

## **Comparison of Three New Generation Pulse Oximeters in a Medical Intensive Care Unit.**

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### **Introduction**

Pulse oximeters (SpO<sub>2</sub>) must be accurate and new generation oximeters must be evaluated before adoption in the critical care setting. New Generation technology is available either in stand-alone devices or integrated in bedside multi-parameter monitors. SpO<sub>2</sub> measures from new generation pulse oximeters, whether stand alone or integrated, will agree with blood CO-Oximetry.

### **Methods**

100 critically ill patients were studied. Patients were compared for accuracy of SpO<sub>2</sub> and pulse rate (PR) readings from two standalone new generation oximeters (Nellcor Oximax N-600 and Masimo SET Radical and an integrated oximeters (Philips Intellivue Fast SpO<sub>2</sub>) to measured SaO<sub>2</sub> via CO-Oximetry and ECG-derived heart rate (ECG-HR). Adhesive digit sensors were applied to the same hand and shielded to prevent optical cross-talk. Following sensor placement SpO<sub>2</sub>, PR and ECG-HR was recorded under stable conditions prior to and following arterial blood gas (ABG) sampling for clinical care. ABGs were immediately analyzed, including CO-Oximetry. Number of occurrences where PR from each oximeters was >5, 10 and 25 bpm different than ECG-HR were compared.

### **Result**

100 measurements were obtained with each patient studied once. Bias and precision for each oximeter vs. measured SaO<sub>2</sub> were calculated using Bland-Altman method. Bias +/- precision (%) for Nellcor, Masimo and Philips were 0.18 +/-2.25, 0.31 +/- 1.98 +/- 2.8, respectively. There were no statistical differences in bias between the three systems. A statistically significant difference in precision observed between Philips and Masimo (p=0.008). No unsuccessful measurements occurred. Mean SaO<sub>2</sub> (%) was 95 +/- 2.7 (range 80-99). No statistical differences in PR and ECG-HR between devices noted.

### **Conclusions**

We conclude that all three new generation pulse oximeters devices evaluated in this study demonstrated comparable bias and precision. There were little clinical differences observed between devices.