# Royal Hospital for Women (RHW)
# NEONATAL BUSINESS RULE
# COVER SHEET

Ref T24/28585

| | |
|---|---|
| **NAME OF DOCUMENT** | Drager Babylog VN500 set up |
| **TYPE OF DOCUMENT** | Clinical Business Rule |
| **DOCUMENT NUMBER** | RHW CLIN036 |
| **DATE OF PUBLICATION** | 6 May 2024 |
| **RISK RATING** | Low |
| **REVIEW DATE** | May 2029 |
| **FORMER REFERENCE(S)** | N/A |
| **EXECUTIVE SPONSOR** | S Bolisetty (Medical Co-Director Newborn Care Centre); S Wise (Nursing Co-Director Newborn Care Centre) |
| **AUTHOR** | E Jozsa (CNS), C Walter (CNE) |
| **SUMMARY** | To provide guidance on the set up of the Drager Babylog VN500. |

# Royal Hospital for Women (RHW)
# NEONATAL BUSINESS RULE

## Drager Babylog VN500 set up RHW CLIN037



### 1. BACKGROUND

The Drager Babylog VN500 is one of the ventilators used within Newborn Care Centre to provide respiratory support to premature and sick neonates. This policy demonstrates how to set up the ventilator for use.

### 2. RESPONSIBILITIES

Medical and Nursing Staff

### 3. PROCEDURE

#### 3.1 Equipment

- Drager Babylog VN 500 Ventilator (with flow sensor cable attached)
- VN 500 block
- Flow Sensor and Flow sensor housing
- F & P Neonatal Ventilator Dual heated circuit kit – 950N80
- 2L bag of Water for Irrigation
- Humidifier base 950
- Test Lung
- Ventilation Circuit Temperature probe and heater wire
- Non-eMR Results Mounting chart (For attaching sterilisation stickers)

#### 3.2 Clinical Practice

1. Collect equipment (Picture 1).
2. Perform hand hygiene.
3. Open packs on clean work surface ready to assemble.
4. Inspect and ensure that the plastic diaphragm is inserted correctly into the block (Picture 2).
5. Ensure grey “exhaust outlet” is correctly attached to the block (Picture 2).
6. Ensure water trap chamber correctly attached to base of block (Picture 2).
7. Open blue cover to insert the block to the ventilator. Twist to the right until it locks into place (Pictures 3).
8. Ensure blue cover shuts.
9. Insert the flow sensor into the flow sensor housing.
10. Attach the ventilation circuit to the VN 500 (Picture 4):
    - White expiratory limb to (left) expiratory side (labelled)
    - Blue inspiratory limb to (right) inspiratory side
11. Connect other end of blue inspiratory tubing to humidifier base (Picture 5).
12. Connect the T-Piece with white and blue (expiratory and inspiratory) limb to the flow sensor and flow sensor housing (Picture 6).
13. Attach flow sensor cable to flow sensor (Picture 6).
14. Attach test lung to patient end of flow sensor (Picture 6).

Health
South Eastern Sydney
Local Health District

# Royal Hospital for Women (RHW)
# NEONATAL BUSINESS RULE

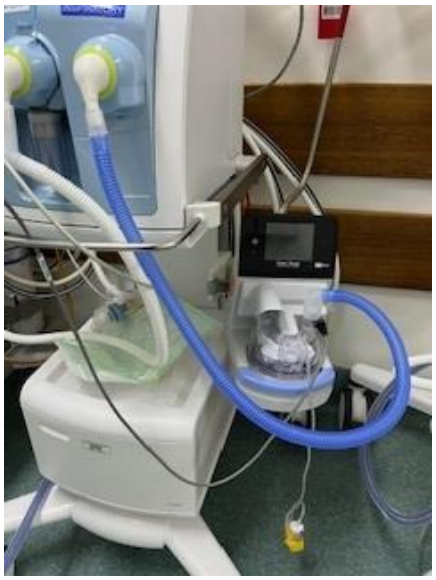
## Drager Babylog VN500 set up — RHW CLIN037

Picture 1

Picture 2


Picture 3


Picture 4



Picture 5

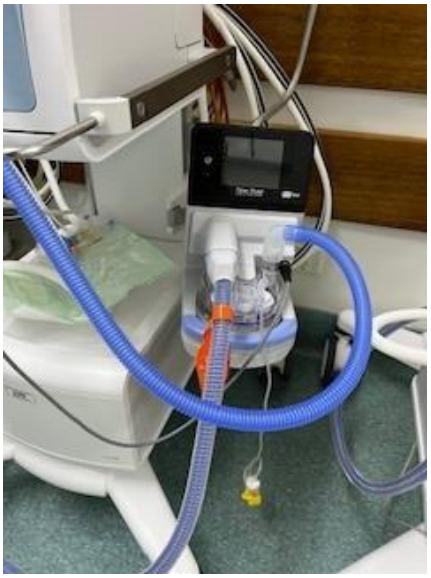
Picture 6

15. Attach other end of blue tubing from T-Piece to other outlet on humidified base (Picture 7).
16. Ensure temperature probe from humidified base plugged in to expiratory (white) limb (Picture 8).
17. Check all remaining ports in the circuit are closed to prevent leaks.
18. Do not pierce water bag with water line- keep circuit dry until point of commencing use on patient.
19. Remove Barcode Stickers from sterile equipment packs of flow sensor, flow sensor housing and block. Stick them onto the Non-eMR Result Mounting chart.
20. Request second RN to check and confirm the completed set-up of the ventilator is correct.
21. Both RNs to sign on the chart with stickers and leave with ventilator.
22. Ensure ventilator and humidifier base both plugged in to power.

The Royal HOSPITAL FOR WOMEN

23. Connect oxygen and air ventilator hoses to oxygen and air wall outlets.
24. Ensure ventilator is turned on (humidifier base remains off until circuit wet and about to commence use on patient).
25. Perform pre use check through main home screen, following instructions as prompted on the screen.
26. Perform leakage performance test, following prompts on the screen.

NOTE:
- Once water line has pierced water bag and circuit is wet, must be used within 24 hours or whole circuit should be removed and replaced. Please note that the flow sensor, flow sensor housing, test lung and block are not disposable and should be sent to CSU for sterilisation.
- Leakage test and pre use check should be completed once a shift for ventilators not in use, and should be checked by the RN before commencing use of ventilator on a patient.
- Ventilator circuits should be changed every 14 days



Picture 7


Picture

### 3.3 Abbreviations

| | | | |
|---|---|---|---|
| NCC | Newborn Care Centre | | |

## 4. CULTURAL SUPPORT

- When clinical risks are identified for an Aboriginal family, they may require additional supports. This may include Aboriginal health professionals such as Aboriginal liaison officers, health workers or other culturally specific services.
- For a Culturally and Linguistically Diverse CALD family, notify the nominated cross-cultural health worker during Monday to Friday business hours.
- If the family is from a non-English speaking background, call the interpreter service: NSW Ministry of Health Policy Directive PD2017_044-Interpreters Standard Procedures for Working with Health Care Interpreters.

## 5. IMPLEMENTATION PLAN

This (revised) CBR will be distributed to all medical, nursing and midwifery staff via @health email. The CBR will be discussed at ward meetings, education and patient quality and safety meetings. Education will occur through in-services, open forum and local ward implementation strategies to address changes to practice. The staff are asked to respond to an email or sign an audit sheet in their clinical area to acknowledge they have read and understood the revised CBR. The CBR will be uploaded to the CBR tab on the intranet and staff are informed how to access.

## 6. RISK RATING

- Low

## 7. NATIONAL STANDARDS

- Standard 1 Clinical Governance
- Standard 5 Comprehensive Care

## 8. REVISION AND APPROVAL HISTORY

| Date | Revision No. | Author and Approval |
|---|---|---|
| Nov 2009 | 1 | KB Lindrea (CNC) |
| 24 Nov 2015 | 2 | KB Lindrea (CNC) |
| 28 Mar 2024<br>23.4.24 | 3 | E Jozsa (CNS), C Walter (CNE); Approved NCC CBR Committee<br>Endorsed by RHE Business Rule Governance Committee |