RESPIRATION RATE AT YOUR FINGERTIPS

Introducing the Welch Allyn® Connex® Spot Monitor with digital respiration rate

Enhance your workflow today with a new way to digitally spot-check a patient’s respiration rate. Automation can support your goals to capture, standardize and create confidence in the accuracy of your readings.

Adding the Connex Spot Monitor with Masimo RRp technology helps you digitally spot-check respiration rate as part of the vitals you capture routinely with the option to incorporate them into your early warning scoring protocol.

The Connex Spot Monitor with spot-check respiration rate uses Masimo® RRp® technology to acquire a respiration rate in less than a minute using standard Masimo LNCS® or RD SET™ sensors.

Vital sign documentation is much lower for respiration rate (1X/day) versus blood pressure (5X/day), heart rate (4.4X/ day), and temperature (4.2Xday).³
Switch from Subjective to Objective

Respiration rate is one vital sign that calculations and acquisition methods vary based on clinical experience and protocol. Research shows that respiration is the most frequently missed vital during rounds yet is the leading indicator of patient deterioration 8-12 hours prior. “…Respiration rate changes are of much greater magnitude and more likely to be better at discriminating between stable patients and patients at risk.”¹

Masimo Respiration Rate Technology Specifications

- 4-70 respirations per minute (rpm)
- 3 RPM SD (Standard Deviation)
- 1 RPM mean error
- Adult and pediatric patients greater than two years old
- Spot-check and Interval profiles

Configuration Options

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<td>Upgradeable to Wifi</td>
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Order your Welch Allyn® Connex Spot Monitor from Hillrom with Masimo RRp enabled or contact your local Hillrom representative for upgrade paths.*

In one study, nurses recorded nearly 72% of all respiratory rates as either 18 or 20 bpm, whereas only 13% measured by trained observers had these values, confirming a significant bias and/or multiplication artefact.⁵

Vincent, J.L.

¹ Subbe et al., 2003
² Vincent et al., 2018
³ Van Leuvan et al., 2008
⁴ Chen et al., 2009
⁵ Semler et al., 2013