

AnaConDa®



Training Manual

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Important user information

Important user information

The Training manual is an advanced technical description of the Sedana Medical AnaConDa® system. It is designed to complement the *Instructions for use* containing detailed descriptions of construction, usage, medical method and specifications.

Please carefully read the *Instructions for use* before using the AnaConDa®.

If you have any comments about this publication, please contact Sedana Medical AB.

Sale restrictions

U.S. federal law restricts this device to sale by or on the order of a physician.

Trademarks

AnaConDa® is a trademark owned by Sedana Medical AB.

In the following text AnaConDa® is referred to as "Anaconda".



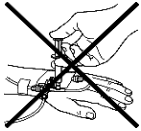
Copyright

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Important user information

Symbols

The following symbols are used in this manual and/or on the device itself.

Symbol	Description
WARNING!	Indicates a condition, which, if not followed exactly, may cause harm to the patient or user. Do not proceed until the instructions are clearly understood and all stated conditions are met.
CAUTION!	Indicates a condition, which, if not followed exactly, may cause harm to the product or equipment. Do not proceed until the instructions are clearly understood and all stated conditions are met.
	For single use only.
	Attention! Please consult the accompanying documents.
	Not for IV use.
Note!	Indicates information important for optimal use of the product.

Important user information

General Warnings, Cautions and Notes

- WARNING!** Do not use desflurane.
- WARNING!** Not for IV use.
- WARNING!** Do not use the Anaconda on patients with copious secretions.
- WARNING!** Only fill the Anaconda Syringe with room tempered isoflurane or sevoflurane.
- WARNING!** Position the Anaconda patient side connector lower than the Anaconda machine side connector to avoid accumulation of condensate.
- WARNING!** Ensure that the exhaust gases do not affect the ventilator parameters.
- WARNING!** When changing the patient's minute volume, always consider the syringe pump rate (according to chart 1).
- WARNING!** If the gas concentration level on the monitor changes unexpectedly, verify that there are no loose or leaking parts and that the surface of the miniature vaporizer is clean and free from defects. If the problem persists, replace the product.
- WARNING!** Position the Anaconda gas sampling port towards the patient and towards the ceiling.
- WARNING!** Always disconnect the gas monitor from the Anaconda when temporary leaving the Anaconda disconnected from the patient.
- WARNING!** Always consider the increased dead space when connecting extra items.
- WARNING!** Repeated nebulisations may increase the flow resistance of the Anaconda. Pay attention to the monitored breathing pressures and signs of occlusions.
- WARNING!** If the syringe is disconnected from the agent line always seal the agent line with the luer closure on the Anaconda gas monitor port.
- CAUTION!** Do not use the bolus function of the syringe pump when connected to Anaconda.

Important user information

- CAUTION!** The Anaconda and the Anaconda syringe are only compatible with isoflurane or sevoflurane.
- CAUTION!** Only use the syringe closure supplied with the Anaconda system since others may not be suited for isoflurane or sevoflurane.
- CAUTION!** If pressure support ventilation is used, monitor gas concentrations carefully.
- CAUTION!** If Anaconda is used in a circle system use fresh gas flow equal to or higher than the patient minute ventilation.
- Note!** Make sure that the Anaconda is replaced every 24 hours or when needed.
- Note!** The Fi concentration shown by the gas monitor is usually sampled at the end of inspiration when using the Anaconda. The agent concentration in the end of inspiration is low. This may show a lower Fi measured value displayed in the gas monitor. Read the Fe value which reflects the alveolar concentration.
- Note!** Before connecting to the patient, calculate the pumping rate (see chart 1).
- Note!** If the Anaconda is covered pay attention to the gas monitor for any leakage.
- Note!** Chart 1 is for guidance only. Patients may require different amount of anaesthetic agent subsequently the pump rate must be adjusted. The chart applies to isoflurane and sevoflurane.
- Note!** Mark the box on the syringe label with agent filled into the syringe and date of filling.
- Note!** Set the pressure alarm limit on the syringe pump on maximum.
- Note!** Save the red caps for use when disposing of the Anaconda.
- Note!** When disconnecting the Anaconda, always start with disconnecting the Y-piece first. When connecting the Anaconda always connect the ET-tube first.
- Note!** Anaconda has not been tested with NO.

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1 System description

The Anaconda is a recirculating anaesthetic gas system that uses no traditional valves, carbon dioxide absorber or vaporizer. It can be used together with almost any kind of ventilator.

1.1 Intended use

The Anaconda is intended for use by professionally trained medical personnel to administer and recirculate isoflurane and sevoflurane to patients. It is intended for single-patient use.

WARNING! Do not use desflurane.

WARNING! Do not use the Anaconda on patients with copious secretions.

Note! Anaconda has not been tested with NO.

1.2 System set up

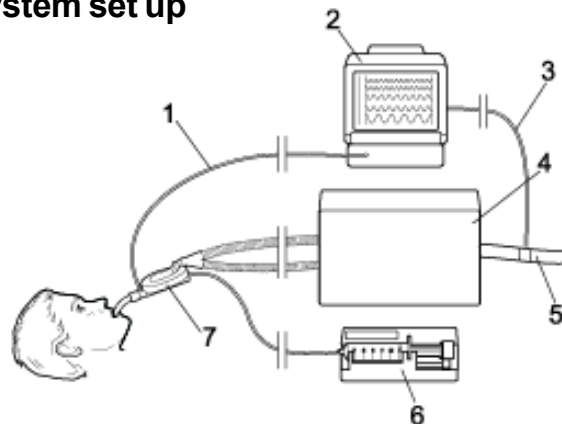


Figure 1. Anaconda system with additional equipment required

- | | |
|------------------------------|-----------------------|
| 1. Gas monitor sampling line | 5. Ventilator exhaust |
| 2. Gas monitor | 6. Syringe pump |
| 3. Gas monitor exhaust | 7. Anaconda housing |
| 4. Ventilator | |

1 System description

1.3 Included parts in the Anaconda system

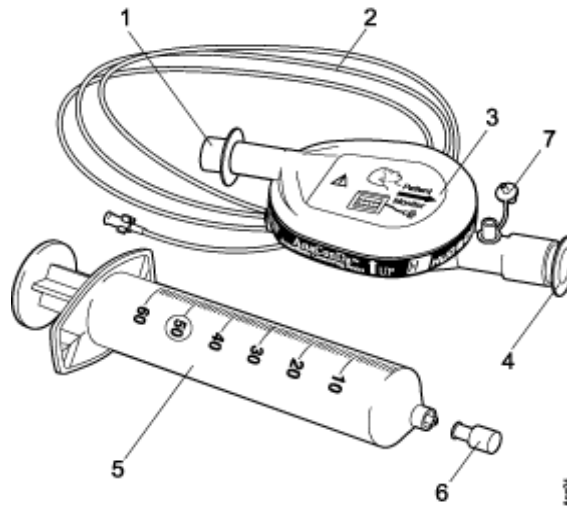


Figure 2. Included parts in the Anaconda system

- | | |
|----------------------|--------------------------------------|
| 1. Red sealing cap | 5. AnaConDa 50 ml Syringe |
| 2. Agent supply line | 6. Syringe closure |
| 3. Anaconda housing | 7. Gas monitor sampling port closure |
| 4. Red sealing cap | |

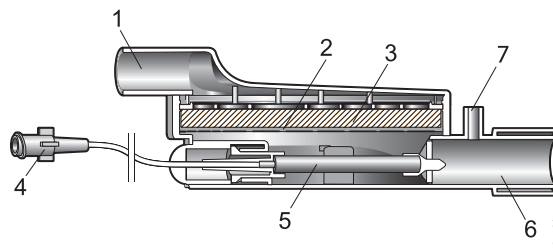


Figure 3. Cross section of the Anaconda housing

1. Ventilator/Anaesthesia machine side 15 mm male connector
2. Microorganism and particle filter
3. Conserving medium (active carbon)
4. Anaesthesia agent supply line with luer lock
5. Miniature vaporizer
6. Patient side 22 mm male/15 mm female connector
7. Gas monitor sampling port

1.3.1 Housing

The Anaconda housing is made of polypropylene. The lower part, closest to the patient is transparent to enable detection of accumulated secretions. The anaesthesia agent supply line is permanently attached to the Anaconda. The opposite end is equipped with a luer lock connector to enable connection to the Anaconda syringe.

1.3.2 AnaConDa® 50 ml Syringe

To contain and administer the anaesthetic agent, the Anaconda system includes an Anaconda 50 ml syringe that must be operated by a syringe pump. The syringe is only compatible with sevoflurane or isoflurane.

CAUTION! The Anaconda and the Anaconda syringe are only compatible with isoflurane or sevoflurane.

1 System description

1.4 Additional equipment required

The Anaconda requires the following additional equipment:

- Syringe pump.
- Anaesthetic gas monitor with sampling line and water trap if necessary.
- Ventilator or anaesthesia machine.
- Gas scavenging system.
- Filling Adapter (REF 26042, 26064)
- Ventilator exhaust line from gas monitor to scavenging system.

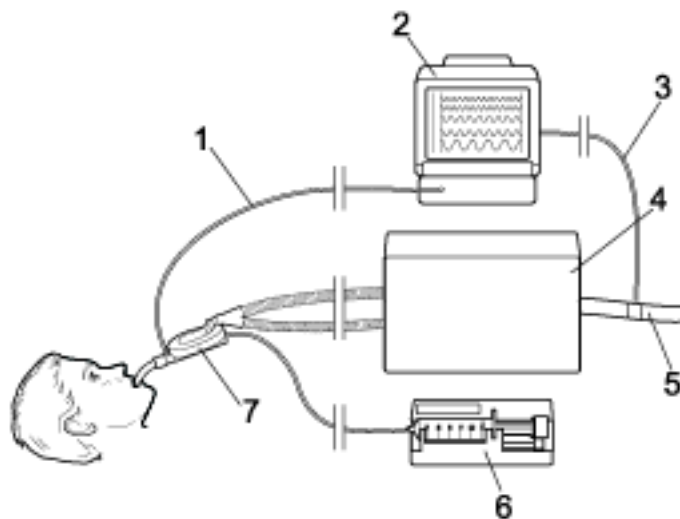


Figure 4. Anaconda system with additional equipment required

- | | |
|------------------------------|-----------------------|
| 1. Gas monitor sampling line | 5. Ventilator exhaust |
| 2. Gas monitor | 6. Syringe pump |
| 3. Gas monitor exhaust | 7. Anaconda housing |
| 4. Ventilator | |

1.4.1 Syringe pump

To operate the syringe containing the anaesthetic agent the Anaconda system requires a syringe pump.

The syringe pump shall:

- be able to use settings for *Sherwood Monoject 50 ml syringe* or *Beckton Dickenson Plastipac 50 ml syringe*. The Anaconda 50 ml syringe is compatible to these syringes. When using either of the above mentioned syringe settings in the syringe pump, the pump will only then dose the correct ml/hr set on the syringe pump.

1.4.2 Anaesthetic gas monitor with sampling line

A requirement for using the Anaconda system is to continuously monitor the anaesthetic gases with an anaesthesia gas monitor.

Set the monitor display to show Fi (Inspiratory Concentration) and Fe (Expiratory Concentration) values.

1.4.3 Ventilator or anaesthesia machine

The Anaconda system requires a ventilator or an anaesthesia machine with a ventilator. The unique solution of the Anaconda system makes CO₂ absorber and anaesthesia agent vaporizer unnecessary. This simplifies the use considerably and any ventilator capable of giving correct ventilation can be used even if it is not equipped with these components.

CAUTION! If pressure support ventilation is used, check gas concentrations carefully.

CAUTION! If Anaconda is used in a circle system use fresh gas flow equal to or higher than patient minute ventilation.

1 System description

1.4.4 Gas scavenging system

Although the Anaconda system recirculates most of the anaesthetic gases delivered to the patient, there is a certain flow of exhaust gases from the ventilator and the gas monitor. You should never drain off these gases without using a gas scavenging system.

If only a central evacuation is available such as a central vacuum source, this can be used together with a pressure equalization system. Contact your local technical department for help with scavenging system solutions.

2. Operation

2.1 Calculating the required agent flow rate

Example: A ventilation rate of 15 breaths per minute multiplied by the 500 ml tidal volume results in a ventilation rate of 7.5 l/min. The required pumping rate to achieve 0.5% concentration sevoflurane is 3.4 ml/hr as shown below (chart 1). This rate is multiplied by 2 (that is 6.8 ml/hr) to achieve 1% sevoflurane/isoflurane concentration. After approximately 1 hour when the patient has reached steady state, the flow rate should be reduced to maintenance flow rate. (Chart 1)

NOTE! Chart 1 is for guidance only. Patients may require different amount of anaesthetic agent subsequently the pump rate must be adjusted. The chart applies to isoflurane and sevoflurane.

Example: Required syringe pump flow rate to reach 0.5%.

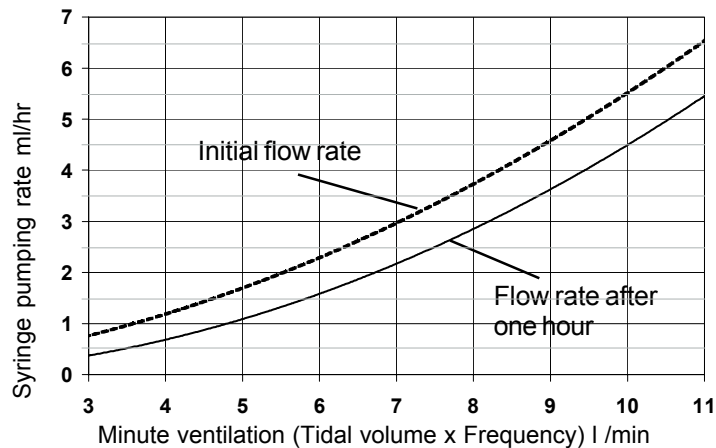


Chart 1:

1. Initial flow rate
2. Flow rate after one hour

2 Operation

2.2 Function control


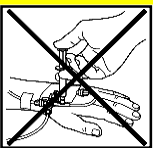
Always check the anaesthesia machine or ventilator for leakage according to existing clinical routines before setting up the Anaconda. Also check the Anaconda for damage.

2.3 Filling the syringe

To fill the syringe from bottles of anaesthetic agent, only use Sedana Medical luer bottle connecting adapters (section 5 ordering information).

The adapters have a built in pressure valve mounted to minimize the exposure of anaesthetic gases.

1. Attach the Filling Adaptor to the anaesthetic agent bottle. REF 26042 (Sevoflurane) REF 26064 (Isoflurane).
2. Fill the syringe with air and attach to the Filling Adapter. Push air into the bottle and fill the syringe.
3. Remove the syringe from the bottle and make sure that no air bubbles remain in the syringe.
4. Close the syringe with the syringe closure.
5. Label the syringe with the anaesthetic agent used (e.g. sevoflurane) and date of filling.

AnaConDa® Syringe		
NOT FOR IV USE		
<input type="checkbox"/> Isoflurane	<input type="checkbox"/> Sevoflurane	
Date: _____	Bed: _____	
SEDANA MEDICAL Sedana Medical AB Rissneleden 136 SE-174 57 Sundbyberg Sweden	CE 0086	
		EN Not for IV use DE Nicht für i.v. Gebrauch FR Ne pas utiliser en intraveineux ES No es para uso IntraVenoso IT Non per uso Intravenoso EL ΞΕ ΑΕΑ ΑΙ ΑΙΟΕΑΑΕΑ ×ΝΟC NL Niet voor intraveneus gebruik PT Não usar Intravenoso PL Nie stosować do•ylnie CS Není pro nitro•ilni pou•iti DA Ikke til IV brug FI Ei IV - käyttöön NO Ikke til IV bruk SV Ej för IV bruk
		9 560 963-R002

WARNING! Not for IV use.

WARNING! Only fill the syringe with room tempered isoflurane or sevoflurane.

CAUTION! Only use syringe closure supplied with the Anaconda system since other may not be suited for isoflurane or sevoflurane.

Note! Mark the box on the syringe label with agent filled into the syringe and date of filling.

2.4 To store filled syringes

A syringe filled with sevoflurane or isoflurane may be stored for seven (7) days providing it is kept in dark conditions and at room temperature.

2 Operation

2.5 Set-up

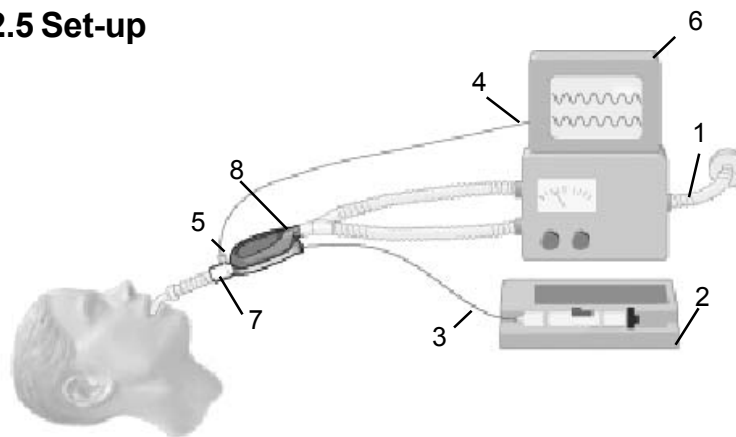
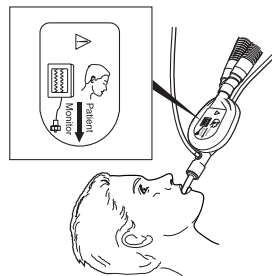


Figure 5.

1. Connect the exhaust from ventilator and gas monitor to the gas scavenging system (1).
2. Position the syringe in the syringe pump (2)
3. Connect the agent supply line to the syringe (3).
4. Take away the red cap on the ventilator side
5. Connect the gas monitor sampling line to the gas monitor (4) and to the Anaconda gas monitor sampling port (5).
6. Set the gas monitor display (6) for the anaesthetic agent used.
7. Set the gas monitor display to show Fi (Inspiratory Concentration) and Fe (Expiratory Concentration) values.
8. Remove the remaining red cap and connect the AnaConDa to the patient's endotracheal tube (7)
9. Connect the Anaconda to the breathing circuit Y-piece (8).

Figure 6.



10. Position the Anaconda, as indicated in fig. 6, with the gas monitor sampling port directed towards the patient and ceiling.
11. Check the system for leaks.

WARNING! Position the Anaconda patient side connector lower than the Anaconda machine side connector to avoid accumulation of condensate.

WARNING! Ensure that the exhaust gases do not affect the ventilator parameters.

WARNING! Position the Anaconda gas sampling port towards the patient and towards the ceiling.

Note! Set the pressure alarm limit on the syringe pump on maximum.

Note! If the Anaconda is covered, pay attention to the gas monitor for any leakage.

Note! Save the red caps for use when disposing of the Anaconda.

Note! Before connecting to the patient, calculate the pumping rate (see chart 1).

2.6 Priming the AnaConDa® system

Priming of the Anaconda can be done in two ways, either after Anaconda has been connected to the patient or before it is connected to the patient.

2.6.1 To prime Anaconda when it is connected to patient,

Follow the set-up procedure page 18, then:

1. Run the syringe pump at suitable priming rate (e.g. 25 ml/h). Approximately 1.2 ml liquid anaesthetic agent is needed to fill the agent supply line.
2. Carefully monitor the anaesthetic gas concentration on the gas monitor. As soon as gas concentration values are displayed, stop the syringe pump and reset it at suitable running rate (Chart 1).

2 Operation

CAUTION! Do not use the bolus function of the syringe pump when connected to the Anaconda.

Note! Chart 1 is for guidance only. Patients may require different amount of anaesthetic agent and subsequently the pumping rate must be adjusted. The chart applies for Isoflurane and Sevoflurane.

2.6.2 To prime the system before it is connected to the patient

1. Position the syringe in the syringe pump
2. Take away the red cap on the ventilator side of Anaconda.
3. Connect the agent supply line to the syringe
4. Connect the gas monitor sampling line to the gas monitor port on Anaconda.
5. Set the gas monitor to display inspiratory and expiratory concentration of the agent used.
6. Run the syringe at suitable priming rate (e.g. 25 ml/h). Approximately 1.2 ml liquid anaesthetic agent is needed to fill the agent supply line.
7. Carefully monitor the anaesthetic gas concentration.
8. When gas concentration values are displayed immediately stop the syringe pump.
9. Set the syringe pump at suitable induction rate according to chart 1 (upper curve).
10. Take away the red cap on the patient side of Anaconda.
11. Connect the Anaconda to the patient. First connect to the ET tube and then to the Y-piece.
12. Start the syringe pump. Carefully monitor the gas concentration.

2.7 Induction

During induction a higher pump rate is needed than during maintenance. Use the upper curve in Chart 1 to set appropriate pump rate for induction. Use this pump rate until desired concentration is reached.

Note! The F_i concentration shown by the gas monitor is usually sampled at the end of inspiration when using the Anaconda. The agent concentration in the end of inspiration is low. This may show a lower F_i measured value displayed in the gas monitor. Read the F_e value which reflects the alveolar concentration

2.8 Maintenance

When desired concentrations is reached, set the syringe pump for maintenance pump rate, Chart 1 lower curve.

WARNING! If the gas concentration level changes unexpectedly, verify that there are no loose or leaking parts and that the surface of the miniature vaporizer is clean and free from defects. If the problem persists, replace the product.

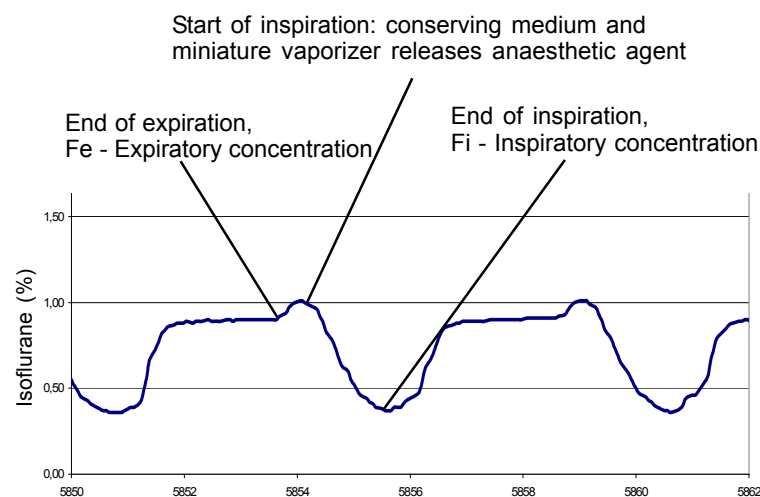
WARNING! When changing the patients' minute volume, always consider the syringe pump rate (according to chart 1).

2 Operation

2.9 Interpretation of the gas monitor values

The values for F_i (Inspiratory concentration) and F_e (Expiratory concentrations) are calculated by the gas monitor according to specific algorithms developed by the manufacturer. The expiratory value is normally measured at the end of expiration and the inspiratory at the end of inspiration. To determine when expiration and inspiration starts and ends, gas monitors normally use the CO_2 curve.

When using Anaconda the expiratory value measured by the gas monitor will be higher than the inspiratory value unlike when using a circle system. The reason is that when using the Anaconda most of the agent released from conserving medium and the miniature vaporizer during inspiration is released in the beginning of the inspiration. This release can be seen as a short peak on the gas monitor. At the end of the inspiration where a gas monitor measures the inspiratory concentration (F_i), the concentration will be lower than the measured expiratory concentration (F_e). During expiration the anaesthetic gas concentration increases and at the end of expiration where the expiratory concentration is measured, the concentration will reflect the alveolar concentration. Therefore to set desired concentration using the Anaconda, expired concentration (F_e) shall always be used.



2.10 Temporary disconnecting and reconnecting the AnaConDa®

2.10.1 Disconnecting

1. Take note of the syringe pump rate and end tidal concentration of anaesthetic agent as shown by the gas monitor.
2. Stop the syringe pump
3. Remove the gas monitor line and seal the gas sampling port with the gas monitor sampling port closure.
4. Remove the Anaconda by first disconnecting the ventilator side then the ET-tube.
5. Connect the red sealing caps to the Anaconda.

2.10.2 Reconnecting

1. Remove the read cap on the ventilator side of the Anaconda.
2. Connect the gas monitor and read the end tidal gas concentration in the gas monitor.
3. If the end tidal concentration is considered to be too high, keep the gas monitor connected and follow the gas concentration until it is acceptable.
4. Connect the Anaconda to the patient by first connecting on the ET-tube.
5. Set appropriate syringe pump rate and start the syringe pump.

WARNING! Always disconnect the gas monitor from the AnaConDa when temporary leaving the AnaConDa disconnected from the patient.

2.11 Changing the AnaConDa® Syringe

1. Stop the syringe pump and remove the empty syringe from the syringe pump.
2. Place the new Anaconda syringe in the syringe pump. For filling see 2.3.
3. Disconnect the Anaconda agent supply line from the empty syringe and immediately connect to the new syringe.

2 Operation

4. Connect the syringe closure to the empty syringe and dispose it according to hospital routines.
5. Start syringe pump.
6. Check the patient and agent concentration on the anaesthesia gas monitor.

WARNING! If the syringe is disconnected from the agent supply line, always seal the agent supply line with the gas monitor port closure.

2.12 Changing the AnaConDa®

1. Stop the syringe pump.
2. Disconnect the red cap on the ventilator side of a new Anaconda.
3. Transfer the side stream gas monitor line on the Anaconda and connect it to the new Anaconda. Close the gas sampling port, with the gas sampling port closure.
4. Disconnect the agent supply line from the Anaconda syringe and close it on the gas sampling port closure.
5. Connect the agent supply line to the syringe.
6. Start priming the Anaconda with the syringe pump. Approximately 1.2 mL is needed to fill the agent supply line.
7. As soon as gas concentration values are displayed, stop the syringe pump and reset it at suitable running rate (Chart 1).
8. Disconnect the old Anaconda and replace it with the new one.
9. Close the old Anaconda with the red sealing caps.
10. Start the syringe pump.

Note! When disconnecting the Anaconda, always start with disconnecting the Y-piece first. When connecting the Anaconda always connect the ET-tube first.

Note! Make sure that the Anaconda is exchanged every 24 hours or when needed.

2.13 Ending

1. Stop the syringe pump.
2. Remove the Anaconda from the patient. Disconnect from the Y-piece first.
3. Close the Anaconda connectors with the red sealing caps.
4. Disconnect the gas monitor. Close the gas monitor port with the gas sampling port closure.
5. Disconnect the agent supply line from the Anaconda syringe and close it on the gas sampling port closure.
6. Seal the syringe with the syringe closure.

WARNING! If the syringe is disconnected from the agent line always seal the agent line with the luer closure on the Anaconda gas monitor port.

2.14 Disposal

Dispose of the sealed Anaconda and the sealed syringe according to hospital routines.

2.15 Connecting a nebulizer to the AnaConDa[®] system

It is possible to connect jet nebulizer or ultrasonic nebulizers to the Anaconda system between the patient and the Anaconda. Ultrasonic nebulizers are preferable, as they do not add extra airflow. If a jet nebulizer is connected it may be necessary to increase the syringe pump rate, to compensate for the extra flow from the nebulizer. When connecting the nebulizer to the breathing circuit, hold an expiratory pause on the ventilator.

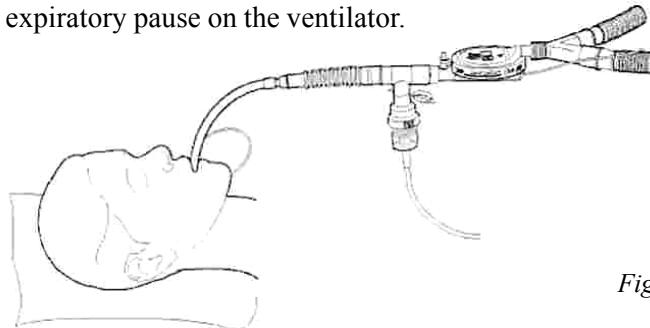


Figure 7

2 Operation

WARNING! Always consider the increased dead space when connecting extra items.

WARNING! Repeated nebulizations may increase the flow resistance of the Anaconda. Pay attention to the monitored breathing pressures and signs of occlusions.

2.16. Suctioning

There are several ways of doing this.

- Using a closed suction system or a swivel connector with suction port is preferable.
- If disconnecting from the ET-tube during suctioning, hold an expiratory pause on the ventilator.

WARNING! Always disconnect the gas monitor from the Anaconda when leaving the Anaconda disconnected from the patient.

3. Specifications

3.1 Anaesthetic agents

The Anaconda system is compatible only with isoflurane and sevoflurane.

3.2 Operating conditions

Minimum tidal volume required 350 ml.

3.3 Dimensions and weight

Anaconda housing

Height: 46 mm

Width: 76 mm

Length: 156 mm

Dead space: 100 ml

Weight: 50 g

Agent supply line

Length: 2200 mm

Outer diameter: 2 mm

Inner diameter: 0.5 mm

Syringe

Length: 161 mm

Outer diameter: 30 mm

Inner volume: 50 ml

Weight: 33 g

3.4 Storage

The product should be stored in clean, dry and dark conditions at room temperature.

3 Specifications

3.5 Residues after incineration

Product	Part	Material	Residues
Anaconda	Housing	Polypropylene	CO ₂ , H ₂ O
	Evaporator	Polypropylene	CO ₂ , H ₂ O
	Carbon filter	Carbon	CO ₂
	Microorganism and particle filter	Polypropylene	CO ₂ , H ₂ O
	Agent supply line	Polyethylene	CO ₂ , H ₂ O
	Agent supply line connectors	Polyethylene	CO ₂ , H ₂ O
	Hot melt adhesive	Olefin co-polymer	CO ₂ , H ₂ O
	Syringe closure	Polyethylene	CO ₂ , H ₂ O
	Locking plug	Polycarbonate	CO ₂ , H ₂ O
	Labels	Polypropylene	CO ₂ , H ₂ O
	Syringe	Barrel	Polypropylene
Plunger		Polypropylene	CO ₂ , H ₂ O
Piston		Rubber	CO ₂ , H ₂ O
Adhesive		Acrylic U. V.	CO ₂ , H ₂ O
Lubricant		Silicone	SiO ₂
Label		Polypropylene	CO ₂ , H ₂ O
Single unit packaging	Over layer	Paper	CO ₂ , H ₂ O
	Tray	Polyethylene Terephthalate	CO ₂ , H ₂ O

3.6 Performance

This performance information refers to typical values in laboratory tests.

Property	Performance	Test method
Resistance at 60L/min gas flow	2.5 cm H ₂ O (250 Pa)	ISO 9360:2000
Moisture loss at 0.75L x12 breaths/min	5 mg/l	ISO 9360:2000
Corresponding moisture output (calc.)	30 mg/l	
Moisture loss at 1.0 L x10 breaths/min	7 mg/l	ISO 9360:2000
Corresponding moisture output (calc.)	29 mg/l	

4 Troubleshooting

4. Troubleshooting

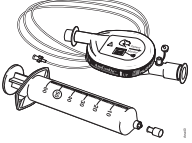

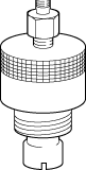
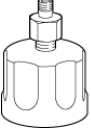

Please first carefully read the *Instructions for use*.

Problem	Solution
<p>The anaesthetic gas concentration value, displayed on the monitor does not increase although the pump has been pumping more than 1.5-2 ml of anaesthetic agent.</p>	<p>Check that the monitor is correctly connected to the system. The point where the gas is monitored is between the patient and the Anaconda.</p> <p>If side stream measurement is used, check that the gas-monitor sampling line is connected properly to the gas monitor sampling port and points towards the patient and ceiling.</p> <p>Check for air bubbles in the syringe and the connected agent supply line.</p>

Problem	Solution
<p>After the steady state has been reached, the anaesthetic gas concentration value displayed on the monitor decreases, although the syringe pump settings have not been changed.</p>	<p>Check the monitor connection for leakage.</p> <p>Check that the gas monitor sampling port points towards the patient.</p> <p>Check that the patient side connector is positioned lower than the machine side connector.</p> <p>If there is water, disconnect the Anaconda and empty the housing and position the Anaconda correctly once again.</p>
<p>After a while the ventilator pressure gauge indicates a marked increase in the system pressure peak.</p>	<p>Check that the gas monitor sampling port points towards the patient.</p> <p>Check that the patient side connector is positioned lower than the machine side connector.</p> <p>If there is water, disconnect the Anaconda and empty the housing and position the Anaconda correctly once again.</p>

5 Ordering information

5. Ordering information

	Ref No	Item	Quantity
	26000	Anaconda system (Anaconda with syringe)	6
	26022	Anaconda syringe 50 ml	15
	26042	Filling adapter 26042 sevoflurane	1
	26064	Filling adapter 26064 isoflurane and sevoflurane	1
	3 000 010	Training manual	1