

WELCOME TO AFFLOVEST®

with Mobile Mechanical Oscillation therapy

Airway Clearance Therapy (ACT) is considered the cornerstone of therapy aimed at minimizing the effects of airway obstruction, infection, and inflammation in lung diseases.



The fully mobile AffloVest® is engineered to mimic anatomically targeted chest physical therapy. It can deliver effective airway clearance therapy to help improve bronchial drainage by enhancing mobilization of secretions. It can be used for the treatment of respiratory diseases, such as:

- Bronchiectasis
- Multiple Sclerosis (MS)
- Amyotrophic Lateral Sclerosis (ALS)
- Cystic Fibrosis
- Muscular Dystrophy (MD)
- Other neuromuscular respiratory diseases

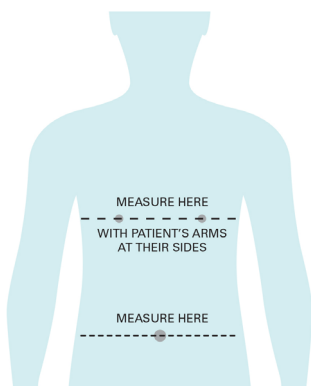
SIZING CHART

Measurement Instructions

Have the patient remove any outerwear and stand straight with arms at their side. The patient should not inhale to overly expand their chest but be in a natural state. Using a tailor's or sewing tape, take the chest/bust measurement under the arms across the **largest** part of the chest and do the same around the largest part of the abdomen. Pull the measuring tape around without stretching or tightening the tape (a relaxed measurement). Take the chest/bust and abdomen measurements with the patient's arms at their side (not with their arms up or outward, see image below). Use the larger of the two measurements to determine the correct size. If there is a greater than 12" (30 cm) difference between the chest/bust and abdomen, please contact International Biophysics for sizing determination assistance.



Guidelines Based on Body Measurement



SIZE	Body Measurement
XXS	18" – 23" (46 – 58 cm)
XS	23" – 29" (58 – 74 cm)
S	29" – 35" (74 – 89 cm)
M	35" – 41" (89 – 104 cm)
L	41" – 48" (104 – 122 cm)
XL	48" – 55" (122 – 140 cm)
XXL	55" – 65+" (140 – 165+ cm)

Please note:

- Fit and sizing vary from person to person
- Using the front adjustment straps, the AffloVest should fit very snugly on the chest, but not limit the patient's ability to take in a full, deep breath
- If needed, adjust the shoulder snaps to place the front upper AffloVest oscillation motors on the upper chest, just below the collar bone



Upon receipt of the AffloVest, please note:

- A 1 inch (2.5 cm) overlap of the vertical black seams on the front of the AffloVest is acceptable for all sizes
- A 1 to 5-inch (2.5 – 13 cm) gap between the two sides of the AffloVest is also acceptable for all sizes



Specifications

Treatment	Treatment times can vary depending on physician prescription; however, treatments generally take 20-30 minutes and are conducted twice daily
Sizes	Available in 7 sizes for a custom fit, XXS to XXL (18" circumference chest to 65"+)
Weight	Lightweight, ~5.0 – 8.5 lbs.
Power Supply	Battery operated, rechargeable with 5-year warranty, AC/DC power
Mode of Operation	8 oscillation motors anatomically positioned into the AffloVest that create 8 individual pressure waveforms

Warranty

The AffloVest and its internal oscillation motors, the Battery, AC Power/Charger Supply, and Hand-Held Controller all have a five (5) year limited warranty, the Go Anywhere travel case has a one (1) year warranty. Limited warranty does not cover any lost items or abuse. Please see the AffloVest complete written warranty policy for details and limitations.

AFFLOVEST ORDERING INFORMATION

- Provide a prescription for E0483 HFCWO vest therapy with recommended frequency
- Gather all medical records and chart notes documenting:
 - **If a DX of any type of Bronchiectasis is the primary DX, the following applies:**
 - Most insurances require CT scan for a diagnosis of bronchiectasis, but requirements vary by payer
 - 6 continuous months of productive cough **OR** 3 or more exacerbations requiring antibiotics (both must be within the previous 12 months)
 - Previous treatments aimed at mobilizing secretions that patient has tried and failed, is unable to tolerate, or is unable to use
 - **If any other qualifying DX (CF or Neuromuscular) is the Primary DX, the following applies:**
 - Qualifying diagnosis with chart notes that support this DX
 - Previous treatments aimed at mobilizing secretions that patient has tried and failed, is unable to tolerate, or is unable to use
 - Chart notes must occur within 12 months prior to the prescription
- Fax all the information above to **888.793.2319**

For more information, please visit afflovest.com.

AffloVest requires a doctor's prescription for treatment by High Frequency Chest Wall Oscillation (HFCWO). It is intended to promote airway clearance and help improve bronchial drainage by enhancing mobilization of secretions. It can be used for the treatment of respiratory diseases, such as Bronchiectasis, Cystic Fibrosis, Multiple Sclerosis (MS), Muscular Dystrophy (MD), Amyotrophic Lateral Sclerosis (ALS), and other neuromuscular and respiratory diseases.



International Biophysics Corporation | 2101 E. St. Elmo Rd. Ste 275 | Austin, TX 78744
(T) 888-711-1145 | (F) 888-793-2319 | afflovest.com | info@biophysicscorp.com | © Copyright 2019.