

CLINICAL INSTRUCTION SHEET

\mathbf{A}	Austin	
	Austin	Health

PMV-IN-LINE WITH THE **VENTILATOR**

UR:	
Surname:	
Given Name(s):	
Date of birth:	
Affiv Patient Lahel Here	

Ventilator Programs:	
Program 1: Cuff UP	
	ngs:
Program 2: Cuff DOV	VN with PMV in line
Ventilatorsetti	ngs:
please have a CNS or trained senior	s procedure before or are not confident in doing it staff member do it with you
1. Explain procedure to the patient. Note baseline measures: HR, breathing pattern, respiratory rate, measured airway pressure and SpO2 if using oximeter. 2. Adjust ventilator settings as per Physio / ICU Senior Medical staff recommendations documented on the ventilator order sheet and/or the Clinical Instruction Sheet - Use of the PMV in line with the ventilator. 3. If a Suctionaid tracheostomy tube in situ, suction above the cuff and mouth if required. 4. Suction via tracheostomy. 5. Fully deflate cuff using 10ml syringe and suction trachea simultaneously. 6. Encourage patient to clear his/her throat, swallow and suction as required. 7. To place the PMV in line: remove the swivel connector with tapered flex tubing from the circuit (Fig 1) replace with the new swivel connector, PMV with standard wide to wide flex tubing(Fig 2) If the patient is ventilator-dependent, consider manually ventilating with AirViva whilst changing the swivel connector with PMV in line, if clinically indicated 8. Assess patient tolerance of cuff deflation, the adjusted ventilator settings and PMV inline by monitoring and comparing baseline observations incl. patient comfort, anxiety, sweating, pallor, respiratory rate, airway pressure, heart rate, SpO2. 9. Listen to his/her voice, instruct patient to clear throat/swallow as needed. 10. Once scheduled time completed, or if patient shows signs of respiratory distress/fatigue: Remove PMV, swivel connector with standard flex tubing, replace original swivel connector with tapered flex tubing Reinflate cuff, check cuff pressure and return to original ventilator settings Document time the PMV was removed and ventilator was returned to baseline settings Picture 1: Wide to tapered end flex tubing Picture 2: Wide mouth flex tubing (both ends are wide) with PMV in line	
Erictisfic	Program 2: Cuff DOV Ventilator setti Please note: If you have not done this please have a CNS or trained senior. This is a 2-person procedure Explain procedure to the patient. Note respiratory rate, measured airway predicted and the ventilator order settings as per Physical documented on the ventilator order settine PMV in line with the ventilator. If a Suctionaid tracheostomy tube in a Suction via tracheostomy. Fully deflate cuff using 10ml syringe and Encourage patient to clear his/her through the patient is ventilator-dependent changing the swivel connector with the patient is ventilator-dependent changing the swivel connector with Assess patient tolerance of cuff deflated line by monitoring and comparing bases sweating, pallor, respiratory rate, airwork. Listen to his/her voice, instruct patient D.Once scheduled time completed, or Remove PMV, swivel connector with tapered flex tubing Reinflate cuff, check cuff pressure Document time the PMV was removed.

Wide to tapered end flex tubing



Wide to wide flex tubing PMV

CONTACT

Speech Path: Tanis Cameron, pager 3095, Charissa Zaga pager 3093

VRSS Physio: Linda Rautela pager 1307, Caroline Chao pager 1031,

CSN: Emma Marchingo or Hallie Silver, CNE, pager 1673



CLINICAL INSTRUCTION SHEET



PMV-IN-LINE WITH THE **VENTILATOR** Page 2 of 2

UR:			
Surname:			
Given Name(s):			
Date of birth:			
Affix Patient Label Here			

CLINICAL SCHEDULE FOR USE		
Date:		
Duration of valve use:	 	
How many times per day:		
Signed:		
Other notes:		

CONTACT

Speech Path: Tanis Cameron, pager 3095, Charissa Zaga pager 3093 VRSS Physio: Linda Rautela pager 1307, Caroline Chao pager 1031, CSN: Emma Marchingo or Hallie Silver, CNE, pager 1673

Disclaimer: This Document has been developed for Austin Health use and has been specifically designed for Austin Health circumstances. Austin Health shall not be liable for any claims arising from the use of any information contained in this literature used by an organisation outside of Austin Health. Copyright © 2014 Austin Health. All rights reserved. Other clinicians and institutions are granted license to use this document and to modify it for their own purposes. It is a condition of this license that users acknowledge Austin Health TRAMS within all educational and promotional activities where this information is used.