

Pall Ultipor[®] 25

Breathing System Filter for Anaesthesia

Features

- Pleated hydrophobic membrane
- Validated for removal of Hepatitis C virus, HIV, Influenza A virus, *Mycobacterium tuberculosis*, *Staphylococcus aureus* and abnormal prion proteins
- 100% retentive for liquid-borne contaminants
- Retains natural rubber latex allergens in solutions and in airborne particles
- Individually integrity and efficiency tested
- Small volume

Benefits

- High efficiency patient protection against cross-contamination with human pathogens
- Extended circuit life
- Cost reduction
- Faster turn-around times
- Less medical waste
- Proven protection against latex contamination
- Range of applications

Product Features

 Effective microbial barrier: The pleated hydrophobic membrane provides effective protection against airborne and liquid-borne microorganisms. This assures protection against cross-contamination between patients in anaesthesia^{1,2,3}. The filter has been validated to retain *Mycobacterium tuberculosis*⁴, *Staphylococcus aureus*⁵, Hepatitis C virus², HIV⁶, infectious PrP^{SC} protein⁷, *Candida albicans*⁸, and Influenza A virus⁹.



- Additional humidification: Patient water loss is minimized in the US to a physiological level under conditions of semi-closed circle anaesthesia¹². In semi-open paediatric anaesthesia ventilation the Ultipor 25 increases instantly the humidity in the dry ventilation gases to a physiological level¹³.
- Hydrophobicity and retention of contaminated secretions^{2,5,6,14}. All Pall Breathing System Filters contain the proprietary Pall fine hydrophobic filter media. The Pall Ultipor 25 has been shown to withstand a water intrusion pressure (hydrophobicity) in excess of 70 cm of water column¹⁵.
- Latex safety: The Ultipor 25 filter is not made with natural rubber latex. It retains natural rubber latex allergens in liquids and contained in airborne particles^{16,17}.
- Low resistance: Unique pleated hydrophobic membrane assures low air flow resistance throughout clinical use when used according to the instructions for use.
- Small volume: Due to its small dead space, the Ultipor 25 can be used for adult and paediatric patients in anaesthesia. Filter volume is 35 mL^{13,18}.

Pall Ultipor 25 Performance

Pall Total Quality and Performance Guarantee

Each Pall Ultipor 25 Breathing System Filter is individually tested during manufacture for:

Filter Integrity - assuring housing and seal quality.

Filtration Efficiency - using a non-destructive test, assuring membrane quality.

Product Validation Certificate that is batch and customer specific can be provided that details testing and validation. This is the customer's guarantee of 100% reliability, performance in use and assurance of protection of breathing systems and equipment, patients and staff.

Specifications

Filter volume

35 mL

Liquid-borne bacterial/viral and latex allergen removal efficiency 100%

Airborne bacterial/viral removal efficiency > 99.999%

Resistance at 30 L/min Approximately 1.5 cm H₂O

Resistance at 60 L/min Approximately 3.5 cm H₂O

Connections (ISO tapers)

Patient side 15 mm ID 22 mm OD Breathing system side 22 mm ID 15 mm OD

Weight

26 g

Recommended use

Patient end use only: 24 hours max - single patient use only

Ordering Information

Reorder Code	Description	Packaging
BB25A	Pall Small Volume Breathing Filter	50 units per case
BB25AB	Pall Small Volume Breathing Filter	50 units per case
BB25ABN	Pall Small Volume Breathing Filter with 100° Elbow	50 units per case

All Pall BB25 filters are equipped with a gas monitoring port.

References

- 1. Association of Anaesthetists of Great Britain and Ireland. HIV and other blood borne viruses guidance for anaesthetists. January 1996 Update.
- 2. Lloyd G et al. Anaesthesia and Intensive Care 1997; 25: 235-8.
- 3. Purday J. Technic 1997; 63: 9-11.
- 4. Speight S et al. Centre for Applied Microbiology and Research, 1995.
- Rosales M & Dominguez V. 2nd International Conference on Prevention of Infection, Nice, France, 4-5th May 1992.
- 6. Lloyd G et al. Centre for Applied Microbiology and Research, 1997.
- 7. Capewell A. Scientific and Laboratory Services Report Pall Europe 2004.
- 8. Scott DHT et al. Anaesthesia 2010; 65: 670-3.
- 9. Heuer J et al. GMS Hyg Infect Control 8(1): Doc09 (2013).
- 10. Hübner et al. (2011) GMS Krankenhaushygiene Interdisziplinär Vol. 6(1).
- 11. Dubler et al. Acta Anaesthesiol Scand. 2016 Oct;60(9):1251-60.
- 12. Kendall K & Wilkins K. Scientific and Laboratory Services Report, Pall Europe 1996.
- 13. Monrigal JP & Granry JC. Paediatric Anaesthesia 1997; 7: 295-300.
- 14. Hedley RM & Allt-Graham J. Anaesthesia 1992; 47: 414-20
- 15. Cann C et al. Anaesthesia 2006; 61: 492-7
- Barbara J et al. Oral presentation, SFAR Congress, Paris, France, 21-24 September 2000.w
- 17. Chen Z & Capewell A. Scientific and Laboratory Services Report, Pall Europe 2000.
- 18. Jensen A. Journal fur Anasthesie und Intensivbehandlung 2006; No.2:75

PALL Medical

Pall Corporate Headquarters

25 Harbor Park Drive Port Washington, NY 11050 USA Visit us on the Web www.pall.com/medical

International Offices

Pall Corporation has offices and plants throughout the world in locations such as: Argentina, Australia, Australia, Belgium, Brazil, Canada, China, France, Germany, India, Indonesia, Ireland, Italy, Japan, Korea, Malaysia, Mexico, the Netherlands, New Zealand, Norway, Poland, Puerto Rico, Russia, Singapore, South Africa, Spain, Sweden, Switzerland, Taiwan, Thailand, the United Kingdom, the United States and Venezuela. Distributors in all major industrial areas of the world.

The information provided in this literature was reviewed for accuracy at the time of publication. Product data may be subject to change without notice. For current information consult your local Pail distributor or contact Pail directly.

© 2019, Pall Europe. Pall, @) and Ultipor are trademarks of Pall Corporation. © indicates a registered trademark in the USA. Protect What Matters - Every Day is a service mark of Pall Corporation.