

PROTOCOL APPENDICES

**APPENDIX P: USE OF THE CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP) DEVICE**

Scope: EMTs and Paramedics may utilize Continuous Positive Airway Pressure (CPAP), for any appropriate indication as authorized by the service medical director.

**INCLUSION CRITERIA**

1. 15 years of age or older.
2. Be Alert, cooperative, and able to maintain an open, patent airway on their own.
3. Respiratory distress.

**EXCLUSION CRITERIA**

4. Respiratory failure or need for immediate Endotracheal Intubation.
5. Systolic blood pressure less than 100 mmHg.
6. Airway Obstruction.
7. Facial burns with possible airway involvement.
8. Trauma.
9. Suspected pneumothorax.
10. Active vomiting, upper GI bleeding or other aspiration risks.
11. Inability to tolerate the mask due to pain or discomfort.
12. An adequate mask seal is unobtainable.

**NOTE: CPAP IS TO BE IMMEDIATELY DISCONTINUED IF ANY OF THE EXCLUSION CRITERIA DEVELOP.**