

Respiratory Therapy Equipment

This procedure may involve potential and/or direct exposure to blood, body fluids, infectious diseases, air contaminants, and hazardous chemicals.

Protective Barriers
(as necessary to prevent exposure to blood or body fluids)



Purpose

The purpose of this procedure is to provide guidelines to help prevent nosocomial infections associated with respiratory therapy equipment, including ventilators, and to prevent transmission of infections to residents and staff.

Procedure Guidelines

Oxygen Administration

1. Obtain equipment (i.e., oxygen tubing, reservoir, and sterile distilled water).
2. Use sterile distilled water for humidification.
3. Mark bottle with date and initials upon opening .
4. Check water levels of refillable humidifier units daily. If the water level falls below the fill line:
 - a. Discard residual solution.
 - b. Pour a small amount of sterile distilled water into reservoir and swish around to rinse all surfaces.
 - c. Discard water.
 - d. Refill with sterile distilled water to fill line.
 - e. Change the reservoir every WEEK on _____ during the night shift.
5. Check water level of prefilled reservoir frequently.
6. Change prefilled humidifier when water level becomes low.
7. Change oxygen cannulae and tubing every WEEK on _____ during the night shift and as necessary.
8. Keep oxygen cannulae and tubing used PRN in a plastic bag when not in use.
9. Wash filters from oxygen concentrators in soapy water every WEEK on _____ during the night shift. Rinse and squeeze dry.
10. Wash hands after manipulation.

Medication Nebulizers (Updraft)/Continuous Aerosol:

1. Obtain equipment (i.e., administration "set-up," plastic bag, gauze sponges).
2. Wash hands.
3. After completion of therapy:
 - a. Remove nebulizer container;
 - b. Rinse container with fresh tap water; and
 - c. Dry with clean paper towel or gauze sponge.
4. Reconnect to administration "set-up."
5. Use caution not to contaminate internal nebulizer tubes.
6. Wipe mouthpiece with damp paper towel or gauze sponge.

Respiratory Equipment

7. Store circuit in plastic bag, marked with date and resident's name, between uses.
8. Wash hands.
9. Discard administration "set-up" every WEEK on _____ during the night shift.

Miscellaneous

1. Hands must be washed before and after respiratory therapy is administered and before and after manipulation of any respiratory therapy equipment.
2. Gloves should be worn when there is potential for exposure to resident's blood, body fluids, excretions, secretions, non-intact skin, or mucous membranes. Gloves should be changed after contamination, before handling clean equipment, and in-between residents.
3. Gloves must be worn on both hands when suctioning residents.
4. Sterile distilled water with a pH of 5-7, used in respiratory therapy, must be dated and initialed when opened.
5. When reservoir fluid level requires more solution, reservoirs must have residual fluid discarded. The reservoir must then be rinsed with a small amount of distilled water, which is then discarded, and then refilled with distilled water.
6. Transport respiratory therapy equipment to designated soiled utility area for decontamination.
7. Personal protective clothing (e.g., gown, gloves, masks, etc.) used during respiratory therapy functions must be discarded into appropriate receptacles.