



*Software update for the
SLE6000 ventilator*

Version 2.0 software



When the smallest thing matters

SLE6000: New Software Modules

Major Update

Version 2.0 software is the biggest update we've ever made to a ventilator. New modes, new features and new ways of reducing workloads.

Additional Languages

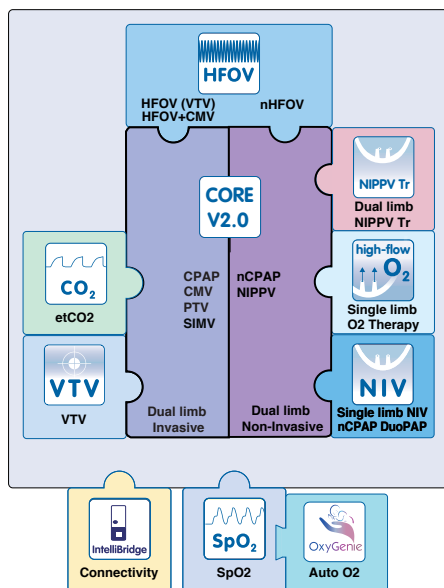
The new software brings additional language support to the SLE6000. It now supports 15 languages including Russian and Chinese.

Modularity

The modular design of the SLE6000's software makes it easy to upgrade.

SLE offers a range of software packages that can be installed via a USB memory stick. All seven of the new module options available with version 2.0 software are shown alongside.

Please note, some upgrades require additional hardware (such as sensors or interface devices) which can be supplied by SLE.



HFOV (with VTV)

High Frequency Oscillation Ventilation is now a standalone module. It includes VTV (Volume Targeted Ventilation) as standard. The addition of volume targeting in HFOV can contribute to maintaining more stable PaCO₂, responding to changes in lung mechanics.⁽¹⁾

In HFOV+VTV, the SLE6000 automatically adjusts the ΔP, in order to achieve the target Vte, set by the user.



NIPPV Tr

Non-invasive Positive Pressure Ventilation (Triggered)

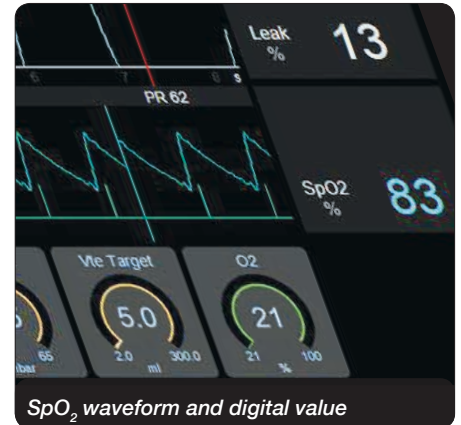
In addition to the existing NIPPV mode, users have now an option to allow the patient to trigger the SLE6000's mechanical inflations.

Successful triggering can lead to reduced work of breathing compared with nCPAP.⁽²⁾



DuoPAP

The new DuoPAP mode can be used with single limb CPAP generators. DuoPAP is associated with better CO₂ clearance than nCPAP and can contribute to a reduction in re-intubations.⁽³⁾



SpO₂ with MasimoSET

The SpO₂ software module uses Masimo™ SET (Signal Extraction Technology) to allow the SLE6000 ventilator to monitor SpO₂.

Having all of the data on a single screen allows the caregiver to focus on the patient's ventilation.

During therapy the caregiver can call up simultaneous trends of SpO₂ and compare it with other parameters (such as pressure or delivered oxygen) allowing easier interpretation of linked events and better visualisation of the patient's condition.

The SpO₂ module is a prerequisite for adding OxyGenie.

References

⁽¹⁾ High-Frequency Oscillatory Ventilation Combined with Volume Guarantee in a Neonatal Animal Model of Respiratory Distress Syndrome

Manuel Sánchez Luna, Martín Santos González, and Francisco Tendillo Cortijo

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Volume 2013, Article ID 593915

<https://www.hindawi.com/journals/ccrp/2013/593915>

⁽²⁾ Synchronized Nasal Intermittent Positive Pressure Ventilation (SNIPPV) Decreases Work of Breathing (WOB) in Premature Infants With Respiratory Distress Syndrome (RDS) Compared to Nasal Continuous Positive Airway Pressure (NCPAP)

Zubair H. Aghai, Judy G. Saslow, Tarek Nakhla, Barry Milcarek, James Hart, Robyn Lawrysh-Plunkett, Gary Stahl, Robert H. Habib, and Kee H. Pyon,

Pediatric Pulmonology 41:875–881 (2006)

https://www.umanitoba.ca/faculties/health_sciences/medicine/units/pediatrics/sections/neonatology/media/Resp1.pdf

⁽³⁾ Early nasal intermittent positive pressure ventilation (NIPPV) versus early nasal continuous positive airway pressure (NCPAP) for preterm infants.

Lemyre B, Laughon M, Bose C, and Davis PG.

<https://www.ncbi.nlm.nih.gov/pubmed/27976361>

Links

Please visit our website at: www.sle.co.uk to download PDF brochures on the products below.

[SLE6000 brochure \(various languages\)](#)

[OxyGenie brochure](#)

[SpO₂ brochure](#)

[EtCO₂ brochure](#)

[SLE Miniflow brochure](#)



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