INTERMITTENT POSITIVE PRESSURE BREATHING (IPPB)

I. GENERAL INFORMATION

A. Purpose: To improve breathing by the administration of bronchodilators, mucolyticsm or other medications directly into the lungs by means of positive pressure aerosol instillation. To provide an atmosphere of high humidity to assist the break-up of pulmonary and bronchial secretions.

B. The IPPB machine delivers air or oxygen under positive pressure during inspiration. It automatically turns on when the pupil breaths in, and automatically shuts off when the preset pressure is reached.

B. An Intermittent Positive Pressure Breathing (IPPB) machine assists the pupil in getting medication into the lungs and in loosening mucus so that it can be coughed up.

A. Medication placed in the nebulizer cup is converted into a fine mist which is delivered to the lungs.

B. This procedure requires a physician's written authorization and must be reauthorized yearly by the prescribing physician, parent and included with the I.E.P.

C. Parent/careprovider will provide equipment and prescribed medications for performing procedure at school.

II. PERSONNEL

D. School Nurse

E. Designated school personnel under direct or indirect supervision.

INTERMITTENT POSITIVE PRESSURE BREATHING (IPPB)

Student's Name:_____ DOB:_____

Equipment and Supplies *(Responsibility of parent/care-provider).	1. IPPB machine 2. Tubing 3. Nebulizer, including cup and mouthpiece 4. Medication and diluent
Physician orders must specify:	1. Frequency of treatment: _____ 2. Length of treatment: _____ 3. Pressure setting: _____ 4. Name and volume of medication: _____ 5. Name and volume of diluent: _____

PROCEDURE

ESSENTIAL STEPS	KEY POINTS & PRECAUTIONS
1. Assemble supplies..	
2. Have student sit upright in a comfortable position.	
3. Take and record pulse and breathing rate.	This establishes base line rate.
4. Attach tubing to IPPB machine, turn on machine and verify that preset pressure is reached.	Pressure must not exceed preset level.
5. Wash hands.	
6. Place prescribed amount of medication and diluent in nebulizer cup and attach to nebulizer.	A fine mist should be produced.
7. Have the student place mouthpiece in mouth.	Lips should be closed around mouthpiece to assure a good seal.
8. Have the student breathe slowly through the mouth and hold breath for 1 – 2 seconds, then exhale through the mouth piece.	When coughing occurs, remove mouthpiece and allow student to clear secretions completely before continuing treatment.

ESSENTIAL STEPS	KEY POINTS & PRECAUTIONS
9. Discontinue medication if adverse reactions occur.	Adverse reactions may include wheezing, rapid heart rate, lightheadedness, excitability, anxiousness.
10. Continue treatment until all medication is used or prescribed length of time has elapsed.	
11. Turn off machine.	
12. Have student take several deep breaths and cough up loosened secretions.	
13. Wash your hands and have student also wash hands.	
14. Take pulse and breathing rate; record and compare to baseline readings.	Call parent/careprovider if pulse or breathing rate is increased or decreased greater than 40. Call paramedics if appropriate.
15. Record on SPCHS log.	
16. Clean equipment	Daily thorough cleaning should be done at home.
a. Rinse the nebulizer cup and mouth- b. Shake off the excess water. c. Lay nebulizer parts on a clean cloth or towel to dry and cover. d. When the parts are dry, store them in a clean plastic bag.	The tubing does not have to be cleaned, but it should be stored in the same bag with the other equipment.