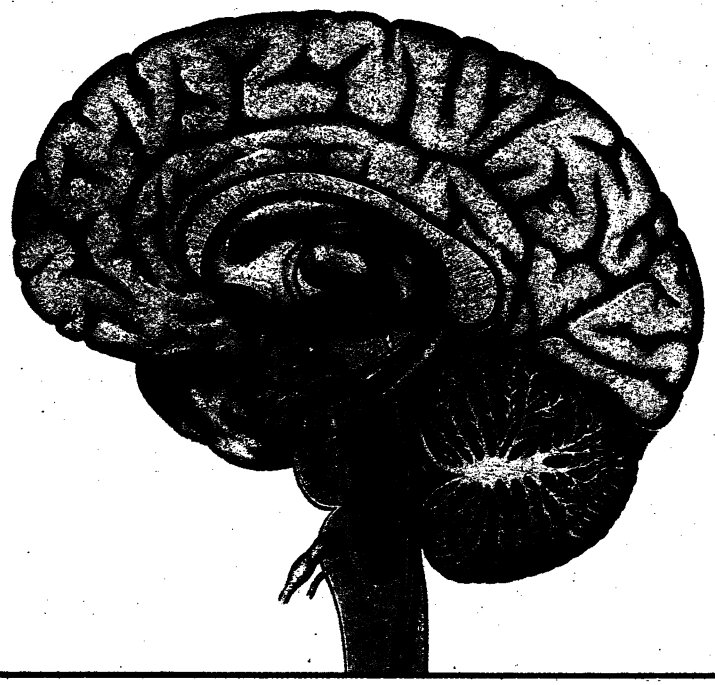
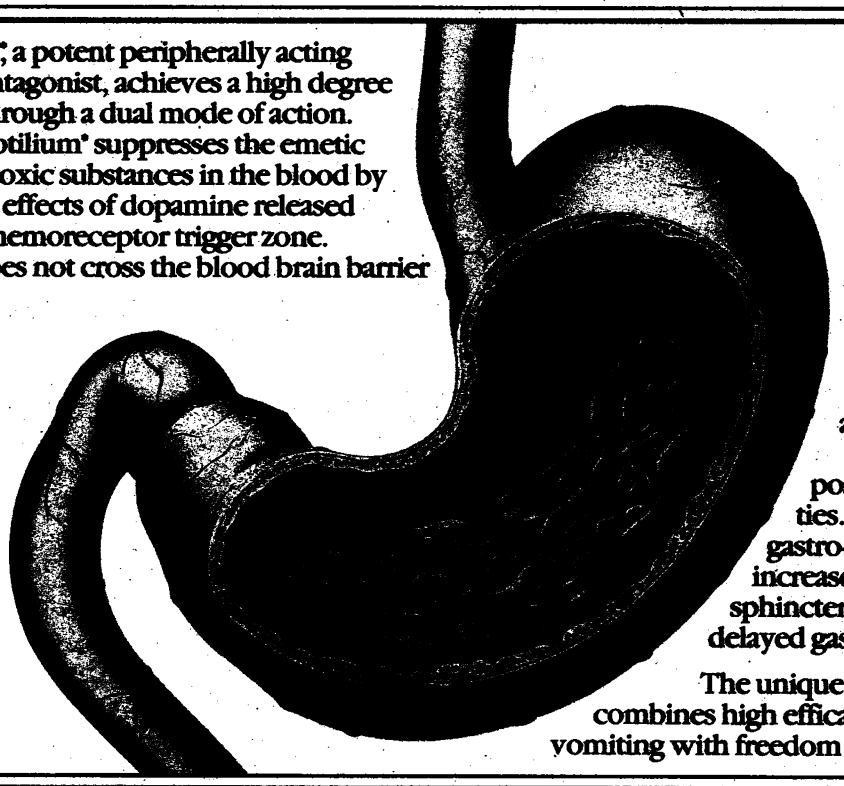


Motilium™
(domperidone)

controls nausea and vomiting without central effects

Motilium*, a potent peripherally acting dopamine antagonist, achieves a high degree of efficacy through a dual mode of action.

Firstly Motilium* suppresses the emetic response to toxic substances in the blood by blocking the effects of dopamine released within the chemoreceptor trigger zone. Motilium* does not cross the blood brain barrier



and therefore does not interfere with the nigrostriatal and mesolimbic systems.

Secondly Motilium* possesses gastrokinetic properties. Acting locally on the upper gastro-intestinal tract Motilium* increases lower oesophageal sphincter pressure and improves delayed gastric emptying.

The unique mode of action of Motilium* combines high efficacy in controlling nausea and vomiting with freedom from central side effects.

MOTILIUM® Prescribing Information

▼ **Presentation:** White tablets containing domperidone maleate equivalent to 10mg domperidone base. Sweet tasting, white suspension containing domperidone 1mg/ml. 2ml colourless ampoules each containing 5mg/ml domperidone. **Uses:** Adults: acute nausea and vomiting from any cause. Children: nausea and vomiting following cancer chemotherapy or irradiation only. **Dosage:** Adults: 10-20mg by mouth or 1-2 ampoules by IM or IV injection at 4-8 hourly intervals. Patients requiring intravenous MOTILIUM* who are also receiving concomitant cytotoxic chemotherapy or who are predisposed to hypokalaemia or cardiac arrhythmias should receive an infusion diluted 1:10 with saline over 15-30 minutes. **Contra-indications, Warnings etc:** No specific contra-indications. MOTILIUM* produces a rise in serum prolactin; however the clinical relevance of this has not been established. Although no teratogenic effects have been observed in animals, the safety of MOTILIUM* in pregnancy has not yet been established. **Product Licence Numbers:** Tablets 0242/0100, Injection 0242/0073, Suspension 0242/0077. **Basic NHS Cost:** 9p per 10mg tablet (ex 250 pack) Pack of 10 ampoules: £3.10 Bottle of 200ml suspension: £1.80 (Correct at time of printing).

Further information is available from:- **Janssen Pharmaceutical Limited,** Janssen House, Chapel Street, Marlow, Bucks. SL7 1ET. *Trademark © JPL/157/83

Tegretol®
carbamazepine BP

making epilepsy easier to live with

Tegretol®
Indications Epilepsy (grand mal and temporal lobe), trigeminal neuralgia. Dosage in epilepsy Use a gradually increasing dosage scheme, adjusting to patient's needs. Adults: 100-200mg once or twice daily, increasing slowly up to 800-1,200mg daily; in some cases 1,600mg daily may be necessary. Children: up to 1 year old, 100-200mg daily; aged 1-5 years, 200-400mg daily; aged 5-10 years, 400-600mg daily; aged 10-15 years, 600-1,000mg daily. It may be helpful to monitor plasma drug levels: optimum therapeutic range is 3-10μg/ml (13-42μmols/l). Dosage in trigeminal neuralgia Begin with small doses, using 100mg tablets or syrup, and increase gradually until satisfactory therapeutic response is obtained; 200mg 3-4 times daily is generally sufficient to maintain pain-free state. Side-effects Dizziness and diplopia (usually dose-dependent), less frequently drowsiness, dry mouth, diarrhoea, nausea and vomiting. Generalised erythematous rash, disappearing on cessation of therapy. Isolated reports of oedema, hyponatraemia, exfoliative dermatitis, leucopenia, thrombocytopenia, agranulocytosis, aplastic anaemia, cholestatic jaundice and acute renal failure. Blood count should be checked in early stages of treatment. Precautions Caution in patients taking oral anticoagulants or requiring oral contraception. In pregnancy, potential benefits of Tegretol must be weighed against potential hazards. Do not administer with, or within two weeks of cessation of, MAOI therapy. In rats treated with carbamazepine for two years, incidence of liver tumours increased (no evidence of significant bearing on the therapeutic use of the drug). Serum folic acid levels should be observed during anticonvulsant therapy. Contra-indications Previous drug sensitivity to Tegretol. Do not administer to patients with atrioventricular conduction abnormalities unless paced. Packs Tablets of 100mg (PL0001/5027) basic NHS price £2.99 per 100, £14.40 per 500; tablets of 200mg (PL0001/5028) £5.56 per 100, £26.78 per 500; tablets of 400mg (PL0001/0088) £10.92 per 100; syrup 100mg/5ml (PL0001/ 0050) £5.34 per 300ml bottle. Full prescribing information is available on request from Geigy Pharmaceuticals, Horsham, West Sussex.

Geigy

High on purity. Low on cost.

Wellcome purified insulins, Neusulin, Neuphane and Neulente cover the needs of the vast majority of diabetics providing smooth, prolonged and cost-effective control. These Wellcome Insulins (and Insulin Injection BP [purified]) are now manufactured in 100 unit presentations. All other Wellcome Insulins continue to be available.

Wellcome – committed as always to the service of diabetics and diabeticians – will also continue to provide the patient and doctor service items for which the company is well-known.

Neusulin*

Neutral Insulin Injection BP (purified) Wellcome

Neuphane*

Isophane Insulin Injection BP (purified) Wellcome

Neulente*

Insulin Zinc Suspension BP (purified) Wellcome

From March 1st, 1983

WELLCOME INSULINS 100

Prescribing Information

Uses *Management* of Diabetes mellitus. **Dosage and administration.** Dosage to be determined by the physician. Site of injection to be changed according to suitable routine. Avoid unintentional intravascular injection. *Neusulin, Insulin Injection BP:* Administered s.c., i.m. or i.v. S.c., onset of action within 30-60 minutes, duration 6-8 hours. I.m., onset is faster and duration is shorter. I.v. administration has fastest onset and shortest duration, usually reserved for investigational use or diabetic ketoacidosis. *Neuphane, Neulente:* Administered s.c. or i.m. *Not to be given i.v.* S.c., onset of action within 2 hours, duration (Neuphane) 20-24 hours, (Neulente) 24-28 hours. I.m., onset is faster and duration shorter. Mix well by gently inverting the vial several times before use. *Mixing:* Neusulin or Insulin Injection BP may be mixed in the syringe, on medical advice, with Neuphane or Neulente if required, *provided the mixture is injected immediately.* However, it is preferable to avoid mixing insulins of different pH. See data sheet for procedure. **Contra-indications** Hypoglycaemia. **Precautions** Dosage requirement may alter with variation of lifestyle, infection, pregnancy and with change in species, type or purity of insulin. Hypo- and hyperglycaemia may be enhanced by drugs which interact with insulin. Beta-blockers may affect insulin requirement and mask hypoglycaemia. MAO inhibitors may potentiate insulin. **Side-effects** Hypoglycaemia. Possible altered visual refraction. Transient local reactions at the site of injection. **Storage** Store at 2-8°C. *Do not freeze.* Avoid direct sunlight. **Presentation** Neusulin, Neuphane, Neulente and Insulin Injection BP (purified) Wellcome* are available as 100 units per ml, in vials of 10ml.

Basic NHS costs

Neusulin 100 units/ml PL3/0161 £5.70
Neuphane 100 units/ml PL3/0162 £6.15
Neulente 100 units/ml PL3/0171 £5.37
Insulin Injection BP 100 units/ml PL3/0165 £5.70

Further information is available on request.
Wellcome Medical Division
The Wellcome Foundation Ltd,
Crewe, Cheshire

*Trade Mark

Wellcome

THE WELLCOME CONTRIBUTION TO OPTIMAL CONTROL

responds rapidly to

new brufen 600

Ibuprofen B.P.

fast, dependable relief of

post-operative pain
post-episiotomy pain
dental pain
dysmenorrhoea
non-articular rheumatism
soft-tissue injuries

Prescribing Information. Presentation: Light-magenta, film-coated tablets containing 600 mg of Ibuprofen B.P. **Uses:** Rheumatoid arthritis (including Still's disease), ankylosing spondylitis, osteoarthrosis and other non-rheumatoid arthropathies. Non-articular rheumatic conditions such as capsulitis, bursitis, tendinitis, tenosynovitis, low back pain, soft tissue injuries. As an analgesic in mild to moderate pain. **Dosage** Adult: 1200 mg daily in divided doses; maintenance 600 to 1200 mg daily. In severe conditions, the dosage can be increased until the acute phase is under control. Total daily dose should not exceed 2400 mg. **Contra-indications:** Severe or active peptic ulceration. **Warnings:** Prescribe with caution in patients with asthma and those who have developed bronchospasm with other nonsteroidal agents. Avoid, if possible, during pregnancy. **Side-effects:** Dyspepsia, gastro-intestinal intolerance and bleeding; skin rashes. Less frequently, thrombocytopenia; rarely, toxic amblyopia. **Basic N.H.S. Price:** Brufen 600 100 pack £8.88 **Product Licence No:** Brufen 600 PL0014/0264. Brufen is a registered trade mark.

The Boots Company PLC Nottingham
Further information on new Brufen 600 is available on request.

just one tablet three times daily

Why 80% of GPs have

Selective, effective H_2 blockade

PRESCRIBING INFORMATION: DOSAGE AND ADMINISTRATION: THE USUAL ADULT DOSE IS ONE 150mg TABLET TWICE DAILY. IT IS NOT NECESSARY TO TIME THE DOSE IN RELATION TO MEALS. IN MOST CASES OF DUODENAL ULCER AND BENIGN GASTRIC ULCER, HEALING WILL OCCUR IN FOUR WEEKS. PATIENTS WITH A HISTORY OF RECURRENT ULCER MAY HAVE AN EXTENDED COURSE OF ONE TABLET DAILY AT BEDTIME. FOR REFLUX OESOPHAGITIS THE RECOMMENDED COURSE FOR ADULTS IS ONE TABLET TWICE DAILY FOR UP TO EIGHT WEEKS. **SIDE EFFECTS:** NO SERIOUS ADVERSE EFFECTS HAVE BEEN REPORTED IN PATIENTS TREATED WITH ZANTAC TABLETS. **PRECAUTIONS:** WHERE GASTRIC ULCER IS SUSPECTED, THE POSSIBILITY OF MALIGNANCY SHOULD BE EXCLUDED BEFORE THERAPY IS INSTITUTED. PATIENTS RECEIVING PROLONGED TREATMENT SHOULD BE EXAMINED PERIODICALLY. DOSAGE SHOULD BE REDUCED IN THE PRESENCE OF SEVERE RENAL IMPAIRMENT (SEE DATA SHEET). AS WITH ALL DRUGS, ZANTAC SHOULD BE USED DURING PREGNANCY AND NURSING ONLY IF STRICTLY NECESSARY.

already prescribed Zantac[1]

It's simple

In the treatment of peptic ulcer disease, Zantac effectively promotes ulcer healing in 4 weeks on just one 150mg tablet twice-daily;[2] one nightly in maintenance.

It's selective

Zantac's selective action minimises risks of drug interactions,[3] dizziness and mental confusion,[2] and antiandrogenic effects.[4,5]

And it's effective

4-week peptic ulcer healing, together with a maintenance regime to keep patients both symptom-free and ulcer-free, could be another reason why 80% of GPs have prescribed Zantac after less than 2 years' availability.

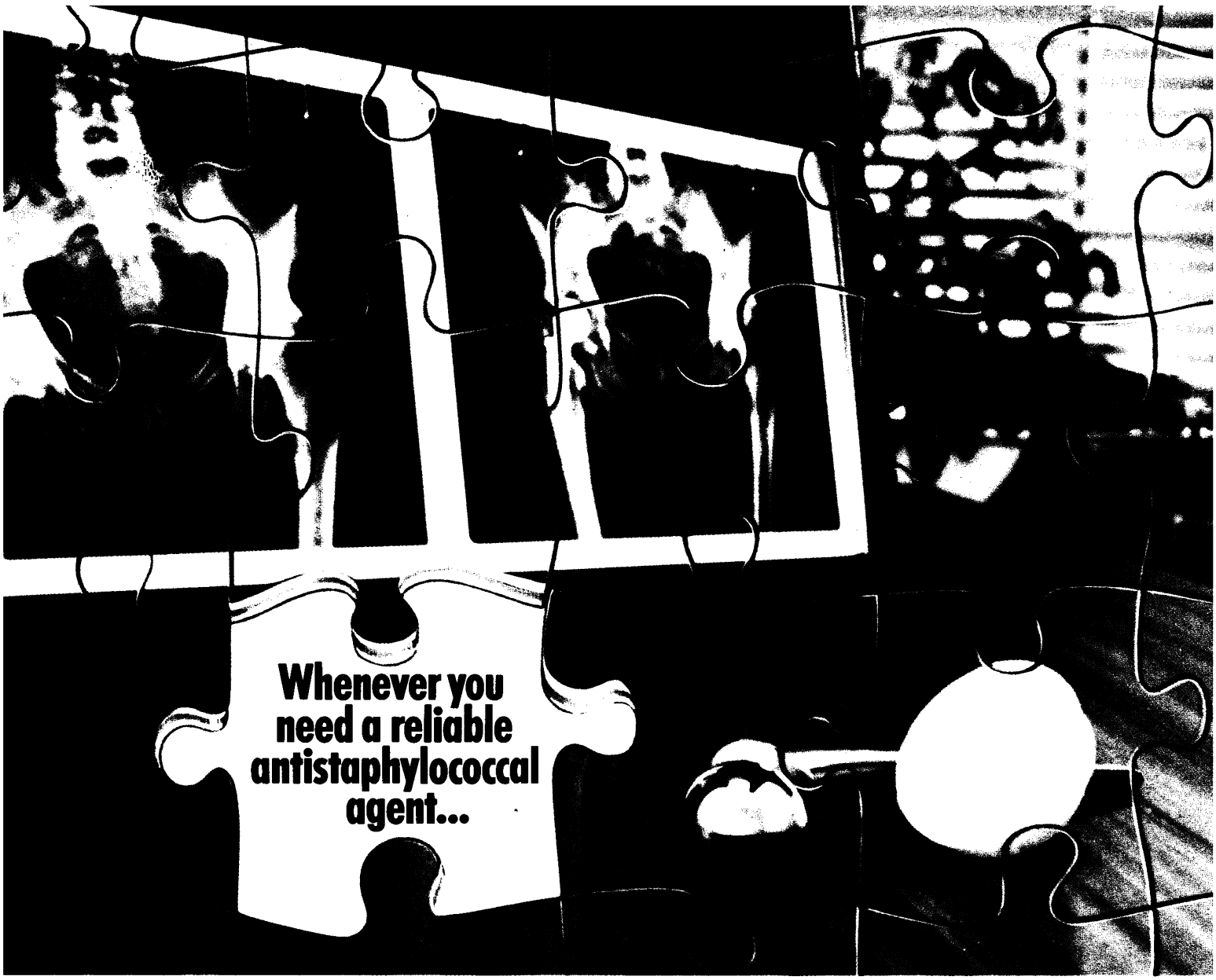
When you think about it, it's simple.

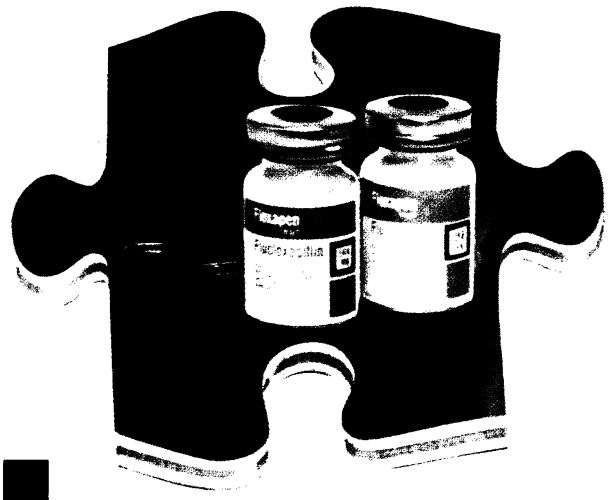
Zantac

RANITIDINE

CONTRA-INDICATIONS: THERE ARE NO KNOWN CONTRA-INDICATIONS TO THE USE OF ZANTAC. BASIC NHS COST (EXCLUSIVE OF VAT) 60 TABLETS £27.43. PRODUCT LICENCE NUMBER: 4/0279. FURTHER INFORMATION ON ZANTAC (TRADE MARK) IS AVAILABLE FROM: GLAXO LABORATORIES LTD., GREENFORD, MIDDX. UB6 0HE. REFERENCES: 1. INDEPENDENT MARKET RESEARCH-MRF LTD, 1983. 2. DATA ON FILE, GLAXO GROUP RESEARCH. 3. SERLIN, M.J. THE CLINICAL USE OF RANITIDINE, LONDON, 1981: MEDICINE INTERNATIONAL REVIEW: 89. 4. HUNT, R.H. REVIEW OF THE SATELLITE SYMPOSIUM HELD AT THE "WORLD CONGRESS ON GASTROENTEROLOGY;", STOCKHOLM, JUNE 1982. 5. EDWARDS, C.R.W. AND RILEY, A.J. THE CLINICAL USE OF RANITIDINE, LONDON 1981; MEDICINE INTERNATIONAL REVIEW: 65.

Glaxo





Floxapen

FLUCLOXACILLIN

PRESCRIBING INFORMATION USUAL ADULT DOSAGE ORAL: 250mg q.i.d., ½-1 hour before meals. I.M.: 250mg q.i.d., dissolved in 1.5ml Water for Injections B.P. or 500mg q.i.d. dissolved in 2ml Water for Injections B.P. I.V. (INJECTION): 250-500mg q.i.d. dissolved in 10ml Water for Injections B.P. and administered by slow intravenous injection (3-4 minutes). I.V. (INFUSION): Floxapen may also be added to infusion fluids or injected, suitably diluted, into the drip tube over a period of 3-4 minutes. Floxapen is compatible with most intravenous fluids but should not be mixed with blood products or other proteinaceous fluids (e.g. protein hydrolysates). INTRAPLEURAL: 250mg once daily, dissolved in 5-10ml Water for Injection B.P. INTRA-ARTICULAR: 250-500mg once daily, dissolved in up to 5ml Water for Injection B.P. or 0.5% lignocaine hydrochloride solution. AEROSOL: 125-250mg q.i.d., dissolved in 3ml sterile water. **USUAL CHILDREN'S DOSAGE:** 2-10 years ½ adult dose. Under 2 years: ¼ adult dose. NOTE: In severe infections dosages may be doubled. serum concentrations achieved are proportional to the dose administered. **SIDE EFFECTS:** As with other penicillins. **CONTRA-INDICATIONS:** Penicillin hypersensitivity, ocular administration.

AVAILABILITY AND BASIC NHS PRICE:

CAPSULES	SYRUP	VIALS FOR INJECTION
250mg £3.91 for 20	125mg/5ml	250mg 83p each
500mg £7.81 for 20	100ml £3.26	500mg £1.66 each

Favourable Hospital Rates are available from the company. Prices correct at October 1980

Further information is available on request to the company.

Floxapen is a product of British research from
Beecham Research Laboratories
Brentford, England.

PL0038/5051 5052, 5055, 5056, 5058.

Floxapen and the BRL logo are trade marks

BRL 3037

Ventolin

(Salbutamol BP)

Unsurpassed performance in bronchodilator therapy

Prescribing information. Uses: Routine control of bronchospasm in bronchial asthma, bronchitis and emphysema, or as required to relieve attacks of acute bronchospasm. Doses may also be taken before exertion to prevent exercise-induced asthma or before exposure to a known unavoidable challenge. **Dosage and administration:** As single doses for the relief of acute bronchospasm, for managing intermittent episodes of asthma and to prevent exercise-induced bronchospasm. Using Ventolin Inhaler – *Adults:* 1 or 2 inhalations. *Children:* 1 inhalation increasing to 2 if necessary. *For chronic maintenance or prophylactic therapy:* Using Ventolin Inhaler – *Adults:* 2 inhalations three or four times a day. *Children:* 1 inhalation three or four times a day increasing to 2 inhalations if necessary. For optimum results in most patients inhaled Ventolin should be administered regularly. **Contra-indications:** Ventolin preparations should not be used for the prevention of threatened abortion during the first or second trimester of pregnancy. **Precautions:** If a previously effective dose of inhaled Ventolin fails to give relief lasting at least three hours, the patient should be advised to seek medical advice. Ventolin should be administered cautiously to patients suffering from thyrotoxicosis. Unnecessary administration of drugs during the first trimester of pregnancy is undesirable. **Side effects:** No important side effects have been reported following treatment with inhaled Ventolin. **Presentation and Basic NHS cost:** Ventolin Inhaler is a metered-dose aerosol delivering 100 micrograms Salbutamol BP per actuation. Each canister contains 200 inhalations. Basic NHS cost £3·00. **Product licence number:** Ventolin Inhaler 0045/5022.

Further information is available on request from: Allen & Hanburys Limited, Greenford, Middlesex UB6 0HB.
Ventolin is a trade mark of Allen & Hanburys Limited.

From theory

A Wellcome discovery made it possible

Epoprostenol is a naturally occurring prostaglandin, which prevents platelets sticking to vessel walls and to each other.

The discovery of epoprostenol (or prostacyclin as it was called at the time) was a significant achievement of Wellcome prostaglandin research – a discovery which has since generated immense interest.

In 1975, Dr John Vane and colleagues embarked on a line of research to determine whether vessel walls synthesised thromboxane A_2 (TXA_2). The latter had already been shown to cause platelet aggregation and vasoconstriction.

In fact, Vane *et al* disproved the synthesis theory, but observed that the endoperoxide precursor of TXA_2 was being converted into another, unknown substance.

Further work showed this substance to be the biological counterpart of TXA_2, epoprostenol. It relaxed vessel walls and was found to be the most potent inhibitor of platelet aggregation known. So powerful, in fact, that it can also disaggregate platelet clumps.

For this, and other discoveries in the field of prostaglandins and related substances, Dr. Vane shared the 1982 Nobel Prize for Medicine.

Flolan is the synthetic sodium salt of epoprostenol.

Wellcome

A Data Sheet and further information is available on request

Wellcome Medical Division,
The Wellcome Foundation Ltd,
Crewe Hall, Crewe, Cheshire, CW1 1UB.

FLOLAN Prescribing Information

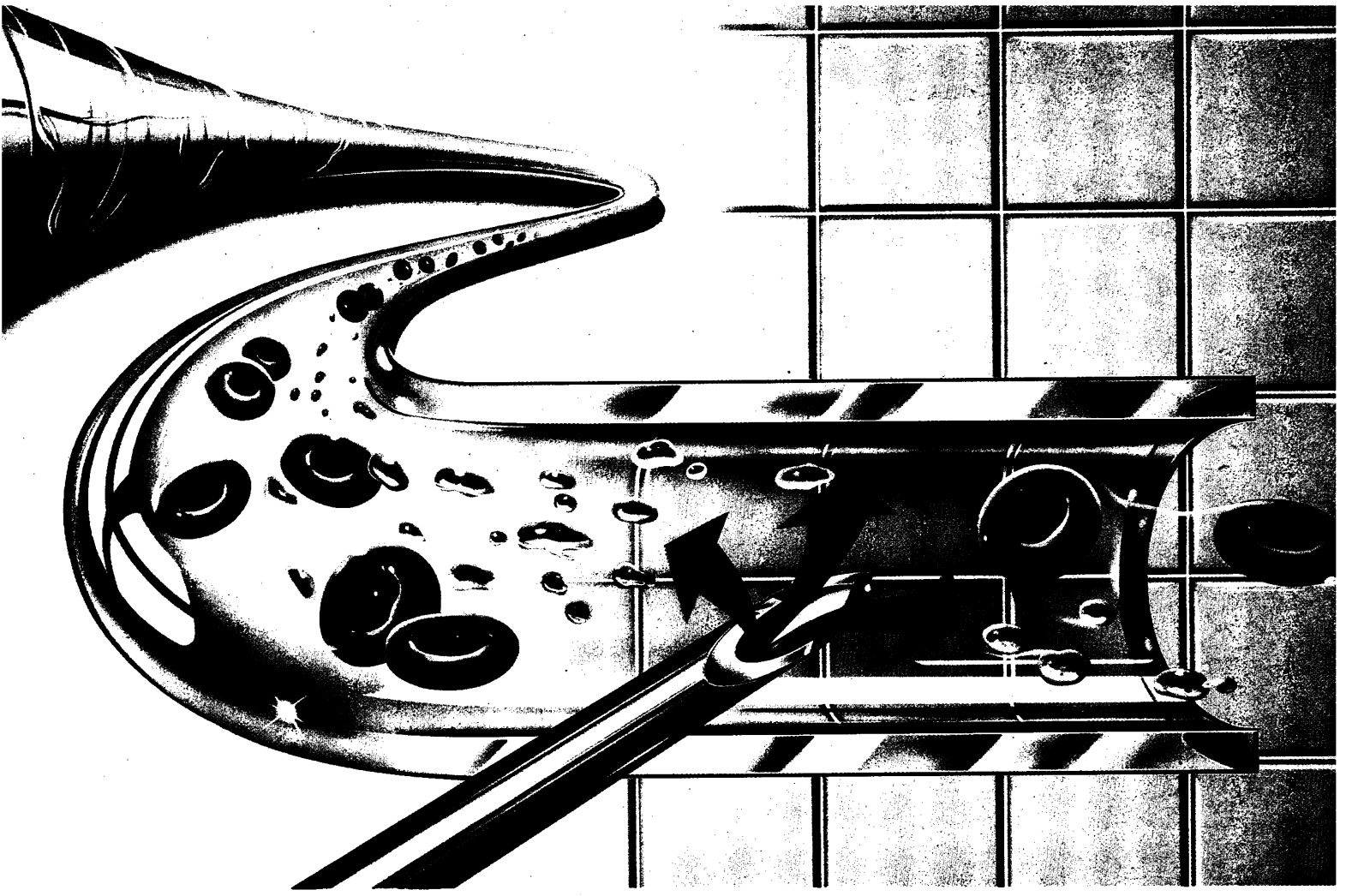
Presentation In each pack is a vial containing 500 μg freeze-dried epoprostenol sodium, plus a 50 ml vial of sterile diluent containing Sodium Chloride BP 0.147% w/v and Glycine BP 0.188% w/v in clear solution.

Uses Flolan inhibits platelet aggregation. It is indicated for the preservation of platelet numbers and function during cardiopulmonary bypass and charcoal haemoperfusion, and as an alternative to heparin during renal dialysis.

Dosage and administration Flolan is suitable for continuous infusion only, either intravascularly or into the blood supplying the extracorporeal circulation. The dosage schedule varies according to the indication. For details see Data Sheet or pack leaflet.
Reconstitution must be performed aseptically, using only the diluent provided. For the method of reconstitution see Data Sheet or pack leaflet.

Contra-indications No recognised contra-indications.

Precautions Flolan should not be used to replace heparin in cardiopulmonary bypass or charcoal haemoperfusion but can do so in renal dialysis. However, standard anti-coagulant monitoring is advisable when concomitant anti-coagulants are administered.
Haemorrhagic complication should be considered in patients with spontaneous or



to theatre.

Therapeutic roles – now and to come

In the operating theatre, Flolan is of particular benefit in extracorporeal circulation procedures, for example, cardiopulmonary bypass, renal haemodialysis and charcoal haemoperfusion. In such circuits, blood is brought into contact with artificial surfaces, which can cause activation, aggregation and consumption of platelets.

The resulting clumps may circulate in the body as microaggregates and can result in renal and cerebral impairment. Platelets also aggregate onto membranes and filters in the circuit, and slow the filtration rate.

Flolan helps prevent these problems by inhibiting aggregation. Fewer platelets stick to the artificial surfaces, more intact platelets return to the body, and the risk of circulatory microaggregates is significantly reduced.

Flolan is an exciting and continuing development which may also show great promise in the treatment of vascular and other diseases.

Wellcome is at work exploring its full potential.

Flolan is a Trade Mark

Flolan

Epoprostenol sodium (formerly known as prostacyclin)

Keeps platelets in circulation

rug-induced haemorrhagic diatheses.
olan and other vasodilators may augment each other's hypotensive effects.
he effects of Flolan on heart rate may be masked by concomitant use of drugs which
ffect cardiovascular reflexes.
excessive hypotension occurs, the dose should be reduced or the infusion discontinued.
he hypotensive effect of Flolan may be enhanced by the use of acetate buffer in the
alysis bath during renal dialysis.
evated serum glucose levels have been reported occasionally.
e in pregnancy and lactation The potential benefits must be weighed against the risks.

Side- and adverse effects Facial flushing is common. Headache and gastro-intestinal symptoms including nausea, vomiting and abdominal colic have occurred. Bradycardia associated with a considerable fall in systolic and diastolic blood pressure has followed a dose of 30 ng/kg/min in healthy conscious volunteers. Bradycardia accompanied by pallor, nausea, sweating, and sometimes abdominal discomfort and orthostatic hypotension, has occurred in healthy volunteers at doses greater than 5 ng/kg/min.
Basic NHS cost 1 pack containing 1 vial of Flolan + 1 vial of diluent £103.86 (PL3/0151)

How to get your career off to a flying start.

If there's one thing as vital as qualifying it's finding the right practice. Or perhaps you're already in practice and considering a change.

Either way, the Royal Air Force can offer opportunities where your career can really take off.

As a doctor in the RAF, you would be working in well-equipped, purpose-built hospitals and clinics with highly trained, highly organised staff.

Your patient list will be of a size that gives you ample time to devote to the needs of each patient.

You'll have excellent opportunities for vocational training and you may well decide to work in preventive and occupational medicine. Aviation medicine, for example, presents a fascinating challenge. There'll be plenty of other chances to specialise. If you're interested or qualified in anaesthetics, pathology or ophthalmology, prospects are particularly favourable.

You'll have the pleasure of being part of a close-knit community with its own special social life and a wide variety of sports facilities.There's also a good chance during your career you'll work abroad in hospitals or medical centres in Hong Kong, Cyprus, Gibraltar, Sardinia or Germany.

If you are a qualified medical practitioner, you can join us initially on a gratuity-earning three-year Short Service Commission, or if you opt for three years' vocational training the minimum period of service extends to five years. Later you can apply for a pensionable, permanent commission.

Your starting salary would be at least £12,662 p.a. at April 1982 (it could be more depending on your age and qualifications). Upper age limit on entry is 39.

If you'd like more details and an application form, please write to: Wing Commander P. L. Hickey, MBE, MB, BS, DObstRCOG, DAvMed, RAF, Room 722 (724 MG/7), First Avenue House, High Holborn, London WC1V 6HE, enclosing a note listing your present and/or intended qualifications. Or call in at any RAF Careers Information Office.

You must be a British subject and should have been resident in the UK for the last five years before applying.

Formal application must be made in the UK.

Pilot and doctor on flightline.

Doctor

RAF Officer

Gastrozepin is a selective antimuscarinic agent which provides balanced control of gastric secretion without markedly affecting other peripheral receptor sites. This gastro-selective action means that, in practice, Gastrozepin is a well-tolerated drug which heals peptic ulcers.

Gastrozepin DOES NOT . . .
- **rely on acid reduction alone**
- **rely on pepsin reduction alone**
- **rely on mucosal protection alone**
- **profoundly affect intragastric pH**

Gastrozepin DOES . . .
- **relieve daytime pain**
- **relieve night-time pain**
- **reduce antacid intake**
- **heal peptic ulcers with one 50 mg tablet b.d.**

NEW FROM BOOTS
For the treatment of peptic ulcer
Twice daily
GASTRO SELECTIVE
Gastrozepin®
pirenzepine

Prescribing Information; Presentation: White tablets each containing 50 mg of pirenzepine dihydrochloride scored on one face with "G" on one side of the score, and "50" on the other. The obverse is impressed with the symbol ℬ **Uses:** Gastrozepin is indicated in the treatment of gastric and duodenal ulcers. **Dosage:** 50 mg at bedtime and in the morning before meals. In severe cases the total daily dose may be increased to 150 mg in divided doses. Continuous therapy may be recommended for up to three months. **Contra-indications, Warnings etc:** Interaction with sympathomimetics and monoamine oxidase inhibitors and Gastrozepin is a theoretical possibility. Gastrozepin is not recommended during pregnancy although in animal experiments no teratogenic effects were noted. Breast milk concentration after therapeutic doses is unlikely to affect the infant. *Side effects:* occasionally transitory dry mouth and accommodation difficulty may occur. Treatment of overdosage: entirely symptomatic. There is no specific antidote. **Basic NHS price:** 50 mg tablets, 60 £20.50. **Product Licence No:** 50 mg tablets, PL0014/0260.

ℬ Further information is available on request
The Boots Company PLC,Nottingham

Gastrozepin® Trade Mark

This network is The kin

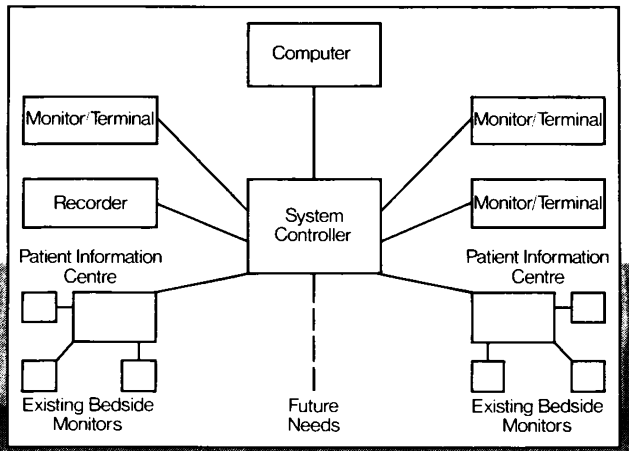
Introducing HP Care-Net, designed to link all kinds of information for critical care.

Hewlett-Packard has chosen an advanced new network technology as our response to your critical care needs. HP Care-Net is not an individual product. HP Care-Net is an integrated patient monitoring system that gives you reliable decision-making tools where, when and how you need them.

In one system it brings together all relevant patient data... from our new Monitor/Terminals, Patient Information Centres (nurses' stations) and all HP bedside monitors, whatever their age.

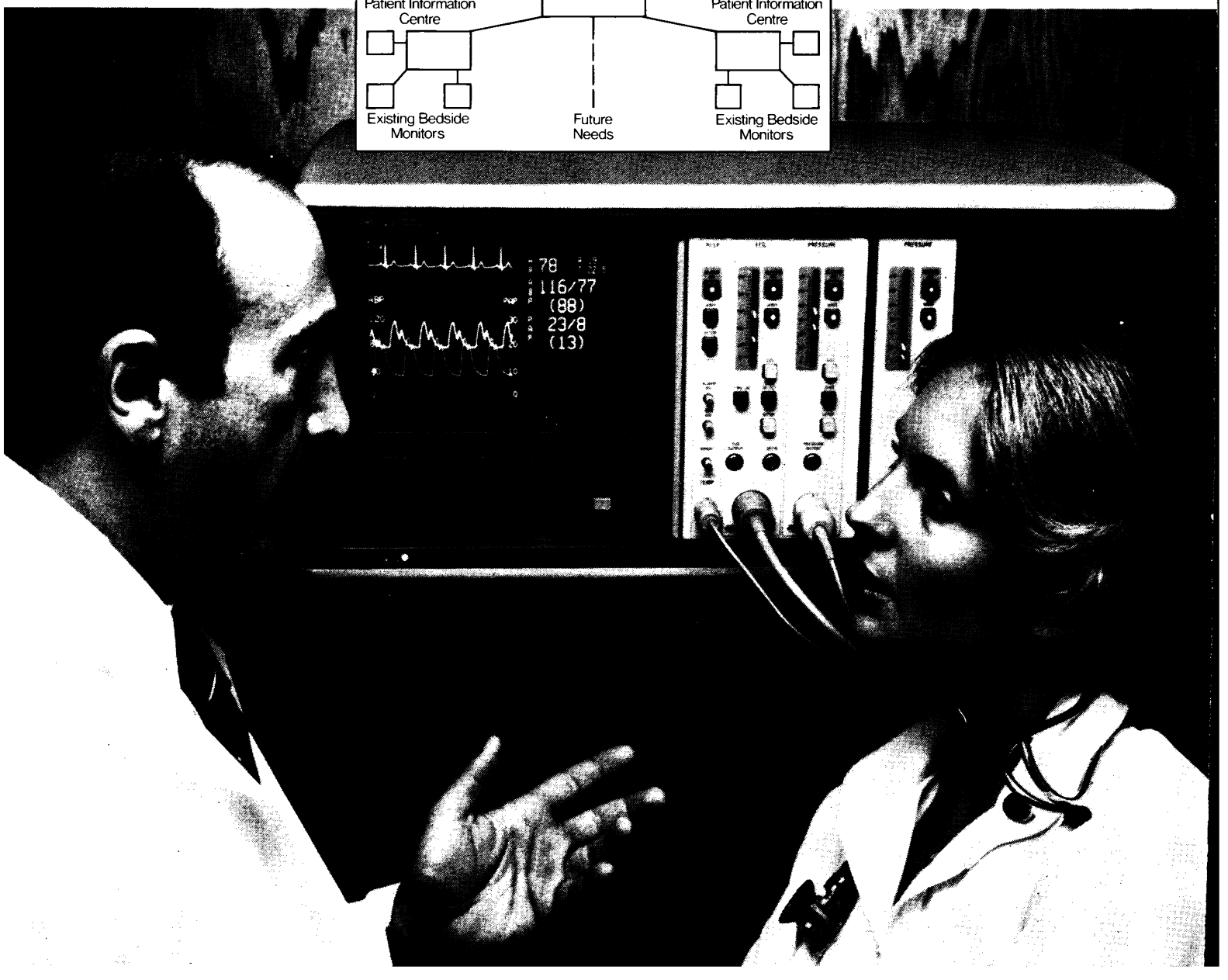
That's HP Care-Net – an information distribution network operating under unified control, as the diagram shows.

And, of course, you can configure the network to meet your unit's needs, and change it as those needs grow.



The key to the system: the HP Care-Net Monitor/Terminal.

The new HP Care-Net Monitor/Terminal is a single bedside instrument that provides all the information you need for accurate



designed for care.
d you give.

decision making... 3 waveforms, at least 5 vital signs, plus comprehensive data management.

In designing the Monitor/Terminal, we spent over 1000 consultation hours with practising nurses and clinicians. We listened to your problems with existing monitors, then set about solving them.

The result is an instrument that's uniquely capable, yet remarkably easy to use.

Sophisticated technology.

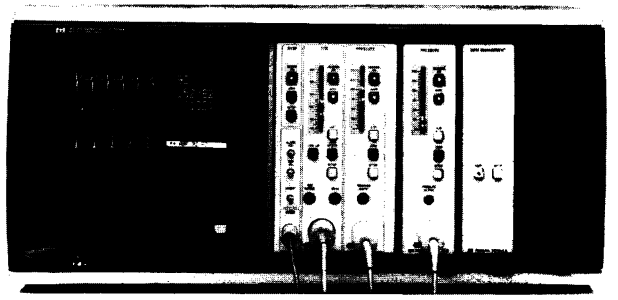
The Monitor/Terminal's sophisticated ECG, pressure and respiratory microprocessor calculations (or alogorithms) ensure reliable information. Set-up and calibration procedures for pressure monitoring, for example, have been streamlined and automated. You can rely on the pressure alogorithms to filter out the artifacts, the respiritory variations and plumbing resonances that would otherwise diminish the accuracy of measurements and cause false alarms.

And the Monitor/Terminal gives you a dependable basis for your therapeutic decisions. You don't have time for manual calculations. So the Monitor/Terminal processes important haemodynamic, respiratory and ventilatory parameters for you. The data is there to be called up instantaneously.

What's more, the Monitor/Terminal stores up to 24 hours of vital patient information and then trends it. You select from 1, 8 or 24-hour displays.

but simple operation.

The new Monitor/Terminal is a flexible instrument, capable of many levels of operation.



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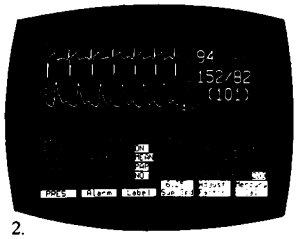

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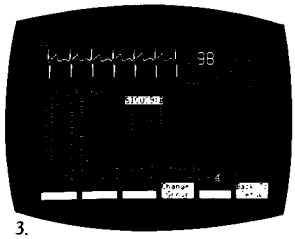

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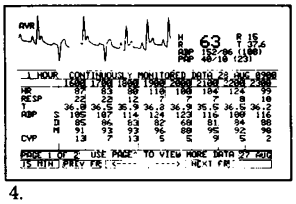

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Gonorrhoea: Single dose of 1·5 grams (2 x 750mg into different sites).

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Contra-indications
Hypersensitivity to cephalosporins.

Precautions
Cephalosporins may, in general, be given safely to patients who are hypersensitive to penicillins. Care is indicated in patients who have experienced an anaphylactic reaction to penicillin. As with all drugs, Zinacef should be administered with caution during the early months of pregnancy. Zinacef does not interfere with enzyme-based tests for glycosuria. Slight interference with copper reduction methods may be observed. Zinacef may cause false-negative results in the ferricyanide test for glucose. This antibiotic does not interfere in the alkaline picrate assay for creatinine. Zinacef should not be mixed in the syringe with aminoglycoside antibiotics. Reduce dosage when renal function is markedly impaired.
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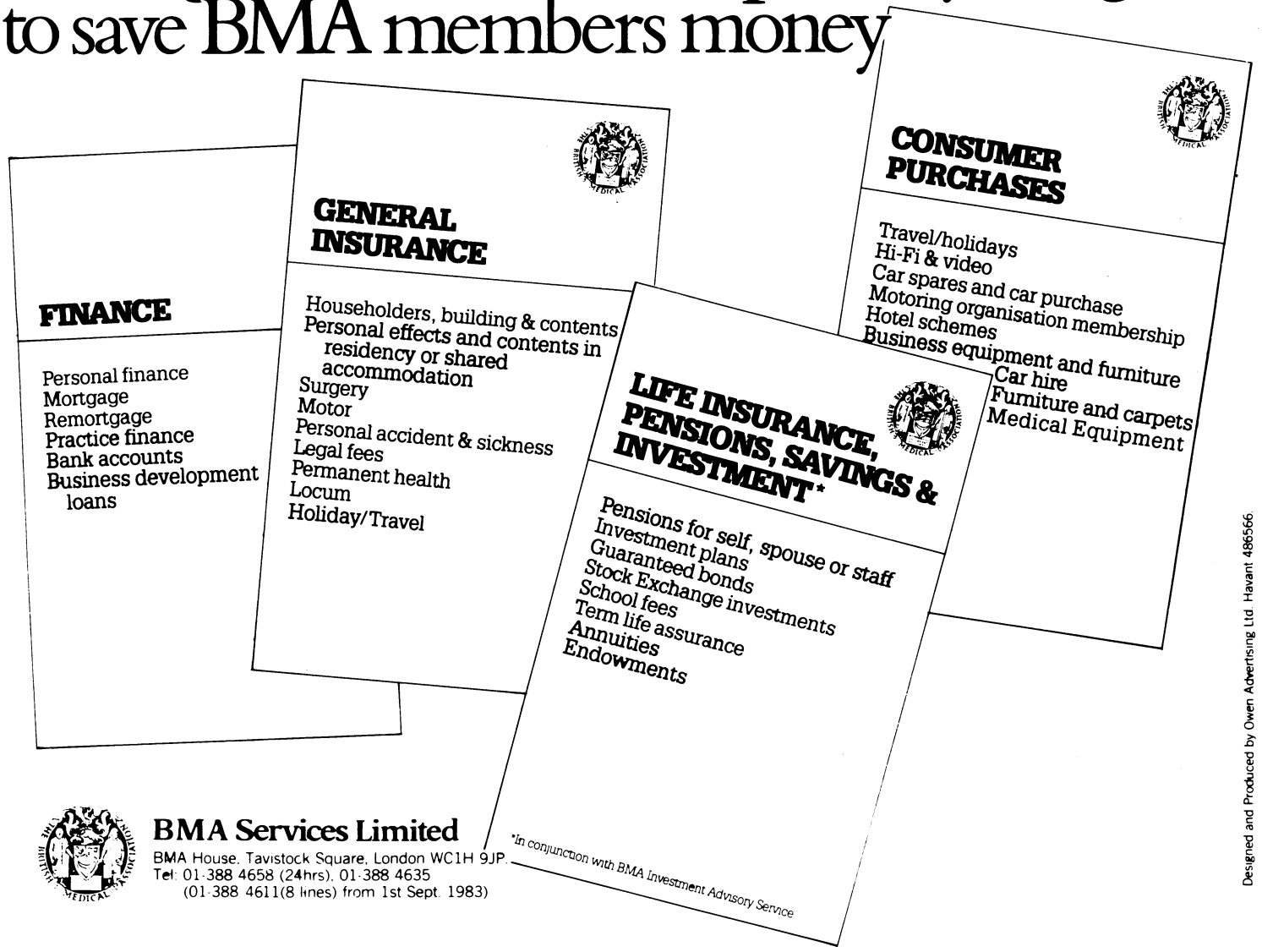

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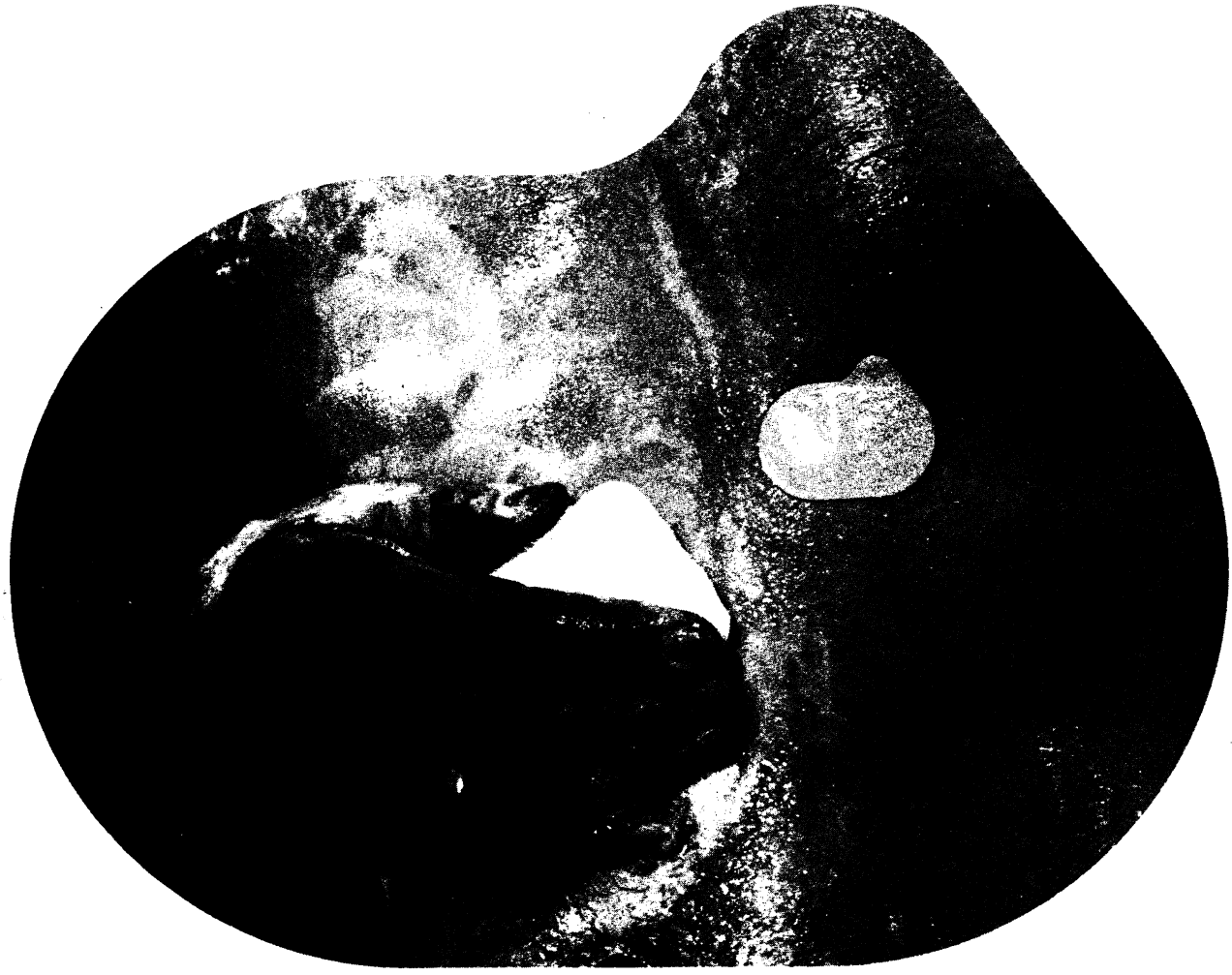

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