Palmetto Health Richland Hyperbaric Medicine Safety Drill April 2012

Subject: Proper use of Non-Rebreather Face Mask in the Monoplace Chamber

Staff Present: Ernest Fayson, RN, Gloria Bowman, RN, Tamar Wagner, RN, CHT, Safety Director, Lindsie Cone, MD

Objective:

To ensure that all employees can readily identify the proper use of the non-rebreather mask (NRB mask). Easy identification of ensuring that the non-rebreather mask is functioning properly and success in demonstrating the proper use to patients treated in the hyperbaric environment.

Discussion:

Staff members reviewed all premonitory signs and symptoms of oxygen toxicity to review with patients prior to HBOT. Staff members discussed the cons of why our facility chooses to use the NRB mask over other masks. Some reasons to include cost, infection control issues, and the ease of use (not having to have a good seal to be effective). Staff members should have all patients practice using the NRB mask prior to their treatment so that patients will be familiar with knowing exactly what to do as well as the sound. All staff members were asked to assemble a rebreather mask that would be used in the hyperbaric chamber (staff was reminded that all masks begin as a rebreather and are converted to a 100% non-rebreather). Each member of the staff removed the elastic ties and the metal nosepiece. A small piece of scotch tape is then placed over the open holes in the mask (opposite the holes that are occluded). The last names of the patients for easily identification are written onto the plastic mask with a permanent marker well before going into the chamber so off gassing won't be a concern. Lastly the oxygen tubing is then connected to the mask while the other end of the oxygen tubing is attached to the yellow Christmas tree located on the door pass thru. Once the mask is set up it is imperative to determine whether or not air successfully passes through the tubing prior to beginning compression of the chamber. To ensure that the non-rebreather is working all trained personnel should turn on the rising stem valve which controls the air break system and physically witness the inflation of the bag on the non-rebreather mask as well as listen for the air filling the bag. Once these tasks are performed the mask is ready for use. Also trained personnel need to be mindful that the oxygen tubing can become pinched in the door seal when closing the hyperbaric chamber door. Once the hyperbaric chamber door is closed, staff should take a final look at tubing through the side of the chamber to ensure that the tubing did not become lodged in the door. If all of these steps are incorporated in your daily use of the NRB mask staff members are readily able to identify and correct potential problems with the use of the NRB mask.

Submitted by:

Tamar Wagner, RN, CHT, Safety Director

Conduct a safety drill each month, once a quarter the safety drill should be related to fire and once a year one of those fire drills should be a timed egress for your worst patient case scenario using your smoke hoods during the evacuation process.