

Supplemental Figure 2. Representative tracings of flow (Panel A) and airway pressure (P_{aw} , Panel B) over time illustrating the coexistence of auto-PEEP and complete airway closure in a single patient. At clinical respiratory rate (26/min in this patient), flow does not go back to zero before next inspiration starts (black arrow on Panel A). During end-expiratory occlusion (gray arrow on Panel A), flow goes back to zero and P_{aw} increases from set PEEP (8 cm H₂O in this patient) to total PEEP of 16 cm H₂O (gray arrowhead on Panel B) illustrating existence of auto-PEEP (intrinsic PEEP of 8 cm H₂O in this patient). After a prolonged expiratory pause (12 seconds in this patient to eliminate auto-PEEP, low-flow (5 L/min) insufflation starts (black-outlined white arrow on Panel A). After abrupt increase in P_{aw} (black-outlined white arrowhead on Panel B), P_{aw} increases slower. Pressure measured at this inflection point is airway opening pressure (19 cm H₂O in this patient, higher than total PEEP) and suggests complete airway closure.

