



Enhanced monitoring and clinical tools

- In addition to traditional monitoring parameters, special monitoring parameters, such as Driving Pressure(DP), are provided to guide clinicians in adjusting ventilation parameters.
- Spirometry loops can be stored for future reference, allowing clinicians the ability to better understand changes in the patient's response to therapy.
- Provide multiple of cardiopulmonary bypass modes (CBP) to assist in the implementation of cardiopulmonary bypass surgery.
- Continuous trend information together with time discrete events are stored and shown in the table or chart.
- Provides medical gas consumption calculations: including O₂, N₂O and Agent. And provide calculations of CO₂ production.
- International standard data protocol support to connect to internet center of hospitals.

BASE UNIT	
Dimensions (H x W x D)	1410×740×730 mm
Trolley version (with breathing circuit)	
Weight and load	110±5 kg
Trolley (without vaporizer and backup cylinder)	25 kg
Top shelf load	
Caster locking	
Braking Types	Individual locking front casters
Power and battery backup	
Power input	AC 100~240 V, 50/60 Hz
Power outlets	4 sockets on back, 1.5A individual
Batteries and Operation time with fully charged	DC 24V, 4.0AH, Minimum 120 minutes
Environmental requirements	
Operation temperature	10~40 °C (50~104 °F)
Operation humidity	≤95% (non-condensing)
Storage temperature	-20~60 °C (-4~131 °F)
Storage humidity	≤95% (non-condensing)
ANESTHESIA GAS SUPPLY MODULE	
Gas supply	O ₂ , N ₂ O, AIR; 280~600kPa
Cylinder yokes	Optional
Fresh gas flow indicator	Electronic display flowmeter
Range of fresh gas flow indicators	O ₂ ,N ₂ O: 0-10L/min; AIR: 0-12L/min
O ₂ flush	25~75 L/min
Auxiliary common gas outlet (ACGO)	Optional
Anesthetic gas scavenging system (AGSS)	Optional
Vaporizer	
Agent	Sevoflurane, Halothane, Enflurane, Isoflurane
Installation mode	Selectatec® with interlock, optional standby vaporizer parking holder
Filling type	Pour-Fill, Key-Fill, Quik-Fil®
Breathing system	
Volume of CO ₂ absorber	1.5 L for single canister
APL Range	Spontaneous breathing (SP) -70 cmH ₂ O
Material	Autoclavable (except O ₂ cell and airway pressure gauge)
Heating system	32~40 °C
CO ₂ bypass	Optional
VENTILATOR OPERATING SPECIFICATIONS	
Ventilator	Pneumatically driven, Electronically controlled
Ventilation modes – standard	
	Manual/Spontaneous
	Volume control (IPPV)
	Pressure control (PCV)
Ventilation modes - options	
	Pressure Controlled Ventilation Volume Guaranteed (PCV-VG)
	Synchronized Intermittent Mandatory Ventilation in Volume (SIMV-VC)
	Synchronized Intermittent Mandatory Ventilation in Pressure (SIMV-PC)
	Synchronized Intermittent Mandatory Ventilation in PCV-VG (SIMV-VG)
	Pressure Support (PS) / Continuous Positive Airway Pressure (CPAP)
	Bilevel Positive Airway Pressure Ventilation (BIVENT)
	Airway Pressure Release Ventilation (APRV)
Control input ranges	
Breathing frequency (Freq)	2~100 bpm
Positive end expiratory pressure (PEEP)	OFF, 3~50 cmH ₂ O
Inspiration/expiration ratio (I:E)	4:1~1:8
Tidal volume (Vt)	10~1500ml
Inspiration pause	OFF, 5%~60%
Inspiratory time	0.2~5.0 s
Inspiratory pressure (P _{TARGET})	5~70 cmH ₂ O
Pressure support level (ΔP)	3~60 cmH ₂ O
Pressure limit (Pmax)	10~100 cmH ₂ O
Trigger	0.5~15 L/min / -20~-1cmH ₂ O
Inspiratory Slope Time (T _{SLOPE})	0~2s
Compensation	Compliance and Leak compensation, fresh gas compensation, altitude compensation
Ventilator monitoring & alarm	
Monitoring	Continuous monitoring of inspiratory O ₂ concentration, breathing frequency, tidal volume, minute volume, peak airway pressure, PEEP, mean or plateau pressure, I:E ratio, resistance, compliance. Option: driving pressure, stress index, CO ₂ concentration, paramagnetic oxygen analyzer, anesthetic gas concentration with MAC
Trend storage	Maximum 720 hours of trend data table, 72 hours of trend chart
Medical gas calculations	Consumption of O ₂ , N ₂ O and Agent. Calculations of CO ₂ production. (require relevant gas monitoring)
Control screen	12.1" TFT color touch screen
Graph Display	Waveforms of P-t, F-t, V-t, CO ₂ -t (option), P-V Loop, V-F Loop, P-F Loop
Alarm	MV high/low limit, F.O ₂ high/low limit, Paw high/low limit, Pow er failure
	High Freq, Negative pressure, Continuous airway pressure, Apnea alarm, etc.
Alarm log	Alarm (Silence ≤120 seconds)
	500 items

Remark: Above configurations include standard and option. Please check price with your Aeonmed sales representative.



Lung-Protective Ventilation

Lung-protective ventilation is the current standard of care for mechanical ventilation. The risk of Postoperative Pulmonary Complications (PPCs) can be effectively reduced through Lung-protective ventilation strategy.

Modern Breathing Circuit

Safe, stable and efficient anesthesia management.

The characteristic breathing circuit is made of alloy, resistant to corrosion and can withstand repeated high temperature and high pressure sterilization.



Ventilator-level ventilation modes

Aeon8600A

is always your professional guard for lives, offering comprehensive and accurate respiratory care for all the patient types from infant to adult, helping clinicians to have more solutions for different clinical situations.

IPPV | PCV | PCV-VG

SIMV-VC | SIMV-PC | SIMV-VG

PS / CPAP | BIVENT | APRV

Low tidal volume

The 8600A has a minimum tidal volume of 10ml in volume control mode, in addition to possessing the PCV-VG and BIVENT ventilation mode, helping to achieve the precise low tidal volume required during lung protective ventilation.

Individualized PEEP titration tool

Stress index (SI) monitoring helps with Individualized PEEP titration. Through the guidance of the Static PV loop tool, the appropriate setting of PEEP value and tidal volume are realized.



Adjustable angle, easy to install, many user-friendly designs make maintenance easier.

The integrated heating system with a better thermal conductivity of alloy help prevent condensation and make patients feel more comfortable.

APL with fast release function, the upper pressure limit is accurately adjustable, avoiding repeated operations and improving anesthesia efficiency.

The Breathing Ciucuit has CO₂ bypass function (optional).



Minimized impact recruitment maneuver

Two types recruitment maneuvers: PEEP increment or sustained inflation. Automate repetitive tasks used during lung ventilation procedures.



SIMV-VG

Garantees patients can breathe spontaneously between mandatory breaths with pressure support as a backup. It offers flexible respiratory solutions when anesthesia steps into different phases.

BIVENT / APRV

Pressure controlled breaths are provided by switching between a high and low airway pressure in an adjustable time sequence. Spontaneous breaths can be pressure supported at the high and low pressure levels.

PCV-VG

Combines the advantages of VCV and PCV, providing better oxygenation with lower peak inspiratory pressure.

