Trilogy 100

AVAPS-AE

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Trilogy 100

The right pressure at the right time for more patient comfort and more efficient ventilation.
AVAPS-AE

Average Volume

Assured Pressure Support-

Auto EPAP
AVAPS-AE is an Auto-titration Mode of Noninvasive ventilation designed to better treat Respiratory Insufficiency patients (OHS, COPD and NMD) in the hospital and homecare environments.
AVAPS-AE: Why do we need it?
• **Proven performance of AVAPS**
  – Maintains targeted Tidal volume

• **Auto EPAP**
  – Maintains patent upper airway at comfortable pressure

• **Auto backup rate**
  – Applies an Auto backup rate near a patient’s resting rate
AVAPS is a pressure support function that can be activated within S, ST, PC and T pressure modes. It automatically adapts pressure support to patient needs to guarantee an average tidal volume.
Based on the Auto-TRAK algorithm performance, the patient's tidal volume is estimated at each breath and compared with the target tidal volume.
Inspiratory pressure increases or decreases from breath to breath to ensure the preset tidal volume. Inspiratory pressure smoothly changes so as not to affect patient comfort, and to prevent any potential patient-ventilator disynchronization. In case the patient tidal volume is far from the set target $V_t$ an accelerating factor will allow the inspiratory pressure to change faster by up to 3 cmH2O/min.
Which benefits?

• Make titration process easier, no IPAP adjustment needed
• Follow disease progression as patient's ventilatory needs change
• Improve patient's ventilation efficacy and comfort
• Increase safety by guaranteeing an averaged tidal volume
Which patients?

• Obese hypoventilation patients: To compensate for changes in body position; averaged tidal volume ensured

• COPD patients: To achieve a combination of ventilation comfort and efficiency with no compromise. Get both benefits by applying "the right pressure at the right time"

• Restrictive patients: To provide the comfort and leak compensation of a pressure mode, and the safety of a guaranteed volume
Can you take a Trilogy on a Tracheostomy patient?
No you can not take a Tracheostomy Patient on a Trilogy. Once a Trilogy is placed on a Trach it turns into an invasive ventilator. (regardless if it is a Bi-Level setting)
How to Order Trilogy?

Did you know Medicare accepts multiple clinic visits for respiratory issues, a hospitalization is not required.

A sleep study is also not required to order trilogy.
1. **Primary Diagnosis**
   - COPD
   - Emphysema
   - Chronic Bronchitis
   - Cystic Fibrosis
   - Scoliosis
   - Interstitial Lung Disease
   - OHS (Obese Hypoventilation Syndrome)
   (Compete List in Handout)

2. **Secondary**
   - Chronic Respiratory Failure
   - OR
   - Acute on Chronic Respiratory Failure
Ordering Trilogy Continued:

3. ABG’s PaCO2 > 50  OR  PFT with FEV1 <50%

4. Required in Notes from Physician:
   “Ordering nocturnal volume ventilation. Home BiPAP insufficient due to severity of condition. Primary Cause of hypercapnia is ______________.”
   
   (Cause can not be OSA!)
Trilogy 100 Policy

Policy:
Prior to accepting residents with Trilogy Ventilator the following criteria must be met:

- Notes from the prescribing physician must clearly state that the resident has been prescribed a Trilogy Ventilator.
- Duration of use must be identified.
- Verify that Medical Equipment provider has provided an interface that has been accepted by the resident.
- Ensure all staff are trained and comfortable with using the Trilogy ventilator.
Settings for Trilogy will be determined by the prescribing Physician.

**Settings:**

Primary Mode: AVAPS-AE with Target Tidal Volume

VT (Tidal Volume - 8ml/kg): _____  Max Pressure: ______

PS Max (pressure support max): ______
PS Min (pressure support minimum): ______

EPAP Max: ______  EPAP Min: ______

Rate (if rate = “auto” then “N/A”): _____
Using the Trilogy

**Items Needed:**
1. Full face mask
2. 6 ft tubing
3. O2 tubing
4. O2 valve port connector
Questions??

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