



Lung volume recruitment is a high-risk procedure that may generate droplets, exposing staff to respiratory pathogens. Appropriate Personal Protective Equipment (PPE) must be applied to reduce exposure to respiratory secretions.

POLICY STATEMENT

A physician order is required prior to initiating Lung Volume Recruitment (LVR) with a modified resuscitation bag. LVR is used to improve peak expiratory cough flow (PCF) and vital capacity (VC) by reaching maximum insufflation capacity (MIC) in patients with paralytic/restrictive disorders. These disorders include spinal cord injuries and neuromuscular diseases such as ALS, Guillain-Barré Syndrome (GBS), myasthenia gravis, muscular dystrophy, multiple sclerosis, post polio, kypho-scoliosis, and syringomyelia.

DEFINITIONS

Assisted Cough Manoeuvre:

A manually Assisted Cough Manoeuvre involves the application of an abdominal thrust or costal lateral compression using various hand placements after an adequate spontaneous inspiration or maximal insufflation.

FEF Max:

The maximum Forced Expiratory Flow rate (FEF) measured during a Force Vital Capacity (FVC) manoeuvre.

GPB: Glossopharyngeal Breathing (GPB) is a method of breathing, which consists of stroke-like action of the tongue along with constricting action of the pharynx pumping air through the larynx into the lungs.

LVR: Lung Volume Recruitment (LVR) refers to breath stacking, techniques allowing a maximum insufflation capacity.

MIC: The Maximum Insufflation Capacity (MIC) measurement (litres) is the maximum volume of air stacked within the patient's lungs beyond spontaneous vital capacity. MIC is attained when the patient takes a deep breath, holds his breath and then breath stacking is applied using a LVR resuscitation bag, a volume ventilator or glossopharyngeal breathing (GPB). When measuring a MIC, the therapist should assist the patient with his/her optimal insufflation technique, introduce the spirometer in the post mode and instruct the patient to completely exhale the MIC volume through the spirometer. *The documented volume must be clearly identified as a MIC and not a post bronchodilator study.*

PCF: Peak Cough Flow (PCF) is measured by using a peak flow meter. The PCF is the velocity of air being expelled from the lungs after a **cough** manoeuvre. This measurement can be expressed in L/min or L/sec (L/min divided by 60). It is useful to measure:

- spontaneous PCF (PCF sp)
- PCF from MIC (PCF bag, PCF vent, or PCF gpb)
- PCF from MIC with an assisted cough timed with the cough (PCF bag & assist, PCF vent & assist or PCF gpb & assist)

Respiratory Therapy Policies And Procedures Manual

Donald F. Egan, Craig L. Scanlan



Respiratory Therapy Policies And Procedures Manual:

Certified Respiratory Therapist Exam Review Guide Albert Heuer, Louis Sinopoli, 2010-11-15 Certified Respiratory Therapist Review Guide is a comprehensive study guide for respiratory therapy students and graduates of accredited respiratory therapy education programs who are seeking to take the entry level Certified Respiratory Therapist CRT credentialing exam from the National Board for Respiratory Care NBRC This unique review guide devotes extensive coverage to two problematic areas for credentialing exam candidates which are not covered in any of the other texts 1 test taking skills and 2 key points to remember in taking the NBRC computerized exams Special emphasis is also given to material and subject areas which have proven to be especially challenging for exam candidates such as basic pulmonary function testing arterial blood gas ABGs interpretation monitoring critically ill ICU patients neonatal and pediatric care recommending modifications to therapy and more Certified Respiratory Therapist Review Guide is authored by experts who take the credentialing exam annually so you can be sure the content and format of this guide is current *Respiratory Care*, 1996 **Medicare, Medicaid, State Operations Manual**, 1989 **Pilbeam's Mechanical Ventilation - E-Book** James M. Cairo, 2023-06-13 Selected for Doody's Core Titles 2024 in Respiratory Therapy Ensure you understand one of the most sophisticated areas of respiratory care with Pilbeam's Mechanical Ventilation Physiological and Clinical Applications 8th Edition Known for its simple explanations and in depth coverage of patient ventilator management this evidence based text walks you through the most fundamental and advanced concepts surrounding mechanical ventilation and helps you understand how to properly apply these principles to patient care This new edition is an excellent reference for all critical care practitioners and features coverage of the physiological effects of mechanical ventilation on different cross sections of the population Additionally user friendly features promote critical thinking and clinical application such as key points AARC clinical practice guidelines critical care concepts and updated learning objectives UNIQUE Ventilator Associated Pneumonia chapter presents in depth comprehensive coverage on this very challenging issue Critical Care Concepts present short questions that challenge you to apply knowledge learned to difficult concepts Brief patient case studies list pertinent assessment data and pose a critical thinking question to test your content comprehension Key Points draw attention to pivotal concepts and highlight important information as topics are addressed Intended for classroom or small group discussions Clinical Scenarios offer a more comprehensive patient scenario that covers patient presentation assessment data and treatment options Logical sequencing of chapters builds on previously learned concepts Comprehensive Learning Objectives provide a clear concise listing of what you need to learn in the chapter Bulleted end of chapter summaries help assess comprehension and guide study efforts Excerpts of Clinical Practice Guidelines developed by the American Association for Respiratory Care AARC are presented in a convenient reader friendly format Chapter outlines provide a big picture of the chapter content NBRC style end of chapter review questions reinforce the very difficult concept of mechanical ventilation with practice that focuses on certification

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Respiratory Care: Principles and Practice Dean R. Hess, Neil R. MacIntyre, Shelley C. Mishoe, William F. Galvin, 2011-02-24 A new edition of the classic text *Respiratory Care Principles and Practice* Second Edition is a truly authoritative text for respiratory care students who desire a complete and up to date exploration of the technical and professional aspects of respiratory care With foundations in evidence based practice this essential text reviews respiratory assessment respiratory therapeutics respiratory diseases basic sciences and their application to respiratory care the respiratory care profession and much more Important Notice The digital edition of this book is missing some of the images or content found in the physical edition

Egan's Fundamentals of Respiratory Care Donald F. Egan, Craig L. Scanlan, 1995 This respiratory care guide covers topics such as scientific principles clinical assessment advanced studies such as pulmonary function and blood gases equipment usage and ventilation The text also presents case studies learning objectives and key terms

Manual of Clinical Problems in Pulmonary Medicine Richard A. Bordow, Andrew L. Ries, Timothy A. Morris, 2005 The thoroughly revised updated Sixth Edition of this Spiral Manual is a complete convenient practical guide to diagnosis and management of pulmonary disorders A new chapter on terrorism and disaster medicine has been added and new contributors have rewritten the chapters on preoperative pulmonary evaluation aspiration pneumonia the lung in immunocompromised hosts staphylococcal and streptococcal pneumonias anaerobic pulmonary infections histoplasmosis Aspergillus lung disease neuromuscular diseases and spinal cord injury pulmonary complications in burn patients sarcoidosis and Goodpasture's syndrome Other chapters have been revised to incorporate recent American Thoracic Society recommendations on end of life care exercise testing tobacco control and other concerns

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Clinical Engineering Handbook Joseph Dyro, 2004-09-15 As the biomedical engineering field expands throughout the world clinical engineers play an evermore important role as translators between the medical engineering and business professions They influence procedure and policy at research facilities universities as well as private and government agencies including the Food and Drug Administration and the World Health Organization The profession of clinical engineering continues to seek its place amidst the myriad of professionals that comprise the health care field The Clinical Engineering Handbook meets a long felt need for a comprehensive book on all aspects of clinical engineering that is a suitable reference in hospitals classrooms workshops and governmental and non governmental organization The Handbook s thirteen sections address the following areas Clinical Engineering Models of Clinical Engineering Practice Technology Management Safety Education and Training Design Manufacture and Evaluation and Control of Medical Devices Utilization and Service of Medical Devices Information Technology and Professionalism and Ethics The Clinical Engineering Handbook provides the reader with prospects for the future of clinical engineering as well as guidelines and standards for best practice around the world From telemedicine and IT issues to sanitation and disaster planning it brings together all the important aspects of clinical engineering Clinical Engineers are the safety and quality facilitators in all medical facilities The most definitive comprehensive and up to date book available on the subject of clinical engineering Over 170 contributions by leaders in the field of clinical engineering

Self-instructional Manual for an Outcome Oriented Survey of Long Term Care Facilities ,1989 **Essentials for the Improvement of Healthcare Using Lean & Six Sigma** D.H. Stamatis, 2010-11-30 Essentials for the Improvement

of Healthcare Using Lean it is evident that the processes currently employed and the subsequent defensive medicine philosophy that has resulted will not be able to meet the future demands of our aging society Through Six Sigma and Lean this text moves the focus from reactive controls to the proactive efficiency required to implement real and sustainable quality improvements that will allow us to forge a system that is all about wellness *Patient Centered Care* Mickey L. Parsons, Carolyn L. Murdaugh, Parsons, M L Parsons, 1994 This is a book nurse managers and all managers throughout the hospital should be reading It provides an overview of how to create the inter disciplinary team management and shared values essential to effective restructuring It also contains valuable advice on staffing plans management challenges and solutions quality control issues lessons learned and pitfalls to avoid and a host of other special considerations You ll learn how to develop a viable financial plan predict the impact of restructuring and collect and evaluate data to determine cost savings quality of care outcomes and patient satisfaction *Lippincott's Nursing Procedures* ,2009 The newly revised fifth edition of this popular reference is a start to finish guide for more than 400 basic to advanced nursing procedures It provides step by step instructions for each procedure and explains how to use and troubleshoot equipment

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