

CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP) PROCEDURE

ALWAYS USE BODY SUBSTANCE ISOLATION PRECAUTIONS

INDICATION

- Patients > 8 years of age in severe respiratory distress and signs of CHF, COPD, and asthma.
- Near drowning

CONTRAINDICATION

- Absolute
 - Age < 8
 - Respiratory or Cardiac Arrest
 - Agonal respirations
 - Severely depressed level of consciousness
 - Signs and symptoms of pneumothorax
 - Inability to maintain airway patency
 - Major trauma (especially head trauma with signs of ICP or significant chest trauma)
 - Facial anomalies or trauma (e.g., burns, fractures)
 - Vomiting
- Relative Contraindications
 - Systolic BP <100
 - History of Pulmonary Fibrosis or history of barotrauma
 - Decreased LOC
 - Claustrophobia or inability to tolerate mask (after 1-2 minutes trial)

EQUIPMENT

- CPAP equipment
- In-line nebulizer

PROCEDURE

- ALS RMC
- Place patient in a seated position with legs dependant
- Follow manufacturer directions for CPAP device set up
- Explain device to patient
- Apply device to patient; set flow rate in excess of the patients inspiratory flow rate & monitor every 5 minutes including continuous SAO₂
- If albuterol and/or ipratropium appropriate, may administer with CPAP in-line nebulizer.
- Reassess V/S q 5 minutes after CPAP applied
- Increase oxygen percentage if patient does not demonstrate improvement after 5 minutes of application; repeat as needed to obtain improvement
- Remove the CPAP device and assist ventilations with BVM and/or intubation if patient condition worsens

SPECIAL CONSIDERATION

- Consider using sedation to alleviate possible anxiety associated with the CPAP device

RELATED POLICIES/ PROCEDURES

- Adult Sedation ATG 3
- Bronchospasm/Asthma/COPD R4