

Select Options Template – ABC Model 4100

Use this template to indicate desired programming options by circling or writing were indicated

Circle Each Rate Mode for Programming

Continuous and V/T Modes	Body-Weight Modes	Mass Modes/Unit Modes	
ML/HR	mcg/KG/min	mcg/min	mU/min
ML/min	mcg/KG/HR	mcg/HR	mU/HR
	MG/KG/min	MG/min	U/min
Volume/Time	MG/KG/HR	MG/HR	U/HR

8.3.2.1 OPTIONS: PAGE 1 OF 2:

8.3.2.1.1 SYRINGE MFGER (Manufacturer):

If only one syringe manufacturer is chosen, this will serve as the default syringe manufacturer and the user does not have to program the manufacturer setting. If multiple manufacturers are chosen, PUMP DEFAULTS will show VAR. (for “variable”), and the desired manufacturer can be chosen from the list displayed.

Circle Each Syringe Mfger for Programming

Non-Enteral

Enteral

Becton Dickinson (B-D)	B-D with Enteral Tip (ETBD)
Monoject (Mono)	Mono with Enteral Tip (ETMN)
Terumo (Teru)	Baxa® NeoThrive (BAXA)
B-D Glass (B-D G)	NeoMed® (NEOM)
ABC	Ameritus® (SVN)
	Vygon® C-Gon (VYGO)

8.3.2.1.2 USE B-D 1ML LL (luer lock): YES or NO

B-D 1ML luer lock syringe and B-D 3ML syringe have the same diameter syringe barrel. If B-D 1ML luer lock is enabled, the user must manually select B-D 1ML Luer Lock or B-D 3ML syringe.

8.3.2.1.3 DELIVERY LIMIT: YES or NO

If YES is chosen, the pump will prompt user to enter limit. If NO is chosen, there is no prompt.

8.3.2.1.4 BOLUS ENABLED: YES or NO

If YES is chosen, the pump will prompt user to enter Bolus. If NO is chosen, there is no prompt.

8.3.2.1.5 STAND-BY MODE: AUTO or MANU (manual)

User can program either Auto or Manu setting. Refer to paragraph **Error! Reference source not found.** for the differences between Stand-by Modes.

8.3.2.1.6 MAX RT ML/HR (Maximum Rate in ML/HR only): 0-999

Write in max rate if desires _____

Limits the maximum normal delivery rate in ML/HR mode. No maximum rate limit is in effect if 0 is selected.

8.3.2.1.7 PLUNGER FORCE: LOW, HIGH, MID, or NORM

Sets the threshold of the plunger (occlusion) force.

8.3.2.2 OPTIONS: PAGE 2 OF 2:

8.3.2.2.1 TOTAL UNIT: ML or MASS

Unit for total amount displayed.

8.3.2.2.2 RATE INPUT: ML or Mass

Unit for rate input displayed.

8.3.2.2.3 USE ALL MODES: YES or NO

If No is selected, the only available rate modes are those in the start-up list.

8.3.2.2.4 DISPLAY CLOCK: YES or NO

If Yes, real-time clock will be displayed during normal operation.

8.3.2.2.5 MOTOR REVERSAL: YES or NO

If Yes, Motor will reverse briefly when occlusion is encountered. The motor reversal reduces post occlusion bolus it does not reduce the occlusion detection time.

8.3.2.3 ALARM/ALERT OPTIONS (1 page):

8.3.2.3.1 ALARM VOLUME: LOW, NORM, or HIGH

Allows user to program audio volume settings.

8.3.2.3.2 ALARM FREQ. (frequency of sound):

Allows user to program audio alarm frequency. Two digits, 0-9 for each. An audio alarm may consist of two different frequencies; the first digit corresponds to the first frequency, and the second digit corresponds to the second frequency. The higher the digit, the higher the sound. For only one sound, set second digit to 0.

8.3.2.3.3 ALARM DELAY: 2-60 minutes – Default is 2 mins

Record desire delay if different - _____

Allows user to select the amount of time the audio alarm will be temporarily silenced after the ALARM OFF key is pressed.

8.3.2.3.4 STOP ALARM: YES or NO

If NO, there will be no slow beep audio alarm in stop state.

8.3.2.3.5 EMPTY ALARM: YES or NO

If NO, there will be no audio alarm when the syringe is empty.

8.3.2.3.6 LOW BATT (battery) ALARM: YES or NO

If NO, there will be no audio alarm when battery is low.

8.3.2.3.7 NEAR-EMP (empty) ALARM: YES or NO

If NO, there will be no audio alarm when near-empty condition is detected.

8.3.2.3.8 NEAR-EMP (empty) DELAY: 2-99 minutes Default is 10 mins

Record desired delay if different - _____

Allows user to adjust the amount of time before the syringe is emptied when a Near-Empty audio alarm is triggered.

8.3.2.3.9 BOLUS COMPLETE: YES or NO

If NO, there will be no audio alarm when bolus infusion is completed

Apply color tape to Pump Label Area (see Section 3.1 item 12 ops manual)

Circle desired color *Orange* or *Purple*

Name of Institution _____

Name of Person _____

Date (month/day/year) _____

Atlanta BioMedical received Sign/Date _____

Teacher pump options programmed as above _____

Model 4100s as students cloned _____

Sign/Date _____