

## PROCEDURES PROC-01L

# IMPEDANCE THRESHOLD DEVICE (RESQPOD)

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## **General:**

• An Impedance Threshold Device (ResQPOD®) selectively impedes inspiratory gases from entering the lungs during the decompression phase (upstroke) of CPR. This generates a greater negative pressure in the thorax, allowing for an enhanced venous return to the heart. As a result of greater venous return, increased preload is accomplished, which generates a greater stroke volume during the subsequent compression phase (downstroke) of CPR, which leads to increased blood flow.

#### Indication:

- VF/VT arrests
- PEA/Asystolic if <10 downtime from dispatch to arrival</li>

#### **Contraindications:**

- Traumatic Cardiac Arrest
- Patients <10 kg
- Flail Chest

### **Procedure:**

- 1. Begin CPR ensuring proper rate and depth, and allowing for complete chest recoil during the decompression phase of chest compressions
- 2. Select the airway adjunct (mask, endotracheal tube, SGA, etc.)
- 3. Attach Impedance Threshold Device (ResQPOD®) to the airway adjunct used above.
- 4. Attach the EtCO2 detector between the ITD and the ventilation source (BVM or ventilator)
- 5. If ventilating with a mask (pt is not intubated):
  - o Do not use the timing assist light
  - CPR continues at 30 compressions : 2 ventilations
  - Pause compressions to deliver the ventilations
- 6. If patient is intubated endotracheally or with a SGA:
  - o Deliver a single one-second ventilation with each flash of the timing assist light
  - Do not pause compressions to deliver ventilations. Ventilations may be asynchronous to compressions.
- 7. REMOVE DEVICE ONCE ROSC IS OBTAINED