



Dräger V500 Ventilator

Overview of Modes and Features for NICU
Nurses



Objectives

- Discuss the modes of the Dräger V500 that will be used in the NICU
- Display screen shots of each mode
- Display screen shots of different alarms
- Identify differences between the Dräger and the Avea
- Identify differences between pressure ventilation and volume ventilation

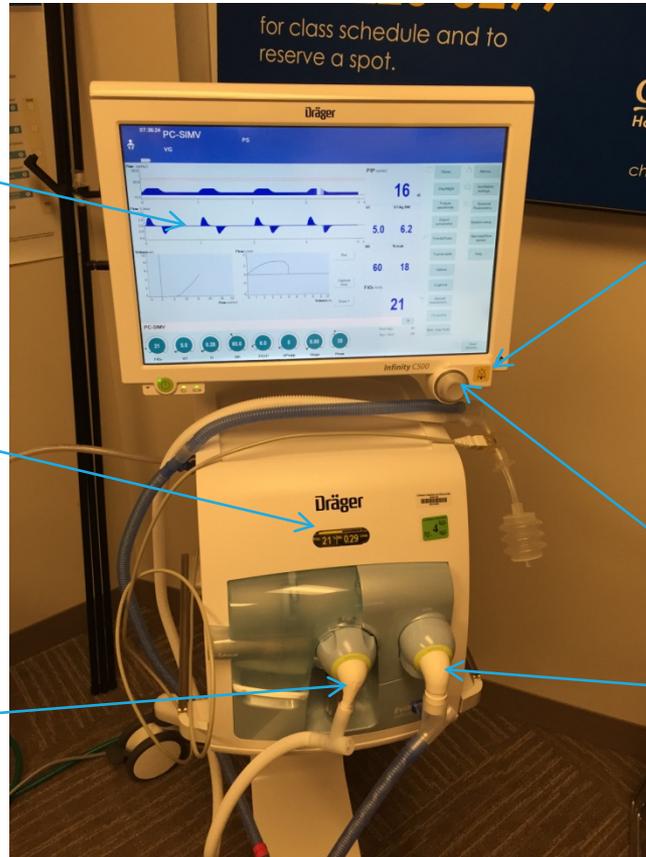
Dräger V500



Touch Screen Monitor

FiO₂ Analyzer and Measured Ve

Expiratory Limb



Alarm Silence

Control Knob

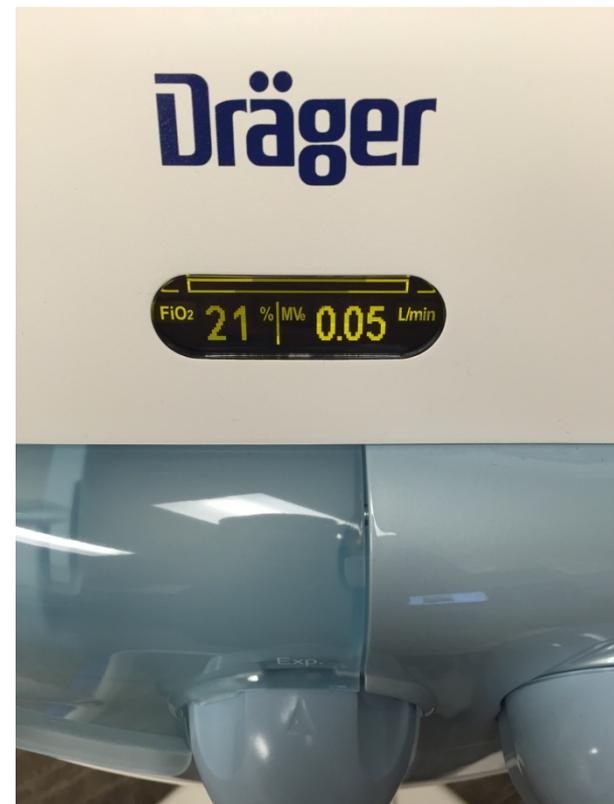
Inspiratory Limb

Dräger V500

Flow Sensor



FiO₂ Analyzer and Measured Ve

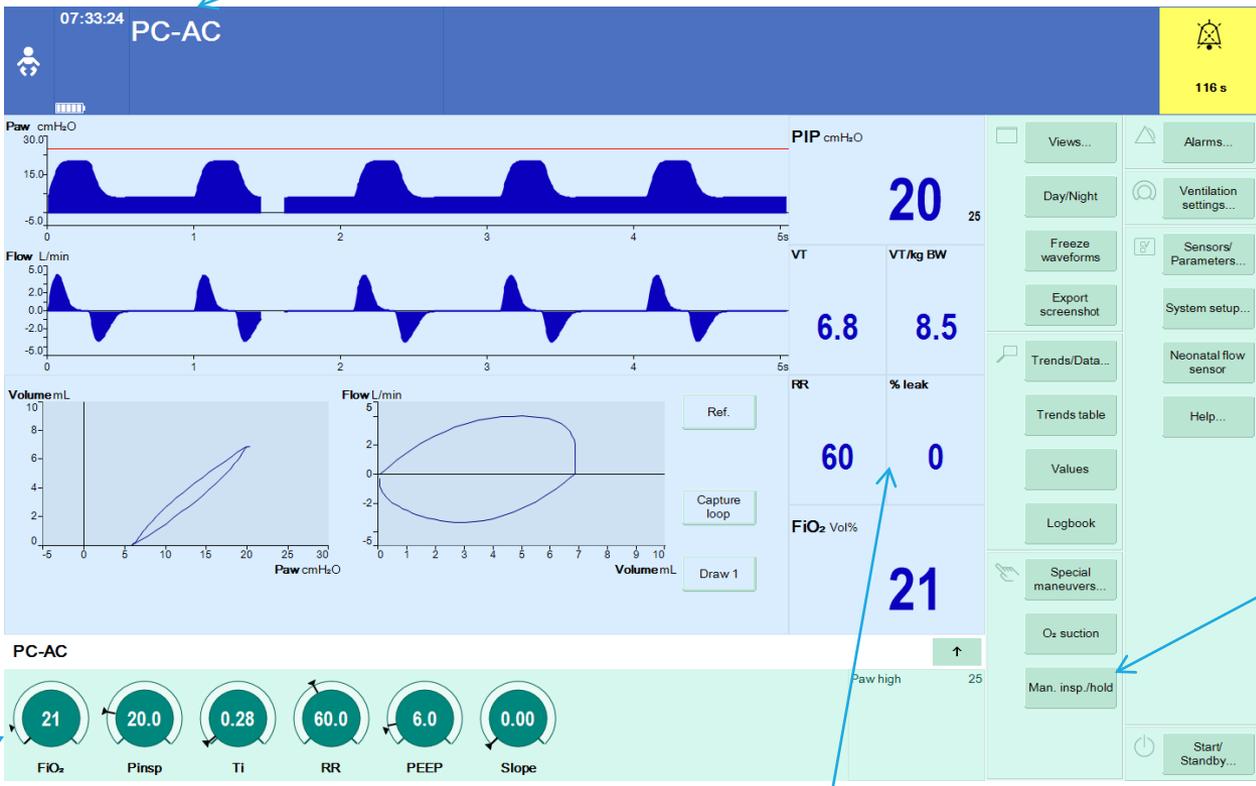


Screen Overview



Patient Size

Mode



Alarms
Silence
Indicator

Waveforms

Loops

Manual
Breath

FiO₂
Adjust

Settings

Measurements

Pressure Control-Assist Control

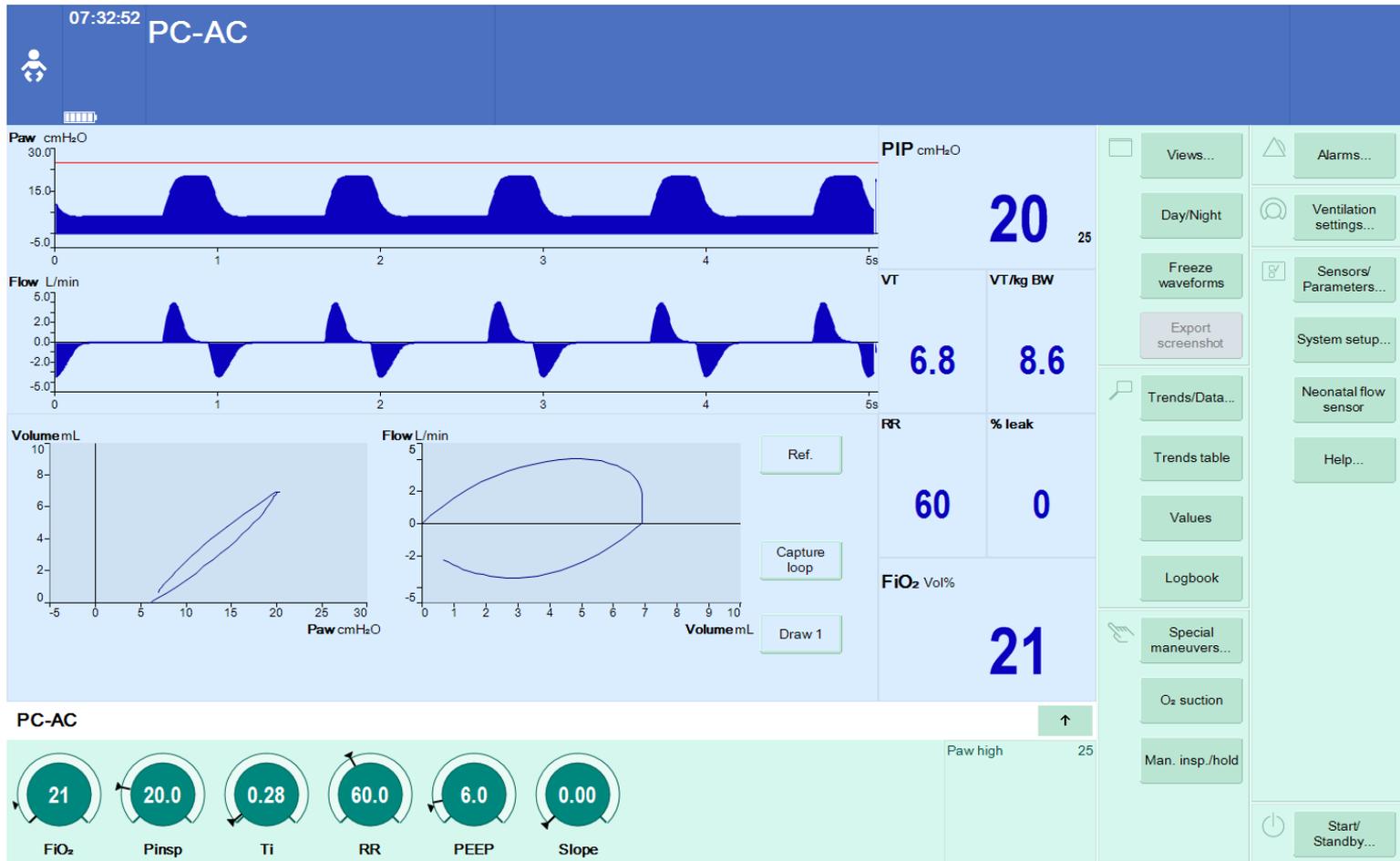
Settings

- P_{insp} (PIP)
- PEEP
- Rate
- Inspiratory Time
- Trigger
 - Baby can trigger the ventilator to get a breath.
 - When baby triggers the ventilator it will give a breath at the **set PIP and set I-Time**
- Alarms
- FiO₂

Measurements

- Inhaled Tidal Volume
- Exhaled Tidal Volume
- mL/kg Tidal Volume
- Minute Ventilation
- P_{mean}
- % Leak
- C20/C

Pressure Control-Assist Control





Pressure Control-SIMV

Settings

- P_{insp}(PIP)
- PEEP
- Rate
- Inspiratory Time
- Trigger
- Pressure Support
 - When patient triggers a breath above the set rate, the ventilator will deliver the breath at the set pressure support level.
- FiO₂

Measurements

- Inhaled Tidal Volume
- Exhaled Tidal Volume
- mL/kg Tidal Volume
- Minute Ventilation
- P_{mean}
- % Leak
- C20/C

Pressure Control-SIMV



Pressure Control-SIMV



Brown colored waveform indicates a spontaneous breath

Volume Guarantee-Assist Control

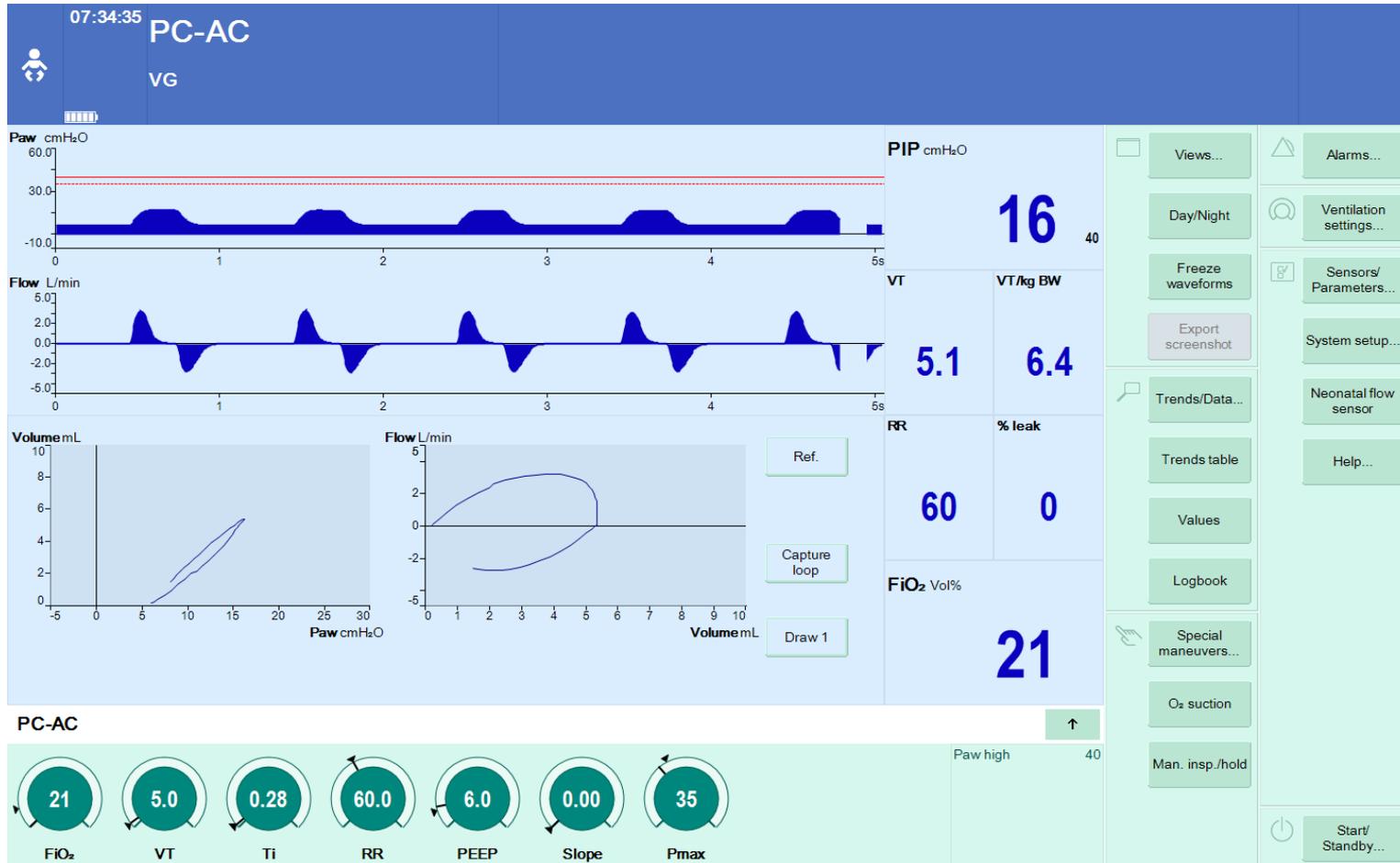
Settings

- Tidal Volume
- PEEP
- Rate
- Inspiratory Time
- Trigger
- Pmax
 - Maximum pressure the ventilator will use to deliver the set volume
- FiO₂

Measurements

- PIP
- Inhaled Tidal Volume
- Exhaled Tidal Volume
- mL/kg Tidal Volume
- Minute Ventilation
- Pmean
- % Leak
- C20/C

Volume Guarantee-Assist Control





Volume Guarantee-SIMV

Settings

- Tidal Volume
- PEEP
- Rate
- Inspiratory Time
- Trigger
- Pmax
 - Maximum pressure the ventilator will use to deliver the set volume
- Pressure Support (Delta P)
 - When patient triggers a breath above the set rate, the ventilator will deliver the breath at the set pressure support level.
- FiO₂

Measurements

- PIP
- Inhaled Tidal Volume
- Exhaled Tidal Volume
- mL/kg Tidal Volume
- Minute Ventilation
- Pmean
- % Leak
- C20/C

Volume Guarantee-SIMV





Nasal CPAP

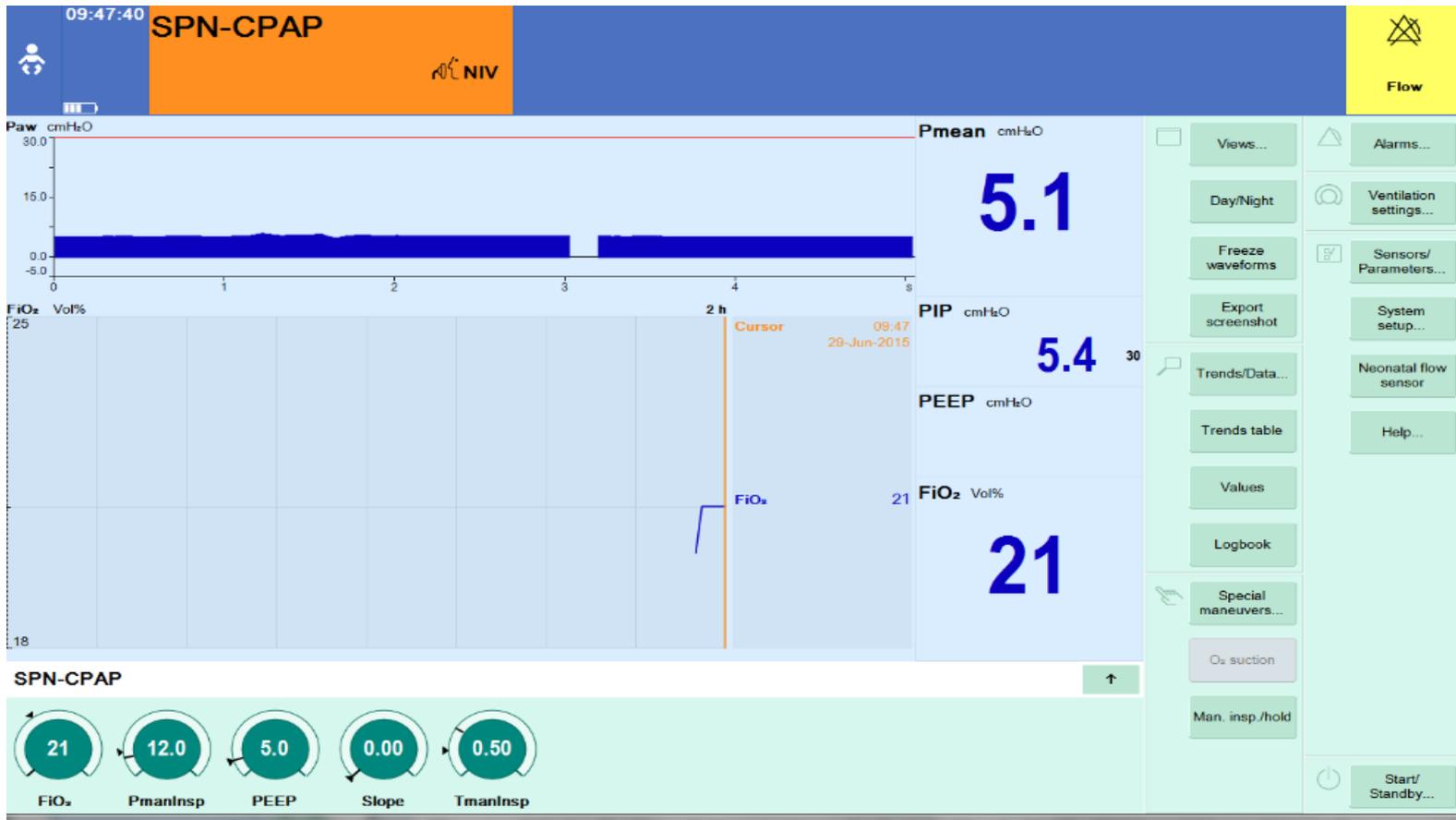
Settings

- PEEP (CPAP Level)
- FiO₂
- PmanInsp
 - Pressure delivered when manual breath is pressed
- TmanInsp
 - Inspiratory time to deliver manual breath

Interfaces

- Flexi-Trunk
- RAM Cannula

Nasal CPAP





Nasal IMV

Settings

- PInsp (PIP)
- PEEP
- Rate
- Inspiratory Time
- FiO₂

***This is a NON-SYNCHRONIZED mode. (Baby Cannot trigger a breath)**

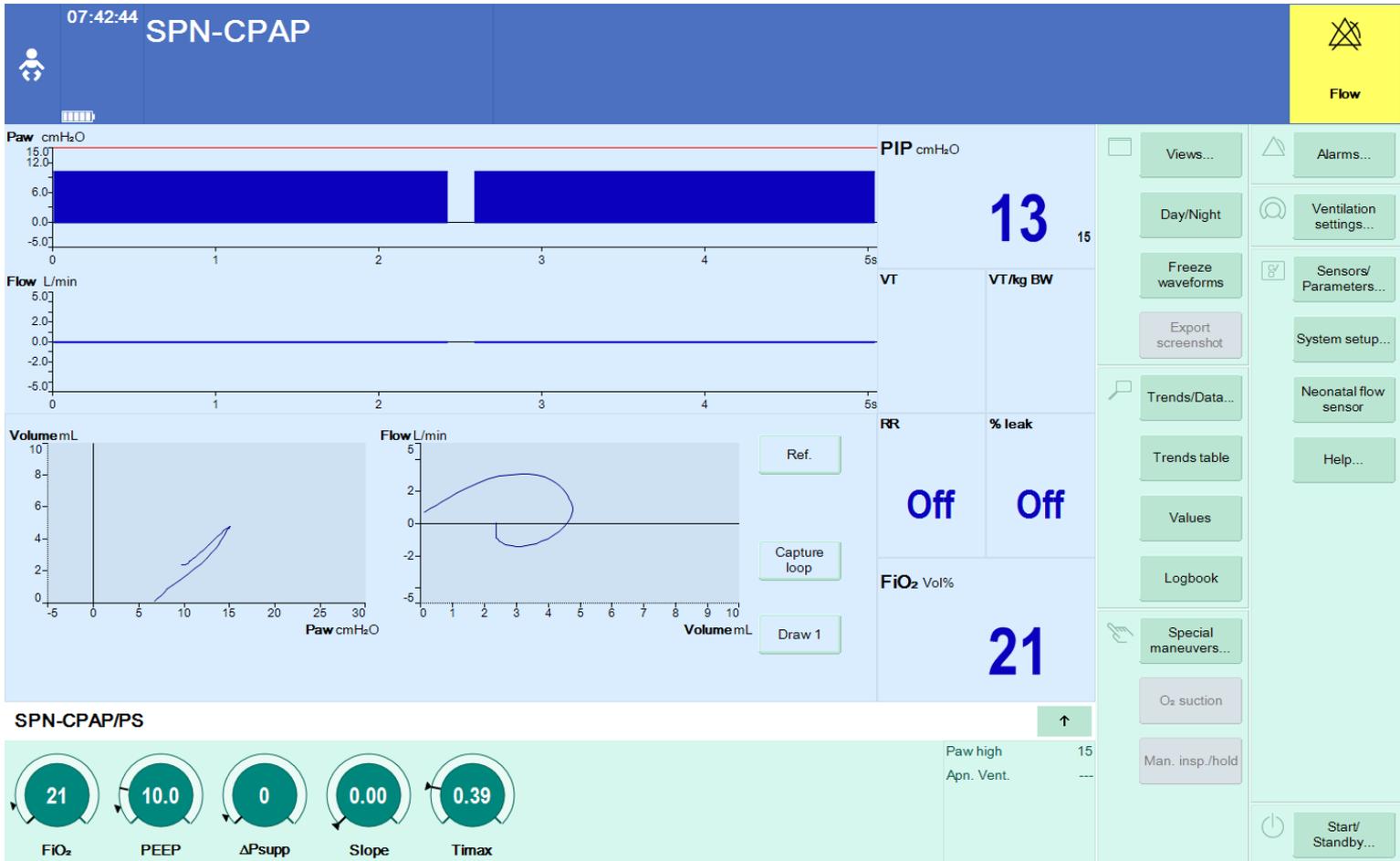
Interfaces

- Flexi-Trunk
- RAM Cannula

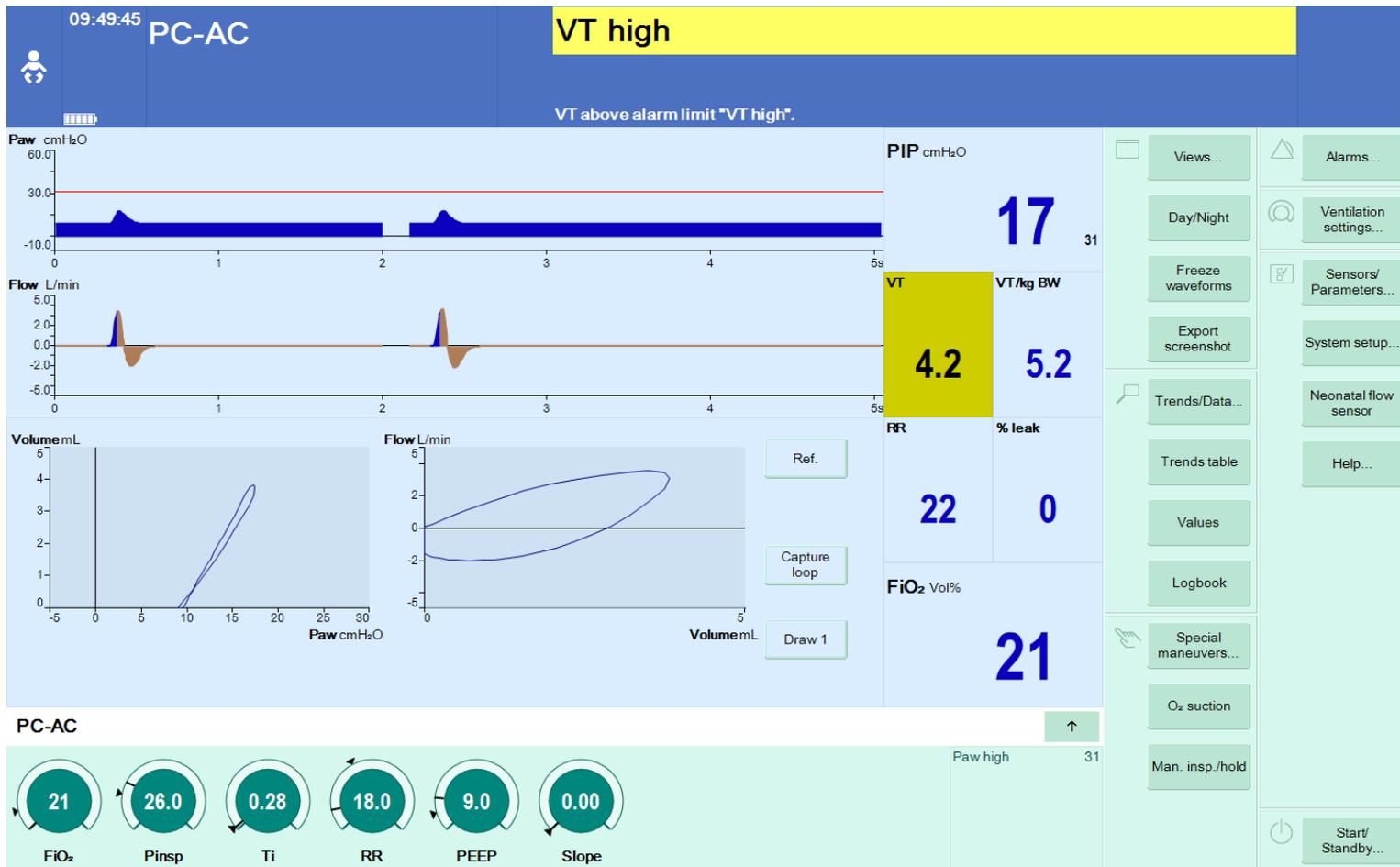
Nasal IMV



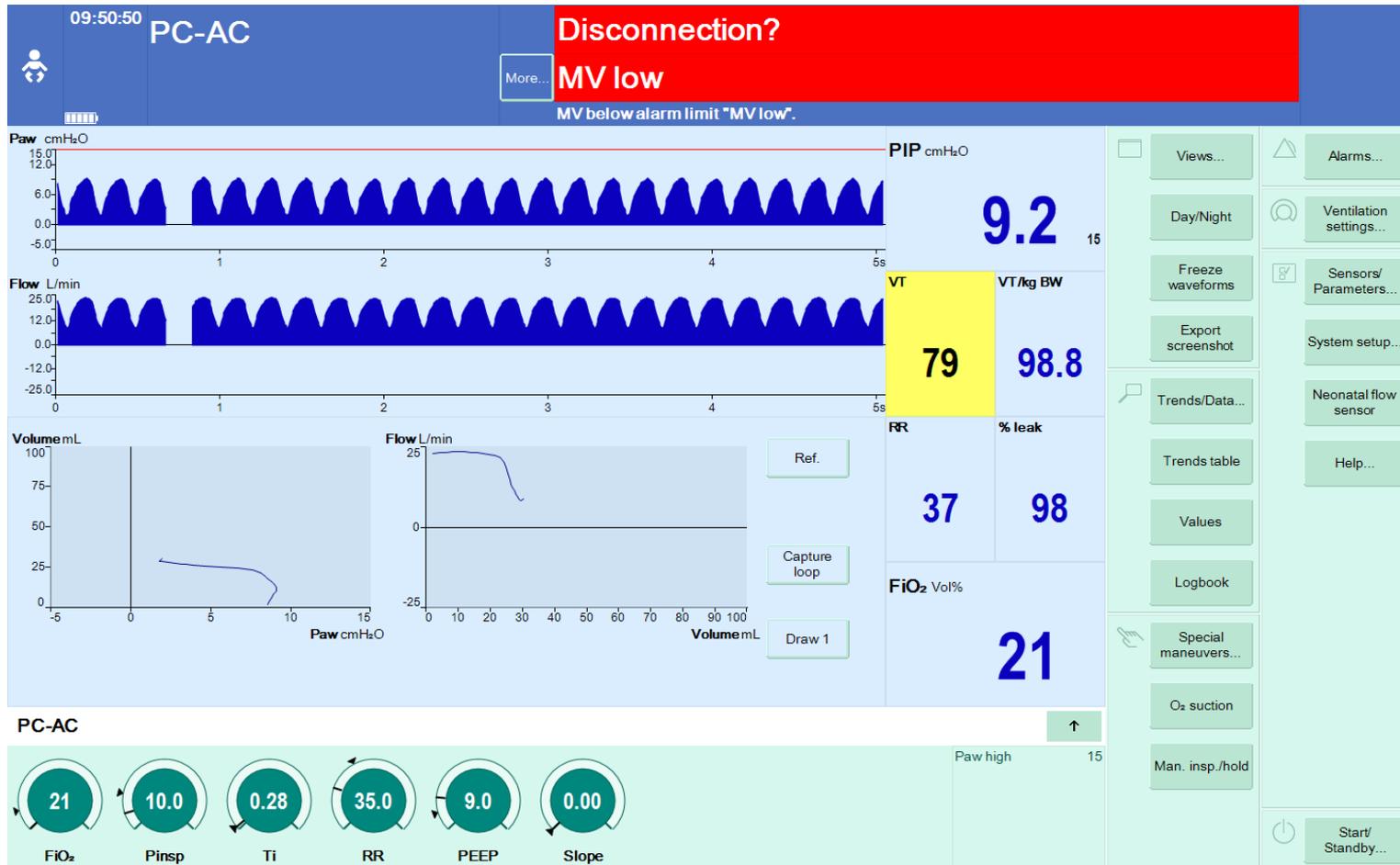
HFJV Screen Shot



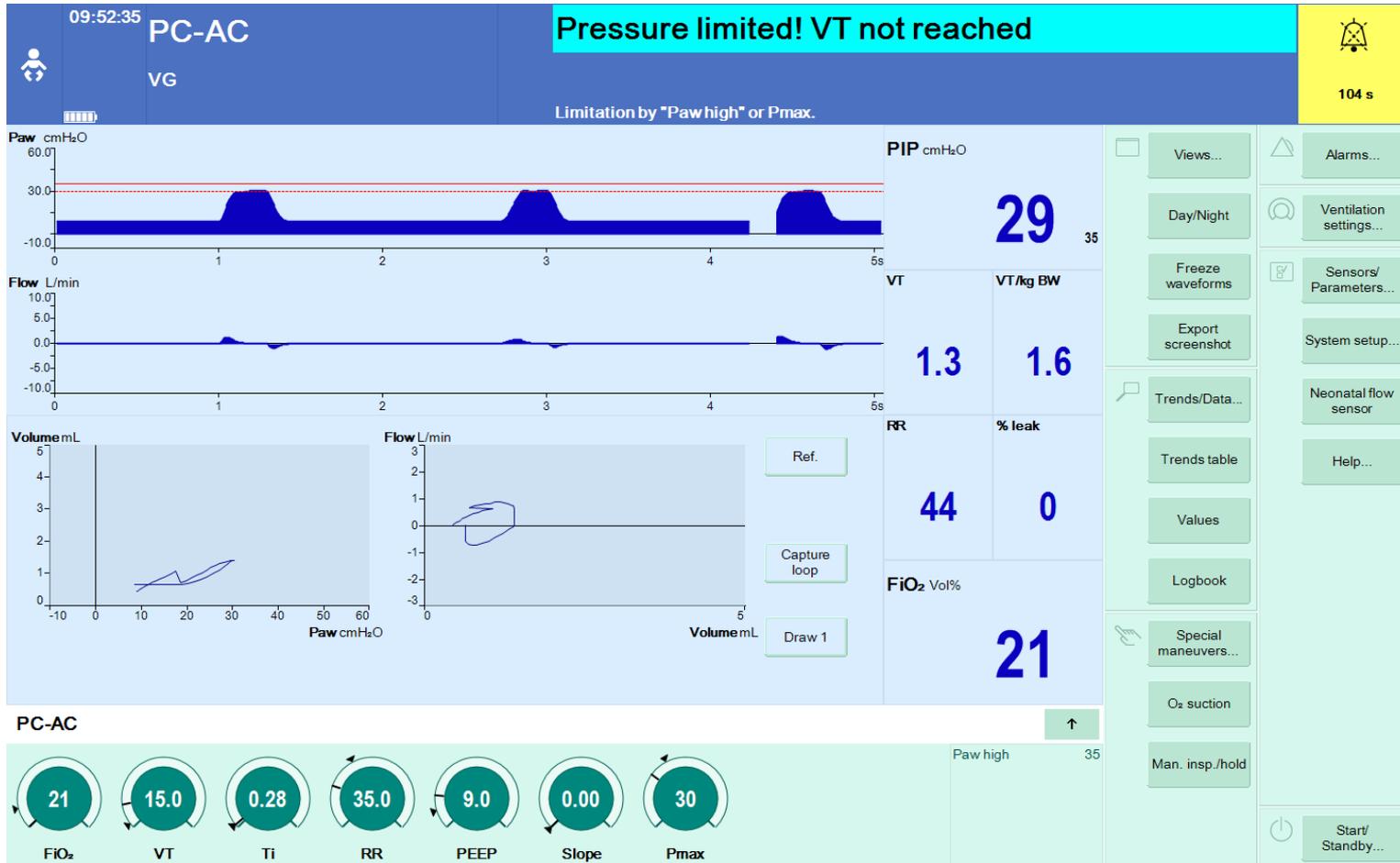
High Tidal Volume Medium Priority Alarm



Circuit Disconnect High Priority Alarm



Pressure Limit Alarm while in Volume Guarantee



Airway Obstruction Alarm



Differences in Increase O_2 or O_2 Suction



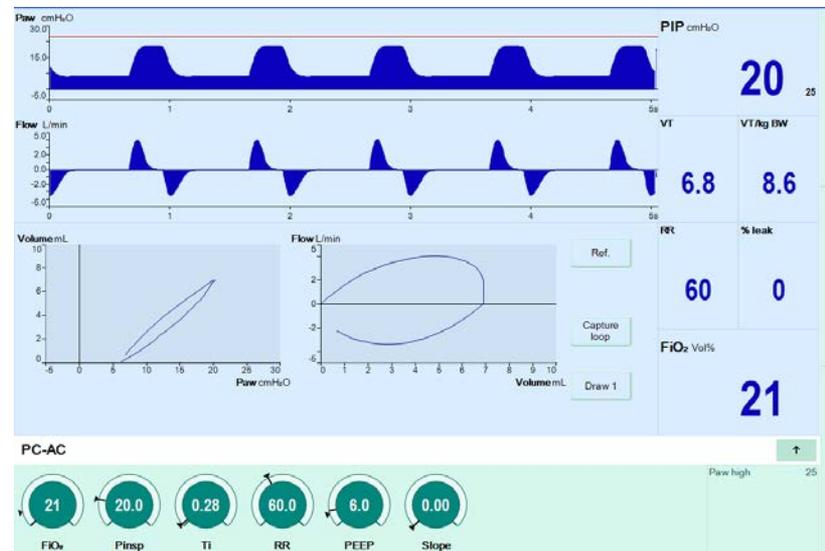
- **Increase O_2 Function**

- Avea: FiO_2 increases by 10%
 - Increase FiO_2 Button
- Dräger: FiO_2 increases by 1.3 times the set FiO_2
 - Example 1: Set FiO_2 is 25%. O_2 Suction is activated, FiO_2 will increase to 33%
 - Example 2: Set FiO_2 is 60%. O_2 Suction is activated, FiO_2 will increase to 78%.
 - O_2 Suction Button
 - Push O_2 Suction on screen
 - Confirm by pushing control knob
 - 180 seconds of oxygen increase



Differences in Set PIP

- **Avea:**
 - Total PIP = Insp pressure + PEEP
- **Dräger:**
 - Total PIP = P_{insp}



Differences in Manual Breath Function



- **Avea:**
 - Manual breath function delivers set pressure/volume and I time
- **Dräger:**
 - Man Insp/hold function
 - Pressing and releasing will deliver set pressure and set I time.
 - Pressing and holding will deliver sustained inflation

Differences in Manual Breath Function



- **Avea:**
 - Manual breath function delivers set pressure/volume and I time
- **Dräger:**
 - Man Insp/hold function
 - In PC will deliver set pressure and set I time.
 - Function can deliver prolonged I time if desired
 - In VG will deliver breath at the set Pmax level
 - This could result in a larger tidal volume than what is currently set.



What is Pressure Ventilation?

- Pressure ventilation or PC is a mode in which the ventilator will deliver a set pressure
 - Tidal volume will vary depending on the patient's compliance and resistance
- **Tidal volume will increase:**
 - Improved lung compliance
 - Decreased resistance
- **Tidal volume will decrease:**
 - Decreased lung compliance
 - Increased resistance
 - Air leak
 - Pneumothorax



What is Volume Guarantee?

- **Volume ventilation is a mode in which the ventilator will deliver a set volume**
 - Peak inspiratory pressures will vary depending on patient's compliance and resistance
 - Peak inspiratory pressures can be limited for safety
- **Peak inspiratory pressure will increase:**
 - Decreased compliance
 - Surfactant deficiency
 - Inflammation/immaturity
 - Increased resistance
 - Secretions
 - Kinked ET tube
 - Pneumothorax
- **Peak inspiratory pressure will decrease:**
 - Increased compliance
 - Surfactant administration
 - Decreased resistance
 - ET tube suctioned and secretions removed
 - Bronchodilator given



Compliance

Increased

- **Causes**
 - Surfactant administration
 - Decreased inflammation
 - Increased lung maturity
- **Pressure Control**
 - Increased Tidal Volume
- **Volume Guarantee**
 - Decreased PIP

Decreased

- **Causes**
 - Surfactant deficiency
 - Inflammation
 - Structural immaturity
 - Infection
- **Pressure Control**
 - Decreased Tidal Volume
- **Volume Guarantee**
 - Increased PIP



Resistance

Increased

- **Causes**
 - Bronchospasm
 - Secretions
 - Kinked ETT
- **Pressure Control**
 - Decreased Tidal Volume
- **Volume Guarantee**
 - Increased PIP

Decreased

- **Causes**
 - Bronchodilator administration
 - Suctioning
 - Air leak
- **Pressure Control**
 - Increased Tidal Volume
- **Volume Guarantee**
 - Decreased PIP

Why is Volume Ventilation Preferred?



- In Pressure Control ventilation, the patient's tidal volumes change depending on compliance and resistance.
 - Because of this, the patient does not receive a consistent minute ventilation
 - $V_e = V_t \times \text{Respiratory Rate}$
 - Excessive tidal volume (volutrauma) is a primary cause of lung injury
- In Volume Guarantee, the volume is set and PIP will change depending on compliance and resistance.
 - In this mode the patient receives a consistent minute ventilation, while being protected from harmful airway pressures and potential for excessive tidal volumes.

Why is consistent minute ventilation important?

- Alveolar minute ventilation affects carbon dioxide removal and PaCO₂.
 - $\text{PaCO}_2 = \text{CO}_2 \text{ Production} / \text{Alveolar minute ventilation}$
- Consistent minute ventilation can aid in keeping a normal acid/base balance.
- Severe hypocarbia or severe hypercarbia can cause rapid changes in cerebral blood flow
- Rapid changes in cerebral blood flow can cause:
 - IVH
 - PVL



Questions?

- Please contact Ryan Sura or Alicia Rummel with any questions or concerns that you may have.
- Ryan.sura@childrensmn.org
- Alicia.rummel@childrensmn.org