



Step 1: Complete the box below corresponding to your options for the Airvo2:

**Usage Hours-**

Daytime Only **OR**

Nighttime Only **OR**

Continuous Use **OR**

Minimum number of hours \_\_\_\_\_

**Interface-**

Trach Mask (for trach patients) **OR**

Nasal Cannula Style

**Temperature-**

31 °C ° **OR**  34 °C

**OR**  37 °C (manufacturer recommended for trach patients)

**Target Total Flow- (between 30-60 lpm)**

Target flow between 30-40 (L/min)

**OR**  Specific flow (L/min) \_\_\_\_\_

**FIO2-** \_\_\_\_\_ % with a target flow of 30-40 L/min  
an FIO2 of up to 34% is available with a 5lpm concentrator or  
46% with a 10 lpm concentrator.

**Continuous Pulse Oximeter Monitoring**  Yes **OR**  No

If yes, settings for High/Low SPO2 and High/Low Heart Rate-

High SpO2 \_\_\_\_\_ Low SpO2 \_\_\_\_\_

High HR \_\_\_\_\_ Low HR \_\_\_\_\_

Patient Name: \_\_\_\_\_ Room #: \_\_\_\_\_

Facility Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_ Contact Email: \_\_\_\_\_

Shipping Address \_\_\_\_\_

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