M191-1

Sakamoto Cardiotocograph Simulator II

- Weight/about 10kg
- Accessories/Fetus(for palpation), Simulation doppler transducer(×1), Simulation labor transducer (×1), Doppler transducer fixing belt(×1), Labor transducer fixing belt (×1), Baby powder, Fetal cushion, Simulation recording paper (4 types), Storage bag
- Case size/W100×D42×H39cm

Renewal

For training on labor monitoring equipment

※The Sakamoto cardiotocograph simulator 2 can be used for nurse and midwife training.
Please note that the simulator does not provide a written or audio record of the heart rate.

Features

The baby is at 10 months Four different presentation positions can be used for training

Fetal

Internal structure

Can be installed in 4 directions

1 Measure

Practical measurements can be carried out on the body which resembles the 39th week of pregnancy.

Abdominal girth measurement

Uterine measurement

2 Palpate

The abdomen is soft so that training in palpation of the fetus is possible. The accessory fetus for palpation has a built-in skull and pelvis.

Palpating the position of the uterine fundus and the fetus

Check the orientation of the fetus

Palpating the fetus on the symphysis pubis

3 Practise attaching

Practice can be carried out by securing the Doppler transducer and labor pain transducer belts. You can look at the box to check if the belts are attached correctly.

Belt attachment practice

4 Listen to heartbeat

Practice listening to the fetal heartbeat at 4 points (No.1breech presentation, No.2 breech presentation, No.1 occiput presentation and No.2 occiput presentation).

Front Back

The heartbeat can be heard coming from the special box, and there are switches at the back for setting the heartrate and alarm.

The setting can be changed at a single touch to normal (120BPM), tachycardiac (>180 BPM) or bradycardiac (<110 BPM) heart rate. The alarm switch is set to ON,the alarm sounds when the Doppler transducer is incorrectly attached.

5 Look at wave patterns

Four types of wave pattern (normal, tachycardiac, bradycardiac or transient bradycardiac) can be practised.

Recording paper which is the same size as actual paper can be held in the hand while practising. (The recording paper is already printed on.)