

Sprague Rappaport Stethoscope
Instructions for Accessories

PRINTED: 4-COLOUR CMYK
FINISHED SIZE: W210 mm x H230 mm



C69 M0 Y100 K0
(from PANTONE 361C)



C0 M0 Y0 K100
PROCESS BLACK



SCORE LINE



TRIM

Sprague Rappaport Stethoscope

Instructions for Accessories

*Instructions for using the different accessories on the
Sprague Rappaport are included in this leaflet.*



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NOTE: ALL SPOT COLOURS HAVE BEEN CONVERTED TO CMYK PROCESS

210 mm

105 mm

105 mm



Instructions for Accessories

Sprague Rappaport Stethoscope

Because of its versatility, this stethoscope is an excellent choice for medical students, pediatricians and cardiologists. With the flexibility of 5 different chest piece attachments, the stethoscope is highly useful in the detection of a wide range of heart and lung sounds in adults, children and infants. The ability to detect high, medium and low frequencies is achieved by using the different accessories.

Features

- Five stethoscopes in one
- Soft sealing ear tips
- Lifetime limited warranty
- Accessory pouch with extra ear tips, diaphragms and bells
- Adult and pediatric diaphragm assemblies

Diaphragm

Use the diaphragm to detect faint high pitched respiratory sounds and components of certain cardiac sounds. The diaphragm attenuates low pitched frequencies thereby making high pitched frequencies easier to recognise. To accommodate a range of patients, use the various sized diaphragms to better isolate the origin of sounds. Included are both child and adult sizes.

Bell

Use the bell to detect low frequency cardiac sounds such as first and second heart sounds. As with diaphragms, you can match the bell size to your patient to better locate the sound origin. For this reason, we provide three different sized bells: infant, child and adult.

Accessory Kit

- The accessory kit contains the following components:
- Spare adult and child plastic diaphragm
- Three bells (1 adult, 1 child & 1 infant)
- Two sets of ear tips (mushroom style and clear PVC)

How to Use a Sprague Rappaport Stethoscope

1) Adjust the angle with which the binaural metal tubes face forward in order to provide the best air seal to your ears. Adjustment may be necessary for comfort as well. Both comfort and air seal are important for you to hear at your best. With the binaurals in your ears gently rub your fingers together near the ear. Do you hear the rubbing sound easily? If you can you probably have an imperfect air seal. Readjust. If necessary you can slowly and carefully turn the angle of the binaural to allow the best fit. See item #2 below.

2) Try out ALL the different ear tips if you have choices. If you "can't hear anything" this is because of a poor air seal (see item #1 above) or because you have a poor ear tip fit. They are misaligned in your ear canals. The best ear tips are the ones which give the most comfort in your ears and give a good air seal.

3) All accessories on a Sprague Rappaport attach in the same way to the chest piece. You screw the part on or you screw the part off. Sometimes you will harmlessly disassemble a diaphragm assembly without completely removing it from the chest piece. If you only remove the outside bezel and the transparent disk just unscrew the flat diaphragm backing and reassemble the unit before putting it away in your accessory pouch. Your Sprague Rappaport will probably arrive with the large and the small diaphragm assemblies on the chest piece head. Most physicians prefer to replace the small diaphragm with the large bell.

4) Of the two attachments on the chest piece only one is "ON" at a time. To switch to the other side on any dual stethoscope or Sprague Rappaport stethoscope hold the chest piece stem and rotate the outer rotor one half turn (in either direction). You will hear or feel the click when the head turns over and the air hole in the rotor is aligned with the air hole in the attachment you are using.

5) The stethoscope can easily be folded and put into your lab coat pocket or left around your neck.

6) Characteristics and advantages of the various attachments:

Large Bell: Best for loudest and deepest sound. Routinely used to screen for S3, S4 and rumbles. Also used to listen for bruits and A-V malformations.

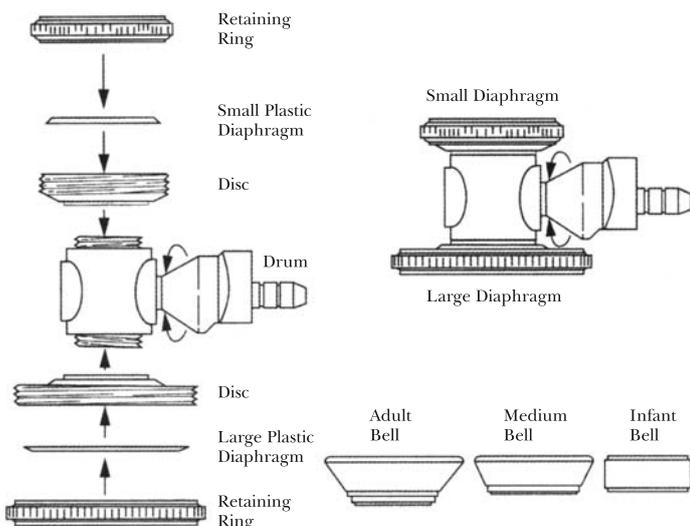
Medium Bell: For where the largest bell is too large; small children, cachectic patients, ocular bruit auscultation. Localises bruits better than the large bell.

Small Bell: For where the medium bell is too large. Localises bruits best.

Large Diaphragm: For routine auscultation of high-frequency sounds, especially in the presence of low-frequency sounds which would tend to mask them; various murmurs, breath sounds, bowel sounds. Also used for checking splitting of S1 and S2 and blood pressures though the large bell is sometimes more appropriate.

Small Diaphragm: Cuts out even more low-frequencies than the large diaphragm and so may provide more detail about high-frequency sounds in the presence of simultaneous low-frequency sounds. Also for use when the large diaphragm is too large, as with children and cachectic patients.

Disclaimer: This information sheet is not intended to replace professional instructions and training and should be used as a guide only.



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