

# Diapact® CRRT System

An integrated system for high flow continuous *or* intermittent renal replacement *and* plasma therapies

## Technical Features and Specifications

- Easy access to internal components
- PC-based diagnostics system assists technician in isolating and correcting machine problems as well as conducting calibration and preventative maintenance procedures



### Technical Specifications

#### Dimensions and weight

Dimensions (W x H x D) ..... 19 in. x 49.5 in. x 19.5 in.  
Weight..... 100 pounds

#### Electrical data

Rated voltage ..... 110/240 V - 50/60 Hz  
Current ..... 3.5 A  
Battery power supply (option)..... 12 V  
Electromagnetic compatibility ..... EN 60601-1-2

#### Operating conditions

Relative humidity ..... 30% to 90%  
Temperature ..... 15 – 40° C  
Atmospheric pressure ..... 700 – 1060 mBar  
Staff call ..... Connector  
Run Time Clock ..... Standard

*Other CRRT Products from B. Braun include hemofilters, standard dialysate, substitution fluids and customized fluids from CAPS® (Central Admixture Pharmacy Services).*

#### Blood side

Blood flow rate ..... 10 – 500 mL/min.  
Blood volume range ..... Up to 999 L  
Arterial pressure range ..... -400 – +100 mmHg  
Venous pressure range ..... 0 – 400 mmHg  
Filter inlet pressure range ..... 0 – 500 mmHg  
Safety air detector ..... Ultrasound type connection  
External Anticoagulant Pump ..... "Smart" connection

#### Fluid side

Intermittent Dialysate flow rate ..... 5 – 400 mL/min. (24L/hr.)  
Continuous Dialysate flow rate ..... 5 – 200 mL/min. (12L/hr.)  
Substitution flow rate  
system control ..... 5 – 100 mL/min. (6L/hr.)  
Ultrafiltration flow rate ..... 0 – 300 mL/min. (18L/hr.)  
Intermittent Weight loss goal range ..... 0 – 2000 mL/h  
Continuous Weight loss goal range ..... 0 – 2000 mL/h  
Fluid balance goal range ..... 2 – 25 Kg  
Fluid temperature range ..... 20 – 40° C  
Inlet/outlet filter pressure range ..... -400 – +400 mmHg  
Blood leak detector ..... Red sensitive  
TMP Monitoring Range ..... 100–600 mmHg

#### Schedule a demo today.

Call your B. Braun Representative  
at 1-800-848-2066 or email [rtd@bbraun.com](mailto:rtd@bbraun.com)



Flexible design allows multiple treatments:  
SCUF, CVVH, CVVHD, CVVHFD, PEX, PAP, HD/FD

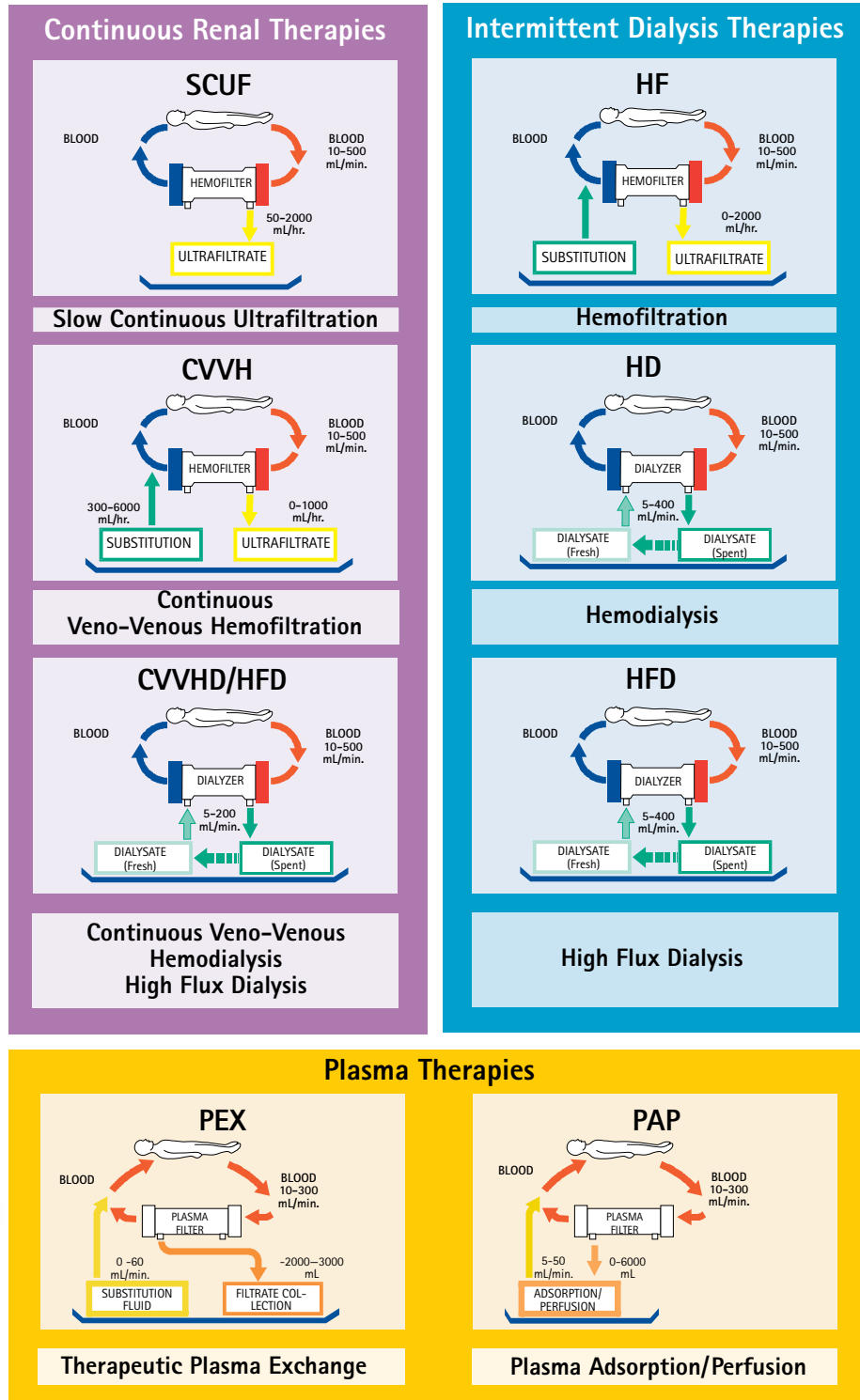
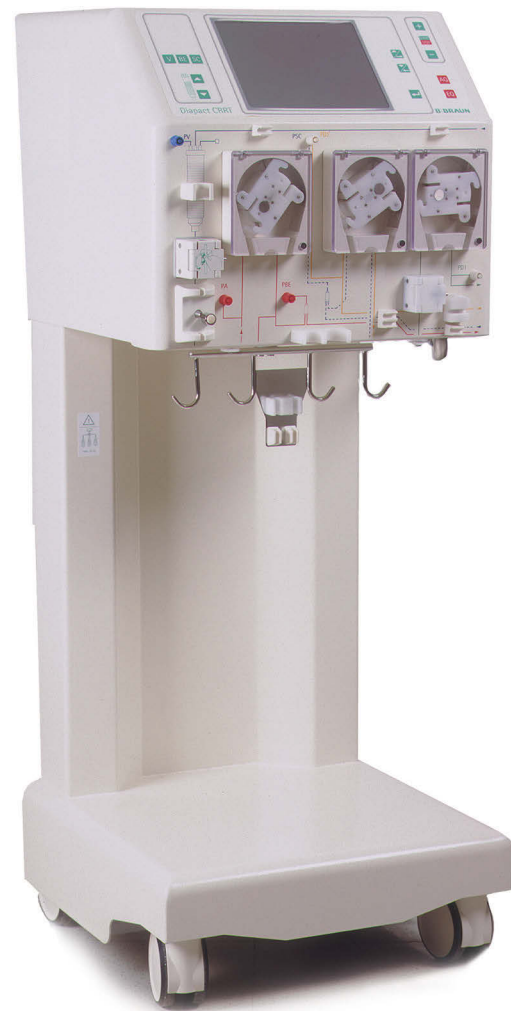
# Versatility and Multifunctionality

The Diapact CRRT System can be used to perform the following therapies:

Continuous Renal Therapies

Intermittent Dialysis Therapies

Plasma Therapies\*



\* Plasma Therapy is optional.

# Innovative Technical Features



**Integrated Warmer**  
Warming of infusion and dialysate fluids is sometimes an important requirement for ICU patients which can be satisfied by means of the integrated plate warmer.



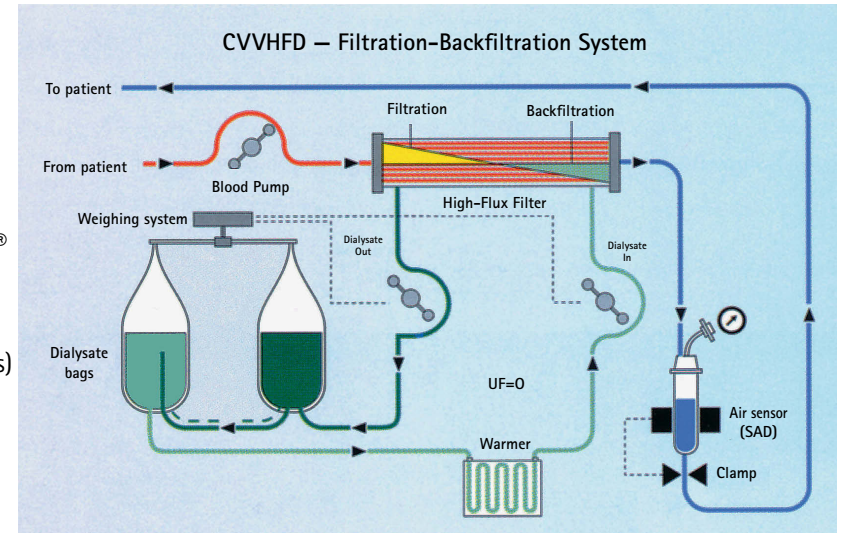
**Single Weighing System**  
In the Diapact® CRRT System, the solution and ultrafiltrate bags are connected to a single load cell. The simplicity of this weighing system reduces the possibility of error and increases accuracy.



**Battery Backup (available option)**  
Diapact® CRRT System can be equipped with an optional battery pack which allows the system to continue treatment, even when the patient is moved or during a power outage.

## Filtration/ Backfiltration System

Using a high flux filter at low UF rates produces backfiltration at the dialysate inlet of the filter. This backfiltrated fluid serves as a substitution fluid. The patient's fluid balance is maintained by the Diapact® CRRT System's single weigh scale. The result of this therapy (CVVHFD – Continuous Veno-Venous High Flux Dialysis) is a combination of convective and diffusive clearances combined with the middle molecule clearance capability of the high flux filter.



Reference  
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Lonnemann G., Bechstein M., Linnenweber S., Burg M., Koch KM.: Tumor necrosis factor-alpha during continuous high-flux hemodialysis in sepsis with acute renal failure. *Kidney Int Suppl*. Nov; 72:S84-7, 1999

Ronco C., Brendoan A., Crespaldi C., Feriani M., LA Greca G.: Continuous High Flux Dialysis (CHF): A New Form of Continuous Renal Replacement Therapy in Intensive Care Patients. *Proc. 3rd Int. Satel. Symposium on ARF, Halkidiki* 1993