



**Standard Operating Procedure** 

## Delivering Nitric Oxide Therapy using the INOmax delivery system

#### 1. Scope

For use within the KIDS/NTS transport service operating within the Birmingham Women's and Children's NHS Foundation Trust.

## 2. Purpose

To provide safe, efficient and practical guidance for the use of the INOmax delivery system in KIDS/NTS.

This guideline identifies the key equipment to set up INomax delivery system is safe and fit for use before and after any transfers take place.

The purpose of this document is to outline how to use the INOmax, the importance of a regular systematic checking procedure and a working knowledge of the equipment to ensure safe and effective transfers

## 3. Definitions and abbreviations

- NO- Nitric oxide
- NO2- Nitrogen dioxide
- O2-Oxygen
- PPM- Parts per million
- PSI- Pounds square inch
- L/Min- Litres per minute

#### 4. Introduction

TheINOmaxDSIR® (delivery system) delivers INOMAX® (nitric oxide for inhalation) therapy gas into the inspiratory limb of the patient breathing circuit in a way that provides a constant concentration of nitric oxide (NO), as set by the user, to the patient throughout the inspired breath. It uses a specially designed injector module, which enables tracking of the ventilator waveforms and the delivery of a synchronized and proportional dose of NO. It may be used with most ventilators





- The INOmax delivers a constant concentration of NO unaffected by ventilator mode
- Delivery range of 0.1 to 80ppm.
- Provides continuous monitoring of inspired NO, NO<sub>2</sub> and O<sub>2</sub>.
- Integrated manual emergency backup NO delivery system
- Comprehensive alarm system includes
  - user adjustable alarms
  - system alarms
  - ability to review resolved alarms
- Integrated battery backup- can run up to 6 hours on full charge battery
- Low battery alarm- at least 30 minutes remaining
- A cylinder under 400PSI should be replaced
- Perform a low and a high calibration of NO, NO2 and O2 monthly.

## 5. Equipment required for delivering Nitric oxide via INOmax delivery system:

Patient gas sampling line

Injector tube (NO delivery line)

Connector 22M/15F

Connector 22F-22F



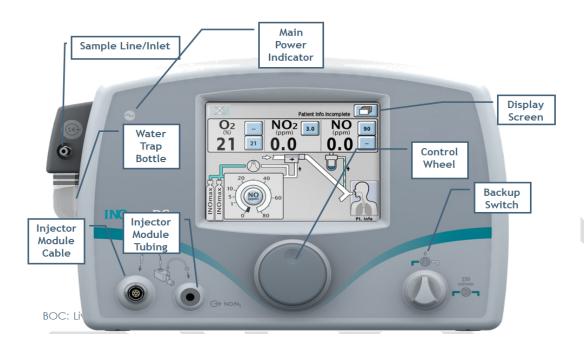




## 6. Front & Back View of INOmax delivery system:

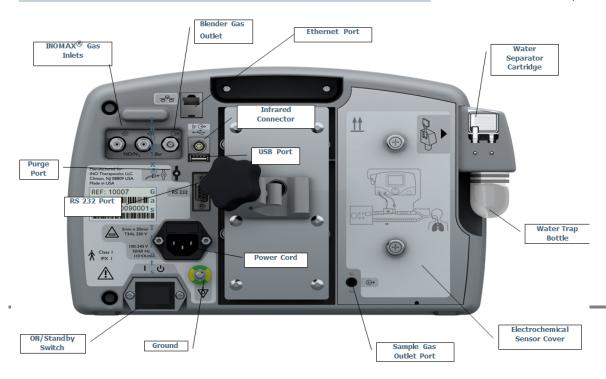






# INOmax® DS<sub>IR</sub> Back View









## 7. Setting up the INOmax to deliver Nitric Oxide:

## 1: Connect all disposable consumables:



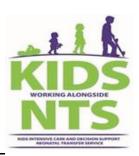
Connect Intersurgical 22M/15F to top of injector module

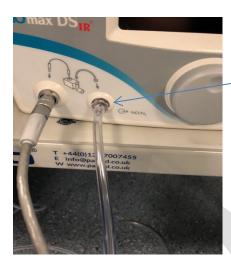
Connect Intersurgical 22F-22F to bottom of injector module



Connect NO injector tube to injector module





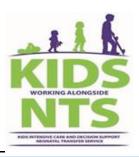


Connect NO injector tube to port on INOmax machine.



Connect gas sample line to connector at side of INOmax head.





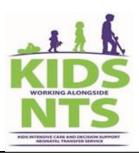


Connect gas sample port to inspiratory limb for nitric sampling, also attaching gas sample line to this port.



Connect sampling port and line back to patient connection end.





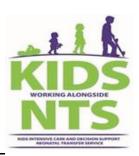


Insert water separation cartridge into slot at side of monitor (rear end).



The water trap is a plastic bottle that needs to stay on the INOmax machine at all times (not disposable)





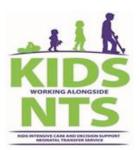


Full set up via humidifier.
The arrow on the injector module must always be facing down. This will be set up with the humidifier base secure on trolley.

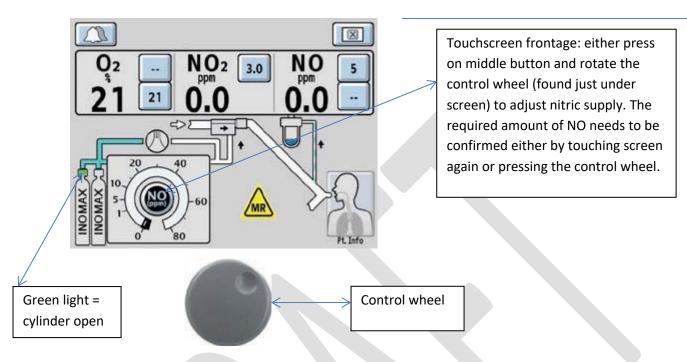


Vertical view set up of NO coming through open trolley plate. The humidifier chamber may need adjustment to facilitate the set up (turning slightly).





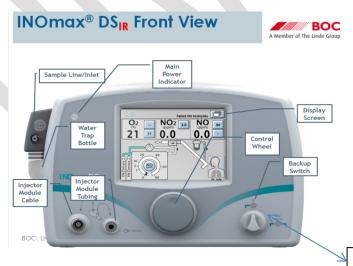
## Front screen set up:



This will then allow the correct amount of NO to be delivered to the patient if following the set up and using the touchscreen delivery display. This can be adjusted as required.

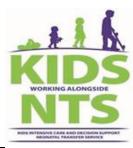
## Back up delivery system:





Back up switch

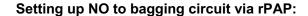




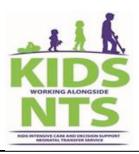
- 5 L/min, the delivered NO dose will be approximately 40 ppm. Breathing circuit
- The integrated pneumatic backup is intended for short term use when the electronic delivery system fails until a replacement NO delivery device can be brought to the bedside.
- The integrated pneumatic backup delivers a variable concentration of NO to the patient depending on the flow being used.

The integrated pneumatic backup delivery provides a fixed flow of 250ml/min of INOMAX Into the ventilator circuit through the MR injector. Please see table below for estimations of flow rates and how much concentration of NO you would be delivering on back up mode.

This table indicates nom	inal NO conce	entrations	delivered f	or differer	it ventilato	gas flows
Ventilator Gas Flow	(L/min)	5	7.5	10	15	20
NO Concentration	(ppm)	40	27	20	13	10

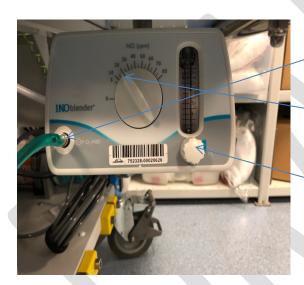








Disposable oxygen tubing to be cut to around 2m length (length of incubator). One side to be connected to rPAP.



Attach other end of oxygen tubing straight to INOblender port.

Dial up how much NO is required for patient

Turn the o2 flow metre to the desired flow rate (5L to 14L/min)





## 9. Depressurising and clearing the regulator supply line

- This should be done before any patient use and also off the patient as you may be purging NO2.
- Open and close the cylinder.



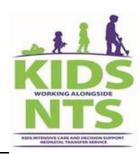
Using the nitric delivery line from the back of the head, unclip this and press on to the purge port. An audible noise (hissing) should be heard.

This depressurises the regulator.



When the regulator pressure gauge reads zero, remove the regulator hose from the purge port and connect it to the INOMAX gas inlet ready for delivery.





## **Equality and diversity statement**

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Owning department:		KIDS/NTS			
Author(s):		Emma Sang			
Pharmacist:	1	n/a			
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