Conservation Plan for Respiratory Equipment

Goal –

To provide staff with guidance on how to maximize conservation of disposable supplies in critical situations.

Ventilators -

1. Total ventilator count for Adult ICU: 45 Servos and 16 Revels used for transport.
   a. We have the capability to have 61 patients on ventilators.
      i. Recommended to have maximum to have 56 patients on ventilators. Plus have 5 Revels to be kept aside for transport needs.

Vent Circuit Conservation Practices-

• Our current practice is to change all patients from non-humidified circuits to humidified circuits in 72hrs. Humidified circuits require water, temp probes and also could go on back order quick.
• The goal of making the following changes is to decrease the use of humified circuits to use for more critical patients. It will also help conserve water and temp. probes.
• The only downside to this is that we may end up using two circuits for one patient if patient status changes. This will also increase use of HMEs.

1. All patients will be started on non-humidified vent circuits.
   a. Assess to change to humidified circuits Q48hrs. Indications for humidification;
      i. Thick, copious, or bloody secretions
      ii. Oncology patients
      iii. ARDS patients
      iv. Post-op Lung Transplant
      v. Patient iNO, iEPO
      vi. ECMO
      vii. MV > 14LPM
      viii. All patients intubated during r/o or are positive COVID-19 will be started on humidification systems to minimize breaking system if condition worsens.

Vent Duo gard Filters conservation practices-

• Current practice is to change exp. Filters every 24 hrs.
• The goal of making this changes is to keep us from depleating exp. Filters

1. Non-humidified vent circuits-
   a. Change filters if auto-peep increases or as needed. (set alarms for high peep tighter)

2. Humidified circuits –
   a. change filters as needed or if saturated.

Revel vent circuits-

• Current practice is to throw away vent circuits after each transport.
• The goal of the following changes is to conserve vent circuits.

1. All patients except for patients confirmed or in r/o for COVID-19 will do following.
   a. Remove HME, Clean vent circuit and place in a closed bag.
   b. COVID-19 r/o or confirmed cases throw circuit away after each use.

NIV- (Do NOT use NIV for COVID-19 positive or rule out patients on resp. distress.)

• Current total V-60 count 35
• Current practice is to place most patients on NIV with humidity.
• Goal is to decrease the use of humidification water, temp. probes and humidified circuits.
   a. Non-heated circuits: use for all patients that use CPAP over night
   b. Humidified circuits: to be used on patients that are requiring continuous NIV ventilation.

** All patients that are suspected to have COVID-19 will need to be placed on hospital devices if patient is stable. (i.e. Home CPAP)**

HFG –

• Current total count 12.
• Current practice is to place any patients on Respiratory Distress and with needs of FIO2 >50% on HFG.
• Goal is to decrease the use of HFG and use them for critical patients.
   a. Place patients on PNRBM until patient is assessed enough information is gathered to determine if patient will be on HFG for more than 24hrs.
   b. Assess patient regular with goal to wean patient from HFG.