"I saw and was conquered. I was not able to defeat the Masimo SET® pulse oximeter using all the motion and low pulse tricks I know. This technology is most impressive and should be available in all oximeters.”

John Severinghaus, M.D.
Professor of Anesthesiology, Emeritus
University of California, San Francisco

Masimo continues to innovate and in 2019 introduced improved SpO2 accuracy with RD SET® sensors of 1.5% $A_{RMS}$* to provide clinicians with greater confidence when monitoring oxygen status during motion and no-motion conditions. Previous studies utilized sensors with SpO2 accuracy of 3% $A_{RMS}$ during motion.

Over 100 independent and objective studies have shown that Masimo SET® outperforms other pulse oximetry technologies.¹

> On a post-surgical unit it was found that:

- Rescue calls and ICU transfers were reduced by 65% and 48%, respectively, after the implementation of continuous surveillance monitoring with Masimo SET®.²
- Over five years, clinicians achieved their goal of zero preventable deaths or brain damage due to opioids.³
- Over ten years, clinicians maintained a 50% reduction in unplanned transfers and a 60% reduction in rescue events, despite increases in patient acuity and occupancy.⁴

Performance During Motion and Low Perfusion

> Masimo SET® had 3% missed true alarms and 5% false alarms versus 43% and 28%, respectively, when using competitor technology.

Performance During Motion and Low Perfusion


Results shown are calculated by combining sensitivity and specificity outcomes of machine-generated and volunteer-generated motion.

* $A_{RMS}$ accuracy is a statistical calculation of the difference between device measurements and reference measurements. Approximately two-thirds of the device measurements fell within ± $A_{RMS}$ of the reference measurements in a controlled study.
The Performance of Masimo SET®

> In a PACU, Masimo SET® had a greater than 50% reduction in false alarms compared to other pulse oximetry technology.5

> In a study of 122,738 infants, critical congenital heart disease (CCHD) screening sensitivity increased from 77% to 93% with the combined use of Masimo SET® and clinical assessment.6

> In a study of 39,821 infants, CCHD screening sensitivity increased from 63% with physical exam alone to 83% with physical exam and Masimo SET® pulse oximetry.7

CCHD Screening

> When combined with clinical assessment, Masimo SET® improved critical congenital heart disease (CCHD) screening sensitivity to 93%.

Retinopathy of Prematurity

> Masimo SET®, coupled with changes in clinical practice, led to a significant reduction in rates of severe retinopathy of prematurity (ROP).

Improved Critical Congenital Heart Disease Screening Sensitivity vs. Clinical Assessment Alone

![Graph showing improved screening sensitivity](image)

Severe Retinopathy of Prematurity Rate

![Graph showing reduced retinopathy rates](image)


Caution: Federal (USA) law restricts this device to sale by or on the order of a physician. See instructions for use for full prescribing information, including indications, contraindications, warnings, and precautions.

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5 Published clinical studies on pulse oximetry and the benefits of Masimo SET® can be found on our website at http://www.masimo.com. Comparative studies include independent and objective studies which are comprised of abstracts presented at scientific meetings and peer-reviewed journal articles. 6 Taenzer AH et al. Impact of pulse oximetry surveillance on rescue events and intensive care unit transfers: a before-and-after concurrence study. Anesthesiology 2010;112(2):282-287.