



PROCEDURES PROC-01C

NONINVASIVE VENTILATION (CPAP/BPAP)

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Indications:

- Significant respiratory distress

Relative contraindications:

- Inability to maintain open airway (severe AMS)
- Systolic < 90
- Apnea
- Suspected pneumothorax or chest trauma
- Patients at risk for aspiration (nausea/vomiting, foreign body airway obstruction, etc.)
- Anatomy that would interfere with proper fit of mask (trauma, tracheostomy, etc.)

Procedure:

1. Prepare equipment
 - Attach mask to circuit
 - Attach circuit to e700
 - Turn on e700
 - Select appropriate patient size (infant – pedi – adult)
2. Adjust ventilator mode to “CPAP” mode and verify/adjust settings.
 - For CPAP: Adjust the CPAP setting (between 2-10 cmH₂O) and leave the PSV blank.
 - For BiPAP: Adjust the CPAP setting (typically 5 cmH₂O) and adjust the PSV setting (typically 5-15 cmH₂O). Most common initial setting CPAP 5 cmH₂O and PSV 5 cmH₂O.
3. Place facemask on patient (without straps) and verbally coach patient to breathe deeply and allow the ventilator to support their efforts.
4. Completely attach the head strap to both sides of the facemask ensuring a tight, but tolerable, seal.
5. Administer in-line nebulizer treatments for COPD/Asthma
6. Once the patient is compliant with the procedure, slowly increase PSV up to 15 cmH₂O if needed. Titrate to effect.

Considerations:

- Success is highly dependent upon patient tolerance, and provider’s ability to coach
- Consider Sedation Management for associated anxiolysis
- Monitor closely for development of pneumothorax and or hypotension