E Sterilization & Disinfection

This product is packaged as non-sterile and should be processed before use.

Follow the specific sterilization or disinfection procedures that have been validated by your institution.

Sterilization and High-Level Disinfection Recommendations:

Pasteurization: Pasteurize at 160°F-170°F (71°C-77°C) for no less than 30 minutes.

Chemical Disinfectants: Disinfect according to validated parameters. Follow the chemical manufacturer's recommendation for temperature and soak time. Chemical disinfection should be followed by a sterile water rinse. Recommended Chemicals: 2-4% glutaraldehyde solutions.

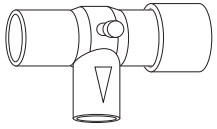
Do not disassemble silicone rubber leaf before cleaning or processing.

Always carefully examine the physical integrity of this product after processing.

Ensure that the silicone rubber leaf lies flat against the valve seat before using.

Do not use if cracking (or crazing) is seen, or if parts fit together improperly after processing.

F Product Specifications



Model #	KC 9-P
Type	**Auto-PEEP Measurement Device**
Use	Single Patient Use
Port Sizes	22mm O.D. x 22mm O.D.
Materials	Polycarbonate Silicone Rubber

EXPLANATION OF SYMBOLS			
Rx ONLY	Federal law restricts this device to sale by or on the order of a physician.	2	Single Patient Use
NON STERILE	Non-Sterile	LATEX	Not manufactured with Natural Rubber Latex
PHT DEHP	Not manufactured with Di(2-ethylhexyl) phthalate (DEHP)		Manufacturer

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Instrumentation
Industries, Inc.

Auto PEEP Measurement Device

Installation & Usage Directions

KC 9-P

Rx ONLY | 2 | NON STERILE | LATEX | PHT DEHP

10-15

ECO 2385 Rev. H

A Indications for Use

The Single Patient Use **KC 9-P** with removable cap is designed for use on ventilators not equipped with expiratory hold. It allows single breath measurement of auto-PEEP in its use as a Braschi valve pressure readout.

B Contraindications

None known.

C KC 9-P Auto PEEP Measurement Device Abstract

In patients with a degree of airway obstruction associated with various lung conditions, at the end of a normal duration of exhalation not all of the gas in the alveoli may be equilibrated with the pressure at the machine end of the tracheal tube. The average pressure that would be imposed by that residual gas can be measured at the tracheal tube by occluding the tracheal tube when normal exhalation has ended. After allowing a period for equilibration of the gas pressures throughout the lungs, trachea and tracheal tube, a steady-state pressure is then developed by the residual gases in the lungs. This is one measure of auto-PEEP.

The ***Instrumentation Industries, Inc.*** Single Patient

Use **KC 9-P Auto-PEEP Measurement Device** is a one-way valve that enables a single breath measurement of auto-PEEP in its use as a Braschi valve. The **KC 9-P Auto-PEEP Measurement Device Cap** is removed during exhalation, causing the next delivered breath to be vented to the atmosphere. At the end of exhalation, when the exhalation valve has closed, the one-way valve allows the residual gases in the patient's lungs to reach an equilibrated pressure, thus allowing an auto-PEEP measurement to be taken from the airway pressure readout.

Note: *This method can only be used with ventilators that have an exhaust port that provides a positive seal during exhalation. Ventilators that employ a proximal pressure purge will give inaccurate auto-PEEP readings unless the proximal pressure line is disconnected or modified.*

D KC 9-P Auto PEEP Measurement Device Directions for Use

KC 9-P Auto-PEEP Measurement Device is designed for Single Patient Use only and should be processed before use. Please refer to panel E for Sterilization/Disinfection recommendations.

1. **Place** the **KC 9-P Auto-PEEP Measurement Device** in the inspiratory line of a ventilation circuit with the directional arrow pointing **TOWARD** the patient, in the direction of flow. Please note that peak flow resistance is approximately **2cm H_2O** at an inspiratory flow rate of **60** liters per minute.
2. **Remove** the cap during exhalation, venting the next delivered breath into the room. This will allow the patient's lungs to equilibrate against the closed exhalation valve **and the KC 9-P Auto-PEEP Measurement Device**.
3. A single-breath measurement will then be displayed on the airway pressure read-out. **Subtract** set PEEP from this value to obtain the auto-PEEP measurement.
4. **Replace** cap immediately. Failure to replace cap will vent breaths into the room and prevent delivery of prescribed tidal volume.
5. After a successful auto-PEEP reading has been determined, remove the device from the ventilation circuit.