

**NEBULIZER TREATMENT
Policy & Procedure**

Policy:

It is the policy of this community to provide nebulizer treatments as ordered by a physician.

Procedure:

Resident Centered Care Techniques:

- Speak in a quiet and soothing manner.
- Ask resident if he/she is too cold, too hot, in pain, and/or comfortable.
- Explain to resident that caregivers are trained to provide care and respect privacy
- Use therapeutic touch to address any anxiety the resident may be experiencing

1. Review physician order.
2. Knock on resident's door.
3. Introduce yourself.
4. Explain procedure.
5. Provide for privacy.
6. Wash hands.
7. Indications for this treatment are:
 - a. Tightness in chest.
 - b. Increased or thick secretions
 - c. Pneumonia (congestion) and/or
 - d. Atelectasis
 - e. Shortness of breath
8. Reasons to avoid the treatment include:
 - a. Increased blood pressure (autonomic hyperreflexia)
 - b. Increased pulse
 - c. History of adverse reaction to the medication.
9. The following equipment is needed for respiratory treatments with a nebulizer:
 - a. Nebulizer
 - b. Compressor oxygen tank (to drive nebulizer)
 - c. Oxygen tubing
 - d. Respiratory medication
 - e. Normal saline (cc vials)
10. Following is the procedure for treatments with a nebulizer:
 - a. Remove cup portion of the nebulizer
 - b. Draw up prescribed amount of the medication or use unit dose
 - c. Place medication in the medication cup with 3cc normal saline or as ordered by

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This policy and procedure is not intended to replace the informed judgment of individual physicians, nurses or other clinicians nor is it intended as a statement of prevailing community standards or minimum standards of practice. It is a suggested method and technique for achieving optimal health care, not a minimum standard below which residents necessarily would be placed at risk.

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the physician or use unit dose

- d. Return cup to the nebulizer
- e. Place tubing on the connector on the nebulizer and attach other end to the compressor or oxygen tank
- f. Turn on the compressor or tank until mist is seen coming out of the mouthpiece.
- g. Check resident's pulse
- h. Place the mouthpiece in the resident's mouth and instruct the resident to take slow, deep breaths. If on a ventilator, the nebulizer can be placed in line in the ventilator circuit. To do this, remove the mouthpiece and connect the nebulizer between the dead space tubing and the exhalation valve assembly.
- i. During the treatment, monitor the resident's pulse. If the pulse increases to more than 20 beats a minute, discontinue the treatment. Continue treatment until all medication is administered.
- j. Following the treatment, use postural drainage, percussion, assisted coughing and/or suctioning, as ordered by the physician.
- k. Do not leave resident unattended during nebulizer administration unless the resident has been assessed and the physician has approved self-administration of medications.

I have read, understand and agree to adhere to the requirements outlined in this policy and procedure.

Administrator Signature: _____ Date: _____

Medical Director Signature: _____ Date: _____

Review Dates: _____

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