

Capiox[®] NX19 Oxygenator

with UltraPrime[™] Technology

Smaller. And more powerful.¹



 **TERUMO**



Smaller. And more powerful.

The Capiiox® NX19 oxygenator with UltraPrime™ Technology is our smallest, most advanced full-size adult oxygenator to date. Building on Terumo's oxygenator legacy, the Capiiox® NX19 oxygenator features high gas transfer utilizing new proprietary hollow fiber, enhanced gaseous microemboli (GME) removal technology, and a highly efficient heat exchanger that delivers the standard of safety² and performance that you trust from Terumo.

By uniquely combining materials and technologies engineered to deliver ultra performance, the Capiiox® NX19 oxygenator is everything you expect in a full-size oxygenator with the benefit of the lowest prime volume available³.

**Ultra performance.
No compromise.™**

UltraPrime™ Technology

Optimized for outstanding outcomes.

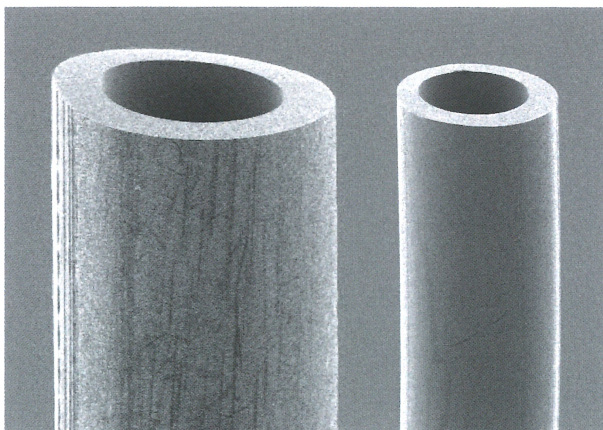
Terumo's UltraPrime™ technology is a combination of materials and technologies to further reduce oxygenator priming volume without giving up functionality and performance or modifying clinical technique.

Smaller hollow fiber with high efficiency

Hollow fiber is the heart of the oxygenator. With decades of experience of in-house hollow fiber development and manufacturing, Terumo now created a smaller hollow fiber with higher efficiency.

This innovative hollow fiber – woven in a unique pattern – provides low priming volume and surface area reduction while delivering high gas exchange performance in combination with a lower transmembrane pressure drop.

- **Lower priming volume**
 - Minimizes hemodilution – resulting in fewer red blood cell (RBC) transfusions, which are associated with infection, ischemic postoperative morbidity, longer hospital stays, and higher hospital costs⁴
 - Maintains higher hematocrit – potentially reducing acute kidney injury (AKI)^{5,6}
- **Less foreign surface area**
 - Reduces risk of inflammatory reaction⁷



Standard hollow fiber

Capiox® NX19
hollow fiber

Highly efficient heat exchange

Terumo's choice of polymer material and small capillary design increases performance in warming and cooling.³ Clinicians can be confident in the heat exchanger's efficiency with the benefit of low prime in a smaller device.

Innovative air removal technology

Plastic heat exchangers retain air bubbles in the spaces between the heat exchange layers. Leveraging our own hollow fiber technology, Terumo has developed a new patent-pending pre-heat-exchanger air removal technology. This technology in combination with our original self-venting technology and Prime Assist™ feature ensures excellent GME removal.

- **Pre-heat-exchanger air removal technology**
 - Removes air and prevents it from becoming trapped in the heat exchanger – reducing the potential for inflammatory reactions⁸
- **Proven self-venting technology and integrated arterial filter**
 - Provides the safety² of arterial filtration with less foreign surface area and no added prime volume – simplifying the circuit and assuring that the oxygenator is fully primed
- **Prime Assist™ feature**
 - Enables easier prime – efficiently removing air without tapping and manipulation

Reducing Primary Risks of Cardiopulmonary Bypass Surgery

Hemodilution

*"Excessive hemodilution during cardiopulmonary bypass (CBP) is associated with an increased rate of red blood cell (RBC) transfusion and acute kidney injury (AKI). Minimization of the oxygenator priming volume is a measure to contain hemodilution."*⁵

Systemic Inflammatory Response

*"Cardiac Surgery using cardiopulmonary bypass (CPB) provokes a systemic inflammatory response. This is mainly triggered by contact activation of blood by artificial surfaces of the extracorporeal circuit. ... In its extreme form this inflammatory response may be associated with the development of the systemic inflammatory response syndrome (SIRS) that can often lead to major organ dysfunction (MODs) and death."*⁷

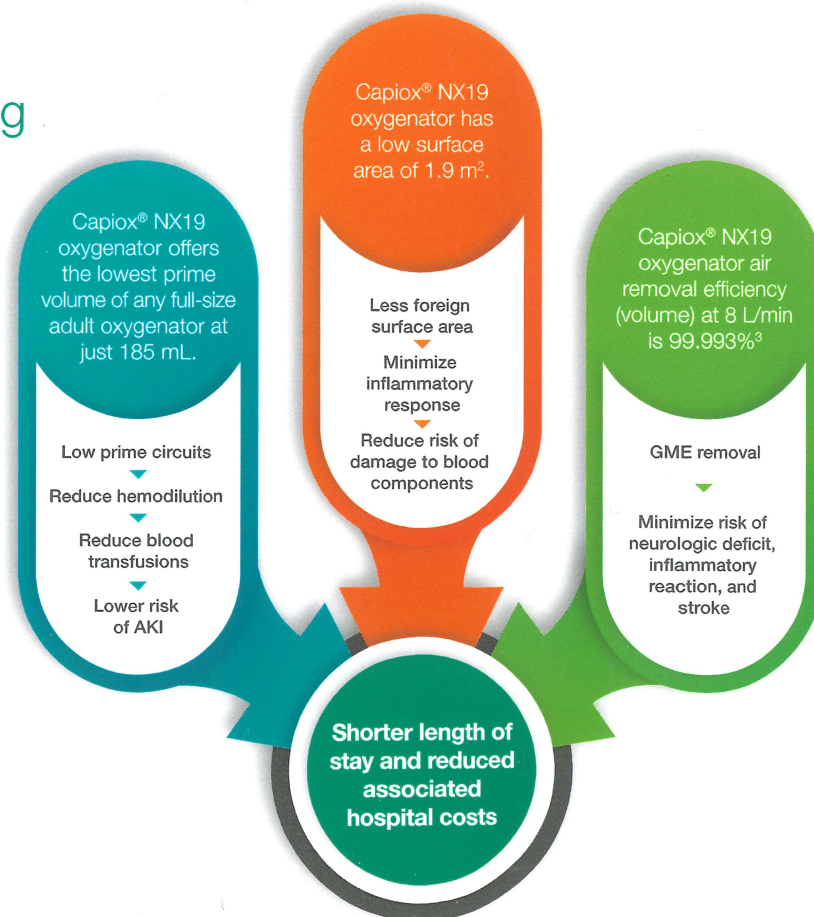
Clinical evidence supports lower prime circuits, less foreign surface area and gaseous microemboli (GME) removal are leading contributors to optimal patient care and reduced hospital expenditure.^{7,8,9,10}

Gaseous Microemboli (GME)

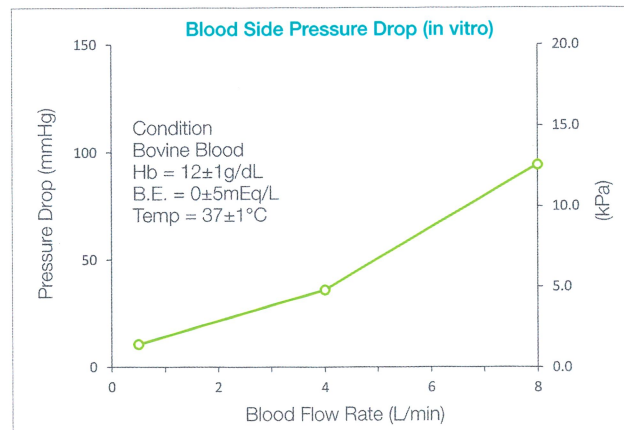
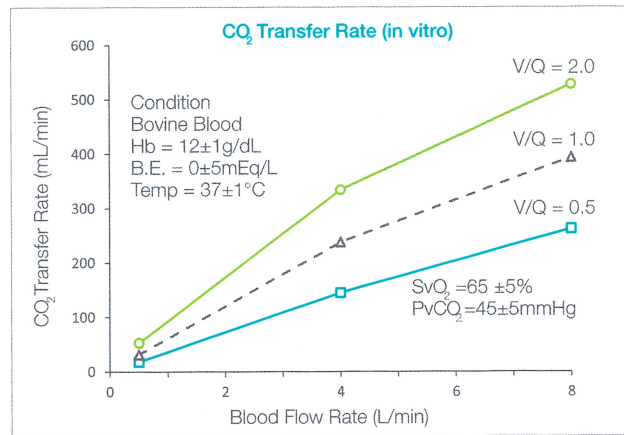
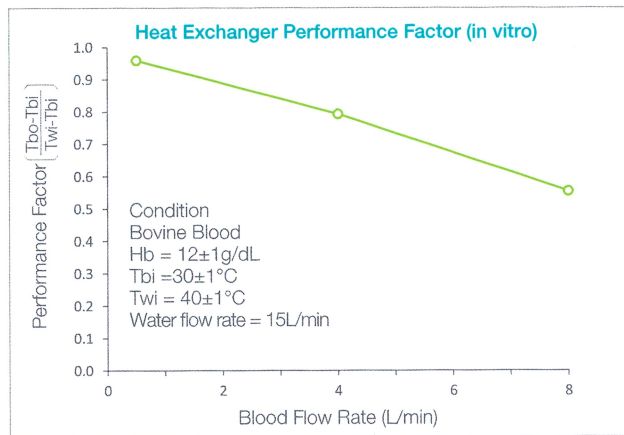
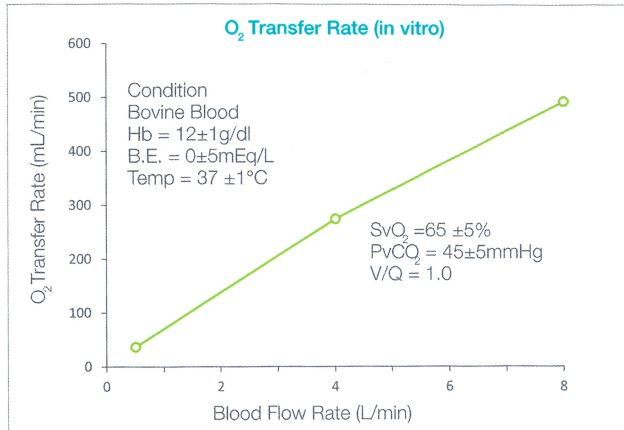
*"The consequences of microemboli, microbubbles, is underrecognized and usually overlooked in daily practice. ... Micro bubbles originate mainly in extracorporeal lines and devices, such as cardiopulmonary bypass... The micro bubble obstructs blood flow in the capillary, thus causing tissue ischemia, followed by inflammatory response and complement activation."*⁸

*"The incidence of cognitive dysfunction at 1 week following cardiac surgery is approximately twice that of noncardiac surgery. In addition to patient morbidity, adverse cerebral outcome is associated with increased mortality, prolonged hospitalization, and excessive use of intermediate or long-term care facilities."*⁸

Terumo links oxygenator performance to improving clinical outcomes



Performance Data



Specifications

CAPIOX® NX19 Oxygenator Module

Component	Specifications	
Housing	Material	Polycarbonate
Fibers	Material	Microporous Polypropylene
	Surface area	Approx. 1.9 m ²
Arterial filter	Material	Polyester screen type
	Pore size	32 μm
	Surface area	360 cm ²
Heat exchanger	Material	Polyethylene Terephthalate (PET)
	Surface area	Approx. 0.43 m ²
Blood flow range	Min.	2.0 L/min (or 0.5 L/min for up to 2 hours)
	Max.	8.0 L/min
Priming volume (static)		185 mL ± 10%
Blood inlet port (from pump)		3/8" (9.5 mm)
Blood outlet port		3/8" (9.5 mm)
Cardioplegia port		1/4" (6.4 mm)
Gas inlet port		1/4" (6.4 mm)
Gas outlet port		5/16" (7.9 mm)
Water ports		1/2" (12.7 mm)
		Hansen quick connect fitting
Maximum pressure	Blood inlet	1,000 mmHg (133 kPa) (1.36 kgf/cm ²)
	Water inlet	1,470 mmHg (196 kPa) (28 PSI) (2 kgf/cm ²)

CAPIOX® Hardshell Reservoir

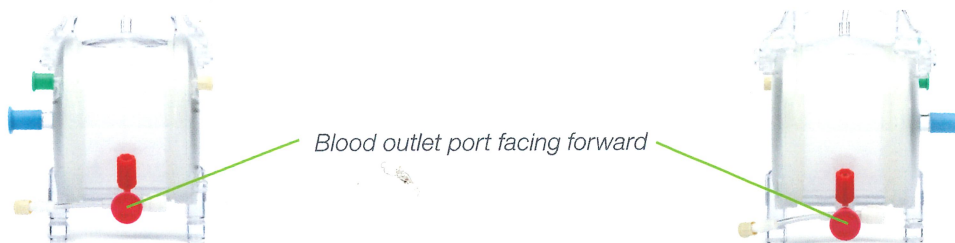
Component	Specifications	
Housing	Material	Polycarbonate
Blood flow range	Min.	2.0 L/min (or 0.5 L/min for up to 2 hours)
	Max.	8.0 L/min
Cardiotomy inlet	Max.	5.0 L/min
Combined flow	Max.	8.0 L/min
Blood storage capacity		4,000 mL
Operating volume	Min.	150 mL
Venous filter	Material	Polyester screen type
	Pore size	47 μm
Cardiotomy filter	Material	Polyester depth type
Defoaming part	Material	Polyurethane foam
Venous blood inlet port		1/2" (12.7 mm) rotatable
Blood outlet port (to pump)		3/8" (9.5 mm)
Suction ports		six 1/4" (6.4 mm)
Vertical port to CR filter		3/8" (9.5 mm)
Quick prime port		1/4" (6.4 mm)
Vent port		1/4" (6.4 mm)
Auxiliary port		1/4"–3/8" (6.4 mm–9.5 mm)
Luer ports		- three filtered luer locks to cardiotomy filter
		- a non-filtered luer lock
		- two luer locks on venous inlet
Positive pressure relief valve		0 to 8 mmHg (1.1 kPa)
Maximum sustainable negative pressure in reservoir		-150 mmHg (-20 kPa)



Xcoating™ Surface Coating, Terumo Corporation's biocompatible amphiphilic polymer surface coating, is a standard feature on the Capiox® NX19 Oxygenator with UltraPrime™ Technology.

Ordering Information

Capiox® NX19 Oxygenator comes in two configurations. Place the blood outlet port facing forward as indicated in the photo. The blood inlet port orientation is (W)est – LEFT or (E)ast – RIGHT side.



Blood inlet port (W)est – LEFT

Blood inlet port (E)ast – RIGHT

Catalog #	Description	Units/Case
CAPIOX® NX19 Oxygenator with Integrated Arterial Filter and UltraPrime™ Technology		
3CX*NX19RW	Hollow fiber oxygenator with 4000 mL hardshell reservoir, "West" orientation	4
3CX*NX19RE	Hollow fiber oxygenator with 4000 mL hardshell reservoir, "East" orientation	4
3CX*NX19W	Hollow fiber oxygenator "West" orientation	4
3CX*NX19E	Hollow fiber oxygenator "East" orientation	4
Holders and Accessories for CAPIOX® NX Oxygenators		
XX*CXH15	Holder for CAPIOX® NX19 oxygenators	1
XX*CXH18	Holder for CAPIOX® NX19 oxygenators when separated from reservoir	1
XX*CXH18R	Holder for CAPIOX® NX19 oxygenators with hardshell reservoir, long arm	1
XX*XH032	Holder for CAPIOX® NX19 oxygenators with hardshell reservoir, short arm	1
CX*BP021	Thermistor wire, blue	10
CX*BP022	Thermistor wire, red	10

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6. Ranucci M et al. Acute kidney injury and hemodilution during cardiopulmonary bypass: a changing scenario. *Ann Thorac Surg.* 2015; 100:95-100.
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9. LaPar DJ et al. Blood product conservation is associated with improved outcomes and reduced costs after cardiac surgery. *J Thorac Cardiovasc Surg.* 2013; 145:796-803.
10. Murphy GS et al. Optimal perfusion during cardiopulmonary bypass: an evidence-based approach. *Anesth Analg.* 2009; 108:1394-1417.



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