Spio₂
Faith in Pleth
During general anesthesia, the use of excessive or insufficient analgesic medication may lead to peri- and post-operative adverse events. SPI (Surgical Pleth Index) reflects the patient’s hemodynamic responses to both opioid delivery and surgical stimuli during general anesthesia.

Clinical Evidence

Combined Hypnosis & SPI monitoring has shown to reduce Remifentanil consumption by 22.7% to 25%.

Assessing a patient’s oxygenation level is one of the key elements in helping clinicians develop the best course of treatment for their patients.

Did You Know?

SPI index is part of the Adequacy of Anesthesia (AoA) concept which may help clinicians to assess patient’s responses to anesthetic agents, opioids and NMBAs during general anesthesia.

Surgical Pleth Index has shown:
- Significant correlation with surgical stress level.
- Significant correlation with remifentanil amount.
- Better sensitivity to surgical stimuli than HR, BP, or RE.
- Better correlation to opioid amount than HRR, PPGA, RE, or SE.
- No sensitivity to the variation of hypnotic drug amount.

GE algorithms apply specific calibration curves based on each sensor’s optical characteristics.
Each GE TruSignal sensor is individually tested and calibrated.
GE SpO2 Systems are compliant with the Medical Devices Directive (CE Mark Directive 93/42, Article 12).
Sensors

Large variety of sensors designed for optimal patient comfort.

** SENSITIVE

GE TruSignal* sensors are intended for use in continuous non-invasive arterial oxygen saturation (SpO2), pulse rate monitoring and SPI**, to help clinicians in their daily patient care decisions.

** Surgical Pleth Index is to be used for unconscious and fully anesthetized adult (>18 years old) patients during general anesthesia.

SPI monitoring can be performed with CARESCAPE* modular monitors and GE SpO2 technology. SPI measurement site should always be the finger.

References


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