

**Perfusate chemistry readings from
real-time sensors (e.g. pH)**



**Perfusate hemodynamics from in-
line sensors (e.g. pressure)**



Display monitors for user interface



**Automated hemostatic adjustment
(see Table below)**

Variable	Condition	Automated Response	Additional Manual Interventions
pH	<i>Above 7.45</i>	Increase CO2% gas inflow into HA (by 1% until back in range)	Increase dialysis blood pump speed to shunt more blood through filter
	<i>Below 7.35</i>	Increase rate of N2 inflow into PV (by 5mL/min until back in range)	Addition of bicarbonate
pO2 (Artery)	<i>Above 130</i>	Stop gas flow into HA (resumes at low flow until back in range)	N/A
	<i>Below 100</i>	Increase O2 % and/or rate into HA (by 1% until back in range)	N/A
pO2 (Vein)	<i>Above 85</i>	Set N2% to 100%, Increase rate of N2 inflow into PV (by 5mL/min until back in range)	N/A
	<i>Below 60</i>	Increase O2 % and/or rate into PV (by 1% or 1mL/min until back in range)	N/A
pCO2	<i>Above 30</i>	Increase rate of N2 and/or O2 inflow into PV (by 5 mL/min until back in range)	Increase dialysis blood pump speed to shunt more blood through filter
	<i>Below 10</i>	Increase CO2% inflow into HA (by 1% until back in range)	Addition of bicarbonate
Hct/Hgb	<i>Above 45</i>	Dialysis inflow pump increases with respect to outflow to add volume	Dilution with saline
	<i>Below 30</i>	Dialysis outflow pump increases with respect to inflow to draw off volume	Addition of more blood (cleaned RBC packs) if available
Lactate/K/Na	<i>Above 5/6/150</i>	When K exceeds 6, dialysis speed increases	Increase dialysis blood pump speed to shunt more blood through filter
	<i>Below X/X/140</i>	N/A	If Na low, add bicarbonate (Lactate and K are physiologically low)
Pressure (PV/HA)	<i>Above 8/100</i>	Decrease pump speed (currently working on implementing this automation)	Adjust cannula trajectory; bolus epoprostenol
	<i>Below 2/70</i>	Increase pump speed (currently working on implementing this automation)	Bolus phenylephrine