counters will activate with this feature.

## **Effective Treatment**

The *AeroChamber mini*™ HC is a 110cc comfortably in your hand. It can be easily connected to the endotracheal tube in front of a wve or HME in a ventilator circuit. While in a ventilator circuit it is designed to maintain positive end expiratory pressure (PEEP). It can be used with a standard aerosol resuscitation mask and is effective for use with low tidal volume patients.



# **Supporting In Vitro Studies:**

R. DiBlasi, D.P. Coppolo, M.W. Nagel, C.C. Doyle, VA. Avvakoumova, R.S. Ali, J.P. Mitchell A NOVEL VALVED HOLDING CHAMBER FOR DELIVERING INHALED MED-ICATIONS TO NEONATES AND SMALL CHILDREN: LABORATORY SIMULATION OF DELIVERY OPTIONS Resp Care 2010 April;55(4):TBD

 The AeroChamber mini™ HC was successfully tested using pre-term infants, infants and small child breathing patterns each with three common delivery methods.

### **Total Emitted Mass (TEM)**

Treatment Modality	Pediatric Patient Simulation (μg/actuation) Mean ± S.D.		
	Pre-term Infant	Infant	Small Child
MV (Mechanical Ventilation)	3.3 ± 1.2	3.8 ± 2.1	4.2 ± 2.3
MR (Manual Resuscitation)	5.5 ± 0.3	10.7 ± 0.9	10.0 ± 1.1
SB (Spontaneously Breathing)	6.0 ± 1.0	10.5 ± 0.7	12.1 ± 1.8

M. Nagel, M. Foley, J. P Mitchell, R. Ali, H. MacKay, D. Coppolo IN VITRO EVALUATION OF A NOVEL AEROSOL CHAMBER FOR DELIVERY OF AEROSOLIZED MEDICATION TO THE MECHANICALLY VENTILATED PREMATURE INFANT Poster Presented at ERS Annual Congress 2009

•Using pediatric ventilator settings the *AeroChamber mini*™ HC delivered significantly more (8.8µg ± 3.1µg/actuation) medication as related to the Ace<sub>†</sub> (4.5 $\mu$ g ± 2.2 $\mu$ g/actuation). Unpaired t-test, p<0.001.

DP. Coppolo, JP. Mitchell, HA. MacKay, VA. Avvakoumova, MW. Nagel A NOVEL SPACER FOR IN-VENTILATOR CIR-CUIT USE PROVIDES EFFICIENT MEDICATION DELIVERY FROM PRESSURIZED METERED DOSE INHALERS (PMDI) Poster Presented at ATS 2009

- The AeroChamber mini™ HC was studied with three HFA formulations: Ventolin+ (albuterol), Flovent+-50 (fluticasone propionate) and Atrovent+ (ipatropium bromide).
- Fine particle mass of 4.7µm from the AeroChamber mini™ HC was substantially equivalent of fine particle mass 4.7µm emitted by the pMDI alone.

Formulation	pMDI alone	AeroChamber mini™	
ipratropium bromide (Nominal Dose 18 µg)	6.7 ±0.4	5.2 ±0.2	
fluticasone propionate Nominal Dose 44µg)	19.0 ±2.3	15.3 ±1.6	
albuterol HFA (Nominal Dose 90 μg)	34.8 ±1.4	40.8 ±2.9	
FPM*<4.7 µm (µg/actuation)			

\*Fine Particle Mass n = 5 devices/group mean ± SD

Dimensions: patient connection - 15mm ID/ wve connection - 15mm OD Tested up to 25 PSI

This diagram illustrates a flow test performed on the AeroChamber mini™ HC during exhalation. The exhaled air moves through the AeroChamber mini™ HC and out through the exhalation valve to prevent the patient from re-breathing carbon dioxide.

#### **Ordering Information**

Description Part #

98810 **AeroChamber mini**™ HC cs/10

For more information or a demonstration, contact your Monaghan Medical Sales Representative.













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