17L - POSITIVE END EXPIRATORY PRESSURE (PEEP)

A small amount of PEEP ranging between 5 and 10 cm/H_2O prevents airway closure, increases the airway opening index and improves the efficiency of alveolar ventilation produced by chest compressions.

Indication: Any pediatric patient (Birth to 12 years of age) with an advanced airway.

Contraindication: Status Asthmaticus

Set PEEP device to 5 cm/H_2O (Figure 1) and attach PEEP device to the Bag Valve Mask exhaust port (Figure 2). Attach Bag Valve Mask to endotracheal tube or supraglottic airway and provide ventilations per protocol 3A - Respiratory Arrest or 4A - Cardiac Arrest as indicated.

Rotate PEEP valve to increase pressure by 1 cm/H_20 (clockwise ¼ turn) every 2 minutes until SpO2 ≥ 94%. Max PEEP 10 cm/H_2O.

Clinical Note: If patient has a congenital cardiac anomaly or other known medical condition with baseline SpO2 <94% set PEEP device to 5 cm/H_2O and titrate to upper limit of baseline SpO2.

Attach ResQPOD™ to BVM if ≥ 12 years of age AND estimated patient wt ≥ 50 Kg.

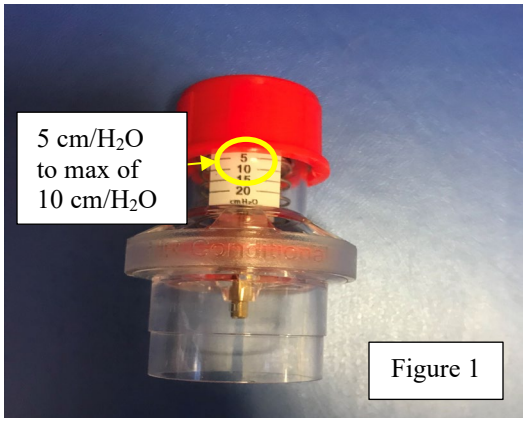
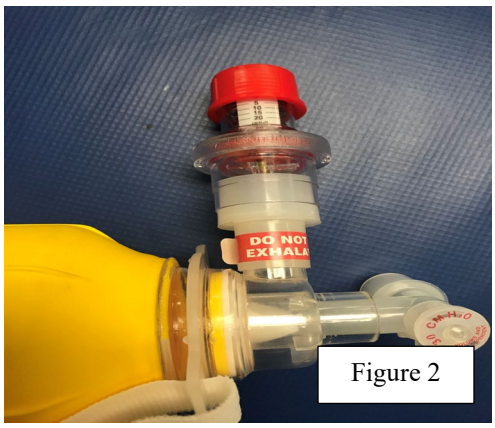


Figure 1


Figure 2