

In-Line Nebulizer for Flowsafe II CPAP Device

Applies to:	
P	Paramedic

Clinical Indications:

1. In-line nebulization via CPAP is indicated in patients whom inadequate ventilation is suspected, who present with bronchospasm (wheezing), and who have adequate mental status and respiratory drive to allow CPAP to function.

Clinical Contraindications:

1. Decreased Mental Status.
2. Facial features or deformities that prevent an adequate mask seal.
3. Excessive respiratory secretions.
4. Suspected pneumothorax
5. Thoracic trauma
6. SBP < 90 mmHg

Procedure:

1. Ensure adequate oxygen supply to ventilation device.
2. Explain the procedure to the patient.
3. Assemble the CPAP device with nebulizer by adding a handheld nebulizer device between the mask and oxygen connector; add albuterol/ levalbuterol.
4. Connect the DISS adapter to demand port on regulator. Oxygen will automatically flow at 7-8 lpm.
5. Connect the CPAP tubing to the primary port on the regulator and begin flow rate to achieve 10 cmH₂O; titrate down to 7.5 cmH₂O on the device.
6. Place the delivery mask over the mouth and nose. Oxygen should be flowing through the device at this point.
7. Secure the mask with provided straps starting with the lower straps until minimal/no air leak occurs.
8. Evaluate the response of the patient assessing breath sounds, oxygen saturation, and general appearance.
9. Titrate oxygen levels to the patient's response (O₂ sat > 92%).
10. Encourage the patient to allow assisted ventilation to occur.
11. Observe closely for signs of complications and deterioration. Switch to assisted ventilation with BVM if necessary.
12. Document time and response in the EHR.

