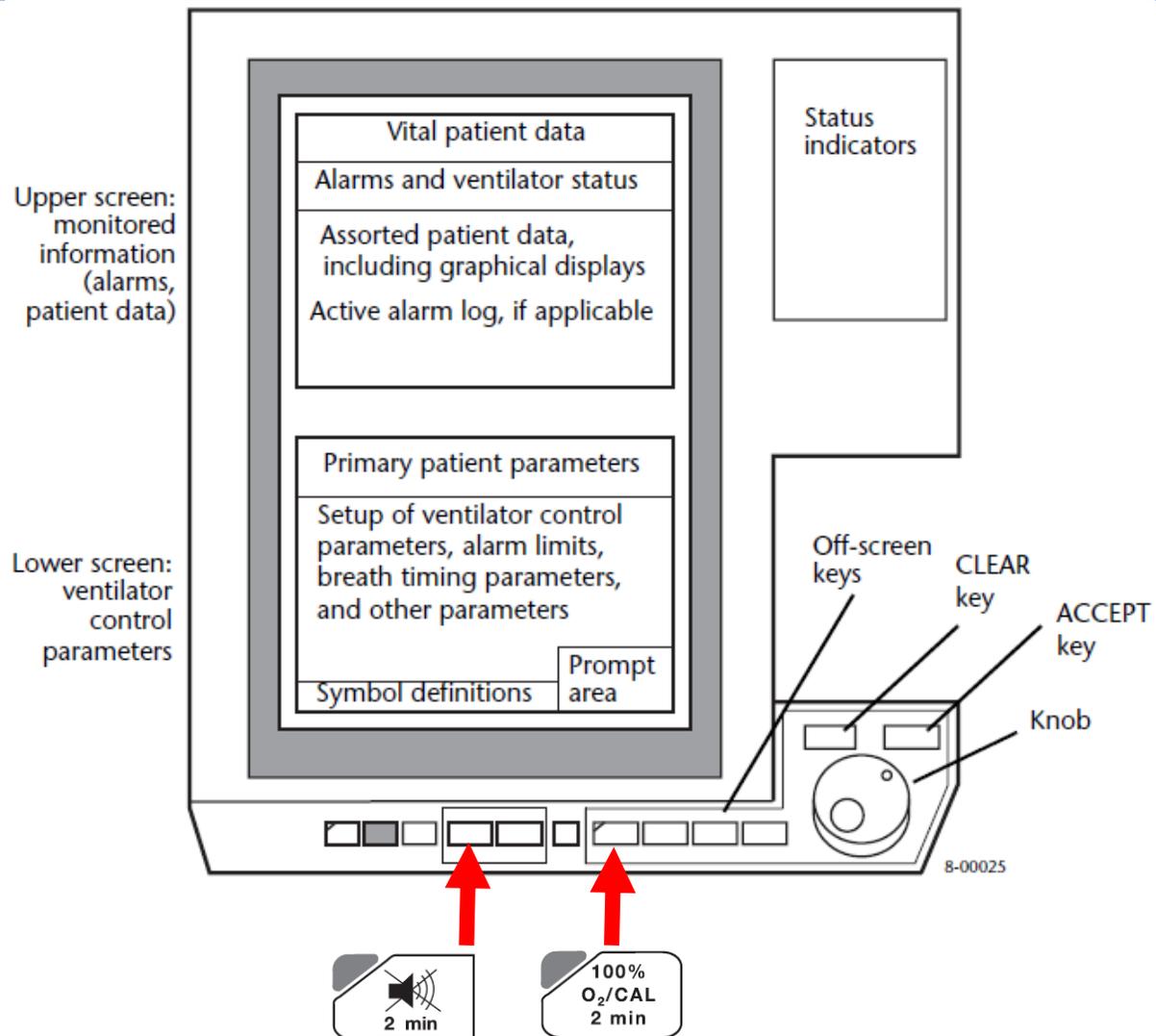


PB-840 Quick Use Guide



The main ventilator control parameters are the buttons displayed at the top of the lower screen. Follow these steps to change main parameters:

1. Touch button of the parameter you want to change.
2. Turn the knob to set the desired value. To cancel this change, press the 'CLEAR' key to go back to the previous value.
3. Repeat steps 1 and 2 for each parameter you want to change.
4. To cancel your changes, press the 'CANCEL ALL' button, or press 'ACCEPT' to apply the new ventilator control parameter(s).

Changes to FiO₂ - Increase in 10% increments if patient's SpO₂ or PaO₂ is below lower threshold. If the patient's SpO₂ or PaO₂ is above threshold, decrease in 5% -10% increments.

Suction Procedure - Press the 'O₂ Suction' key. This will increase the FiO₂ to 100% for 2 minutes and allow the ventilator to be disconnected.

Respiratory Rate Changes - Increase RR if PaCO₂ is above (pH is below) threshold, decrease RR if PaCO₂ is below (pH is above) threshold.

Positive End Expiratory Pressure (PEEP) changes - Only increase after FiO₂ is at 100% if patient's oxygenation status has not improved.

Alarm	Potential Causes	Potential Remedies
High Pressure	Excessive pressure in the system:	
	• Secretions	Suction patient
	• Bronchospasm	Give bronchodilators
	• Kink in tubing	Check for kinks, patient biting, obstruction of filter
Circuit Disconnect or Low Pressure	• Coughing	Suction patient
	An acute drop in ventilating pressure	
	• Circuit or connection leak	Reconnect disconnection
	• Cuff leak (evident by oral sound)	Add air to artificial airway cuff
High Volume (MV or VT)	• Patient disconnect	Reconnect patient to ventilator
	Increase in exhaled volume	
	• Increased respiratory rate	See high respiratory rate section
Low Volume (MV or VT)	• Increased VT	Determine cause and correct (i.e. air hungry)
	Loss of expired volume	
	• Leak in system	Correct cause of leak
	• Obstruction	Determine cause and correct (filter, kink, etc.)
High Respiratory Rate	• High pressure limiting volume	Correct cause of high pressure
	Respiratory rate higher than alarm setting	
	• Tachypnea	Determine cause and correct if possible (i.e. pain, hypoxia)
	• Coughing	Suction patient
Vent Inop Loss, Gas Supply Circuit Occlusion	• Auto-cycling	Determine cause and correct (i.e. secretions, leak, cardiac oscillation)
		If any occur, immediately remove patient from ventilator, manually ventilate, and call RT

If unable to correct alarm call for RT support