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