Shaping New Perspectives on Pulmonary Function

tremoflo

Airwave Oscillometry
Fast, Easy Assessment of Small Airway Function

Oscillometry (Forced Oscillation Technique, FOT)
Breathe-through Vibrating Mesh (Patented)
AOS: Pseudo-random noise
20 sec (typ.), user adjustable
3 repetitions (as per guideline)
Bacterial/viral filter with integrated mouthpiece
7.5 x 5.1 x 5.5 in, 1.5 lb (handheld only)
8.3 x 5.5 x 9.4 in, 3.7 lb (handheld & cradle)
Meets and exceeds ERJ 2003, 22: 1026-1041
Health Canada, CE Mark, ARTG
The innovative tremoflo C-100 Airwave Oscillometry System (AOS) offers fast, easy assessment of large and small airway function. Measurements are obtained during tidal breathing and without patient effort. The tremoflo is excellently suited for a wide range of patients, from preschoolers to the elderly.

1. Fast & Easy
To assess respiratory function, the tremoflo adds a gentle oscillatory wave to the patient’s regular, quiet breathing. A measurement duration of only 20 seconds allows three repetitions within a couple of minutes.

2. Outcomes
The tremoflo provides curves of Resistance ($R$) and Reactance ($X$) as well as parameters reflecting large and small airway function. For details, visit www.tremoflo.com/outcomes.

3. Central Obstruction
An obstruction of the large, central airways causes a parallel upward shift in $R$ while $X$ remains largely unchanged.

4. Peripheral Obstruction
Obstruction of the small airways in the peripheral lung causes a downward shift in $X$ along with an increase in $R$. In presence of heterogeneities, $R$ also becomes curved.

5. Dynamic Collapse
Dynamic collapse and expiratory flow limitation cause dramatic changes in $X$, especially during expiration.

More information at www.tremoflo.com
**tremoflo C-100**  
*Airwave Oscillometry System (AOS)*

<table>
<thead>
<tr>
<th><strong>Measurement Principle</strong></th>
<th>Oscillometry (Forced Oscillation Technique, FOT)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Oscillator Technology</strong></td>
<td>Breathe-through Vibrating Mesh (Patented)</td>
</tr>
<tr>
<td><strong>Measurement Modes</strong></td>
<td>AOS: Pseudo-random noise</td>
</tr>
<tr>
<td><strong>Measurement Duration</strong></td>
<td>20 sec (typ.), user adjustable</td>
</tr>
<tr>
<td></td>
<td>3 repetitions (as per guideline)</td>
</tr>
<tr>
<td><strong>Patient Interface</strong></td>
<td>Bacterial/viral filter with integrated mouthpiece</td>
</tr>
<tr>
<td><strong>Dimensions &amp; Weight</strong></td>
<td>7.5 x 5.1 x 5.5 in, 1.5 lb (handheld only)</td>
</tr>
<tr>
<td></td>
<td>8.3 x 5.5 x 9.4 in, 3.7 lb (handheld &amp; cradle)</td>
</tr>
<tr>
<td><strong>Performance</strong></td>
<td>Meets and exceeds ERJ 2003, 22: 1026-1041</td>
</tr>
<tr>
<td><strong>Marks &amp; Licenses</strong></td>
<td>Health Canada, CE Mark, ARTG</td>
</tr>
</tbody>
</table>

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