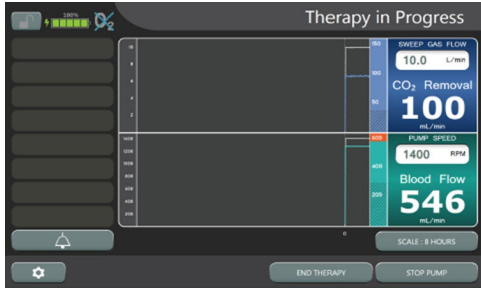


**XIII. HEMOLUNG DAILY MONITORING RECORD SHEET**

PAGE \_\_\_\_\_ of \_\_\_\_\_



- Sweep Gas Flow
- CO<sub>2</sub> Removal Rate
- Blood Pump Speed
- Blood Flow

*This worksheet is intended for daily bedside use while on Hemolung therapy to monitor and record Hemolung performance.*

*Recording of Hemolung parameters is requested 1 - 2 times daily until end of Hemolung therapy. Additional Sheets are available at [alung.com/registry](http://alung.com/registry)*

Date: (mm/dd/yyyy)

Time:

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HEMOLUNG PARAMETERS													
Sweep Gas Flow (L/min)													
CO <sub>2</sub> Removal Rate (mL/min)													
Hemolung Blood Pump Speed (rpm)													
Blood Flow (mL/min)													
<i>Provider Initials</i>													

Date/Time	HEMOLUNG OBSERVATIONS AND ACTION NOTES	Initials

HEMOLUNG CONTROLLER EXCHANGES			
Date/Time	S/N of Backup Controller:	Reason for Exchange:	Initials