

# Positive Pressure Ventilation Survey

## Demographics

Facility: \_\_\_\_\_

Person Responsible for  
Completing this Survey: \_\_\_\_\_

Title:  RT Director     ICU Medical Director     ICU Nursing Supervisor     Other: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Statement of Confidentiality

Any information that would permit identification of the individual facility completing this survey will be held strictly confidential.

**PLEASE SEE THE PAGE 4 FOR EXAMPLES OF VENTILATORS AND WHICH CATEGORY THEY FIT IN TO.**

**DO NOT COUNT VENTILATORS MORE THAN ONCE.  
(FOR EXAMPLE – THE SERVOi IS A FULL FEATURED VENTILATOR (capable of ventilating adults and neonates) - IT SHOULD BE COUNTED IN THE FULL FEATURED VENTILATOR CATEGORY (#1) ONLY, EVEN IF YOU ONLY USE IT IN NEONATAL ICU.**

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0990-XXXX. The time required to complete this information collection is estimated to average 75 minutes per response, including the time to review instructions, search existing data resources, gather the data needed and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave., S.W., Suite 537-H, Washington D.C. 20201 Attention: PRA Reports Clearance Officer.



	# of devices owned
1.Full-Featured Mechanical Ventilator (See Page 4 for examples)	
Vendor & Model: <b>Compressor</b> Yes No	
Vendor & Model: <b>Compressor</b> Yes No	
Vendor & Model: <b>Compressor</b> Yes No	
Vendor & Model: <b>Compressor</b> Yes No	
Vendor & Model: <b>Compressor</b> Yes No	
Vendor & Model: <b>Compressor</b> Yes No	
Vendor & Model: <b>Compressor</b> Yes No	
2. How many of the ventilators in #1 are equipped for neonatal ventilation?	
3. High Frequency Ventilator (See Page 4 for examples.)	
a. Vendor & Model:	
b. Vendor & Model:	
4. Portable Mechanical Ventilator (pneumatically powered) (See Page 4 for examples)	
c. Vendor & Model:	
d. Vendor & Model:	
e. Vendor & Model:	
	# of OWNED units
5. Portable Mechanical Ventilator (with internal gas source) (See Page 4 for examples)	
f. Vendor & Model:	
g. Vendor & Model:	
h. Vendor & Model:	
6. Basic EMS Transport Ventilator. <b>PLEASE ENTER ONLY TOTAL NUMBER. MODEL &amp; VENDOR ARE NOT NECESSARY.</b> (Autovent 2000, Impact 706,	
i. Total Only:	
7. Non-invasive devices (See Page 4 for examples.)	
Vendor & Model:	
Vendor & Model:	

Vendor & Model:		
8. CPAP Devices (See Page 4 for examples)	Pediatrics?	
j. Vendor & Model:	<input type="checkbox"/>	
k. Vendor & Model:	<input type="checkbox"/>	
9. Please indicate how many ventilators listed <b>ABOVE IN #8</b> are exclusively pediatric/neonatal by manufacturer design by <b>FILLING IN THE BOX TO THE RIGHT OF THE VENTILATOR MODEL.</b>		
10. Automatic Resuscitator (See Page 4 for examples.)		
l. Vendor & Model:		
m. Vendor & Model:		
11. Pediatric and Neonatal ventilators. Ventilators which are solely for NICU of the PICU (See Page 4 for examples)		<b># of OWNED units</b>
n. Vendor & Model:		
o. Vendor & Model:		
12. Please list how many ventilators you have in your facility that are not routinely used but could be made functional for ventilating a critically ill patient within 24 hours		<b># of OWNED units</b>
p. Vendor & Model:		
q. Vendor & Model:		

**#1 FULL FEATURED MECHANICAL VENTILATORS (examples of devices)**

**Bird** 8400 or 6400    **Bear** 1000    **Drager** E2, E4, XL, **Savina**    **Hamilton** Veolar, Amadeus, Galileo, G5, **Raphael**    **Puritan Bennett** 7200, 840  
**Maquete/Siemens** 300, Servo i    **Respironics** Espirt    **Viasys** Avea    **General Electric** Engstrom Carestation  
**Event** Inspiration LS    **Newport** E500 or E360    **Emerson** IMV

**#2 How many of the ventilators in question #1 are currently equipped for neonatal ventilation ? As an example with the Drager ventilators is the neo-flow option already installed and do you have the flow sensors on site.**

**#3 High Frequency ventilators (examples of devices)**

**Sensormedics** 3100 A or B    **Bunnell** Jet    **Bear** Jet    **Accutronics** Jet    **Percussionaire** VDR  
**Infrasonics** Ultra high frequency ventilator

**#4 Portable mechanical ventilators operating from 50 psi gas sources (examples of devices)**

**Biomedical Devices** IC2a, Crossvent 3 or 4    **Bird** Avian    **Impact** 750    **Hamilton** MAX    **Airon** pNeuton    **Allied** EPV 100, Omnivent  
**Smiths Medical** VentiPAC or ParaPac    **Drager** Oxylog 1000, 2000, 3000    **Newport** E-100    **Hamilton** C2

**#5 Portable ventilator with internal air source (compressor, piston, turbine). (Examples of devices)**

**Impact** 754, **731** EMV    **Pulmonetics** LTV 1000 or 1200    **Puritan Bennett** LP-6, LP-10, Acheiva, PB 740, **540,760**    **Viasys** Vela,  
**Bird** Tbird    **Newport** HT-50    **VersaMed** iVent    **Allied** MCV100, 200

**#6 Basic EMS transport ventilators (Examples of devices)**

**Impact** 706    **AutoVent** 2000 or 3000    **Smiths** PneuPac    **O-Two systems** Carevent MRI, ATV

**#7 Non-invasive ventilators (Examples of devices)**

**Respironics** Vision, BIPAP, **Focus**, **Synchrony**, **AVAPS**    **Viasys** Orion, Pegasus    **Healthdyne/Respironics** Quantum  
**Resmed** VPAP Series    **Puritan Bennett** Goodknight Series    **Drager** Carina

**#8 CPAP devices. (Examples of devices)**

**Resmed** S8 series    **Respironics** REMstar, BIPAP    **AEIOmed** Everest    **Devilbiss** RPM    **Airon** MACS  
**Vital Signs** Downs flow generator    **Caradyne** Whisper flow    **Emergent** PortO2

**#9 Please identify which of the devices in #8 are solely for neonatal use. (Examples of devices)**

**Hamilton** Arabella    **Viasys** Infant Flow CPAP or SiPAP

**#10 Automatic resuscitators. (Examples of devices).**

**Oxylator** EM-100, EXM, FR 300    **Vortran** VTM-1    **Ambu** Ambumatic    **Impact** 73x  
**O-Two systems** Carevent BLS, EMT, Genesis, ALS, CA

**#11 Neonatal and Pediatric ventilators . (Examples of devices)**

**Drager** Babylog    **Bird** VIP    **Sechrist** Millennium, Model IV-100Bv    **Event** Inspiration Infant Ventialtor    **BioMed** MVP-10    **Bear** Cub  
**Smiths** Babypac

**#12 Stand by ventilators** - we realize that many institutions maintain ventilators that have been retired at the facility for use at peak ICU census. These are the ventilators we hope to capture with this question.

**Puritan Bennett** 7200    **Siemens** 900C    **Bear** 1000    **Bird** 6400/8400