



Pocket Guide Oxylog[®] 3000 *plus* Software version 1.n

The Oxylog[®] 3000 *plus* Pocket Guide is not a replacement or substitute for the Instructions for Use, strict observation of the Instructions for Use is required.

Shown options are at extra cost.

There will be no exchange of the Pocket Guide when the product is updated/upgraded.

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System Overview

NOTE

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- A Screen with screen pages for the specific application
- B Key *Alarms* ▷▷ to display the alarm settings in the "Settings and Alarms" window and to change screen pages
- C Key Settings >> to display ventilation parameters in the "Settings and Alarms" window and to change screen pages
- D Key for setting the ventilation mode SpnCPAP
- E Key for setting the ventilation mode VC-CMV/VC-AC
- F Key for setting the ventilation mode VC-SIMV
- G Key for setting the ventilation mode PC-BIPAP
- H Red and yellow alarm indicators
- I Key 🖾 for suppressing the audible alarm for 2 minutes
- J Key *Alarm Reset* for acknowledging alarm messages
- K Key **02-Inhalation** for O2 inhalation or key **100% O2** for 100% O2 application, depending on the option installed at manufacture

- L Key *Insp. Hold* for initiating a manual inspiration or for extending the current inspiration time
- M Key Start/Standby (1)
- N Display symbols for the power supply
 □→ Charge status of the internal battery
 □→ Mains power supply connected
- **O** Rotary knob for making selections, changing and confirming setting
- P Control knob for setting the O2 concentration FiO2
- **Q** Control knob for setting the maximum inspiratory pressure *Pmax*
- R Control knob for setting the respiratory rate RR
- S Control knob for setting the tidal volume VT
- T Explanation of color codes for quick pre-setting of *RR* and *VT*
- U Key *Curves* [______ to change between the pressure, flow, or CO2 (optional) curve in small and large presentation
- V Key Values C to change screen pages in the "Measured Values" window

Side view, right

Rear view



- A Emergency air intake
- B Knob to secure the battery compartment cover
- C Connectors for flow measuring hoses
- D Gas outlet for ventilation hose
- E Connector for O2 supply
- F Connector for power supply
- G Connector for CO2 sensor
- H Connector for data communication cable



- A Emergency air intake
- B Fresh-gas intake with filter cartridge
- **C** Protection bracket

Adult hose system, reusable

Adult hose system, disposable





- A Angled connector
- B Flow sensor
- **C** Breathing valve
- D Ventilation hose
- **E** Flow and pressure measuring hoses

- A Angled connector
- B Flow sensor
- **C** Breathing valve
- D Ventilation hose
- E Flow and pressure measuring hoses

Pediatric hose system, disposable



- A Angled connector
- B Flow sensor
- C Breathing valve
- D Ventilation hose
- E Flow and pressure measuring hoses

Assembly

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Power supply

The Oxylog 3000 *plus* is designed to operate on power supplies with different voltages:

- DC voltage from the on-board power supply:
 - via DC/DC converter
 - with AC/DC power pack
- Internal rechargeable battery

Installing the battery



- 1 Insert the battery (A) into the battery compartment.
- 2 Close the battery cover (B).
- 3 Tighten the knob (C) by turning it.

Checking the charge status of the battery

 Press the button on the rechargeable battery. The charge status is indicated as a percentage by an indicator.



- 1 The green indicator (A) lights up when an external power source is connected.
- 2 A three colored indicator (B) lights up to show the current charge status of the internal battery:
 - Green: the battery is fully charged.
 - Yellow: the battery is being charged.
 - Red: a battery is not inserted or can not be charged.

Indicators (A) and (B) remain off while the ventilator is being operated from the internal battery.

Additional alarms can draw attention to the remaining operating time of the battery.

The remaining capacity of the battery is indicated by the Oxylog 3000 *plus* in 25% increments in the lower right section of the information window when power is ON.

The capacity indication is overwritten when other messages need to be shown in the information window.

External power supply from mains power (AC/DC power pack)



- 1 Connect the mains plug (A) to the mains outlet.
- 2 Connect the DC connector (B) to the DC connector (C) of the Oxylog 3000 *plus*.
- **3** When the Oxylog 3000 *plus* is correctly connected to an external supply, the indicator (D) lights up.

External power supply with DC/DC converter

The DC/DC converter must be used to connect the Oxylog 3000 *plus* to onboard DC power supply systems, e. g. in ambulances. It can be used with the following voltages: 12 VDC, 24 VDC or 28 VDC. The onboard power supply shall have a fuse of 10 to 16 A.



- 1 Plug the large connector (A) of the DC/DC converter into the on-board supply.
- 2 Plug the small connector (B) into the DC connector (C) of the Oxylog 3000 *plus*.
- **3** When the Oxylog 3000 plus is correctly connected to an external supply, the indicator (D) lights up.

Connecting the gas supply

Supply from an O₂ cylinder

1 Connect the pressure reducer (270 to 600 kPa delivery pressure, 500 kPa nominal pressure) to the O2 cylinder.



- 2 Connect the O2 hose (A) to the Oxylog 3000 plus.
- 3 Connect the O2 hose to the pressure reducer (B).
- 4 Rotate the cylinder valve (C) slowly and open fully.

Determining the approximate pneumatic operating time

Example for supply of O2:

- Cylinder pressure measured on the pressure gauge of the pressure reducer: 20000 kPa (200 bar)
- Liquid capacity of the O2 cylinder: 2.1 L

Supply of O2:

2.1 L x 20000 kPa = approx. 420 L at environmental pressure level.

Example for pneumatic operation time:

VC-CMV mode, frequency 10 breaths/min, VT = 0.53 L, $O_2 = 100\%$

Minute volume = 10 breaths/min x 0.53 L = 5.3 L/min

Operation time = $\frac{O2 \text{ supply [L]}}{(MV + 0.5^*) [L/min]}$

* Calculated with average gas consumption of ventilator: 0.5 L/min

Operation time = $\frac{420}{5.8}$ = approx. 72 minutes

The pneumatic operation time increases when Oxylog 3000 *plus* operates with O2 concentration of less than 100% O2, as ambient air is drawn into the device.

The amount of gas from the high-pressure supply, which is currently being consumed, is indicated by the Oxylog 3000 *plus* in the lower left section of the information window in L/min. This display is overwritten when a higher priority message is activated. Example:

CMV			
MVe 4.3 L/min	FiO2 89	%	102
mbar 301	Paw PEEP	[mbar]	5
20 🖌	Trigge	er [Umin]	Off
10	I:E		1:1.5
0			
0 3	6 S		108
Gas consump. = 5.3	3 L/min		

O2 consumption = 5.3 L/min.

Supply from a piped O2 system



- 1 Connect the O2 hose (A) to the Oxylog 3000 plus.
- 2 Connect the gas probe (B) to the O2 terminal unit until it has properly engaged and the supply of O2 is assured.

Assembling the adult reusable hose system



- 1 Place the diaphragm (B) in the breathing valve housing (C). Ensure that it is inserted correctly.
- 2 Fit the cover (A) and turn it approximately 60^o clockwise to secure into position (a click can be felt).
- 3 Push the flow sensor (D) onto the breathing valve (C). Note the correct alignment of the parts by the groove in the flow sensor (D) and the notch on the breathing valve (C).
- 4 Push the angled connector (E) onto the flow sensor (D).
- **Hose connections**



- 1 Connect the ventilation hose (F) to the breathing valve.
- 2 Connect the flow measuring hoses (G) to the nozzles on the flow sensor. Note the different diameters of the hoses and the nozzles when connecting the flow measuring hoses and connect to the correct side.



- **3** Connect the flow measuring hoses (G) to the Oxylog 3000 *plus*. Correct alignment is indicated by a notch on the connector, which must point away from the ventilation hose. Otherwise, the set will not fit and the measured values will be incorrect.
- 4 Connect the ventilation hose (F) to the gas outlet on the Oxylog 3000 *plus*.

When connecting a hose, check that the hose setting in the **Settings** window corresponds to the connected hose.

Connecting the adult disposable hose system



- 1 Connect the flow measuring hoses (A) to the Oxylog 3000 *plus*. Correct alignment is indicated by a notch on the connector, which must point away from the ventilation hose. Otherwise, the set will not fit and the measured values will be incorrect.
- 2 Connect the ventilation hose (B) to the gas outlet on the Oxylog 3000 *plus*.

When connecting a hose, check that the hose setting in the **Settings** window corresponds to the connected hose.

Connecting the paediatric disposable hose system



- 1 Connect the blue flow measuring hose (B) to the blue labeled connector.
- 2 Connect the transparent flow measuring hose (A) to the other connector.
- **3** Connect the ventilation hose (C) to the gas outlet on the Oxylog 3000 *plus*.

When connecting a hose, check that the hose setting in the **Settings** window corresponds to the connected hose.

Connecting the bacterial filter or HME

It is recommended to use a bacterial filter between ventilator and patient, to reduce the risk of bacteria, viruses, fungi or spores being present in the inspiratory flow.

 Connect the bacterial filter or HME to the angled connector as follows.

Adult reusable hose:



Adult disposable hose:



Paediatric hose:



Connecting the CO₂ sensor and the cuvette



- 1 Disconnect the angled connector (A) from the flow sensor (D).
- 2 Attach the cuvette (C) to the flow sensor (D), with the cuvette windows facing the side.
- 3 Attach the angled connector (A) to the cuvette (C).
- 4 Push the CO₂ sensor (B) onto the cuvette (C), with the cable towards the device.
- 5 Plug the CO₂ sensor into the connector of the Oxylog 3000 *plus*. For the connector location, refer to the section "Side view, right" on page 6.
- 6 Insert the CO₂ sensor cable in the cable clips on the hose.

Alternatively, connect the cuvette (C) directly to the patient side of the angled connector (A), without disconnecting the angled connector from the flow sensor (D).

Getting started

NOTE

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Switch the device ON



• To switch the device ON, briefly press the () key (A).

The Oxylog 3000 *plus* performs a self-test. The self-test will be completed in approximately 6 seconds.

During the self-test, the system briefly displays the starting page with a bar graph indicating the progress of the self-test, the software version, and a prompt for the operator to activate the device check by pressing the rotary knob (B).

If the rotary knob (B) is not pressed during the self-test, the hose selection page is displayed.



Select the connected hose type as seen in the above graphic by rotating the rotary knob (B) and confirm by pressing the rotary knob (B). The ventilator now automatically begins ventilation with the default settings.

Switch the device OFF

- After disconnecting the patient:

Switch the device OFF:



1 To switch the device OFF, press the () key (A) for approximately 3 seconds.

Ventilation is now stopped and a high-priority alarm is issued.

This alarm can be silenced with the 🔯 key.

- 2 Either:
 - Press the rotary knob (B) to confirm switch OFF.

Or

 Press the () key (A) to resume ventilation with the previous settings.

Perform device check

Connect the test lung



- 1 Make sure that the angled connector (A) is connected to the flow sensor.
- 2 Connect the catheter connector (B) of the test lung, diameter 7 mm, to the angled connector. The catheter connector simulates the resistance of the airways.
- Connect the balloon (C) of the test lung. 3

А Oxvlog 3000 plus o 💷 Drägen B

Switch the device ON

To switch the device ON, briefly press the (1) key 1 (A).

The device performs a self-test and the operator is prompted, on the display, to activate the configuration menu or device check:

Press rotary knob for device check and configuration

2 Press the rotary knob (B) to confirm, before the bar is full. The start-up screen appears:



3 Select Device check in the start-up menu and confirm

The device check can be aborted at any time by pressing the Alarm Reset key.

Check connections

- 1 Ensure that the gas supply has been connected.
- 2 Select and confirm the appropriate hose type.
- 3 Ensure that the test lung has been connected. The Oxylog 3000 plus automatically checks if a test lung has been connected. The device check is interrupted if a test lung is not detected within one minute. The check is continued when the test lung is detected.
- 4 The Oxylog 3000 plus automatically checks if the detected hose differs from the selected hose type.
- 5 Set the controls below the display to the required values.

The Oxylog 3000 plus successively activates the audible and visual alarm signals and prompts the operator to acknowledge each signal.

Confirm the audible and visual alarm signals. The device check continues automatically.

The bar graph shows the progress made by the device check.

The result is displayed on the last page of the device check screens.

Error messages	during	the	device	check
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Message	Cause	Explanation/Remedy
System leakage	Leak in ventilation hose system and/or test lung.	Check hoses, breathin valve, flow sensor, and test lung for leaks and replace if necessary.
	Internal leak in system.	Contact your local DrägerService for additional support.
No test lung	Test lung not connected or major	Connect test lung.
	leakage.	Check hoses, breathing valve, flow sensor, and test lung for leaks and replace if necessary.
Breathing valve inop	Breathing valve has malfunctioned.	Check correct condition of brea- thing valve including diaphragm and rubber disc; fit a new breathing valve if necessary or use a new dis- posable hose set.
Pressure measurement inop	The ventilation hose system has not been connected correctly.	Connect ventilation system cor- rectly.
	Pressure measurement is not pos- sible.	Contact your local DrägerService for additional support.
PEEP-valve inop	Internal leak in system.	Check hoses, breathing valve, flow sensor, and test lung for leaks and replace if necessary.
	Device defective.	Contact your local DrägerService for additional support.
Patient flow measurement inop	Flow measurement implausible.	Replace flow sensor.
		Contact your local DrägerService for additional support.
Hose detection inop	The device check failed on the hose detection.	Connect a different hose or change hose setting.
Detected hose differs from se- lected hose	The hose that is detected differs from the selected hose type, or the flow measuring hoses are incorrect- ly positioned.	Connect a different hose or change hose setting.

CO₂ zero calibration and filter check before ventilation (optional)

The CO2 zero calibration and filter check only work if the CO2 option has been installed and if the CO2 sensor is present.



1 To switch the device ON briefly press the (1) key (A).

The device performs a self-test and the operator is prompted, on the display, to activate the configuration menu or device check:

Press rotary knob for device check and configuration

2 Press the rotary knob (B) to confirm, before the bar is full.

Menu	
Device check	
Configuration and information	
CO2 Zero Calibration and Filter Check	
Start ventilation	1
Exit with Alarm Reset	146371

3 Select CO2 Zero Calibration and Filter Check in the start-up menu and confirm.

NOTE

The CO2 zero calibration and filter check can be discontinued at any time by pressing the *Alarm Reset* key.

Zero calibration before ventilation

The zero calibration is performed with a clean CO2 sensor that has been removed from the cuvette.

033

1 Remove the CO2 sensor (A) from the cuvette (B).

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- 2 Select and activate Zero Calibration. The screen displays the text Remove sensor from cuvette. Confirm with rotary knob.
- 3 Confirm. The zero calibration starts and the line displays Zero calibration in progress. After a successful zero calibration, the line briefly displays Zero calibration OK.
- 4 Press Alarm Reset to exit.
- 5 Attach the CO₂ sensor back to the cuvette.

CO₂ filter check before ventilation

NOTE

Before the CO2 filter check, you need to have finished a successful CO2 zero calibration. Otherwise the CO2 filter check may be outside of the tolerance range.

1 Remove the CO₂ sensor from the cuvette.



- 2 Attach the CO2 sensor (A) to the test filter (B).
- 3 Select Filter check.
- 4 Confirm. The filter check starts and the screen displays *Filter check in progress*. After a successful filter check, the line briefly displays *Filter check OK*.
- 5 Press Alarm Reset to exit.
- 6 Attach the CO₂ sensor back to the cuvette.

Selecting the ventilation mode



 Press the appropriate ventilation mode key (A) for approximately 3 seconds.

- 1 Press the appropriate ventilation mode key (A).
- 2 Press the rotary knob (B) to confirm.

The selected ventilation mode will be activated.

The active ventilation mode is displayed in the upper left corner of the display (C).

Setting ventilation parameters

• Set the required control knob below the display.

Or

 Select, set and confirm a parameter on the display with the rotary knob.

If the changed settings are not confirmed after 5 seconds, the alarm *! Confirm settings* appears. If the settings are still not confirmed after 10 seconds, the alarm *! Settings not confirmed* appears. After that the former settings are restored.

When the PEEP setting is increased above 10 mbar, a message **Confirm PEEP above 10 mbar?** will appear to request confirmation of the change. The PEEP setting can be increased to the desired setting after the message is confirmed with the rotary knob.

The device can be configured to show *Ti* or *I*:*E* as a primary parameter that can be set. If *Ti* is configured as the primary parameter, *I*:*E* will be shown in the information window when *Ti* is selected, and vice versa.

Display operating controls



Or

- A Rotary knob for making selections, changing and confirming settings.
- B Key *Values* >> to change screen pages in the "Measured Values" window.
- C Key Curves to change between the pressure, flow or CO2 (optional) curve in small and large presentation.
- D Key Settings ▷▷ to display ventilation parameters (ventilation screen) in the "Settings and Alarms" window and to change screen pages.
- E Key *Alarms* ▷▷ to display the alarm settings in the "Settings and Alarms" window and to change screen pages.

Displaying curves

The curves window can display the airway pressure curve Paw, the flow curve or the CO₂ curve (optional).

To display a different curve:

Press Curves key.

Displaying measured values

Measured values are displayed in the measured values window.

To switch between the values:

• Press the *Values* >> key: the next value pair is displayed on the screen.

Measured values window



- A Parameter measured.
- B Measured value.
- C Unit of measure.
- D Measured values 1/7: 1st page of 7 available pages. If CO2 option is not installed: 1/6 available pages.
- E Trigger indicator.

Cardio-pulmonary resuscitation (CPR)

During CPR, the airway pressure *Paw* is increased because of chest compressions.

The Oxylog 3000 *plus* will try to limit the airway pressure *Paw* to the set *Pmax*, without ending the inspiration prematurely.

However, if due to compressions the airway pressure **Paw** exceeds the set **Pmax** by 5 mbar, the Oxylog 3000 *plus* cycles to the expiration phase.

Therefore in general, if *Pmax* is set to a higher value, a higher minute volume is possible. However, this increases the intra-thoracic pressure and may reduce coronary perfusion.

Operation

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Ventilation functions of the Oxylog 3000 *plus*

Ventilation modes:

- Volume-controlled ventilation:
 - VC-CMV / VC-AC
 - VC-SIMV
- Pressure-controlled ventilation:
 - PC-BIPAP
- Support of spontaneous breathing:
 - SpnCPAP

Additional settings for ventilation:

- Pressure support: in the ventilation modes VC-SIMV, PC-BIPAP, SpnCPAP
- Apnoea ventilation: in the ventilation mode SpnCPAP
- AutoFlow (optional): in the ventilation modes VC-CMV, VC-AC, and VC-SIMV
- NIV: in the ventilation modes SpnCPAP (/PS), PC-BIPAP (/PS), VC-CMV / AF, VC-AC / AF, and VC-SIMV / AF

Special procedures:

- Inspiration hold
- O2 inhalation (optional), with an inhalation mask

VC-CMV, VC-AC

Volume Controlled - Controlled Mandatory Ventilation



Volume-controlled ventilation with fixed mandatory minute volume MV, which is set with tidal volume *VT* and respiratory rate *RR*.

Set the ventilation pattern with the controls below the display:

- Tidal volume VT.
- Ventilation respiratory rate *RR*. (minimum possible frequency: 5 per min).
- Maximum airway pressure **Pmax**.
- O2 concentration *FiO2*.

The following can be set on the display:

CMV MVe 4.3 L/min FiO2 89 % 1/7 mhar Paw 5 PFFP [mbar] 30 Off Trigger [L/min] 20 I:E 1:1.510 0 É s 1/3Gas consump. = 5.3 L/min

- Positive end expiratory pressure PEEP.
- Sensitivity Trigger.
- Ventilation time ratio I:E or inspiration time Ti.



- Plateau time *Tplat* %, in % of the inspiration time.
- AutoFlow (optional).
- Hose type

The selected hose type must match the hose type in use. Otherwise a correct volume measurement cannot be guaranteed.

Cuvette type (optional)

Activating/setting the trigger



- 1 Press the key *Settings* >> (A) until the trigger parameter is displayed.
- 2 Select the line *Trigger* on the display and then set and confirm the value with the rotary knob. Small value = high sensitivity.

The ventilation mode **AC** is shown on the display.

Successful patient triggering is indicated by an asterisk (*) on the left side of the curves window.

Deactivating the trigger

- Set a value less than 1 L/min or greater than 15 L/min (off is displayed instead of a value).
- 2 Press the rotary knob to confirm.

The last effective trigger value is adopted by the ventilator when changing from VC-AC to PC-BIPAP or SpnCPAP.

NOTE

When the Oxylog 3000 *plus* is in the ventilation mode VC-CMV and the trigger is set to a value, the ventilation mode changes to VC-AC.

Setting AutoFlow (optional)

The following can also be set on the display for VC-CMV and VC-AC:

CMV/	AF							
MVe	3.8	L/min		FiO	2 80	%	E	17
n 30†	ibar 		Paw	_	Slope			~
20	1				AutoF	low - AF)n
10					NIV		0	ff
0				_				
0		3		-6 s				33
Gas co	onsum	p. = 4.3	2 Umir	1				D

- The AutoFlow function AutoFlow-AF.

When AutoFlow is switched on, the setting *Tplat***%** is no longer valid, and *Slope* must be set.

VC-SIMV, VC-SIMV/PS

Volume Controlled - Synchronized Intermittent Mandatory Ventilation



For patients with inadequate spontaneous breathing, or for patients who are to be weaned gradually.

Fixed mandatory minute volume MV is set with tidal volume VT and ventilation respiratory rate RR. The patient can breathe spontaneously between the mandatory ventilation strokes and thus contribute to the total minute volume. Spontaneous breathing can be assisted with PS.

Set the ventilation pattern with the controls below the display:

- Tidal volume VT.
- Respiratory rate *RR*. (minimum possible respiratory rate: 2 per min).
- Maximum airway pressure Pmax.
- O2 concentration FiO2.

The following can be set on the display:

- Positive end expiratory pressure PEEP.
- Pressure support *APsupp* above PEEP.
- Sensitivity Trigger.
- Ventilation time ratio I:E or inspiration time Ti.
- Plateau time Tplat %, in % of the inspiration time.
- AutoFlow (optional).

Insp.term.%PIF

Inspiration termination criterion of pressure supported strokes, as percentage of the peak inspiratory flow (PIF).

Hose type

The selected hose type must match the hose type in use. Otherwise a correct volume measurement cannot be guaranteed.

- Cuvette type (optional)

Setting pressure support VC-SIMV/PS

The following can also be set on the display for VC-SIMV:

SIMV/PS				
MVe 4.1 L/min	FiO2	79 '	%	1)7
mbar 30+	Paw P	EEP	[mbar]	5
20-	Δ	Psupp) [mbar]	3
10	Т	rigger	'[L/min]	3
0	I I	:E		1:1.5
0 3	6 s			08
Gas consump. $= 3.6$	8 L/min			

- Setting on page 1: Pressure support △*Psupp* above PEEP.
- Setting on page 2: When △*Psupp* is set above 0 mbar, the pressure rise time *Slope* can be set.
 - Flat slope = long pressure rise time

Medium slope = medium pressure rise time

Steep slope = short pressure rise time.

Setting AutoFlow (optional)

The following can also be set on the display for VC-SIMV and VC-SIMV/PS:

SIMV	/AF				
MVe	4.2	L/min	FiC	2 79 %	1)7
30 20 10 0	nbar		Paw	Slope AutoFlow - AF NIV	_ ⊡ Off
0		3	6 5	i	23
Gas o	onsum	ip. = 3.i	3 L/min		

The AutoFlow function AutoFlow-AF.

When AutoFlow is switched on, the setting *Tplat*% is no longer valid, and *Slope* must be set.

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PC-BIPAP, PC-BIPAP/PS

Pressure Controlled - Biphasic Positive Airway Pressure



Pressure-controlled ventilation combined with spontaneous breathing throughout the breathing cycle and variable pressure support at CPAP level.

For patients without spontaneous breathing, to spontaneously breathing patients shortly before extubation. The patient is weaned by gradually reducing the mandatory portion of the total minute volume MV and by reducing the pressure support Δ Psupp.

The mandatory portion of the total minute volume MV is set via the inspiratory pressure Pinsp, PEEP and ventilation respiratory rate *RR*.

Set the ventilation pattern with the controls below the display:

- Respiratory rate **RR**.
- Maximum airway pressure *Pmax*.
- O2 concentration *FiO2*.

The following can be set on the display:

BIPAP		
MVe 3.6 L/min	FiO2 81 %	112
mbar 30 	_PawPEEP [mba	r] 5
20	Pinsp [mba	r] 20
10	∆Psupp [mba	r] 0
0	Trigger [L/mi	n] 3
0 3	<u>6</u> s	08
Gas consump. $= 3$.	6 L/min	

- Positive end expiratory pressure PEEP.
- Inspiratory pressure *Pinsp*.
- Pressure support *△Psupp* above PEEP.
- Sensitivity *Trigger*.
 Successful patient triggering is indicated by an asterisk (*) on the left side of the curves window.
- Ventilation time ratio *I:E* or inspiration time *Ti*.
- Pressure rise time *Slope* (effective for the PC-BIPAP stroke and pressure support △Psupp).
- NIV Non-invasive ventilation.
- Insp.term.%PIF

Inspiration termination criterion of pressure supported strokes, as percentage of the peak inspiratory flow (PIF).

Hose type

The selected hose type must match the hose type in use. Otherwise a correct volume measurement cannot be guaranteed.

Cuvette type (optional)

Setting pressure support PC-BIPAP/PS

The following can also be set on the display for PC-BIPAP:

BIPA	P/PS						
MVe	3.6	L/min	F	FiO	2 81	%	107
 30†-	nbar 		Paw .	_	PEEP	[mbar]	5
20	1				Pinsp	[mbar]	20
10	1				∆Psup	p [mbar]	3
0			_	_	Trigge	r [Umin]	3
		3		6 s			<u> 178</u>
Gas co	onsum	р. = З.	6 Umin				

- Setting on page 1: Pressure support △*Psupp* above PEEP.
- Setting on page 2: Pressure rise time Slope.
 - Flat slope = long pressure rise time
 - / Medium slope = medium pressure rise time
 - Steep slope = short pressure rise time.

SpnCPAP, SpnCPAP/PS

Spontaneous Continuous Positive Airway Pressure

Set the ventilation pattern with the controls below the display:

- Maximum airway pressure *Pmax*.
- O2 concentration *FiO2*.

The following can be set on the display:

CPAF)						
MVe	0.6	L/min		FiO	2 100 °	%	1/7
n 601	nbar		Paw		PEEP	[mbar]	5
45					ΔPsupp	[mbar]	0
30							
15	_						
0 0		Ś	10	155			ma.
Gas o	onsum		 9 Límir	1			

- Positive end expiratory pressure PEEP.
- Pressure support *APsupp* above PEEP.
- **NIV** Non-invasive ventilation.
- Insp.term.%PIF

Inspiration termination criterion of pressure supported strokes, as percentage of the peak inspiratory flow (PIF).

Hose type

The selected hose type must match the hose type in use. Otherwise a correct volume measurement cannot be guaranteed.

Cuvette type (optional)

If *A***Psupp** is set above 0 mbar, the following can also be set on the display for SpnCPAP:

- Sensitivity *Trigger*.
 Successful patient triggering is indicated by an asterisk (*) on the left side of the curves window.
- Pressure rise time *Slope* (effective for pressure support *△Psupp*).

Apnoea ventilation



Apnoea back-up ventilation is only applicable when using the SpnCPAP mode. In the event of an apnoea, the ventilator will automatically activate volume-controlled mandatory ventilation (VC-CMV).

When an apnoea occurs, the device simultaneously issues an alarm signal and switches to volume controlled ventilation with the parameters respiratory rate *RRapn*, tidal volume *VTapn*, and the maximum airway pressure *Pmax* when the apnoea time *Tapn* has been reached. The ventilation time ratio I:E = 1:1.5 and the plateau time *Tplat* % = 0 are preset during apnoea ventilation.

Setting apnoea ventilation

On the display:

1 Set *Tapn* with the rotary knob to a value between 15 and 60 seconds.

The parameters RRapn and VTapn, which are required for setting apnoea ventilation, are now displayed:

CPAP/PS	
etCO2 36 mmHg FiO2	100 % 🗾 🗖
mbar Paw N 301	JIV Off
20 T	'apn [s] 20
10 V	/Tapn [mL] 500
₀ -Alle-All e F	Raph [/min] 12
0 5 10 15s	53
Gas consump. =17.2L/min	

- 2 Set RRapn and VTapn.
- 3 Set *Pmax.* This determines the maximum airway pressure allowed during apnoea ventilation.

To end apnoea ventilation

Press the Alarm Reset key.

The ventilator resumes ventilating with the original mode and parameter settings.

To disable apnoea ventilation

Set Tapn to OFF.

NIV – Non-invasive ventilation (mask ventilation)

Use of NIV

NIV can only be activated as a supplementary function in the ventilation modes SpnCPAP (/PS), PC-BIPAP (/PS), VC-CMV / AF, VC-AC / AF, and VC-SIMV / AF. The Oxylog 3000 *plus* automatically adjusts to the requirements of mask ventilation. Mask leakages are detected by the device and compensated for. Therefore, the displayed measured values VTe and MVe do not include the leakage. The leakage alarm is inactive.

When NIV is switched on, the supplement NIV appears in the ventilation mode window.

NOTE

Refer to the NIV section in the Instructions for Use for a clear understanding of risks associated with NIV use.

Special functions

Manual inspiration / Inspiration hold

The function Manual inspiration / Inspiration hold will either initiate a new (manual) ventilation stroke or hold the inspiratory phase of the current ventilation stroke for a maximum of 15 seconds.

The pattern of the manually started ventilation stroke corresponds with the set ventilation mode.

This function is not available for:

- SpnCPAP without PS,
- O2 inhalation (optional).

To activate Manual inspiration or Inspiration hold



Press key Inspiration hold (A) for as long as inspiration is required.

100 % O2 (optional)

To apply 100 % O2 for 3 minutes regardless of the momentarily set value.

 Briefly press key 100 % O2 (B). Its indicator lights up for 3 minutes.

The set value is resumed by the ventilator upon expiry of these 3 minutes, or when the 100 % O2 is pressed again. The indicator dims.

O2 inhalation (optional)

The O2 inhalation function is not a ventilation mode.

It may only be used for patients with spontaneous breathing who receive a constant O2 flow of between 0 and 15 L/min via a mask.

To activate O2 inhalation



- 1 Connect the inhalation mask to the gas outlet for ventilation hose (B).
- 2 Press and hold key *O2-Inhalation* (A) for approx. 3 seconds.

O2 inhalation is performed with the previously effective setting.

3 Set and confirm the required O₂ flow via the rotary knob (C).

Setting HME correction

When using an HME, the measured flow may deviate from the actual expiratory flow, as temperature and humidity of the gas are reduced. The flow and volume measurements can be corrected for use with an HME.

When using HME, select, set and confirm *HME - On* in the Settings window with the rotary knob.

CMV			
MVe 3.2 L/min	FiO2	80 %	07
mbar 30 	H	IME	On
20	H	lose type	REUS
10	В	rightness	3/4
0 <u>-</u>	<u> </u>		हात
Gas consump. = 3.4	t Lýmin		

CO₂ measurement (optional)

The CO₂ measurement only works if the CO₂ option has been installed and if the CO₂ sensor is present.

Cuvette type setting



To set the cuvette type (reusable or disposable):

- 1 Press the Settings >> key.
- 2 Select and activate the line *Cuvette type*.
- 3 Set the cuvette type and confirm.

NOTE

The cuvette windows of the reusable cuvette and disposable cuvette have different optical properties. Therefore, the correct cuvette type must be selected in the Setting menu. Otherwise the zero point is shifted by up to ±8 mmHg of CO₂.

Checking the CO2 sensor during ventilation

The following checks are necessary for the CO₂ sensor during ventilation:

Check	Interval
CO2 zero calibrati- on	Required before measurement and when changing the CO2 sen- sor to another unit.
	Required if the CO ₂ sensor shows an offset after a warm-up phase.
CO2 filter check	Required in intervals of one month.

Zero calibration during ventilation

The zero calibration is performed with a clean CO2 sensor that has been removed from the cuvette.

To perform zero calibration:

 Connect the CO2 sensor and wait at least 3 minutes for the CO2 sensor to complete its warm-up phase.



- 2 Remove the CO₂ sensor (A) from the cuvette (B).
- 3 Press the **Settings** $\triangleright \triangleright$ key.
- 4 Select and activate the line CO2 Zero Calib Run. The screen displays the text Remove the sensor from cuvette then press rotary knob.

5 Confirm. The zero calibration starts and the line displays *Busy*.

Note the possible warm-up time. During zero calibration, ventilation settings can be changed. After a successful zero calibration, the line briefly displays Pass.

6 Attach the CO₂ sensor (A) back to the cuvette (B).

If zero calibration was not successful:

The Oxylog 3000 *plus* displays the alarm *!!!* CO2 Zero calib. failed.

Repeat zero calibration

If zero calibration is still not possible:

- Check whether the sensor (A) is soiled and clean if necessary. If the sensor is defective, replace the sensor.
- 2 Repeat zero calibration.

CO2 filter check during ventilation



To perform CO2 filter check:

- 1 Remove the CO₂ sensor from the cuvette.
- 2 Attach the CO₂ sensor (A) to the test filter (B).
- 3 Press the Settings key.
- 4 Select and activate the line CO2 Filter check Run.
- 5 Confirm. The filter check starts and the line displays Busy. During the filter check, ventilation settings can be changed.

After a successful filter check, the line briefly displays **Pass**.

6 Attach the CO2 sensor (A) back to the cuvette.

If the check was not successful:

The Oxylog 3000 *plus* displays the alarm *!!!* CO2 Filter **check failed**. The test value is outside the permissible tolerance.

- Check whether the sensor (A) or test filter (B) is soiled and clean them if necessary. If the sensor is defective, replace the sensor.
- 2 Check the CO₂ calibration with test gas or calibrate the CO₂ sensor.

Alarms

NOTE

The Oxylog 3000 *plus* Pocket Guide is not a replacement or substitute for the Instructions for Use. Any use of the device requires full understanding and strict observation of the Instructions for Use.

In the event of an alarm



 The indicator (A) flashes red or yellow, or lights up yellow.

And

 The alarm message appears on the upper right corner of the screen (C). In addition, alarm tones are issued.

When the fault has been remedied the alarm tone is cancelled.

Alarms, which have been remedied and remain on the display, can be acknowledged (reset):

• Press the Alarm Reset key (B).

The alarm message is now removed from the display.

Every alarm which has been remedied, but not acknowledged, will be overwritten when a new alarm is issued.

Suppress alarm tones

 Press the key A.
 The alarm indicator remains active and all alarm tones are suppressed for approximately 2 minutes. Alarm tones are resumed by the device after these 2 minutes.

If alarm tones are to be heard again before the 2 minutes have expired:

• Press the key 🕅 again.

Setting alarm limits

Setting upper alarm limit for Paw



• Set the maximum airway pressure Pmax via the *Pmax* control (A).

Lower alarm limit for Paw

The Oxylog 3000 plus automatically generates an alarm when it no longer detects a pressure difference of more than 5 mbar between the inspiratory and expiratory pressure; for more than 20 seconds.

Setting alarm limits for MVe, RRsp and optional etCO₂

- 1 Press the key *Alarms* (>> (B).
- 2 Select and activate the low alarm limit $\sqrt{}$ or high alarm limit / for MVe, RRsp or etCO2 on the display.
- 3 Set and confirm the value.

Alarms window

If the CO2 sensor cable is disconnected, etCO2 alarm limits are not visible. If the CO2 sensor cable is disconnected and then reconnected, the previously set alarm limits will still be valid



Setting alarm limits automatically

The function Alarms: Autoset sets the alarm limits on the basis of the actual measured values at the time of activation. This automatic setting of alarm limits is performed only once, when confirmed with the rotary knob.

- 1 Press the key *Alarms* >> (B).
- 2 Select and activate the line Alarms: Autoset on the display.
- 3 Press the rotary knob to confirm Alarms: Autoset, or press the Alarm Reset key to leave the settings unchanged.

The auto alarm limits are based on the actual measured values as follows:

Alarm		Setting
MVe	▼∕	Current value -20 %, with a minimum of 0.5 L/min. Below 0.5 L/min the limit remains unchanged.
MVe	_/	Current value +30 % or +2 L\min, whichever is smaller.
RRsp	_/	Current value +5/min, with a minimum of 10/min.
etCO2		Based on the current value.

The etCO2 _▼/ / /▲ auto alarm limits are based on the actual etCO2 value as follows:

Lower alarm limit	Current measu-	Upper alarm limit
[mmHg]	red value [mmHg]	[mmHg]
Unchanged	<15	Unchanged
Current –5	15 to 35	Current +15
Current –7	35 to 45	Current +10
Current –10	>45	Current +5

Lower alarm limit [kPa] or [Vol.%]	Current measu- red value [kPa] or [Vol.%]	Upper alarm limit [kPa] or [Vol.%]
Unchanged	<2.0	Unchanged
Current -0.7	2.0 to 4.7	Current +2.0
Current -0.9	4.7 to 6.0	Current +1.3
Current -1.3	>6.0	Current +0.7

Problem solving

NOTE

The Oxylog 3000 *plus* Pocket Guide is not a replacement or substitute for the Instructions for Use. Any use of the device requires full understanding and strict observation of the Instructions for Use.

The Oxylog 3000 *plus* classifies alarm messages according to three priority levels and identifies these accordingly with the aid of exclamation marks:

- !!! Warning High priority alarm message
- !! Caution Medium priority alarm message
- ! Advisory Low priority alarm message

In the following table, the alarm messages are listed in alphabetical order. If an alarm occurs, the table helps to identify causes and remedies. The different causes and remedies should be worked through in the order listed until the cause of the alarm has been resolved.

When multiple alarms occur, they are displayed according to their Alarm Rank, as illustrated in the table below. A lower number has a higher rank.

	Alarm	Cause	Remedy	Alarm Rank
	Apnoea	Spontaneous breathing by the patient has failed, or disconnection.	Check patient condition.	8
			Ventilate in VC-CMV mode.	
			Ensure that hose connections are tight.	
		Faulty flow sensor.	Replace flow sensor.	_
111	Apnoea ventilation	The ventilator has automatically switched over to mandatory ventilation after detecting an apnoea (only in SpnCPAP mode).	Check patient condition.	7
	(only for CPAP)		Check ventilation settings. To return to the original ventilation mode: Press the <i>Alarm Reset</i> key.	
11	Charge int. battery	The Oxylog 3000 <i>plus</i> draws its power from the internal battery due to the absence of an external power supply. There is only approximately 10 minutes of operating time remaining in the internal battery.	The ventilator must immediately be reconnected to the mains supply or an onboard power supply, or a fully charged battery must be installed (ventilation stops while installing the battery).	31
111	Check measuring lines	The flow measuring hoses are connected incorrectly.	Connect the flow measuring lines correctly.	9

Messages in the alarm window

	Alarm	Cause	Remedy	Alarm Rank
11	Check settings flow	The flow resulting from the settings for "Tidal volume <i>VT</i> per unit time" is not possible.	Change tidal volume <i>VT</i> or inspiratory time <i>Ti</i> or ventilation time ratio <i>I:E</i> , plateau time <i>Tplat%</i> , or respiratory rate <i>RR</i> .	27
1	Check settings FiO2	The set FiO2 concentration can- not be achieved with the set flow.	Adjust inspiratory flow or FiO2 concentration (in accordance with measured value).	42
11	Check settings time	The inspiratory and / or expiratory time resulting from the settings for <i>RR</i> and <i>I:E</i> or <i>Ti</i> are not possible.	Change RR or I:E or Ti .	26
11	CO2 Filter check failed	The sensor reports a reference check failure.	Clean the CO ₂ test filter or the CO ₂ sensor and cuvette win- dows.	19
			Recalibrate the sensor.	
11	CO2 sensor?	The connector of the CO2 sensor was removed during operation.	Reinsert the connector.	15
		The CO2 sensor has a hardware failure.	Replace the CO2 sensor.	
III	Clean the CO2 cuvette	The sensor or cuvette window is soiled.	Clean the sensor and cuvette windows.	16
11	CO2 Zero calib. failed	The sensor window is soiled.	Clean the CO2 sensor window.	18
		Zero calibration of the CO2 sensor failed.	Redo the zero calibration.	_
III	CO2 Zero calib. request	Zero point of the CO2 sensor is outside the tolerance range.	Perform the zero calibration.	20
!	Confirm settings	Changed setting has not been confirmed with the rotary knob.	Press the rotary knob to con- firm the setting change.	43
111	Constant CO2 value	An incorrect cuvette type selected.	Select the correct cuvette type.	17
		Cuvette or sensor soiled.	Clean the cuvette or sensor.	
<i>III</i>	Continuous high	Breathing valve or hose system	Check patient condition.	4
	pressure		Check breathing valve and hose system.	
		Increased expiratory resistance.	Check bacterial/HME filter. Replace it if necessary.	_
		Technical defect.	Disconnect the patient from the device and continue ventilation without delay using another ventilator. Call DrägerService.	

	Alarm	Cause	Remedy	Alarm Rank
111	Device failure	Technical defect.	Disconnect the patient from the device and continue ventilation without delay using another ventilator. Call DrägerService.	1
111	Display inop	Technical defect.	Disconnect the patient from the device and continue ventilation without delay using another ventilator. Call DrågerService.	38
11	etCO2 high	The upper alarm limit for end-	Check patient condition.	21
		has been exceeded.	Check alarm limits.	-
			Adjust the alarm limit, if neces- sary.	
11	etCO2 low	The lower alarm limit for end- expiratory CO2 concentration has been exceeded.	Check patient condition.	22
			Check alarm limits	_
			Adjust the alarm limit, if neces- sary.	_
11	Flow measurement inop	Measurement hoses for flow measurement kinked, discon- nected or leaking.	Ensure that the flow measure- ment hoses are connected cor- rectly.	37
		Flow sensor defective.	Replace flow sensor.	
		Technical defect.	Disconnect the patient from the device and continue ventilation without delay using another ventilator. Call DrägerService.	_
11	High respiratory rate	Patient breathes at a high spon- taneous rate.	Check patient condition, check ventilation pattern, correct alarm limit <i>RRsp</i> if necessary.	28
11	Int. battery charging inop	The internal battery is not being charged due to a battery failure.	Exchange internal battery. Call DrägerService.	32
		The internal battery is not being charged due to a device failure.	Continuous ventilation with this device is only possible with an external power source. Call DrägerService.	_
111	Int. battery dis- charged	The operating time for operation with the internal battery has expired and an external power supply has not been connected.	The ventilator must immedi- ately be reconnected to a mains supply, an on-board DC supply or a fully charged bat- tery must be installed.	2

	Alarm	Cause	Remedy	Alarm Rank
11	Int. battery in use	During ventilation, when the external power source has been disconnected, the internal bat- tery becomes the main power source.	Connect an external power supply. Press the <i>Alarm Reset</i> key to confirm the alarm.	25
		When starting ventilation while using the internal battery this alarm will not be issued.		
II	Key failed	A key is pressed for longer than 30 seconds.	Press keys only briefly.	33
		Technical defect.	To continue ventilation with this device, verify the ventilation settings and continuously monitor the device functions. Call DrägerService.	-
<i>III</i>	Leakage	The measured expiratory tidal volume VT is approximately 40 % lower than the inspiratory value.	Repair leaks in hose system	14
	(not in NIV)		Use a new hose system.	
		Faulty flow sensor.	Replace the flow sensor.	-
		Technical defect.	Disconnect the patient from the device and continue ventilation without delay using another ventilator. Call DrägerService.	_
11	Loss of data	No logbook data or clock avail- able. Actual settings will be lost in case of a power loss.	Ventilation functions are not affected. Call DrägerService.	35
11	Loudspeaker inop	Technical defect.	To continue ventilation with this device, continuously monitor the device functions. Call DrägerService.	36
111	MVe high	The upper alarm limit for the minute volume MVe has been exceeded.	Check patient's condition, check ventilation pattern, adjust alarm limits if necessary.	13
		Faulty flow sensor.	Replace flow sensor.	_
		Technical defect.	Disconnect the patient from the device and continue ventilation without delay using another ventilator. Call DrägerService.	_

	Alarm	Cause	Remedy	Alarm Rank
111	MVe low	The minute volume MVe has dropped below its lower alarm limit.	Check patient's condition, check ventilation pattern, adjust alarm limits if necessary.	12
		Leak in exhalation system.	Ensure connections in exhala- tion system are tight.	_
		Faulty flow sensor.	Replace flow sensor.	_
		Technical defect.	Disconnect the patient from the device and continue ventilation without delay using another ventilator. Call DrägerService.	
!!	No int. battery ?	Internal battery not installed, faulty or wrong battery installed.	Fit battery or press the <i>Alarm</i> <i>Reset</i> key to confirm the alarm or change internal battery.	39
1	No int. battery ?	Internal battery not installed, faulty or wrong battery installed.	Advisory message, is displayed continuously when confirmed. Fit battery or change internal battery.	40
!	No int. battery charg- ing	Internal battery cannot be charged due to a faulty battery or too hot or cold environment.	Press the <i>Alarm Reset</i> key to confirm the alarm. Change internal battery.	41
11	Only 100 % O2 to patient	Technical defect.	Independent of the set <i>FiO2</i> , the device supplies 100 % O2 to the patient. Other ventilation functions remain unchanged. Call DrägerService.	34
111	Paw high	The alarm limit <i>Pmax</i> for the air- way pressure has been reached. Patient "fights" the ventilator, coughing.	Check patient's condition, check ventilation pattern, adjust alarm limits if necessary.	3
		Ventilation hose kinked, or obstructed.	Check hose system, breathing valve and tube.	
111	Paw low	The set pressure level is not achieved or no pressure differ- ence >5 mbar between inspira- tion and expiration. Leak in cuff.	Inflate cuff and check for leaks.	6
		Leakage or disconnection.	Check hose system for leaking connections. Ensure that the breathing valve has been installed correctly.	_

	Alarm	Cause	Remedy	Alarm Rank
111	Paw measurement inop	Fault in flow measurement hoses.	Check hose system for loose connections. Ensure flow measurement hoses are connected correctly.	5
		Technical defect.	Disconnect the patient from the device and continue ventilation without delay using another ventilator. Call DrägerService.	
111	Reselect hose type	The detected hose type is not the same as the selected hose type.	Change hose type setting.	10
			Connect a different hose type.	
1	Self test OK	The device has been switched on and the self-test completed successfully.	The message disappears auto- matically after approximately 15 seconds.	46
!	Settings not con- firmed	Changed setting has not been confirmed with the rotary knob.	Redo the setting change.	45
11	Supply pressure low	Supply pressure <1800 mbar.	Ensure that supply pressure exceeds 1800 mbar. Disconnect the patient from the device and continue ventilation without delay using another ventilator.	24
11	VT high for hose	The measured <i>VT</i> is above 250 mL, while using a paediatric hose.	Set a lower VT or press the <i>Alarm Reset</i> key to confirm the alarm.	- 11
		An incorrect hose connected.	Use another hose or press the <i>Alarm Reset</i> key to confirm the alarm.	
1	VT high for hose	The measured <i>VT</i> is above 250 mL, while using a paediatric hose.	Advisory message, is displayed continuously when confirmed. Set a lower VT.	44
		An incorrect hose connected.	Advisory message, is displayed continuously when confirmed. Use another hose.	
11	VT low, pressure limit	During <i>AutoFlow</i> additional pressure is necessary to achieve the set tidal volume <i>VT</i> . (Pressure is limited to Pmax - 5 mbar.)	Check patient condition. Check ventilation settings	29

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Dräger Medical GmbH 23558 Lübeck, Germany The quality management system at Dräger Medical GmbH is certified according to ISO 13485, ISO 9001 and Annex II.3 of Directive 93/42/EEC (Medical devices).