

RECOMMENDED EQUIPMENT REPLACEMENT SCHEDULE

Full-Face Mask	1 per 3 months
Nasal Mask (mask or cannula/pillow type)	1 per 3 months
Replacement Cushion for Full-Face Mask	1 per month
Replacement Cushion/Pillow for Nasal Mask	2 per month
Headgear	1 per 6 months
Chin Strap	1 per 6 months
Tubing	1 per 3 months
Disposable Filter	2 per month
Non-Disposable Filter	1 per 6 months
Replacement Chamber for Humidifier	1 per 6 months
Positive Airway Pressure Device (CPAP, APAP, BiPAP)	1 per 5 years
Humidifier, Heated	1 per 5 Years



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