STEP ONE

IDENTIFY THE VAPORIZER’S STYLE AND WRITE THE CORRESPONDING CHARACTER IN SPACE 1.

SPACE 1

(3) TEC 3 STYLE (125ML CAPACITY)

(4) TEC 4 STYLE

(5) TEC 5 STYLE

(3) TEC 3 STYLE (125ML CAPACITY)

(O) OHIO STYLE

(D) DRAGER

(P) PENLON

(4) TEC 4 STYLE (TALLER BODY THAN A TEC 3. 250ML CAPACITY)

(5) TEC 5 STYLE
STEP TWO

IDENTIFY THE AGENT TYPE AND WRITE THE CORRESPONDING CHARACTER IN SPACE 2.

SPACE 2

ISOFLURANE

SEVOFLURANE

(S)

(I)

USE ONLY ISOFLURANE

USE ONLY SEVOFLURANE

FILL ONLY WITH SEVOFLURANE

FILL ONLY WITH SEVOFLURANE
STEP THREE

IDENTIFY HOW THE VAPORIZER IS FILLED AND WRITE THE CORRESPONDING CHARACTER IN SPACE 3.

SPACE 3

(F)
FUNNEL FILL
(REMOVE CAP TO FILL)

(K)
KEY FILL
(NEED BOTTLE ADAPTER)
STEP FOUR

IDENTIFY HOW THE VAPORIZER MOUNTS TO THE MACHINE AND WRITE THE CORRESPONDING CHARACTER IN SPACE 4.*

(C) CAGE MOUNT

(T) SELECT-A-TEC MOUNT

(H) HOSE BARB MOUNT

TEC 4 - CAGE MOUNT (CAGE MOUNT IS SIMILAR ON TEC 5)

TEC 3 - CAGE MOUNT (CAGE MOUNT IS SIMILAR ON EX III, OHIO, DRAGER AND PENLON)

TEC 4 - SELECT-A-TEC MOUNT (SELECT-A-TEC MOUNT UTILIZES A LOCKING LEVER THAT IS SIMILAR ON THE TEC 5)

TEC 4 - HOSE BARB MOUNT (HOSE BARB MOUNT IS SIMILAR ON TEC 5)

TEC 4 - HOSE BARB MOUNT

OHIO - HOSE BARB MOUNT

*If you encounter any other mounting configurations, contact the Anesthesia and Monitoring Support line at 866.825.6076 for assistance.
QUICK REFERENCE GUIDE

SPACE 1
Tec 3 Style (3) • EX III STYLE (X) • Tec 4 Style (4) • Tec 5 Style (5) • Ohio (O)
Drager (D) • Penlon (P)

SPACE 2
Isoflurane (I) • Sevoflurane (S)

SPACE 3
Funnel or well fill (F) • Key or pin fill (K)

SPACE 4
Cage mount (C) • Select-a-Tec mount (T) • Hose barb mount (H)

ENTER COMPLETED KEY CODE BELOW:

(Key code must be entered on order to ensure that the customer receives the correct vaporizer.)