



LUISA prescription form Single Circuit with Valve/Double Circuit

Fill out one prescription per form.

Lock form at the end once completed.

Please note: Some web browsers may render form fields differently. For best results, download script and open with Adobe Reader.

Patient Information

Patient Name	Unit/House No.
Date of Birth	Street
Patient ID/MRN	Suburb
	State
Date	Post Code

Device

Supplemental Oxygen	No	Yes	(up to 30 l/min)	
FiO2 Cell (optional accessory)	No	Yes		
Humidifier	No	Yes	Device Model	Settings

Device Settings

Alarm Volume	(1-4)			
Brightness	(10-100%)			
Orientation	Auto	Horizontal	Vertical	
Screen Background	Off	Polar Bear	Koala	Lion Astronaut
2 nd Alarm Language	Off	On	Language	

Program

Program	(1-4) of	(1-4)
Program Name	(8 character limit)	
Patient Type	Adult	Paediatric
Patient Interface	Invasive	Non-Invasive

	Setting Ranges			CPAP	HFT	PSV	aPCV	PCV	aVCV	VCV	P-SIMV	V-SIMV	MPVp	MPVv
	Adult	Paediatric	Increment											
Select mode														
VT	100ml - 3000ml	30ml - 400ml	5ml ≤ 100ml 10ml > 100ml											
CPAP	4 - 20 cmH2O	4 - 20 cmH2O	0.2 cmH2O											
HFT Flow	5 - 60 l/min	5 - 25 l/min	1 l/min											
PS	4 - 60 cmH2O	4 - 60 cmH2O	0.2 cmH2O											
IPAP/IPAP Min	4 - 60 cmH2O	4 - 60 cmH2O	0.2 cmH2O											
PEEP	Off, 2 - 25 cmH2O	Off, 2 - 25 cmH2O	0.2 cmH2O											
Rate (Back-up Rate)	2 - 60/min	5 - 80/min	0.5/min											
Ti Min	0.5 - 4s	0.2 - 4s	0.05s ≤ 0.8s 0.1s > 0.8s											
Ti Max	0.5 - 4s	0.2 - 4s	0.05s ≤ 0.8s 0.1s > 0.8s											
Ti	0.5 - 4s	0.2 - 4s	0.05s ≤ 0.8s 0.1s > 0.8s											
Ti Timed	Auto or 0.5 - 4s	Auto or 0.2 - 4s	0.05s ≤ 0.8s 0.1s > 0.8s											
Trigger														
Trigger Inspiration	Auto or 1-10 CPAP, MPVp, MPVv: 1- 10	Auto or 1-10 CPAP, MPVp, MPVv: 1- 10	-											
Trigger Expiration	5% - 95%	5% - 95%	5%											
Lockout Time	Off, 0.2 - 5s	Off, 0.2 - 5s	0.05s ≤ 0.8s 0.1s > 0.8s											
Target Volume														
Off														
On														
Target Volume Settings (Only complete if Target Volume is selected On)														
Target Volume	100 - 3000ml	30 - 400ml	5ml ≤ 100ml 10ml > 100ml											
IPAP max	4 - 60 cmH2O	4 - 60 cmH2O	0.2 cmH2O											
Speed	1, 2, 3	1, 2, 3	1 - 0.5/8 breaths 2 - 1.0/5 breaths 3 - 1.5/breaths											
Pressure Increase/Reduction														
Increase (Rise time)	1-4	1-4	-											

Setting Ranges			Alarm on/off	CPAP	HFT	PSV	aPCV	PCV	aVCV	VCV	P-SIMV	V-SIMV	MPVp	MPVv	
Adult	Paediatric	Increment													
Alarms (Mandatory, please complete all alarm settings)				Fill in settings below if alarm selected On											
Leakage High	Off, 5 - 200 l/min	Off, 5 - 200 l/min	5 l/min ≤ 50 l/min 10 l/min > 50 l/min	Off On											
Pressure Low	Off, 6 - 60 cmH2O	Off, 6 - 60 cmH2O	0.2 cmH2O	Off On											
Pressure High	6 - 65 cmH2O, Off	6 - 65 cmH2O, Off	0.2 cmH2O	Off On											
PEEP High	4 - 30 cmH2O, Off	4 - 30 cmH2O, Off	0.2 cmH2O	Off On											
Apnea	5 - 60s, Off MPV: 5-1800s, Off	5 - 60s, Off MPV: 5-1800s, Off	5s ≤ 60s 30s > 60s	Off On											
VT/VTi Low	Off**, 90 - 3000ml MPVv: Off, On	Off**, 10 - 400ml MPVv: Off, On	5ml ≤ 100ml 10ml > 100ml	Off On											Off / On Only
VTi High	90 - 3000ml, Off**	10 - 3000ml, Off**	5ml ≤ 100ml 10ml > 100ml	Off On											
VTe Low*	Off, 90ml - 3000ml	Off, 10ml - 400ml	5ml ≤ 100ml 10ml > 100ml	Off On											
VTe High*	90 - 3000ml, Off	10 - 3000ml, Off	5ml ≤ 100ml 10ml > 100ml	Off On											
VT permanently Low On*	Off, On	Off, On	-	Off On											
Rate Low	Off, 1 - 60/min	Off, 1-80/min	0.5/min	Off On											
Rate High	1 - 60/min, Off	1 - 80/min, Off	0.5/min	Off On											
MVi Low	Off, 0.1 - 40l/min	Off, 0.1 - 40l/min	0.1 l/min	Off On											
MVi High	0.1 - 40l/min, Off	0.1 - 40l/min, Off	0.1 l/min	Off On											
MVe Low*	Off, 0.1 - 40l/min	Off, 0.1 - 40l/min	0.1 l/min	Off On											
MVe High*	0.1 - 40l/min, Off	0.1 - 40l/min, Off	0.1 l/min	Off On											

*Double Limb Circuit Only

**Off option not available in invasive ventilation (IV)

Setting Ranges				Alarm on/off	CPAP	HFT	PSV	aPCV	PCV	aVCV	VCV	P-SIMV	V-SIMV	MPVp	MPVv	
Adult	Paediatric	Increment														
Optional Alarms (*Accessories sold separately.)					Fill in settings below if alarm selected On											
FiO2 Low	Off, 20 - 100%	Off, 20 - 100%	1%	Off On												
FiO2 High	20 - 100%, Off	20 - 100%, Off	1%	Off On												
SpO2 Low	85 - 95%	85 - 95%	1%	Off On												
SpO2 High	90 - 100%, Off	90 - 100%, Off	1%	Off On												
Pulse Low	Off, 30 - 150 bpm	Off, 30 - 150 bpm	1 bpm	Off On												
Pulse High	80 - 250 bpm, Off	80 - 250 bpm, Off	1 bpm	Off On												
etCO2 Low	Off, 0 - 20%	Off, 0 - 20%	1%	Off On												
etCO2 High	0 - 20%, Off	0 - 20%, Off	1%	Off On												
Therapy Ended	Off, On	Off, On	-	Off On												
Disconnected Patient	Off, On (HFT ONLY)	Off, On (HFT ONLY)	-	Off On	Locked On		Locked On	Locked On	Locked On	Locked On	Locked On	Locked On	Locked On	Locked On	Locked Off	Locked Off

Additional Information

Prescribers Details

Name	Signature
Health Provider	
provider No.	
Phone Number	
E-mail	

CHECK BOX TO LOCK THE FORM (cannot be unticked)

Technical Setup Sign Off (Internal Use only)

Device Type	Battery Serial Number
Device Serial Number	Battery Firmware Version
Device Firmware Version	Battery Production Date
Preventative Maintenance due date	Battery Replacement Date
<input type="checkbox"/> 4 year	<input type="checkbox"/> 8 year

Technician 1

Name	Name
Phone Number	Phone Number
Signature	Signature
Date	Date
Time	Time

Technician 2

Additional Information