At the Left side of concept we see that oxygen and air enter the chamber, oxygen from below and air from above , the surface between the two is a variable surface , which can be moved vertically, so if, for example, the oxygen pressure level has gone too high, it can greatly increase the air pressure and balance the output Air . The final valve has a spigot that able to adjust final ratio based on the FiO2 level. Patients with lung and breathe problems, such as corona patients, have low oxygen absorption, so we will need an oxygen capsule so that we can control the amount of oxygen in the system. In fact, we control the volume of MV. After this part the air enters the compressor part. In the compressor we have to control two factors, one is the respiration frequency which can be controlled according to the angular velocity, one is the inhale and exhale ratio, which is the ratio of the time when the inhale and exhale is done with a 3:1 ratio. The compressor consists of 2 parts , one shaft and a axle . while this combo are rotating , diaphragm contracts and opens, so ultimately we have to consider the best amount of pressure and air based on the respiration phase ( inhale/exhale) , as result we can finally handle these factors.. Now the air comes out of the second valve, the second valve is the emergency valve of the system, which prevents the patient from reaching the problem if it is difficult to breathe . Now, if there is no problem, the air enters the vertical tube and goes down to the patient’s lungs. We can use antibacterial filters to keep the airway from becoming infected through exhalation, and the exhaled air will go up through the tube.

