

Main Features



72 Hour Glucose Control



Tubeless



Remote Monitoring



Flexible Lifestyle



Comfortable to Wear



Easy-to-use PDA



Safe And Reliable



Eliminate Injections

Specification

Bolus	Increments: 0.025 / 0.05 / 0.5 / 0.1 / 1U
	Max Bolus: 25 U
	Extended Bolus : % or U
Basal	3 Basal Programs
	6 or 24 Segments
	Max Basal Rate : 35 U/h
	Temporary Basal: % or U
Bolus Calculator	Insulin On Board
	48 segments for target blood glucose value
	48 segment for insulin-to-carb ratio
Alarm Prompts	48 segments for correction factor
	Audio, LED, Vibration
Blood Glucose Meter	Exactive EQ Strips
	Sample Size: 0.6 μ L
	Test Time: 5 seconds

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Number: 040101038. V01

equil™ Patch Insulin Pump System

TUBELESS INSULIN PUMP WITH WIRELESS CONTROLLER



Up to **72 hours**
of continuous insulin delivery



Innovative Features

Tubeless

Move freely, wear whatever you want, and play sports without any concern of a tube getting in the way. Deliver a bolus, change a basal rate, or modify user options using the PDA without anyone noticing you use an insulin pump.

Wireless

With the PDA, you can remotely make adjustments to your insulin therapy based on activity level and meal choices.

Quick Bolus

If you forget the PDA or would like to administer a bolus discretely, just use the quick bolus button.

Precise Dosages

Fine tune your boluses and basal rates in steps as small as 0.025U.

Helpful Alerts

The system will send notifications using sound, LEDs, or Vibrations as well as provide information on the PDA display.



Built-in Blood Glucose Monitoring System

The Equil™ Patch Pump System consists of two parts: the tubeless patch pump and the portable diabetes assistant (PDA).



Cloud-based Medical Service

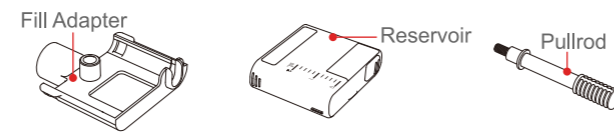


Consumables



Insulin Reservoir

The Reservoir package consists of a reservoir, fill adapter and pullrod, as shown in the figure below:



The total capacity of the reservoir is 2.0ml, which is equal to 200 units of U-100 insulin.



Pump Base

- Disposable
- Stretchable
- Skin breathable



disinfect with alcohol wipe first



Cannula

- 90° Soft Cannula
- 6mm /9mm lengths
- Unique design



Infusion Sites:
Abdomen, upper arms, inner thighs, back waist, hips

The tubeless pump is small, lightweight, and can provide up to 3 days of non-stop insulin delivery. Patients can live life to the fullest with more freedom to move, sleep, play, or exercise.

Simple Setup



1. Fill the reservoir



2. Apply the infusion set



3. Attach the pump



4. Control with the PDA



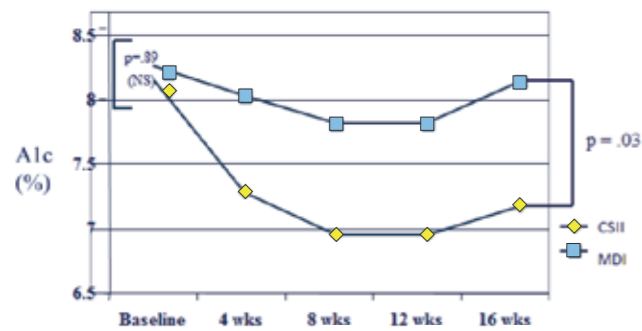


Benefits of Insulin Pump Therapy

Lower HbA1C level

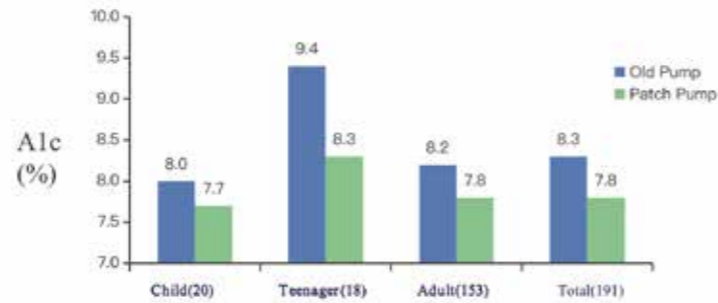
With more precise insulin delivery, you can also gain better control of your diabetes. With proper insulin pump use, you can be four times more likely to achieve your target HbA1C and potentially reduce your low blood sugars by 84%. Since insulin pump therapy can help you achieve better control, you can reduce long-term complications of diabetes such as eye, heart, kidney, and nerve damage.^{1, 2, 3}

Changes in HbA1C levels



Study November 1st, 1995- September 1st 1998.

Changes in HbA1C levels

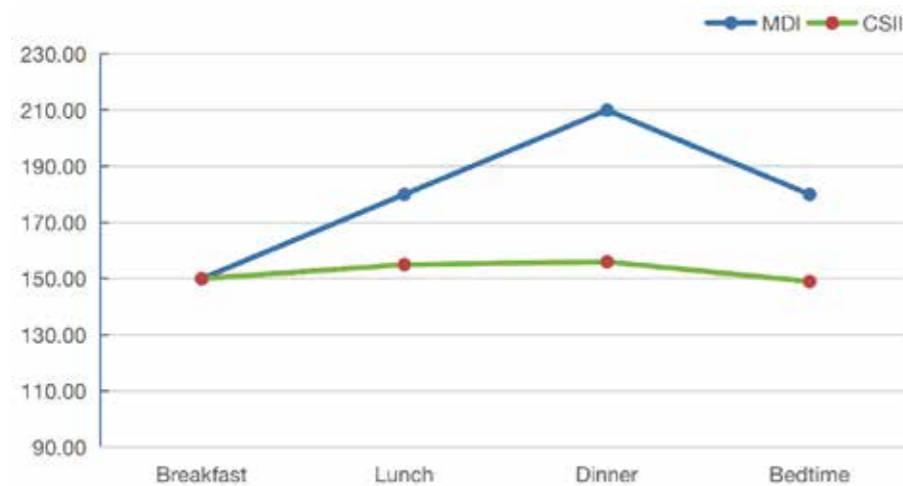


Lavne JE, Parkin CG, Zisser H; J Diabetes Sci Technol. 2016 Aug 22;10(5):1130-5.

Flexibility & Freedom

Increase flexibility in food choices, eating schedules, and activities.

Average pre-meal glucose level change

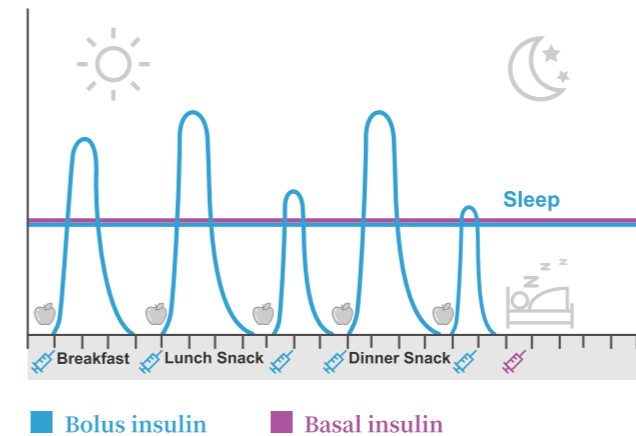


Study November 1st, 1995- September 1st 1998.

Better Time In Range (TIR)

Patients using insulin therapy generally have better TIR than patients using other therapies. Glucose levels are easier to manage within the 70-180 mg/dL range.

Daily insulin change figure

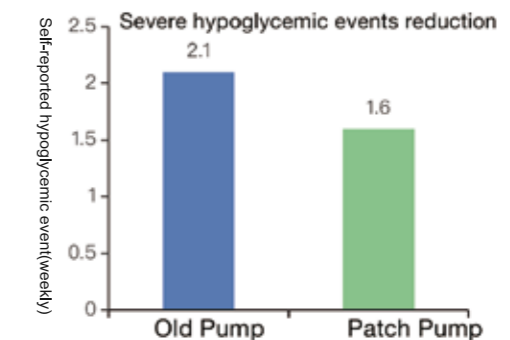
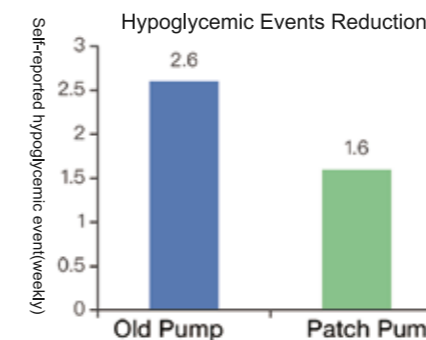


• **Basal rate**
A small, constant supply of insulin is delivered automatically at a personalized, preset rate around the clock.



• **Bolus**
Additional doses of insulin can be delivered when you need them, either around mealtime or to correct high blood glucose.

Hypoglycemia Events Reduction



Lavne JE, Parkin CG, Zisser H; J Diabetes Sci Technol. 2016 Aug 22;10(5):1130-5.

A retrospective clinical study enrolled patients with type 1 diabetes (n=873) who had previously been treated with MDI or a conventional inline insulin pump, and were subsequently switched to patch pump for 3 months. CONCLUSIONS: After the application of the insulin pump, vs. self-reported hypoglycemia and severe hypoglycemia at baseline decreased significantly, 1.6±1.6 vs. 2.6±2.8 beats/week (P<.001); severe hypoglycemia 1.6±1.2 vs. 2.1 ± 1.4 times / week (P < .001).

References:

- ¹ Doyle EA, Weinzimer SA, Steffen AT, Ahern JAH, Vincent M, Tamborlane WV. A randomized prospective trial comparing the efficacy of insulin pump therapy with multiple daily injections using insulin glargine. Diabetes Care. 2004;27(7):1554-1558.
- ² Bode BW, Steed RD, Davidson PC. Reduction in severe hypoglycemia with long-term continuous subcutaneous insulin infusion in type 1 diabetes. Diabetes Care. 1996;19(4):324-327.
- ³ The Diabetes Control and Complications Trial Research Group. The effect of intensive treatment of diabetes on the development and progression of long-term complications in insulin-dependent diabetes mellitus. N Engl J Med. 1993;329(14):977-986.