Capnography is the measurement of exhaled carbon dioxide. It gives us a way to accurately measure and assess both the ventilatory and respiratory status of a patient.

Indications:

1. In-line adapter.
    a. Confirming ET or King Tube placement.
    b. Evaluating effectiveness of assisted ventilations.
2. Nasal cannula.
    a. Assessing respiratory status in spontaneously breathing patients.

Technique:

1. ET tube or King Tube.
    a. Place the adaptor between the tube and the BVM or ventilator.
    b. GENTLY press the orange connector into the port on the Lifepack 12 and twist. The screen should show the ETCO2 in the lower left corner on the screen.
2. Cannula.
    a. Place the cannula on the patient's face in the same manner as a normal oxygen cannula
    b. GENTLY press the orange connector into the port on the Lifepack 12 and twist. The screen should show the ETCO2 in the lower left corner on the screen.
    c. The other tube of the cannula can be connected to oxygen.

Notes:

1. Normal ETCO2 readings should be between 35-45. Below 35 indicates respiratory alkalosis/over-ventilation. Readings above 45 indicate respiratory acidosis/under ventilation
2. Whenever possible, one of the tracings on the screen should be switched to display the ETCO2 waveform.
3. Readings above 10, with a waveform, indicate successful airway placement.

Capnography (ETCO2)

4. In the setting of cardiac arrest, with an independently confirmed tube placement, a persistent reading of below 10 usually indicates an unsalvageable patient.
5. Readings may spike to well over 45 with return of spontaneous circulation in cardiac arrest.

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