Leamington Mennonite Home Long Term Care

POLICY AND PROCEDURE

CATEGORY: SUBJECT: SECTION:

Nursing Continuous Positive Airway Pressure Therapy for

Administrator:

Obstructive Sleep Apnea

POLICY:

С

DATE:

August 2019
REVISION DATES: Director of Care:

CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP) THERAPY FOR OBSTRUCTIVE SLEEP APNEA

POLICY:

CPAP therapy will be supported at Leamington Mennonite Home as outlined by the prescribing Physician. CPAP is a continuous positive airway pressure that is used to provide a resident a patent airway during periods of sleep apnea. The resident must be able to initiate their own breath. The CPAP machine uses room air.

If oxygen is required then it must be connected to the machine at each use.

The air is pressurized in the machine to a specific pressure as outlined by the Physician which splints the resident's airway open when they are asleep.

PROCEDURE:

- 1. It is best practice to keep a routine time for going to bed and getting and utilizing the CPAP machine during this time.
- 2. Prior to applying the mask, the resident should wash their face.
- 3. Ensure that the settings are set as prescribed by the Physician. This should be noted in the TARs.
- 4. Add Fresh Distilled Water to the humidifier chamber. Ensure that the humidifier/CPAP machine is positioned level to, or lower than the resident's head when lying in bed. **DO NOT PLACE THE HUMIDIFIER IN A POSITION HIGHER THAN THE RESIDENT'S HEAD.**
- 5. If Oxygen is required attach to CPAP per manufacturer instructions.
- 6. In the morning, empty the excess water from the humidifier chamber. Clean the mask.
- 7. The application/discontinuation of the CPAP mask/machine utilization should be documented in the TARs.

The CPAP machine may be kept in the resident's room, unless there is a concern for damage from the resident or other resident's, it then can be kept in the Medication Room for safe keeping.

Equipment Care: All care is documented in the TARs

Daily

Wipe mask after use with a warm soapy cloth and allow to air dry. Special attention to parts that touch oily skin or mucous membranes.

Weekly

The mask, head gear, and tubing are open systems that can be washed/submerged together in a sink with mild soap and warm water. Rinse in clear water to remove the detergents. Then hung or placed on a towel to air dry. It is recommended that this is done in the am to allow sufficient drying time for night use.

Humidifier Chamber – the water and heat encourage bacterial growth and must be cleaned. Fill the chamber with 1/3 white vinegar and 2/3 tap water and let the chamber soak X 30 minutes in a sink. Rinse thoroughly with water. Allow to air dry.

Filter Care: All Models of CPAP machines have an air filter to clean the air breathed in by the resident. Some models have 1 or 2 types of filters, including a washable filter and/or disposable filter.

<u>Washable Filters</u> – should be <u>washed weekly</u> (in the am) and documented in the TARs – remove the foam filter from the COPAP machine, wash in warm soapy water, rinse well and air dry. Allow the filter to completely air dry *BEFORE* replacing it into the machine. Check and have replaced any filters when they become deteriorated (fuzzy, dirty, discoloured).

<u>Disposable Filters:</u> these remove finer particles from the air such as pollen, and other irritants. Usually these are replaced on a monthly basis and should be documented in the TARs.

Machine Care: Unplug from electrical source – wipe down with a damp cloth to remove dust or dirt

Refer to individual manufactures instructions for any variations in cleaning instructions.

See following sheets for Trouble shooting Guide.

See Following for Insurance coverage tracking to assist resident if required.

See MOH and LTC ADP website for Assistive Devices Program application for understanding of coverage. The respiratory Supplier is responsible for the application process.