Non-Invasive Ventilation (NIV) Guidelines

NIV is generally indicated as short-term therapy for the treatment of acute reversible exacerbation of a clinical condition

Utilize Heated High-Flow (HHF) Nasal Cannula guidelines prior to initiating NIV

Criteria for Consideration:
- Respiratory distress
  - Failed HHF Management
  - Absent of contraindications

Initiate Non-Invasive Ventilation

After 1 Hour:
- Reassess the patient
- Obtain ABG

Optimize Settings

Transfer to ICU

Contraindications:
- Cardiac or respiratory arrest
- Hemodynamic instability or unstable cardiac rhythm
- Non respiratory organ failure
- Severe encephalopathy (GCS<10)
- Severe upper GI bleed
- Facial surgery, trauma or deformity
- Upper airway obstruction
- Inability to cooperate or protect airway
- Inability to clear secretions
- High risk for aspiration (e.g. nausea, vomiting)
- Untreated Pneumothorax
- Increased Intracranial Pressure

Notify Rapid Response Nurse
- Physician Evaluation

Less than 24 hours on NIV?
- Yes
  - Obtain new NIV orders
  - Yes
    - Actively Weaning and FiO2 < 0.6
      - Yes
        - Wean settings as tolerated
        - Discontinue NIV
        - Discontinue Order
      - No
        - Wean settings as tolerated
        - Discontinue NIV
        - Discontinue Order
  - No
    - Obtain new NIV orders

Reassess patient every 4 hours:
- Skin
- Tidal Volumes
- Respiratory Rate
- Oxygen saturation

Wean settings as tolerated
- Discontinue NIV
- Discontinue Order