

## MERs CO-V Guidelines for Respiratory Care Services

If a patient is suspected of MERS CO-V, the following respiratory therapy modalities should only be used if the patient meets indications and is necessary to treat the patient:

1. Bronchodilator Therapy: MDI's with spacer and/or DPI's only
2. Bronchial Hygiene: Oscillatory PEP (Acapella®) - ideally not recommended
3. Lung Volume Expansion: Incentive Spirometry
4. Oxygen Devices: Only Nasal Cannula, Venturi Mask, or Non-Rebreather Mask. **Heated High Flow Nasal Cannula may be considered if the use of a simple surgical mask covering the patients' mouth and nose can be used to reduce the risk of the flow aerosolizing or spreading oral and nasal secretions.**
5. ETCO<sub>2</sub>: Use only MAINSTREAM (no sidestream) on the SERVOi or the portable transport device (EMMA®).
6. Mechanical Ventilation: Place HEPA filter between the ventilator circuit and the inline suction catheter connected to the endotracheal tube/trach.



7. Resuscitation Bag: HEPA filter between resuscitation bag and in-line suction catheter connected to endotracheal tube/trach.



**The following treatment modality is NOT RECOMMENDED based on risk of exposure to providers and staff. If necessary, the following guidelines apply for non-invasive ventilation:**

- 1. SERVOi with Total Mask and add HEPA filter to the expiratory side of the circuit.**



**2. BiPAP Vision with Total Mask and add a filter to the whisper valve**

