bellavista 1000e
Optimal patient comfort
Sometimes bigger is simply better …

With customisable software solutions, the decision how to effectively use the bellavista 1000e is completely in the clinician’s hands, a practical and unique advantage of the bellavista family.

FEATURES:
• ICU ventilator with 17.3-inch glass touchscreen, full high-definition screen resolution
• Care solutions for premature neonates to adults
• Adaptive Ventilation Mode
• High Flow Oxygen Therapy
• Expanded noninvasive functions
• Lung Recruitment Tool
• Esophageal Pressure Monitoring
• Battery time three-hours minimum

The display on the bellavista 1000e leads the way towards a unique user experience. That’s because the bellavista 1000e from imtmedical features an easy-to-read, easy-to-use, high-resolution 17.3-inch glass touchscreen, making it simple to view parameters and waveforms even in complex and challenging situations. Clinicians will find the capacitive touchscreen interface is intuitive and natural right from the start, delivering an excellent user experience. Performing both invasive and noninvasive ventilation, the bellavista 1000e is powerful, flexible and reliable in the intensive care unit (ICU) and intensive monitoring care, for patients ranging from neonates to adults.

VENTILATION FEATURES

AVM
Adaptive Ventilation Mode (AVM) is a smart ventilation mode that considerably reduces the number of ventilation settings required. By constantly measuring lung mechanics, AVM adapts breath by breath to the patient’s needs, whether the patient is being ventilated or breathing spontaneously. AVM always calculates the optimal ventilation pattern at the lowest possible ventilation pressure and supports patients safely from intubation to extubation.

HFOT
High Flow Oxygen Therapy (HFOT) is a type of therapy that is able, in combination with an actively humidified tubing system, to effectively improve the oxygenation of patients while enhancing patient comfort. This is achieved by high flow rates that build up a positive pressure in the nasopharyngeal space. In contrast to conventional, noninvasive types of ventilation, patients can drink, eat and speak while undergoing HFOT.

LRT
The Lung Recruitment Tool (LRT) is an automated manoeuvre that provides the clinician with all the necessary information for lung recruitment in a reliable, reproducible and simple way. In a first step, measurements are taken in order to find out whether a patient’s lung is recruitable. If that is the case, collapsed alveoli or lung areas can be reopened in a second step.
Customisable software
The bellavista 1000e offers additional options depending on the field of application. The Neonatal advanced option, for example, is specifically geared to the requirements of the smallest and most sensitive patients and integrates all the extended, particularly gentle, ventilation modes.

Accessories
bellavista ventilators offer a wide range of accessories, such as a vertically adjustable trolley or custom diagnostic packages, to enhance the efficiency and effectiveness of care.

"An outstanding user experience due to a brilliant, high-resolution display."

Optimizing workflow and patient interaction

AnimatedLung
AnimatedLung is a dynamic tool that visualises the mechanical state of a patient’s lung. An easily comprehensible graphic display helps to detect at a glance any changes in lung compliance or resistance, as well as the patient’s spontaneous activity.

Advanced Synchrony
Automated tools save a clinician time and ensure optimal ventilation. We offer three automated tools to help the clinician—and patients. auto.sync relieves the patient of a fixed manual expiratory setting and optimises the synchronisation of a patient during spontaneous breathing. auto.rise adapts and optimises the pressure rise time (ramp) by performing continuous breath analysis while simultaneously avoiding pressure peaks. In addition, our fully automatic adaptive leak compensation system, auto.leak, reliably compensates for inspiratory and expiratory leaks up to 120 L/min.

The versatile solution
### Parameters and Specifications

**Patient type:** Adult, Pediatric, Neonatal

**Areas of application:** Life-sustaining ventilation, intensive care unit (ICU), intensive monitoring care (IMC), emergency room (ER), intra-hospital transfer

**Ventilation modes:**
- **Pressure-controlled**
  - CPAP, P–P/C, PC–SIMV, PSV, bilevel, APRV, S, S/T, T
- **Flow pattern**
  - Square, 55% decelerating, decelerating
- **Adaptive mode**
- **Non-invasive modes**
- **Apnea warning**
  - P–AC, V–AC–SIMV
- **Bellows modes**
  - DualVent, DayNight, MaskFit
- **Baseline modes**
  - PSV, Baud backup
- **Bellows modes**
  - HFPEF 2-250 L/min Adult/Pediatric, 1-60 L/min Neonatal
- **Oxygen therapy**
  - HFOT 2-80 L/min Adult/Pediatric, 1-60 L/min Neonatal

**Leak compensation:**
- Automatic leak compensation
- Automatic inspiratory/expiratory leak compensation

**Graphs:**
- Pressure, Flow, Volume, ATC, SpO2, etCO2

**Loops:**
- Pressure/Volume, Pressure/Flow, Volume/Flow, Volumetric CO2

**Monitoring:**
- 160 online parameters
- Trending: 7-day trend, 1-year parameter trending

**Breathing manoeuvres:**
- Lung Recruitment Tool: Manual breath, configurable
- Sigh function, Hold Inspiration, Hold Expiration, NIF (Negative Inspiration Force), V trapped , P0.1 (occlusion pressure), Auto-PEEP

**Weaning protocol:** VentSummary

**Options:**
- Neonatal Advanced, Esophageal Pressure Monitoring
- Nebuliser: Internal, pneumatic

**Interfaces:**
- 2 × RS 232, Ethernet, 2 × USB, nurse call, CO2, SpO2, bellavista bus
- Additional pressure measurement: PAux (internal)

**Dimensions:**
- 260 mm/10.2” W x 440 mm/17.32” H x 250 mm/9.84” D

**Technical specifications:**

**Parameter**
- Peak inspiratory flow
- Inspiratory pressure, MAP
- PSV Level
- Total volume
- Inspiratory time
- Respiratory rate
- I:E ratio
- Inspiratory trigger
- Expiratory trigger
- Rise time

**Specification**
- 260 L/min
- 2–100 mbar
- 0–25 mbar
- 250–250 mL Adult/Pediatric, 2–250 mL Neonatal
- 0.1–10 s
- 1–100 breaths per minute Adult/Pediatric; 1–150 breaths per minute Neonatal
- 1:99 – 100:1
- 0.1–20 L/min, pressure 0.1–15 mbar, Off
- 220–300 mmHg (332–462 kPa), 0%–100%
- 21.75–101.5 psi, 0–110 L/min
- 14.8 kg
- 100–240 V AC ± 20% / 50–60 Hz, low-voltage

**Details:**
- Life-supporting ventilation, intensive care unit (ICU), intensive monitoring care (IMC), emergency room (ER), intra-hospital transfer

**Dimensions:**
- 440 mm/17.32” W x 250 mm/9.84” H x 360 mm/14.18” D
- 1170 – 1320 mm/46.06–51.96”

**Technical specifications:**

**Parameter**
- Leak compensation
- Tube compensation
- Monitoring
- Breathing manoeuvres
- Weaning protocol
- Options
- Interfaces
- Additional pressure measurement

**Specification**
- Auto-leak, automatic inspiratory/expiratory leak compensation
- Pressure, Flow, Volume, ATC, SpO2, etCO2
- Monitoring: 160 online parameters
- Trending: 7-day trend, 1-year parameter trending
- Lung Recruitment Tool: Manual breath, configurable
- Sigh function, Hold Inspiration, Hold Expiration, NIF (Negative Inspiration Force), V trapped , P0.1 (occlusion pressure), Auto-PEEP
- Neonatal Advanced, Esophageal Pressure Monitoring
- Internal, pneumatic
- Pressure, Flow, Volume, ATC, SpO2, etCO2

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