ResQPOD© Impedance

Threshold Device

IMPEDANCE THRESHOLD DEVICE (ITD)

- INTRODUCTION: ResQPOD® is an impedance threshold device (ITD) that enhances the vacuum in the
 chest that forms during the chest recoil phase of CPR. Studies have shown that this process draws more blood
 back to the heart (increases preload), and increases cardiac output, blood pressure, perfusion to vital organs
 and survival rates
- WARNINGS: Contraindicated in patients where cardiopulmonary resuscitation (CPR) is not indicated. Never
 use on patients with pulse or spontaneous breathing. Remove immediately from ventilation circuit once CPR
 is discontinued
- 3. **INDICATIONS:** To be used on all patients ≥ 8 years of age in cardiac arrest
- 4. CONTRAINDICATIONS:
 - 4.1 Patients under the age of eight (8)
 - 4.2 Patients with a flail chest
- PROCEDURE: The ResQPOD can be used for either basic or advanced life support during cardiac arrest, with a bag-valve mask attached to a face mask, an endotracheal (ET) tube, or other airway devices (e.g. - King-LTD)
 - 5.1 Select airway adjunct (tube or mask)
 - 5.2 Attach bag-valve to air intake port on ResQPOD
 - 5.3 Slide the Ventilation Timing Assist Light switch to on when using the ResQPOD in an intubated patient



Timing Light Switch

*Note: the timing light ensures that ventilations do not exceed 8 - 10 per minute

- 5.4 Begin CPR (page 8):
 - ► Allow for complete chest release/recoil after each compression
 - ► Follow recommended ventilation rates
 - **▶ DO NOT** hyperventilate
- 5.5 Use 30:2 compressions:ventilation ratio (15:2 for infants and children with 2 rescuers) for basic life support when using a facemask. Ventilate intubated patients 8-10 breaths/minute with each breath lasting 1.5 seconds (maximum) to optimize CPR and ResQPOD efficacy. Excessive ventilation rates will reduce the effectiveness of the ResQPOD
- 5.6 Clean or suction vomit or secretions from the ResQPOD by removing from airway adjunct and shaking or blowing out debris using ventilation source.

NOTE: Discontinue use if correct function cannot be assured. After pulse and/ or spontaneous respirations have been restored, immediately remove ResQPOD from ventilation circuit and help patient breathe as needed