Jackson County Medical Control Authority
Community Paramedicine Protocols
CPAP/BIPAP/SLEEP APNEA/ OXYGEN SAT CHECKS

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CPAP/BiPAP/Sleep Apnea/Oxygen Sat Checks

Indications: This protocol provides general guidance for the evaluation of patients with CPAP/BiPAP therapy, Sleep Apnea and those recently placed on oxygen under the Community Paramedicine Program. The CPU will respond to a residence on request from the primary care provider, on request by the patient through 911 triage or on referral from ALS 911 response. The CP will follow guidelines outlined by the primary care providers or on-line medical direction orders.

Purpose: To assist the PCP in observing and documenting recently diagnosed/chronic sufferers of obstructive sleep apnea through written and /or verbal communication to ensure proper ventilation of the patient during sleep for the purpose of avoidance of long term Obstructive Sleep Apnea pathologic outcomes.

CPU Directives:
1.   Follow **General Protocol for CPU Patient Assessments**.
2.   Obtain and review patient health history and primary care provider's orders prior to evaluation when available.
3.   If no immediate treatment is needed, perform medication review, and patient education.
   a.   Review pathophysiology with the patient.
   b.   Review devices used by the patient including: oxygen, CPAP/BiPAP devices and other medications being used for maintenance.
   f.   Review when to call health care provider.
   g.   Patient should be monitored for hemodynamic instability the first 8 hours after starting CPAP/BiPAP.
4.   Conduct a patient assessment which includes:
   a.   Vital Sign assessments including PO2 and ETCO2 and weight/BMI
   b.   Sleep habits (work nights? Irregular work schedule)
   c.   Alcohol/recreational drug use? Prescription drug use? Compliant?
   d.   Quality of life - Noticeable changes after usage.
5.   Troubleshoot if necessary including ensuring proper fit of mask and use of machine as well as general condition of machine.
6.   If oxygen is being used assure the patient has connection with necessary resources (oxygen supply company, etc.) to maintain continued supply.
5.   Contact the PCP or on-line medical direction per the **General Protocol for CPU Patient Assessments.**
6.   Continue treatment and follow the **General Protocol for CPU Patient Assessments** until a disposition is determined and continuity plan completed. This plan may include return visits for those patients in whom oxygen saturation is less than 95% on treatment after on-scene assessment and treatment.