

Volume Expansion/Pulmonary Hygiene Flowchart & Therapy Modality Guide

Access Patient Per Provider

Evaluate Patient's Clinical Indications

Clinical Indications -Airway Clearance Therapy (ACT)

- Respiratory Tract Infections
- Hypersecretions/ Ineffective Cough
- Immobility or muscle weakness
- Difficulty w/ secretion clearance
- Sputum Production > 5cc w/ cough or suctioning
- Hx of Chronic Bronchitis, Pneumonia Bronchiectasis, Aspiration
- Cough Peak Flow < 270 LPM

Clinical Indications – Volume Expansion Therapy (VET)

- IS Inspiratory Capacity < 10 ml/kg
- Disorders of the Diaphragm
- Predisposing conditions w/ risk of pulmonary atelectasis, thoracic surgery, upper abdominal surgery
- Suboptimal Oxygen levels
- Presence of neuromuscular disease
- Restrictive Lung Defect
- Mobility/Ambulatory Impairment

Select Therapy Method based on:

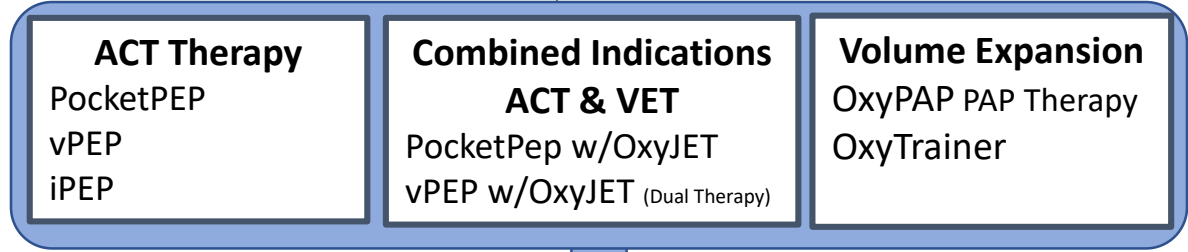
- Clinical Indications
- Patient Tolerance/ comfort/pain avoidance
- Hx. w/ documented therapy effectiveness
- Observation of effectiveness w/ trial

NO

Therapy
Contraindications
Present?

Yes

Re-evaluate
Indications: Contact
Provider



Administer Therapy 4 times Daily & PRN as Tolerated

Patients w/ Increased Symptoms: Consider Escalation to Dual Therapy
OPEP/PAP

Re-Evaluate Patient every 24-hours for Therapy Efficacy

Assess Outcomes/Goals Achieved?

- Resolution/Improvement in Chest CXR/CT/MRI
- Decreased RR and WOB
- Improved Lung sounds via Auscultation
- Increased SPO2 / Improved alveolar oxygenation
- Improvement in VC and PEFs
- Optimal hydration w/sputum production

YES

Consider: decrease
frequency or
discontinuing
therapy

NO

Re-evaluate
indications/
Contact Provider

Note: Patients w/ chronic pulmonary disease who maintain secretion clearance therapy in their home environment should remain on treatment no less than their home frequency