VHA PROSTHETIC CLINICAL MANAGEMENT PROGRAM (PCMP)

CLINICAL PRACTICE RECOMMENDATIONS FOR HOME NEBULIZER COMPRESSOR

I. BACKGROUND

VHA’s Prosthetic and Sensory Aids Service Healthcare Group was directed by the Under Secretary for Health to establish a Prosthetic Clinical Management Program (PCMP). The objectives are to coordinate the development of clinical practice recommendations for prosthetic prescription practices and contracting opportunities to assure technology, uniformity, and ease of access to prosthetic prescriptions and patient care that will lead to valid outcome measures and analysis for research purposes.

A work group, using input from selected clinicians with expertise in home respiratory care and devices, convened to recommend a clinical practice recommendation on prescribing veteran beneficiaries with nebulizer compressors for home use.

Home nebulizer compressors are electric powered devices that compress room air to supply a flow of air to aerosolize medications, such as bronchodilators, steroids, mucolytics, and antibiotics, and deliver these medications into the patient’s airway. They are used in conjunction with a disposable hand held medication nebulizer to supply the proper particle size for disposition in the patient’s airway.

II. POLICY

The purpose of this clinical practice recommendation is to assist practitioners in clinical decision-making, to standardize and improve the quality of patient care, and to promote cost effective prescribing.

III. CRITERIA

MDI’s (metered dose inhalers) or DPI’s (dry powder inhalers) should be the first choice for inhaled medications due to their convenience (short treatment time, small size and weight, no need for outside power source), effectiveness, and lower cost. However, nebulizer compressors may be ordered in the following situations:

- Medication is not available in MDI or DPI.
- Inability of patient to use MDI or DPI due to medical problem such as arthritis, neuromuscular disease, spinal cord injury or severe respiratory disease preventing deep inhalations.
- Patient lacks cognitive and/or motor skills to use MDI or DPI.
- Failure to use MDI after proper instruction and the use of a spacer or valved holding device. This is highly recommended before changing to a nebulizer compressor.
- Nebulizers may be ordered for patients with laryngectomy or tracheostomy due to the difficulty in maintaining a good seal.

Note: appropriate situation should be noted on request form.
For those patients meeting the above needs criteria, in order to accommodate the rare situation where a portable device is required, a battery powered portable nebulizer/compressor may be ordered. To qualify for a portable device, the patient must have one of the following conditions:

- Patient has a history of sudden, frequent, and severe exacerbations.
- Patient takes treatments more frequently than four times a day or more.
- Patient has outside activities that take them outside their home more than 6 hours a day for more than three days a week.
- Lives far from any medical services (say 4 hours away) and has intermittent need.

Note: Ordering of this item for convenience is not recommended. This item should be ordered only if a true need exists. Portable battery powered units are not on contract at this time, but may be ordered as an "EXCEPTION" to meet the medical requirements of the patient.

As with other medical equipment, the patient and or caregiver must be educated in the use, care and safety of this device by appropriate and knowledgeable staff before the equipment is issued.

IV. REFERENCES


f. Moss, K, McDonald, A, Ferra, L (1985) Metered dose inhaler vs compressor driven nebulizer in the delivery of metaproterenol {Abstract} Chest 88,53S


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