ASTRAL150 VENTILATOR PARAMETER FORM

Circuit Type: Single Limb with expiratory valve

Date:_____

Client's Name:_____

Device Asset/Serial Number/Device Number:_____

PROGRAM	
INTERFACE	MOUTHPIECE

Ontario Ventilator Equipment Pool

Prescribed Parameters

Parameter	Client's Settings
Circuit Type	Single
ADULT/PEDS	
MODE	P(A)CV
P Control	
PEEP	
RR	
Ti	
RISE TIME	
SAFETY VT	
P CONTROL MAX	
TRIGGER	
SIGH BREATH	
INTERVAL	
MAGNITUDE	
SIGH ALERT	
MANUAL BREATH	
MAGNITUDE	

Alarms Parameters

ALARM 1	
Vti High/Low	
MVi High/Low	
Pressure High/Low	
Low PEEP	
Resp Rate High/Low	
ALARM 2	
Ventilation Stopped	
ALARM 3	
Fi02 High/Low	OFF
APNEA RESPONSE	ALARM ONLY
T apnea	
NO breath or NO spont	

APNEA RESPONSE	ACV+ALARM
VT	
RESP. RATE	
Ti	
T apnea	
NO breath or No spont	
APNEA RESPONSE	PACV+ALARM
P control	
RESP. RATE	
Ti	
T apnea	
No breath or No spont	
DISCONNECT ALARM	
Disconnect Tolerance	
Alarm Activation Time	
Alarm Volume	
Minimum	

Device Configuration

DEVICE CONFIG	
Language	ENGLISH
Display Brightness	Auto
Backlight timeout	ON
Auto power off	
Ventilation LED	
Alert tone	ON
Date/Time	D/M/YYYY
Units	cmH20 -Ti inches
Big Button	
Reminders	
Preventative Maintenance	
Battery replacement	