

Respimatic 100

Emergency Respiration Assist Device



Frequently Asked Questions

What is a BVM bag?

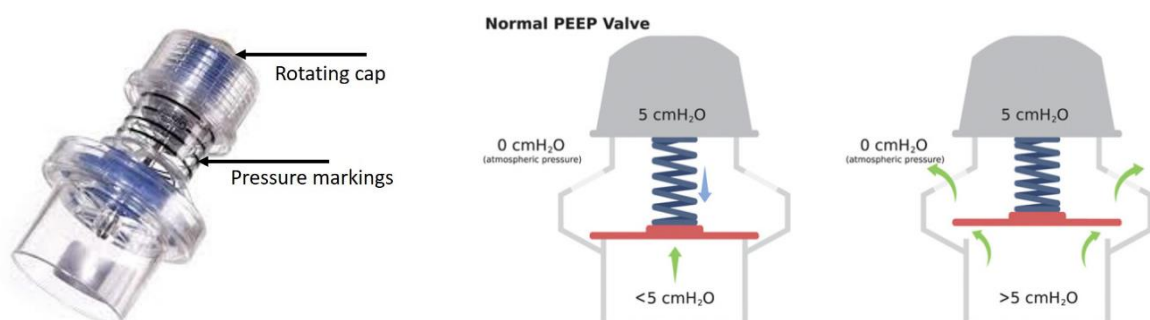
A bag valve mask (BVM), sometimes referred to as an Ambu bag or a Manual Resuscitator Bag, is a self-inflating bag used to provide ventilation to the person not breathing normally. It consists of a self-inflating bag, one-way valve, mask, and an oxygen reservoir.



What is an oxygen reservoir?

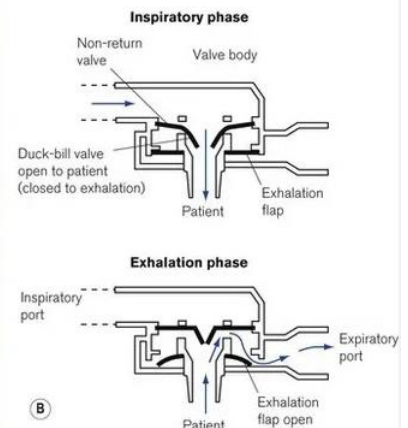
A bag valve mask can be used without being attached to an oxygen tank to provide "room air" (21% oxygen) to the patient. However, BVM devices also can be connected to a separate bag reservoir, which can be filled with pure oxygen from a compressed oxygen source, thus increasing the amount of oxygen delivered to the patient.

What is a PEEP valve?



PEEP valves are adjustable pressure release valves. They are commonly used in conjunction with bag valve masks (BVMs) and vent exhaled gases to the atmosphere. When the pre-valve pressure exceeds the valve setpoint, a diaphragm opens and allows flow. When pre-valve pressure drops below the valve setpoint, the diaphragm closes and flow across the valve stops.

What is a Non-Rebreathing valve?



Non-rebreathing valves prevent rebreathing of the gases by ensuring unidirectional flow of gases. The inhaled and exhaled gases follow different paths, and the exhaled gas never finds its way into the inhalation tube.

What is a HME filter?



Heat and Moisture Exchanger Filter (HMEF) is usually incorporated with a microbiological filter that provides passive humidification.

HME Filter provides adequate humidification of inspired gas reduces the airway resistance, and lowers the incidence of infections and maintains the respiratory loads.

When should the BVM bag be replaced?

BVM bags have a limited lifetime, and the system issues a warning when it is time to replace the one in use. In addition, the BVM bag should be monitored for signs of fatigue every 4 hours of use. Replace the BVM bag if it fails to deliver the desired pressures or volumes, as this may be a sign of fatigue. Always replace the BVM bag between patients. Respiratic 100 has been tested with the Surginatal Disposable Resuscitator.

Why is the target pressure or volume not achievable sometimes?

Adjust the respiratory rate (RR) or inspiratory to expiratory time ratio (I:E).

Check the system for obstructions or kinks.

Replace the resuscitator bag.

Does Respimatic 100 monitor FiO₂?

Respimatic 100 doesn't have an internal oxygen sensor. You can use an accessory FiO₂ monitor, regular arterial blood gases, and SpO₂ pulse oximetry to monitor patient oxygenation. See the Respimatic 100 Operating Manual for more information on FiO₂ flow and minute ventilation.

Are any of the parts of Respimatic 100 reusable?

Replace all parts outside of the Respimatic 100 chassis, which are the ventilator tubing, filters, and patient valve assembly, between patients. You can reuse the components inside the chassis, except the BVM bag, between patients.

Which Respimatic 100 parts should be replaced or cleaned between patients?

Replace all parts outside of the Respimatic 100 chassis, which are the ventilator tubings, filters, HME, water trap, patient valve assembly, catheter mount adapter, and pressure sensing tubings, between patients. You should also replace the BVM bag inside the chassis between patients.

What patient monitoring should I do with Respimatic 100?

It is recommended to monitor patient arterial blood gases and SpO₂, at a minimum. If you use Assist Control, it is also recommended that you conduct CO₂ monitoring as well.

Can I use Respimatic 100 on an infant or a child?

No. Respimatic 100 is designed for adult patients only.

Why does the dashboard lag the front panel by 1-2 breaths?

What is a missed interval on the dashboard?

Where is the dashboard recording saved?