



Airway: Respirator Operation

Clinical Indications:

- Transport of an intubated patient

I	EMT- I	I
P	EMT- P	P

Procedure:

1. Confirm the placement of tube as per airway protocol.
2. Ensure adequate oxygen delivery to the respirator device.
3. Preoxygenate the patient as much as possible with bag-valve mask.
4. Remove BVM and attach tube to respiration device.
5. Per instructions of device, set initial respiration values. For example, set an inspiratory:expiratory ratio of 1:4 (for every 1 second of inspiration, allow 4 seconds and expiration) with a rate of 12 to 20.
6. Assess breath sounds. Allow for adequate expiratory time. Adjust respirator setting as clinically indicated.
7. **It is strongly recommended that the airway be monitored continuously through Capnography (if equipment is available) and Pulse Oximetry. The ventilatory rate should adjusted to maintain a pulse oximetry of >90 (or as high as possible) while maintaining a pCO2 of 30-35.**
8. If any worsening of patient condition, decrease in oxygen saturation, or any question regarding the function of the respirator, remove the respirator and resume bag-valve mask ventilations.
9. Document time, complications, and patient response on the patient care report (PCR).

Certification Requirements:

- Maintain knowledge of the indications, contraindications, technique, and possible complications of the procedure. Assessment of this knowledge may be accomplished via quality assurance mechanisms, classroom demonstrations, skills stations, or other mechanisms as deemed appropriate by the local EMS System.