

NURSING CARE PLAN No 2a
Care of an infant / child on CPAP / BIPAP

Please use in conjunction with careplan 1

Full Name:
Address: Addressograph
.....
HCR:.....

Care Plan No 2a Problem		Care of an infant / child on CPAP / BIPAP Goal	Issue Date: April 2020	Review Date: April 2023
..... Require Non-Invasive Ventilation CPAP/BIPAP Related to:		<ul style="list-style-type: none"> • Prescribed NIV will support respiratory needs safely & effectively. • Facial Skin Integrity is protected. • Psychological support for child & family • Infection Control • Discharge Planning 		
No	NURSING INTERVENTION		Commencement, Date, Signature, Time, Grade	Discontinued, Date, time, Signature, Grade
1	Prescribed NIV will support respiratory needs of child safely & effectively.			
	<ul style="list-style-type: none"> • Perform respiratory observations as required and detail in PEWs • Ensure Mode of NIV & parameters, are prescribed and documented in the medical notes by the respiratory team. • Mask Type & Size _____ • Liaise with NIV CNSp re machine set up and mask fitting. • If Oxygen is required, it should be titrated via the mask and O2 parameters documented by the medical team. • Assess and document the child's response to NIV. • Ensure that the ventilation machine is turned on and oxygen tubing is connected¹. • The respiratory team must be informed if a child who is established on NIV is re-admitted under another team. 			
2	Facial Skin Integrity is Protected			
	<ul style="list-style-type: none"> • Ensure the child tolerates the mask. • Observe for air leaks. • Assess for potential pressure areas & document skin integrity. • Inform the NIV CNSp or the team if there are any skin markings. • Liaise with NIV CNSp re adjustment of mask size for child if required. 			
3	Psychological Needs			
	<ul style="list-style-type: none"> • Provide age appropriate explanations to the child & family. • Assist with mask desensitization. • Liaise with the Play Specialist • Provide support, reassurance & address any concerns expressed. 			
4	Infection Control - ask IPCT for guidance here			
	<ul style="list-style-type: none"> • Decontaminate hands before and after each intervention • Ensure equipment is clean as per OLCCHC policy and manufacturers guidelines • Water : change daily • Mask : clean daily • Filter and tubing : change weekly 			

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5	Discharge Planning	Commencement , Date, Signature, Time, Grade	Discontinued, Date, time, Signature, Grade
	<ul style="list-style-type: none"> • Pre discharge: Demonstrate to parents/guardians know how to fit the mask correctly and turn on/off the device. • Ensure parents/guardian know how to change the water and clean the mask. • Follow up care : The team will arrange a follow up OPD • Homecare provider: A prescription will be sent to the homecare provider by the team upon discharge (Contact details are located on each device) • If the child is requiring O2, ensure the O2 prescription is completed and forwarded to the relevant provider. • Complete PHN referral • Ensure the family have the contact details for the NIV CNSp • Contact details: Niv.nurse@olchc.ie 01-428 2679 / 01-409 6100 bleep 407 		

Created by Respiratory Team
Issue Date: April 2020 Review Date: April 2023

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