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Your cooperation is appreciated to maintain the integrity of scientific communication involving bioimpedance <u>technology</u>.

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Device model	Life cycle	How to cite the technology in the "Material and method" paragraph	Technology (current, frequency, resolution, CV%)
BIA 101	1998 Up to 2009	Whole body bioimpedance (BIA 101 AKERN, Florence, Italy) was performed using an alternating sinusoidal electric current of 800 microampere at an operating frequency of 50 kHz. The calibration of the device was checked	800 μA current at 50 kHz (±2%), resolution Rz: ±1%, Xc: ±2%, CV% <3,5%
		each day measurements were performed, always at the first measurement of the day, using the standard control circuit supplied by the manufacturer with a known impedance [resistance (R) = 380 Ohm; reactance (Xc) = 47 Ohm]. The accuracy of the device was 1% for R and 2% for Xc. For the BIA measurement, each participant	CV /0 \3,3 /0
		was supine with limbs slightly spread apart from the body. Disposable tab electrodes (BIATRODES Akern Srl;	



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		Florence, Italy) were placed on the right side at metacarpal and metatarsal sites	
BIA 101 New Edition	2010 Up to 2019	of the right wrist and ankle [a]. Whole body bioimpedance (BIA 101 new edition AKERN, Florence, Italy) was performed using an alternating sinusoidal electric current of 400 microampere at an operating frequency of 50 kHz. The device was calibrated every morning using the standard control circuit supplied by the manufacturer with a known impedance [resistance (R) = 380 Ohm; reactance (Xc) = 47 Ohm]. The accuracy of the device was 1% for R and 2% for Xc. For the BIA measurement, each participant was supine with limbs slightly spread apart from the body. Disposable tab electrodes (BIATRODES Akern Srl; Florence, Italy) were placed on the right side at metacarpal and metatarsal sites of the right wrist and ankle [a].	400 μA current at 50 kHz (±1%), resolution Rz: ±1%, Xc: ±2%, CV% <2,8%
BIA 101 BIVA	2019 up to 10/2020	Whole body bioimpedance (BIA 101 BIVA AKERN, Pisa, Italy) was performed by a phase sensitive device working with alternating sinusoidal electric current of 250 microampere at an operating frequency of 50 kHz (±1%). The device was calibrated every morning using the standard control circuit supplied by the manufacturer with a known impedance [resistance (R) = 380 Ohm; reactance (Xc) = 42 Ohm]. The accuracy of the device was 0.1% for R and 0.1% for Xc. For the BIA measurement, each participant was supine with limbs slightly spread apart from the body. Very low intrinsic impedance (<30 Ohm) disposable electrodes (BIATRODES Akern Srl; Florence, Italy) were placed on the right side at metacarpal and metatarsal sites of the right wrist and ankle [a].	250 μA current at 50 kHz (±1%), resolution Rz: ±1%, Xc: ±1%, CV% <1%
BIA 101 BIVA PRO	01/2021 - Today	Whole body configuration:	245 μA current at
		Bioimpedance analysis was performed by a phase sensitive device (BIA 101 BIVA PRO AKERN srl, Pisa, Italy) working with alternating sinusoidal electric	50 kHz (±1%), Accuracy : Rz: ±0.1,Ω Xc: ±0.1 Ω



		aument of 245 minutes at	C) /0/ -4.0/
		current of 245 microampere at an operating frequency of 50 kHz (±1%). The device was calibrated every morning using the standard control	CV% <1%
a a Broulast		morning using the standard control	
No march		circuit supplied by the manufacturer	
		with a known impedance [resistance (R)	
		= 380 Ohm; reactance (Xc) = 45 Ohm].	
		The accuracy of the device was 0.1% for R and 0.1% for Xc. For the BIA	
		measurement, each participant was supine with limbs slightly spread apart	
		from the body. Very low intrinsic	
		impedance (<30 Ohm) disposable	
		electrodes (BIATRODES Akern Srl;	
		Florence, Italy) were placed on the right	
		side at metacarpal and metatarsal sites	
		of the right wrist and ankle [a].	
		Regional configuration:	
		Bioimpedance analysis was performed	
		by a phase sensitive device (BIA 101	
		BIVA PRO AKERN srl, Pisa, Italy) working	
		with alternating sinusoidal electric	
		current of 245 microampere at an	
		operating frequency of 50 kHz (\pm 1%).	
		The device was calibrated every	
		morning using the standard control	
		circuit supplied by the manufacturer	
		with a known impedance [resistance (R)	
		= 345 Ohm; reactance (Xc) = 32 Ohm for	
		left sensing channel and resistance (R) = 280 Obrev resetuese (Va) = 45 Obrev for	
		380 Ohm; reactance (Xc) = 45 Ohm for	
		the right sensing channel]. The resolution of the device was 0.1 Ω	
		for Rz and 0.1Ω for Xc in the full range	
		of measurements.	
		For the regional bioimpedance	
		measurement, each participant was	
		supine with limbs slightly spread apart	
		from the body. Very low intrinsic	
		impedance (<30 Ohm) disposable	
		electrodes (BIATRODES Akern Srl;	
		Florence, Italy) were placed on both side	
		of the body at metacarpal and	
		metatarsal sites of the right and left	
		wrists and ankles [c].	
NUTRILAB	2014-	Bioelectrical impedance was measured	Serial number
	Today	with a phase-sensitive touch screen	2014-2019 :



NUTRI LAB NUTRI LAB NUTRI BAAR NUTRI BAAR A: AMME A:		Florence, Italy), working with alternating sinusoidal electric current of 245 microampere at an operating frequency of 50 kHz (\pm 1%). The device was calibrated every morning using the standard control circuit supplied by the manufacturer with a known impedance resistance (R) = 380 Ohm; reactance (Xc) = 45 Ohm. Impedance data are shown directly in a LCD touchscreen and stored into an internal memory. The inter observer CV%, evaluated in this healthy cohort is below 2%.	425 μA current at 50 kHz (±0.1%), resolution Rz: ±0.1%, Xc: ±0.1%, CV% <2% Serial number > 2019 245 μA current at 50 kHz (±1%), Accuracy : Rz: ±0.1,Ω Xc: ±0.1 Ω CV% <1%
BIA 101 Anniversary	2010- 2020	Whole-body impedance (BIA 101 Anniversary, Akern, Florence, Italy) is generated in soft tissues to oppose the flow of an injected alternate current and is measured from skin Ag/AgCl electrodes placed at fixed-distance (5 cm) on the hands and feet. The device generates an alternating sinusoidal electric current of 400 microamperes at an operating single frequency of 50 kHz ($\pm 0.1\%$). Resistance (R, Ω) is the opposition to the flow of an injected alternating current through intra and extracellular ionic solutions, while reactance (Xc, Ω) is the dielectric or capacitive component of cell membranes and organelles, and tissue interfaces.	425 μA current at 50 kHz (±0.1%), Resolution Rz: ±0.1%, Xc: ±0.1%, CV% <2%
CARDIOEFG -RENALEFG	2009 - 2018	Bioimpedance vector analysis using tetrapolar impedance plethysmography that emitted 50 kHz alternating sinusoidal current (CardioEFG, Akern, Florence, Italy) of 400 microamperes. Resistance (R, Ω) is the opposition to the flow of an injected alternating current through intra and extracellular ionic solutions, while reactance (Xc, Ω) is the dielectric or capacitive component of cell membranes and organelles, and tissue interfaces. Data are shown directly in a LCD touchscreen and stored into an internal memory. The CV% was evaluated in (_)	400 μA current at 50 kHz (±1%), Resolution Rz: ±0.1%, Xc: ±0.1%, CV% <2%



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	2005	patients: the mean coefficients of variation for both parameters were 0.5% intra-patient and 1.6% inter-operator. Disposable proprietary low impedance electrodes (BIVATRODES Akern Srl; Florence, Italy) were placed on the right side at metacarpal and metatarsal sites of the right wrist and ankle [a].	
EFG v.3	2005-2010	Whole-body impedance data were obtained using a tetrapolar impedance plethysmography (EFG V.3 Akern, Florence, Italy). The bioelectrical parameters of resistance and reactance were measured using an electric alternating current flux of 400 amperes and an operating frequency of 50 kHz. Whole-body impedance measurements were taken according to the standard protocol of Lukaski et al [a].	400 μA current at 50 kHz (±2%), Resolution Rz: ±1%, Xc: ±1%, CV% <2%
BIATRODES	1998- Today	Two pairs of adhesive Ag/AgCl low impedance electrodes (BIATRODES Akern Srl; Florence, Italy) were placed proximal to the phalangeal-metacarpal joint on the dorsal surface of the right hand and distal to the transverse arch on the superior surface of the right foot. Sensor electrodes were placed at the midpoint between the distal prominence of the radius and ulna of the right wrist, and between the medial and lateral malleoli of the right ankle at a fixed distance of 5 cm each other.	
BIVATRODES	2012- Today	Two sets adhesive Ag/AgCl low impedance electrodes (BIVATRODES Akern Srl; Florence, Italy), designed for accurate and sensitive bioimpedance measurements were placed proximal to the phalangeal–metacarpal joint on the dorsal surface of the right hand and distal to the transverse arch on the superior surface of the right foot. Sensor electrodes were placed at the midpoint between the distal prominence of the radius and ulna of the right wrist, and between the medial and lateral malleoli of the right ankle.	
Bodygram 1.31	1998	EOL (End of Life)	na
Bodygram PRO	2008	EOL (End of Life)	
Bodygram plus	2014	EOL (End of Life)	



Bodygram™ Dashboard	2020- today	Cloud based software for body composition components estimation and graphical representation of the parameters.	
Bodygram™ HBO	2020- today	Stand alone, multi users, GDPR compliant software for body composition components estimation and graphical representation of the parameters.	

MATERIAL and METHOD: sample paragraph

The impedance measurements were performed with a phase sensitive single frequency analyzer (MODEL (), Akern srl, Italy), which applies an alternating current of (____) μ A at the frequency of 50 kHz. Measurements were made using tetrapolar configuration as described by Lukaski (1986) [a]. The subjects were in the supine position with a leg opening of 45° compared to the median line of the body and the upper limbs positioned 30° away from the trunk. After cleansing the skin with isopropyl alcohol, two Ag/AgCl very low-impedance electrodes (Biatrodes, Akern Srl, Florence, Italy) were placed on the back of the right and two electrodes on the corresponding foot, with a distance of 5 cm between each other [b].

To avoid disturbances in fluid distribution, the subject was instructed to abstain from food and drink for >4 h before the test [c] [d].

[a] Lukaski, Henry C., et al. "Validation of tetrapolar bioelectrical impedance method to assess human body composition." *Journal of applied physiology* 60.4 (1986): 1327-1332.

[b] Dunbar, Christopher C., et al. "Effects of small errors in electrode placement on body composition assessment by bioelectrical impedance." *Research quarterly for exercise and sport* 65.3 (1994): 291-294.

[c] Kushner, Robert F., Rani Gudivaka, and Dale A. Schoeller. "Clinical characteristics influencing bioelectrical impedance analysis measurements." *The American journal of clinical nutrition* 64.3 (1996): 423S-427S.

[d] Slinde, Frode, and Lena Rossander-Hulthén. "Bioelectrical impedance: effect of 3 identical meals on diurnal impedance variation and calculation of body composition." *The American journal of clinical nutrition* 74.4 (2001): 474-478.