



**NAVA<sup>®</sup> adult patient case**

Acute respiratory failure with pneumonia

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## Day 1: Patient is intubated and on volume control

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58 years old  
Severe respiratory distress  
Acute Respiratory Failure with  
bilateral pneumonia

Day 2: Patient is switched to pressure support,  
but requires a high level of assist

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## How would you proceed?

### Ventilator settings

- PS 15 cmH<sub>2</sub>O
- PEEP 5 cmH<sub>2</sub>O
- FiO<sub>2</sub> 40%

### Arterial blood gas

- pH 7.47
- pCO<sub>2</sub> 48 mmHg
- HCO<sub>3</sub> 31.7 mmol/L
- pO<sub>2</sub> 73 mmHg
- PaO<sub>2</sub>/FiO<sub>2</sub> 183

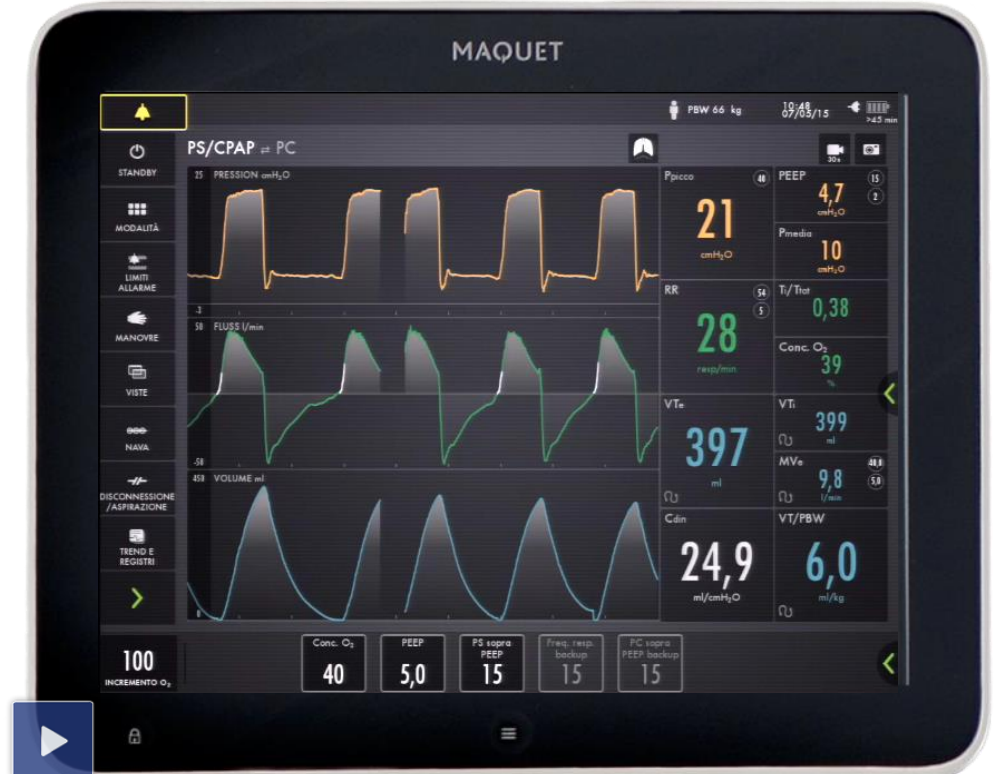


The physician decided to insert the Edi catheter to monitor the diaphragm activity

What will be your next action?

Status:

Edi signal is low, patient remains tachypneic using accessory muscle to breathe



The physician increases pressure support in order to decrease work of breathing and tachypnea

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## What does the Edi signal say?

Status:

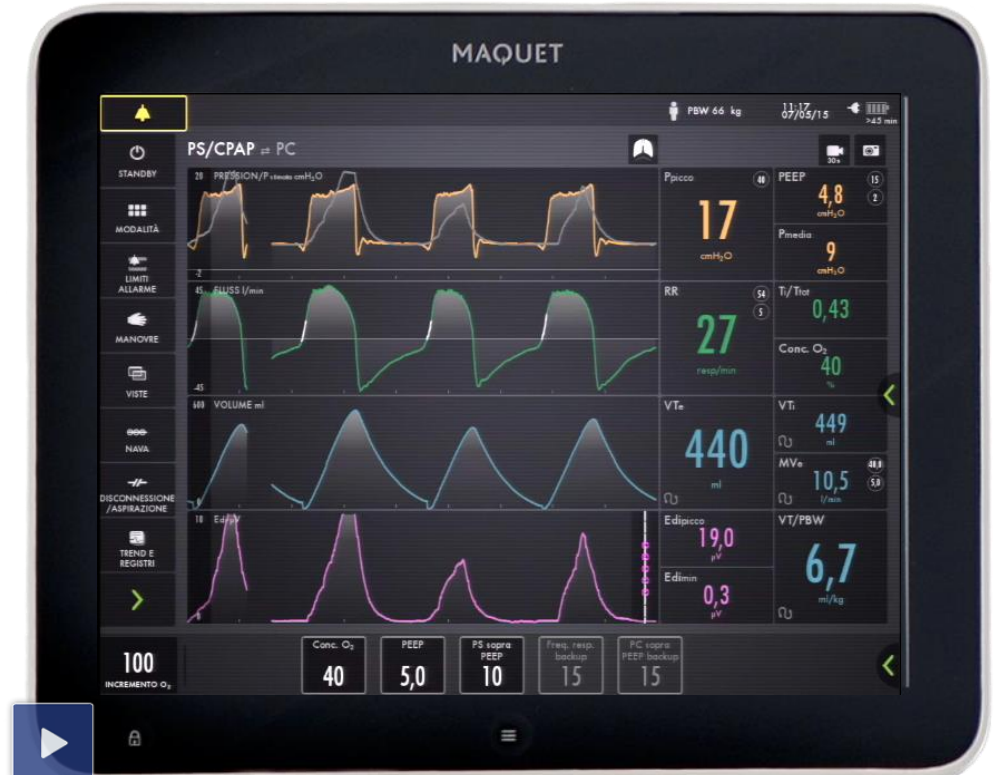
Edi signal is low with asynchrony and missed efforts



Patient is switched to NAVA®

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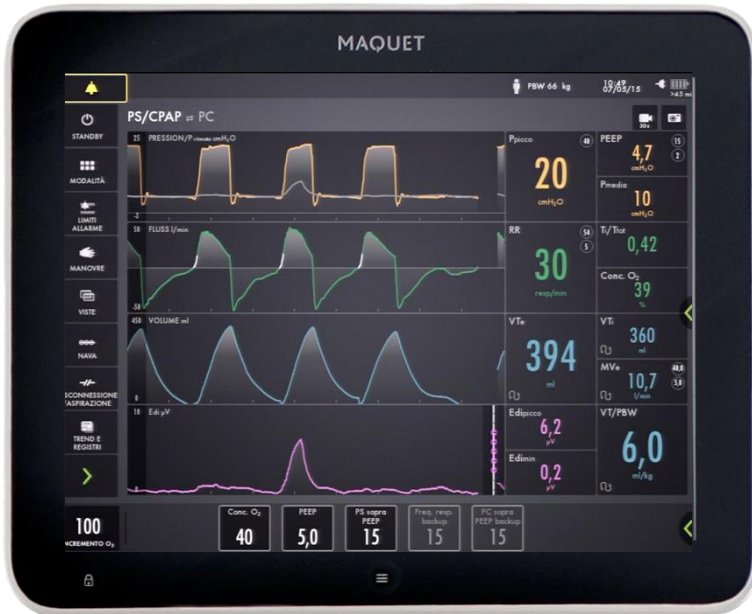
Can you see the results?



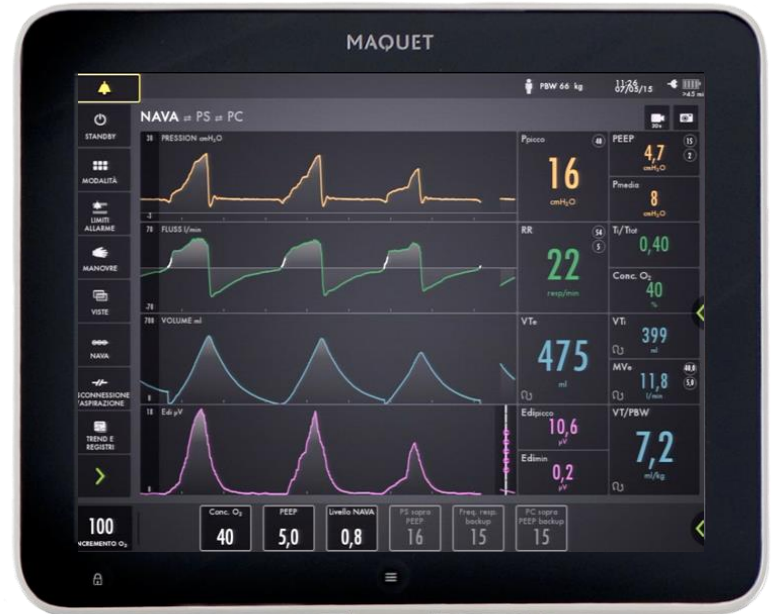
# Advantages of NAVA<sup>®</sup> over pressure support

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## Pressure support



## NAVA



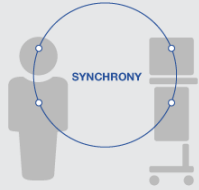
# Day 3: Successfully weaned from NAVA® with continued Edi monitoring

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# You are welcome to learn more



Use NAVA® on patient



Learn from more patient cases



Review the evidence

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