Use of Adult Puritan Bennett 840 & 980 Name of Policy: Mechanical Ventilator THE UNIVERSITY OF TOLEDO MEDICAL CENTER **Policy Number:** 3364-136-07-02 **Department:** Respiratory Care **Approving Officer:** AVP Patient Care Services/ **Chief Nursing Officer Responsible Agent:** Director, Respiratory Care Effective Date: August 1, 2019 Scope: The University of Toledo Medical Center Respiratory Care Department Initial Effective Date: July 1, 1979 New policy proposal Minor/technical revision of existing policy Major revision of existing policy Reaffirmation of existing policy

(A) Policy Statement

Adult mechanical ventilators will be used as outlined in policy #3364-136-07-01 of this manual.

(B) Purpose of Policy

To ensure the safe and proper use of adult ventilators.

(C) Procedure

Ventilators will be set-up and used according to manufacturers recommendations. (Operation manuals will be available in the Respiratory Care Department and in each of the ICU's.

Puritan Bennett 840 & 980

- 1. Clean air and oxygen compressed gas tubing, and plastic and metal components of the ventilator with the hospital approved cleaning agent. Use the hospital approved germicidal agent to clean the Graphic User Interface (GUI computer screen).
- 2. Setup with disposable tubing, and appropriate bacteria filters: small filter on inlet and expiratory filter/water trap installed in breath-delivery unit. Set up with HME, Ambu and, in-line suction catheter and endotracheal tube holder device. Make sure Vue-Link is attached to back of ventilator so it can be connected to the patient monitor in the ICU's so data can be downloaded in the EMR.
- 3. SST test procedure will be successfully completed after cleaning unit.
- 4. All parameter adjustments of ventilators will be according to policy #3364-136-07-01 of this manual.
- 5. For specific adverse reactions and hazards of mechanical ventilation, see policy #3364-136-05-01 of this manual.
- 6. Biomedical Engineering is responsible for all preventative maintenance and repairs of mechanical ventilators.

References:

See specific ventilator manuals in the Respiratory Care Department.

| Approved by: | | Review/Revision Date: |
|-------------------------------------|------|----------------------------------|
| • | | 05/10/1993 |
| | | 03/13/1996 |
| / _S / | | 08/31/1999 |
| Michael J. Taylor | Date | 10/02/2001 |
| Director, Respiratory Care | | 08/05/2002 |
| | | 07/17/2005 |
| | | 01/23/2009 |
| / _S / | | 01/21/2011 |
| Monecca Smith | Date | 08/14/2012 |
| AVP Patient Care Services/ | | 03/01/2016 |
| Chief Nursing Officer | | 08/01/2019 |
| Review/Revision Completed By: | | |
| Director, Respiratory Care | | Next Review Date: August 1, 2022 |
| Policies Superseded by This Policy: | | |

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.