



Peak Flow Meter (OFM101)



Please read instruction manual before use

Warnings

Note: Please read all the information in this manual before using the Peak Flow Meter

- The Peak Flow Meter is recommended for single patient use.
- The Peak Flow Meter should be used under the supervision of a licensed healthcare professional.
- Note: Patients symptoms take precedence over Peak Flow Meter readings.
- If the PEFM is used for longer than its specified life, the accuracy of the device may deteriorate.

What is a peak flow meter?

A Peak Flow Meter is a device intended to measure how well your asthma is under control. The device measures air flowing out of the lungs as you blow into the device as fast as hard as possible. A Peak Flow Meter can reveal narrowing of the airways well in advance of an asthma attack. Used mainly by persons with moderate to severe and persistent asthma, Peak Flow Meters can help determine:

- When to seek emergency medical care.
- The effectiveness of a person's asthma management and treatment plan.
- When to stop or add medication, as directed by your physician.
- What triggers the asthma attack (such as exercise-induced asthma).

With asthma, sometimes you may feel your breathing is fine, but when you measure it with a peak flow meter, your lung function may be decreased. A Peak Flow Meter can help you determine airway changes and better manage your asthma.

Asthma Care Partnership with your Physician

Your doctor will take the time to educate you in Self-Management of your asthma. This will start upon diagnosis and continue with all members of the healthcare team. but will include: basic facts about asthma; roles of medication; skills required for your inhaler, spacer and Peak Flow Meter, environmental control measures; when and how to take rescue actions.

You and Your Asthma

Most people with asthma need to monitor their asthma a least twice a day and to have a plan of action to keep it under control. This leaflet provides detailed information on your Peak Flow Meter and how the Self-Management Action Plan works.

Q. What is Peak Flow?

A. Peak Flow is a measurement of how fast you can blow air out of your lungs. Your peak flow score will be higher when you are well, and lower when your airways get narrower. Peak flow scores are therefore a useful guide to the openness of your airways at any given moment and sense, the

severity of your asthma. You should measure peak flow as soon as you wake up and in the evening before taking your bronchodilator, or as directed by your Doctor.

Although how you feel and what you can do is important, peak flow scores show accurately how your Breathing is changing. Modern asthma medicines aim to give you the best possible peak flow score, keeping you in the green zone. It is also important to aim for stable peak low, ie. Little difference between morning and evening

cores and from day to day.
Q. Why do I need to measure my peak flow?

A. Many people over the ages of five will benefit from monitoring their asthma with a Peak Flow Meter, indicating when and how much to use their lever medication. It will help your doctor because peak flow scores make it easier to see how well your asthma is controlled and when treatment needs changing.

Q. How do I get an Action Plan?

A. Only your doctor can determine the best Action Plan for you. This is likely to be preceded by an initial assessment allowed by a

diagnostic phase. During the diagnostic phase you will need to record your peak flow scores. Your Action Plan is then assessed against your peak flow scores over several days. Your treatment and/or Action Plan may be changed following the diagnostic phase. This procedure may be repeated until your optimum Action Plan is proven.

Q. What is my Normal Value?

A. Your 'Normal Value' is the best Peak Flow value that you can achieve. This is your '100%' or 'reference value. Population normative standards are not clinically useful in going serial monitoring of your asthma.

How to use your Peak Flow Meter

1. Stand up unless your physician advises other wise.
2. Slide the point down to the bottom of the scale at the end where you blow in.
3. Lightly hold the meter on its edge in front of you, with the scale away from your hand. Breathe in as deeply as possible. Holding your breath, place the mouthpiece well into your mouth, bite the mouthpiece

lightly, and seal your lips firmly around it.

4. Do not bend your neck down.

5. Blow out as HARD and as FAST as you can for a second or more. Be careful not to block the mouthpiece with your tongue or teeth. A 'spitting' action will give falsely high readings.

The subject may experience side effects such as dizziness or fatigue, during the test procedure. If this occurs, stop the manoeuvre.

6. Your peak flow is shown on the scale against the pointer.

Note where it is and slide the pointer back to the bottom of the scale.

7. Do this three times using the highest as your guide for your Action.

8. During a diagnostic phase you must record your highest peak flow reading or colour every morning and evening on a chart for your doctor. If you are not in the green zone most of the time your management plan must be reviewed.

Making sense of your Peak Flow Score

If you often fall below your usual peak flow, it may be a sign that your asthma is getting worse. Similarly,

bigger differences between morning and evening scores may mean your asthma is worsening, especially if you also start waking at night with a cough or wheezing.

The Diagnostic Phase

When your doctor first diagnoses your condition and as your disease improves or worsens, recording your peak flow scores two or more times a day is required for a week or longer. This is to ensure that the treatment you are following is adequately keeping your peak flow score in the green zone. If the diagnostic phase proves unsatisfactory, your doctor will change your treatment and start a new diagnostic phase. After satisfactory scores and an Action Plan are established you will probably no longer be asked to record your peak flow scores, but simply to follow your Action Plan.

Care and Cleaning of your Peak Flow Meter

Your Peak Flow Meter should continue to give reliable measurements for up to three years, after which time you should ask your doctor for a new unit. Avoid crushing the unit and keep it clean and dust free. If you

suspect the unit is damaged or is measuring incorrectly, contact your doctor immediately.

The outer surfaces should be thoroughly cleaned every week, more often if necessary. We recommend the use of an ordinary alcohol wipe (IPA 70-90%), paying special attention to the mouthpiece area.

NEVER ATTEMPT TO DISMANTLE THE UNIT. THIS CAN CAUSE FAULTY PEAK EXPIRATORY FLOW SCORES.

In Clinic: When used for multiple subjects always use a disposable mouthpiece. The Peak flow meter should be externally disinfected using an IPA wipe (70%) between each patient, and should be disposed of after 30 patients or 2 weeks, whichever is the earlier.

Technical Specifications

Measurement Range: 60-800 L/min.

Material: ABS plastic.

Accuracy: ± 10 L/min or $\pm 10\%$ of the reading, whichever is greater.

Repeatability: ± 10 L/min or $\pm 5\%$ of the reading, whichever is greater.

Frequency response: Profile A/B difference less than ± 15

L/min or $\pm 12\%$, whichever is greater.

Storage Conditions:

Temperature: 10-35°C;

Relative

Humidity: 30%-75%

Warranty

Passim Lifesciences Ltd. warrants this unit against defects in materials and workmanship for 3 Months from the date of purchase.

* Terms & Conditions apply

WARRANTY CARD	
Model No.	Lot No.
Invoice No.	Date of Purchase.....
Purchased By.....	Contact No.....
Address.....	Dealer's Name.....
Dealer's Sign & Stamp	

Symbols

- Medical Device Lot No.
- Warning/Caution Serial No.
- ManufacturedBy No Trash
- Refer Instructions Manual
- Keep Away From Sunlight
- Do not use if Package damaged
- Must not be exposed in rain or excessive moisture
- Manufacturing Date

Manufactured by:
Passim Lifesciences Ltd.
Plot No. 45, Ind. Area, Phase-II, Panchkula
- 134113, Haryana-INDIA
Mfg. Lic. No.: MFG/MD/2022/000615
For any Complaint / Suggestion please contact:
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