With "Basic Assessment and Support in Intensive Care" by Gamersall et al as a foundation, I built using the humongous and canonical "Principles and Practice of Mechanical Ventilation" by Tobins et al – the 1442 page 2nd edition

SIMV With PRVC: Pressure-Regulated, Volume-Controlled

VOLUME CONTROLLED PRESSURE REGULATED SIMV- here demonstrated without spontaneous breaths

- Volume Controlled
- Time-Triggered – and the pressure support breaths are flow-triggered
  Pressure-limited, or rather “Pressure Regulated”
  ....Flow-limited (but doesn't have to be flow-limited)
- Time-Cycled AND Flow-Cycled

The key feature is, THE LOWEST POSSIBLE PRESSURE IS USED.

The first breath tests for compliance; it’s a low-volume low-pressure calibration breath
A compliance is calculated, and from this value, a pressure is calculated which would be required to deliver the controled target volume.

The next breath is delivered at this calculated pressure. If the controlled target volume is exceeded, the ventilator adjusts the flow rate, so that with the next breath the pressure is slightly lower.

The subsequent breaths are delivered at the decreased pressure.