

## CPAP & BiPAP Ventilation (April 2013)

<p><b>Item:</b></p> <ul style="list-style-type: none"> <li>• CPAP – Device used to provide Continuous Positive Airway Pressure</li> <li>• BiPAP – Device used to deliver Inspiratory Positive Airway Pressure and lower Expiratory Positive Airway Pressure for easier exhalation</li> </ul>
<p><b>Classification:</b></p> <ul style="list-style-type: none"> <li>• Basic Life Support procedure</li> <li>• Specified in existing regulations</li> </ul>
<p><b>Use and Level:</b></p> <ul style="list-style-type: none"> <li>• Not approved for First Aid providers</li> <li>• Not approved for EMR</li> <li>• Authorized for all levels of EMT as basic scope of practice.</li> </ul>
<p><b>Authority:</b></p> <ul style="list-style-type: none"> <li>• Section 100063(a)(6)(E) of the EMT Regulations, Chapter 2, Division 9, Title 22, California Code of Regulations allows an EMT to provide both manual and mechanical ventilation.</li> <li>• Section 100106(a) of the AEMT Regulations, Chapter 3, Division 9, Title 22, California Code of Regulations refers to AEMTs being able to provide any activity identified in the scope of practice for an EMT.</li> <li>• Section 100146(a) of the Paramedic Regulations, Chapter 4, Division 9, Title 22, California Code of Regulations states that an EMT-Paramedic may perform any activity identified in the scope of practice for an EMT.</li> </ul>
<p><b>Training:</b> As specified in EMT and Paramedic regulations for level of provider.</p>
<p><b>Equipment:</b></p> <ul style="list-style-type: none"> <li>• Properly functioning ventilation device</li> </ul>
<p><b>Medical Direction:</b> Used in accordance with a protocol written and approved by the local EMS agency medical director (HS 1797.220).</p>
<p><b>Considerations and Recommendations:</b> No additional guidance at this time.</p>