

**TECHNOLOGY SAVING LIVES**



**TM-12**  
**PC-BASED WIRELESS**  
**12-LEAD EKG**

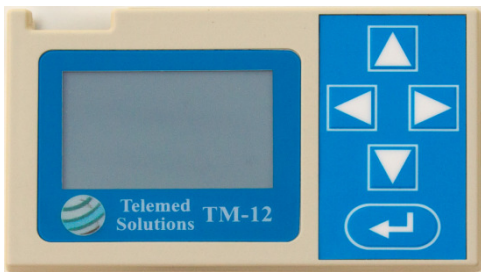


**Telemed  
Solutions**

*Technology Saving Lives*

# THE TM-12 FEATURES WIRELESS TECHNOLOGY, CLINICAL RELIABILITY, AND LAPTOP PORTABILITY

The TM-12 is a PC based 12-Lead EKG system that wirelessly streams ECG data from the patient to your personal computer. The process is simple: perform the patient hookup, input patient data into the software, and then start the analysis. Our system uses the Glasgow 12-Lead algorithm to output fully interpretive ECG statements. Reports include Global Measurements, Individual Lead Measurements and Diagnostic Interpretation. All the heavy lifting is done for you, just review and print.



## PRODUCT INCLUDES

- TM-12 Wireless Acquisition Device
- CardioVu Interpretation Software with Glasgow Analysis Program
- TM-BT Bluetooth Dongle
- 10-Lead Patient Cable
- 10 pc Sure-Lock electrode clips
- Carrying Case

## STREAMS ECG WIRELESSLY FROM THE PATIENT TO YOUR COMPUTER

- Wireless technology allows more patient comfort which results in a higher quality ECG signal and less artifact
- Uses Bluetooth wireless protocol, designed specifically for patient monitoring applications
- Wireless radio gets up to 100 feet of signal range
- Fewer cables means freedom of movement and a safer environment
- “Holter-size” acquisition device weighs only 4.2 oz. with batteries
- No bulky carts to store or push around

## GET RELIABLE AND ACCURATE DIAGNOSIS FROM THE GLASGOW ANALYSIS PROGRAM

- Over 30 years of development in a clinical environment and continues to be enhanced
- Is based on careful scientific research which has been the subject of numerous publications describing unique approaches to ECG analysis
- Provides automated interpretation of ECGs
- Can be used in pediatric as well as adult ECG interpretation
- Provides automatic centralized Minnesota coding (the internationally agreed standard for epidemiological studies and clinical trials)
- Designed with an emphasis toward high specificity and high sensitivity for ECG abnormalities

Glasgow has many unique features including:

- Use of clinical diagnosis (optional)
- Use of drug therapy (optional)
- Extensive use of age and sex based criteria
- Use of race based criteria
- Use of longer diagnostic statements with reasons for diagnosis
- Meets all the IEC 60601-2-51 requirements
- Displays pacemaker spikes on screen
- Produces over 900 clinical statements



## OPTIONAL COMPUTER (ADDED COST)

### DELL INSPIRON 15R LAPTOP

- Windows® 7 Home Premium, 64-Bit
- 3.1 GHz Intel® Core™ i5-3210M CPU
- 6 GB Dual Channel DDR3 1600MHz
- 500GB 5400 RPM SATA Hard Drive
- 15.6" HD (720p) LED Display
- Intel® HD Graphics 4000
- 8x Tray Load CD/DVD Burner

### MICROSOFT SURFACE PRO

- Windows® 8 Pro 64-Bit
- 1.7 GHz Intel® Core 3™ i5-3317-U CPU
- 4 GB RAM (DDR3 SDRAM)
- 128 GB Solid State Hard Drive
- 10.6" HD (1080p) Full HD Display
- Intel® HD Graphics 4000
- Touch Cover Keyboard

## GET WEB, PHONE, OR EMAIL SUPPORT WITHIN MINUTES



- Choose your preferred method of support: Remote system access via Internet, phone, or email
- Enjoy a 18-month warranty on Acquisition Device, Bluetooth Dongle, and Software
- Free software upgrades for 1 year
- Work with an expertly trained support specialist best suited for your issue
- 100% Money Back Guarantee (In the first 30 Days)

## EASY-TO-USE SOFTWARE MAKES TESTS QUICK AND PAINLESS FOR YOUR STAFF



- EKG Tests can be performed, interpreted and printed in only minutes
- Full interpretation and measurement results from Glasgow (GRI) algorithm
- Email reports to a physician's phone
- Prints to standard LaserJet office printers (no need for thermal paper)
- Optional PDF export, to make reports paperless and portable
- Patient Management System uses the powerful Microsoft SQL 2012 database to store patient records
- Takes advantage of Microsoft Windows® 7/8 multi-threading and dual core processing technology

## MULTIPLE HOOKUP MODALITIES ALLOW TESTS THAT FIT YOUR SPECIFIC NEEDS



- Device works with two cable-types: 12 Channel (10 Wire), 3-Channel (7 wire)
- Simply attach the appropriate cable, and the device automatically switches to that modality
- 12-Channel modality: For a true 12-Lead ECG acquisition
- 3-Channel (7-wire) modality: For those more comfortable with a VCG hookup

## MINIMUM HARDWARE SPECIFICATIONS



- Microsoft Windows Vista, 7 or 8
- Intel Core2 Duo 2.67 GHz CPU (or higher)
- 4 GB DDR3 RAM
- 5 GB available hard drive space
- Monitor w/ resolution of 1024 x 768 (or higher)
- TM-BT Bluetooth Dongle (comes with system)
- One available USB 2.0 or 3.0 port
- Internet access for email option

+ OWN PREMIUM EQUIPMENT WITHOUT PAYING PREMIUM PRICES

# GLASGOW INTERPRETIVE ALGORITHM

## Over 900 Adult & Pediatric Statements

### DOMINANT RHYTHM STATEMENTS

Sinus [rhythm, tachycardia, bradycardia, arrhythmia, tachycardia] with sinus arrhythmia, Sinus bradycardia with sinus arrhythmia, Atrial tachycardia, Atrial flutter, Atrial fibrillation, Junctional rhythm, Accelerated junctional rhythm, Junctional bradycardia, Irregular ectopic atrial rhythm, Irregular ectopic atrial tachycardia, Irregular ectopic atrial bradycardia, Marked sinus bradycardia, Accelerated idioventricular rhythm, ventricular tachycardia, ventricular flutter/fibrillation, Wide QRS tachycardia, A-V dissociation, Regular supraventricular rhythm, Irregular supraventricular rhythm, supraventricular tachycardia, Undetermined rhythm

### SUPPLEMENTARY RHYTHMS

With - PVCs, frequent PVCs, multifocal PVCs, frequent multifocal PVCs, interpolated PVCs, multifocal interpolated PVCs, paroxysmal idioventricular rhythm, non-sustained ventricular tachycardia, intermittent conduction defect, [rapid, uncontrolled, slow] ventricular response, 1st degree A-V block, 2nd degree A-V block, [Mobitz I (Wenckebach), Mobitz II]), 2:1 A-V block, 3:1 A-V block, 4:1 A-V block, high degree A-V block, varying 2nd degree A-V block, complete A-V block, 2nd degree (Mobitz II) SA block, bigeminal PACs, bigeminal PVCs, fusion complexes, unclassified aberrant complexes, undetermined ectopic complexes aberrant ventricular conduction, aberrantly conducted supraventricular complexes, undetermined irregularity

### MEASUREMENTS

Short PR interval, Prolonged QT interval, Short QT interval, Prolonged QTc Low QRS voltages in limb leads, Low QRS voltages in precordial leads, Generalized Low QRS voltages, Borderline high QRS voltage – probable normal variant, consider acute ischemia or hyperkalemia, consider hyperkalemia

### STATEMENTS

Consider Acute STEMI, Acute MI / Ischemia, Extreme Tachycardia, Extreme Bradycardia, Significant Arrhythmia, Prolonged QTc, Left Ventricular Hypertrophy, Right Ventricular Hypertrophy, Biventricular Hypertrophy, Inferior infarct, Lateral infarct, Anteroseptal infarct, Anterior infarct, Posterior, Septal infarct, Anterior infarct, Tall R V1-V2, Anterolateral infarct, Anterior and inferior myocardial infarction (MIX), extensive (Acute MI)

### CONDUCTION DEFECTS

Right bundle branch block (RBBB), Left bundle branch block (LBBB), RBBB with RAD - possible left posterior fascicular block, RBBB with Left anterior fascicular block (LAFB), Incomplete RBBB /rSr' V1, Intra ventricular conduction defect (IVCD), Possible LAFB, Wolff-Parkinson-White pattern – probable [left posterolateral, left posteroseptal, Left anterolateral, right posteroseptal, midseptal, Anteroseptal, right anterolateral, right posterolateral] accessory pathway

### ECG FINDINGS

Normal ECG, Normal ECG except for rate, Normal ECG except for rhythm, Normal ECG based on available leads, Borderline ECG, Abnormal ECG, Indeterminate axis, Leftward axis, Left axis deviation, QRS axis leftward for age, Rightward axis, Right axis deviation, Left anterior fascicular block, Possible left anterior fascicular block, Possible left posterior fascicular block, Severe right axis deviation Marked ST Elevation – consider Brugada pattern

### PACING

Atrial Pacing, Demand Atrial Pacing, Ventricular pacing, A-V Sequential Pacemaker, Demand pacing

**Call or Email us for a Demonstration**

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