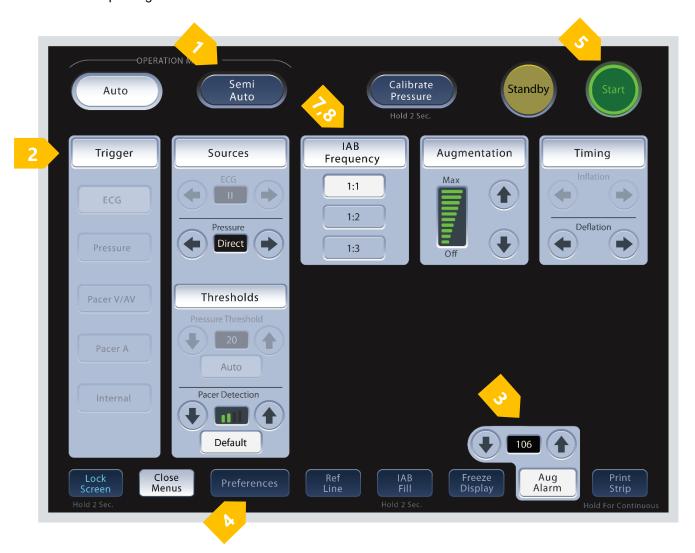


## IABP Driver CardioSave Hybrid Basic settings

- 1. Set the OPERATION MODE on SEMI AUTO
- 2. Set TRIGGER on ECG or PRESSURE
- 3. Disable the AUGMENTATION ALARM (AUG. ALARM)
- 4. Disable the R-TRAC option (Select PREFERENCES → PUMP OPTIONS → R-trac)
- 5. When the iVAC is connected: press the Start button
- 6. Let the IABP driver fill the Membrane Pump
- 7. Start the IABP driver at 1:2 frequency with maximum augmentation and observe the movements of the membrane of the Membrane Pump
- 8. When the membrane is moving smoothly and the timing is correct, set the frequency at 1:1 for maximum performance

To set the IABP driver in INTERNAL mode: select INTERNAL in TRIGGER and remove the ECG cable from the IABP driver. Reconnect the ECG cable when returning to the ECG or PRESSURE triggering mode

In case of repeating alarms: Select PREFERENCES → PUMP OPTIONS → CATHETER ALARMS



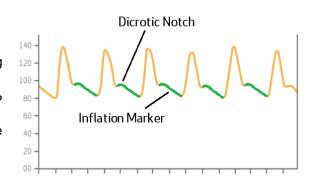


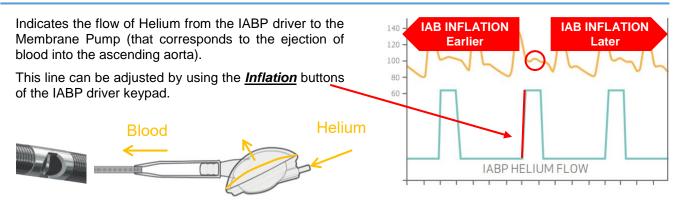
## Basic information to adjust the trigger times

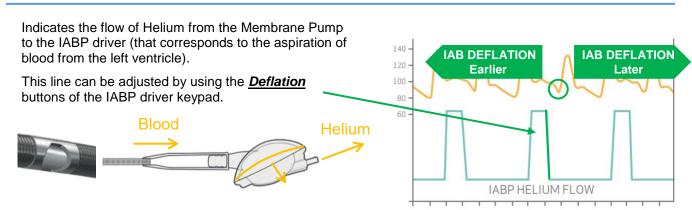
The green line indicates the optimal time for supporting.

The iVAC should eject during diastole and aspirate during systole.

- The inflation may come as soon as the slope of the AP curve is decreasing, just prior to the Dicrotic Notch.
- The deflation should be set prior to the systole of the heart.







If a good trigger (ECG / pressure) is no longer available (ventricular fibrillation, extremely many extrasystoles, too fast/low heart rate), you can switch to internal trigger after disconnecting the ECG cable - initial frequency rate: 80 bpm.

Possible alarms	Reason	Solution
Leak in IAB Circuit	Heart rate too high or too many extra-systoles	Restart console or select Internal trigger in necessary
Rapid Gas Loss		
Check IAB Catheter		
ECG recorded	ECG cable is still plugged in while trigger is set to internal	Disconnect the ECG cable (reconnect the cable if ECG trigger source is selected again)