

# Innovative Lung Therapy for Airway Clearance



Combined Therapy

Conventional Therapy

## **PARI PEP S** POSITIVE EXPIRATORY PRESSURE DEVICE

- Two therapeutic options
- Eight resistance settings covers a large expiratory flow range that offers pressure of 10-20cm H<sub>2</sub>O
- Compatible with all PARI LC<sup>®</sup> Reusable Nebulizers for combination PEP therapy and clinically proven nebulizer therapy
- Easy to use, lightweight, dishwasher safe and boilable



*Delivering*  
**CLINICALLY  
PROVEN SUCCESS**

Specialists in effective inhalation





OPTION ONE:

## Combined PEP and PARI LC® Reusable Nebulizer Therapy

- When the patient inhales, air flows through the nebulizer valve, combines with aerosolized medication and is directed to the patient's lungs.
- When the patient exhales, the nebulizer valve closes and diverts air through a pre-set exhalation port. Airflow resistance is created resulting in an increase in positive expiratory pressure (PEP).



OPTION TWO:

## Conventional PEP Therapy

- When the patient inhales, air flows through the PARI PEP™ S valve and is directed to the patient's lungs.
- When the patient exhales, the valve closes and diverts air through a pre-set exhalation port. Airflow resistance is created resulting in an increase in positive expiratory pressure (PEP).



## What is PEP Therapy?

- Positive Expiratory Pressure (PEP) is a type of therapy that creates resistance pressure during exhalation
- Used for airway clearance
- For patients diagnosed with Cystic Fibrosis or lung diseases with secretory problems.

## Parts and Accessories

<b>018F63</b>	PARI PEP™ S SYSTEM
<b>023F35</b>	PARI LC® SPRINT REUSABLE NEBULIZER
<b>022F81</b>	PARI LC® PLUS REUSABLE NEBULIZER
<b>018D0012</b>	PARI PEP™ S INSTRUCTIONS FOR USE
<b>041F3500</b>	PARI NOSECLIP
<b>044B4612</b>	PRESSURE MONITOR

## Study References

1. Anderson JB, Klausen NO. A new mode of administration of nebulized bronchodilator in severe bronchospasm. *EUR J RESPIR DIS (SUPPL)* 1982; 119:97-100
2. Hardy KA. A review of airway clearance: New techniques, indications, and recommendations. *RESPIR CARE* 1994; 39(5):440-455.