

Responding to Ventilator Alarms

Ventilators have alarms to alert if there is a problem with your child, the ventilator, or the tubing.

IMPORTANT:

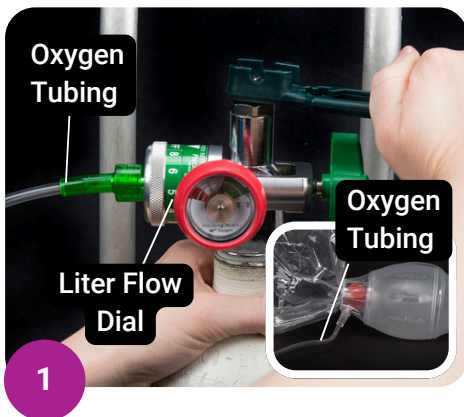
- Always respond to an alarm within 10 seconds.
- Check your child first, before you check the ventilator and circuit.
- Immediately remove the child from the ventilator if you cannot resolve the alarm within three seconds.
- If your child is unable to breathe on their own, give breaths using a resuscitation (Ambu) bag or an alternate vent if available.

In this guide

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 - High Pressure
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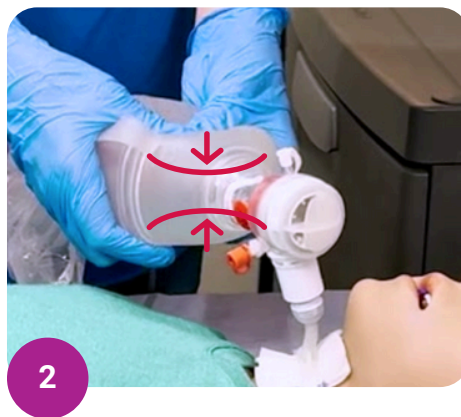
NOTE: Your equipment and supplies may look different than the pictures. The alarm message on the display screen may be different for different brands of ventilators.

Using a Resuscitation Bag with a Trach Tube



1 If using oxygen, turn oxygen tank on. Turn liter flow dial to highest flow or as indicated in your child's care plan.

Ensure one end of the oxygen tubing is connected to the oxygen tank and the other end to the resuscitation bag.



2 Connect the resuscitation bag to the trach tube. Squeeze the bag with an even rhythm.

Make sure your child's chest moves up each time you squeeze the bag.



3 Before squeezing the bag again, allow your child's chest to move down.

Allow the bag to completely refill with air.

Responding to Ventilator Alarms (continued)

Alarms



Obstruction

Obstruction

Causes:

- Blockage in airway, such as increased secretions, mucus plug, or bronchospasm
- Coughing, crying, agitated behavior
- Blockage within circuit, such as kinks, excess water in tubing, mucus on HME, or blocked exhalation valve

Responses:

1. Make sure exhalation valve is not covered by clothing or bedding and that you feel and hear air flowing out of valve. Replace exhalation valve if needed.
2. Check to make sure circuit is not kinked. Empty water from tubing, if needed.
3. Remove HME from trach tube or circuit.
4. Remove circuit from trach tube. Connect child to another vent or ventilate with resuscitation bag if needed.
5. Suction child's airway, perform emergency procedures as directed by healthcare provider, and/or change trach tube.
6. If unable to clear obstruction and child needs medical attention, call 911.



Circuit Disconnect

Circuit Disconnect

Causes: Large leak from patient's trach tube or circuit.

Responses:

1. Make sure circuit is firmly connected to trach tube.
2. Make sure all pieces of circuit are firmly connected.
3. Check for leaks from patient's circuit.
4. If alarm continues, remove circuit from trach tube. Connect child to another vent or ventilate with resuscitation bag if needed.
5. Call PHS.

Responding to Ventilator Alarms (continued)



Low MinVent

Low Tidal Volume (Vte), Low Minute Ventilation, Low Pressure

Causes:

- Large leak from trach tube or circuit.
- Blockage in the airway, such as increased secretions or bronchospasm.
- Patient position and behavior, such as sleeping or very active.
- Seizures or other activity that cause lungs to become tight.

Responses:

1. Make sure circuit is firmly connected to trach tube.
2. Change patient's position and/or activity level.
3. Make sure all pieces of circuit are firmly connected.
4. Remove circuit from trach tube. Connect child to another vent or ventilate with resuscitation bag if needed.
5. Suction airway or give bronchodilator, if needed.
6. Perform emergency trach tube change if needed.
7. Call PHS if alarm continues.



High MinVent

High Minute Ventilation, High Respiratory Rate

Causes:

- Leak from trach tube or circuit causing ventilator to give unwanted breaths.
- Respiratory distress, agitated behavior.
- Excess water in tubing.
- Patient is coughing or crying.

Responses:

1. Check for leaks in circuit.
2. Empty water from circuit, if needed.
3. Suction airway or give bronchodilator, if needed.
4. Provide comfort/soothing to quiet agitation.
5. Remove circuit from trach tube. Connect child to another vent or ventilate with resuscitation bag if needed.

Responding to Ventilator Alarms (continued)



High Pressure

High Pressure

Causes:

- Blockage in the airway, such as increased secretions, mucus plug, or bronchospasm.
- Blockage within circuit, such as kinks, excess water in tubing, mucus on HME, or blocked exhalation valve.
- Patient is coughing or crying.

Responses:

1. Check that trach tube or circuit is not blocked.
2. If needed, suction airway or give bronchodilator.
3. If needed, empty water from circuit, replace exhalation valve, replace HME, or change circuit.
4. Remove circuit from trach tube. Connect child to another vent or ventilate with resuscitation bag if needed.



Internal Battery Nearly Depleted

Low Battery

Cause: Vent battery is low.

Responses:

1. Connect AC power cord to vent and plug into an AC outlet.
2. If AC outlet is not available, use backup battery, if available.
3. If backup battery is not available, connect child to another vent or ventilate with resuscitation bag, if needed.



Ventilator Inoperative

Ventilator Inoperative or Service Required

Causes: Immediate service needed.

Responses:

1. Immediately remove circuit from your child's trach tube. Connect your child to different vent or ventilate with resuscitation bag, if needed.
2. Press POWER button to turn off vent.
3. Turn humidifier and oxygen off, if using.
4. Call PHS.