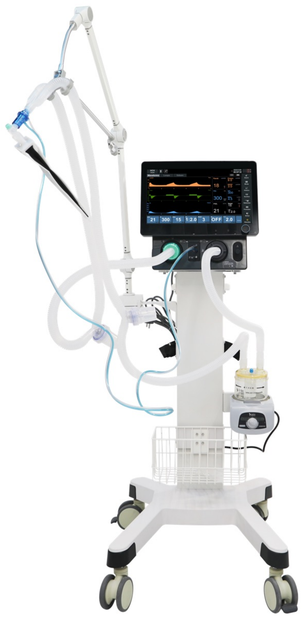


ESHERO

www.esheromed.com

E-mail: Info@eternitymed.com
Contact Number: 86 10-688-27491

ESHERO

SH300

Turbine Ventilator

Powerful Core, Free Breathing

Reliable ventilation support

Complete Modes

The ventilator's sequential therapy implements physiology-guided, step-down respiratory support. Non-invasive ventilation is used as an extension of invasive ventilation to manage post-extubation respiratory failure, leveraging the physiological advantages of high-flow oxygen therapy to achieve the ultimate goal of spontaneous breathing.

Patient: Adult、Pediatric、Neonate

HFNC mode: 2-100L/min

Non-invasive mode: PCV, SIMVP, CPAP/PSV, DualVent、APRV, PSV-S/T, nCPAP

Invasive mode: VCV, PCV, SIMV-V, SIMV-P, CPAP/PSV, PRVC, SIMV-PRVC, DualVent, APRV, VS, SMV, CPRV

Uncompromised performance

Monitoring Parameter Display

Full-screen parameter monitoring ensures ventilation safety

One-Touch Function Activation

One-touch activation of the function button interface enables quick clinical operations for greater convenience
Comprehensive

Ventilation Visualization

Dynamic lung view uses visual graphics to intuitively display the patient's current lung compliance, airway resistance, and spontaneous breathing status

CPRV Ventilation Mode (CPRV)

An emergency ventilation mode for use during CPR compressions. It activates rapidly to provide mechanical ventilation support, effectively avoiding harm from excessive triggering and hyperventilation during CPR.

Smart Minute Ventilation Mode (SMV)

SMV is a ventilation mode that adapts to the patient's parameters to minimize respiratory work. Based on the Otis formula, it continuously monitors respiratory mechanics (expiratory time constant, airway resistance, compliance) to automatically set and dynamically adjust respiratory rate and tidal volume, achieving the target minute ventilation.

Core Technology

Portable Transport

The host and trolley are detachable for convenient and portable transport

Proximal Flow Sensor

Equipped with a proximal flow sensor for more accurate data sampling

High-Performance Turbine

Electrically controlled ventilator with ultra-peak flow to meet patients' mechanical ventilation needs

Safety Protection

- Machine Power-On Self-Test Function
- Three-Level Alarm (Light, Sound, Text)
- 65 L/min - Maximum leak compensation flow rate
- 72-hour trend data, capable of storing 5000 records
- Three waveform and two loops can be freely combined on the same screen for intuitive monitoring of the patient's respiratory status

Safe and precise

Protecting life and health

360° visual alarm light. Visual alarm safety alert

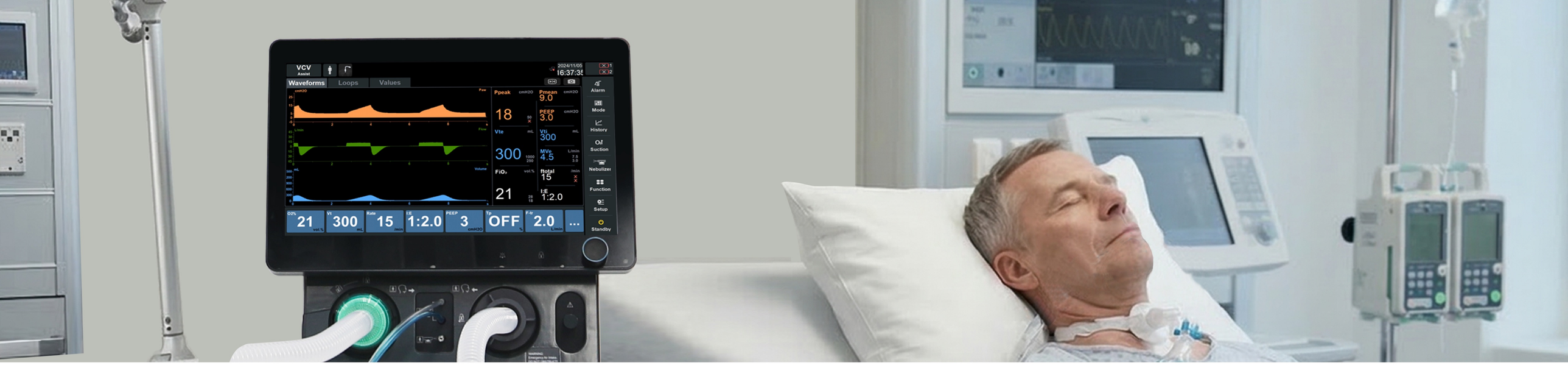
15.6/13.3-inch full HD display (1920 × 1080) with multi-angle adjustment in both landscape and portrait orientations

Various Communication Interfaces
Including: Network Interface, USB Interface, Nurse Call Interface, RS232, HDMI Interface

Tool-free removal of inspiratory and expiratory valves.134 °C high-temperature sterilization to prevent cross-infection

150 minutes with one battery
300 minutes with two batteries

Supports hospital communication protocols for real-time ventilator data transmission



Intelligent Management

Module Expansion

SPO2

SpO_2 monitoring for respiratory risk assessment.

ETCO2

Monitors CO_2 concentration to support clinical decision-making

Paramagnetic oxygen sensor

Higher measurement accuracy
Longer service life, reducing clinical failure rate and maintenance costs

Auxiliary Functions

Inspiratory Hold	Expiratory Hold	Manual Breathing	Nebulization Function	Suction
Sigh	PEEPi	SRTC (ATC)	P-V Tool	SBT

Function

Basic	Nebulizer	PEEPi	P0.1	NIF	P-V	Recruitment	SBT

Weaning Decision Assistance

SBT-Spontaneous Breathing Trial
P0.1, NIF, RSBI Weaning Auxiliary Parameters

Lung Recruitment Tool

Lung Recruitment Function (Single-cycle Lung Recruitment, Multi-cycle Lung Recruitment)

Lung Protective Ventilation

Low-flow P-V curve is a method to select the optimal PEEP based on the improvement of respiratory mechanics

Dynamic Compensation

Automatically compensates tube resistance to ensure accurate pressure delivery at the airway.