

HEALTHEAST MEDICAL TRANSPORTATION
MEDICAL OPERATIONS MANUAL

7C BAG-VALVE-MASK (BVM)

PATIENT CARE GOALS

- To provide oxygenation and ventilation to a patient with inadequate breathing.

EMT

1. Connect the device to an oxygen cylinder running at a rate of 15 liters per minute.
2. Open the patient's airway using a head-tilt chin lift. Use a jaw thrust if cervical spine injury is suspected.
3. Place an appropriately sized nasopharyngeal or oropharyngeal airway, if tolerated by the patient¹.
4. Place the mask over the patient's face by positioning the mask over the bridge of the patient's nose and then lowering it to the chin.
5. Position hands on the mask and deliver breaths using one of the following methods:²

**One Person Technique
Assisting Spontaneously Breathing Pt**



Place one hand on the side of the mask. Use the "C and E" technique to draw the patient's face into the mask and obtain a tight seal. Use the other hand to deliver ventilations to the patient.

Two Person Technique – Preferred



Place one hand on each side of the mask. Point both thumbs downward and squeeze the patient's face into the mask with four fingers to obtain a tight seal. Have a second rescuer deliver ventilations. This is also referred to as the "two thumbs down" method because both thumbs point downward toward to the bottom of the mask"

6. Squeeze the bag to deliver each ventilation until the chest rises. Ventilations should be delivered over 1-1½ seconds.³
7. Get suction equipment out. Place close of patient's head.
8. If the chest does not rise and fall with ventilations, adjust head position, mask seal and evaluate sizing and placement of airway adjuncts.

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DOCUMENTATION KEY POINTS

- Indication for BVM
- Response to intervention and complications encountered

NOTES

- ¹ For the unresponsive patient and during preparation for DFAM insert an NPA into both nostrils and an OPA into the mouth.
- ² The two-person technique is the preferred method for delivering bag-valve-mask ventilations as a tight seal can more easily be obtained. The one-person technique should only be used when resources are limited.
- ³ The O-Two (pink) bag has a valve which does not allow the BVM to be squeezed to forcefully or too quickly. This prevents gastric insufflation. Squeezing the bag more slowly will result in full delivery of air.