LTV® Ventilator Series

Making a Smooth Transition and Adding Mobility.
Agenda

• Welcome and introduction
• Product overview of 1150/1100
• Product comparison
• Making the transition: Examples
• Adding Mobility: Examples
• Q&A
Welcome to LTV Transition Program
Sponsored by CareFusion203

• Presented by Ronda Bradley MS, RRT, FAARC
  ◦ Ronda lives in St. Louis has been working with ventilator
dependent and reliant people for over 20 years.
  ◦ Owns Spiritus Consultants and represents CF203

• CareFusion203 (formerly known as
  Pulmonetic Systems)-
  • Producing LTV Series of ventilators for over 11yr
  • Tried and true platform, low cost of ownership
  • Many partnerships and mobility options.
LTV 1150/1100 Designed for Home Care areas

• LTV 1150/1100
• Portable Volume and Pressure mode ventilators
• Can be used for invasive and non-invasive applications
• For ventilator support from Pediatrics (≥ 5Kg) to adults.
• LTV ventilators weigh 14 lbs. have a 1 hour internal battery and many other transport battery options including the 5 hour Sprint Pack.
## Comparison to PLV/LP10

<table>
<thead>
<tr>
<th></th>
<th>LTV1100/1150</th>
<th>PLV100/102/LP10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weight</td>
<td>14 lbs.</td>
<td>28 lbs./35 lbs.</td>
</tr>
<tr>
<td>Ventilation type</td>
<td>Volume/Pressure support</td>
<td>Volume/pressure limiter</td>
</tr>
<tr>
<td>Modes</td>
<td>A/C, SIMV, PS, CPAP, SIMV with Sigh, AC with Sigh (LTV1150-PC A/C, PC-SIMV, PC-FT)</td>
<td>A/C, SIMV, Control AC, SIMV with sigh (102)</td>
</tr>
<tr>
<td>Trigger (Sensitivity)</td>
<td>Flow or Pressure</td>
<td>Pressure</td>
</tr>
<tr>
<td>Bias Flow</td>
<td>Yes or NO</td>
<td>NO</td>
</tr>
</tbody>
</table>
## Comparison to PLV/LP10

<table>
<thead>
<tr>
<th></th>
<th>LTV 1150/1100</th>
<th>PLV100/102/LP10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Circuit</td>
<td>Active (External Exhalation valve internal PEEP) Circuit pre assembled in package</td>
<td>Active (External Exhalation valve internal PEEP) Pre-assembled and assembly required</td>
</tr>
<tr>
<td>Battery</td>
<td>1 hr. internal/5 hr. Sprint pack, power chair options</td>
<td>1 hour</td>
</tr>
<tr>
<td>FAA Cleared</td>
<td>Yes</td>
<td>NO</td>
</tr>
<tr>
<td>Flow Generator</td>
<td>Turbine</td>
<td>Piston</td>
</tr>
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Alarm Capabilities

- Apnea with Apnea back up (rates lower than 4 or PS) (Adjustable time from 10-60 seconds)
- Low pressure
- High pressure – (High pressure delay)
  - High pressure alarm also serves as “pop off”/pressure release
- Low minute ventilation (VE)
- High RR (f)-(with time delay)
- High PEEP/Low PEEP
- All alarms may be disabled except Apnea (but wide configuration allows safety without nescience alarms)
Interfaces

• The LTV uses an NON-vented mask (interface), No vent (whole/exhalation port) in the mask or whisper swivel needed.

• Benefits:
  ◦ JUST LIKE YOUR PLV! Whatever works for you now....you can stick with it.
  ◦ No extra air blowing out at you from your mask
  ◦ If using a humidifier, no water shooting out of the vent from the mask.
  ◦ Allows for a wide variety of masks, nasal pillows, mouth pieces or dental straw devices.
Mouthpiece ventilation

Dental Straw

Traditional mouth piece

Respironic-Mouth seal

F&P Oracle

Works best with Volume Ventilation
Masks and Nasal Pillows
Your current mask should work just fine!
• Ultra Mirage™ NV Nasal

Ultra Mirage™ NV Full Face

Adams Circuit from PB
S-232100-00B (Standard)
S-231703-00C (Narrow)
Making the Transition

• Follow any transition protocol written by physician with recommendations from DME-RT
• Although all ventilators are slightly different, the LTV 1100 is designed to meet the transitional need of those who have long utilized a pressure trigger ventilator
  ◦ Pressure vs. Flow trigger
  ◦ Ability to turn on or off bias flow
  ◦ Ability to turn on or off leak compensation
• We recommend close communication with physician for setting changes needed, but most settings should transfer without need for change.
Making the Transition

• Work with your RT to determine if additional features such as triggering options, bias flow, leak comp or Sigh are helpful. Always remember, you do **NOT** need to change anything at all, just because you are going to a new machine.

• Spend time getting used to the different sounds and feel of the turbine verse piston. (Just like getting a new fan in the bedroom when you sleep)

• Ask for help! Your local CF rep or Clinical support person can help. 1-800-754-1914 tech/clinical support
Circuit set up

- Open bag
- Remove patient circuit and 22 mm adapter from bag

Circuit will come out of package put together and ready to go

If you are not using a humidifier you can throw this piece away

Circuit will look like this when out of package

#1 Connect Inspiratory limb

22 mm patient circuit, adult
>20 kg
>44 lbs
22 mm adapter
Sense lines/to ventilator
To ventilator
To patient

Connect circuit to 22 mm adapter

Filter optional
Circuit Set up

There are 4 connections: They will only fit on 1 way AND they are color coded

Reusable circuits are available
Circuit set up and Vent operation

Press ON/Standy button to turn on vent.

Making changes in setting is as simple as press/turn dial/press.
Completing set up

• Choosing Flow or pressure triggering
• Turning off Bias
• Turning off leak comp

All can be accessed in preset and vent ops menu. Once set up, they will be locked in and settings will be ready to go when vent is turned on.
Accessing Set up menu

Press and hold to access back menu

Press Select to say YES

Turn dial to say NO
Utilizing Control Lock and Panel Cover

Always lock front panel by pressing Control Lock key

Silence Rest
Alarm messages

• High pressure: Circuit blocked
• Low pressure/Min Vol: leak in circuit/circuit off
• Power loss: Loss of external power: Will automatically run on 1 hour internal battery
• Low Batt: Internal Battery down to 10 min remaining
• Vent IOP: Vent has been shut off
• HW fault: Issue with fan: Needs service
• Disc/Sense: Sense line disconnected or occluded (check lines and reset)

VENTS should NOT alarm for NO reason! If vent is nuisance alarming, check with clinical support person.
Increased mobility options

Auto battery adaptor also available
Bedside Set ups

Rolling stand set up
CF Part # 10611

Table top set up with heater mount and Sprint Pack mount
(Eceee Medical) Contact your CF Independent Rep

Table top mount
CF Part #10699
Case Study
Case Study

• On PLV: Volume A/C, Vt: 500ml, PEEP +5, Rate: 10, Flow 40 l/min. Sensitivity -2 cmH₂O

• On LTV 1100: Volume A/C, Vt: 500ml, PEEP +5, Rate: 10, Flow setting ______ (set display on screen to Vcalc and adjust IT until 40 l/min is displayed. Sensitivity -2
  ◦ Remember: Flow sensor turned to Off position will give you pressure triggering like you are used to on PLV
  ◦ May turn bias flow to off position
  ◦ May turn off leak comp (I would suggest leaving this on at first attempt and only turning to “off” if you can not get comfortable). Leak comp max on LTV 8-10 l/min.
Questions
Thank you

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