



## Non-invasive Ventilation (NIV) Patient settings leaflet

**Please keep this leaflet with your machine as it contains useful information about your treatment. This will be very useful if admitted to hospital or you become unwell.**

Non-Invasive ventilation (NIV) is a treatment to help with your breathing. It involves wearing a mask connected to a machine which makes breathing in and out easier and supports the muscles which make your lungs work. It is generally worn at night during sleep. The mask provided has been specifically selected to fit your face and the machine has also been set for your breathing. The details of these are recorded below. Please keep this information as it will be very useful to sort out any problems quickly.

You will have been issued:

- Machine (with power lead)
- Filter
- Hose
- Mask (with headset)
- Carrying bag

### Useful information

#### How to switch the machine on and off

##### Lumis □

Connect the cable into the power inlet on the rear right hand side of the machine. Please be aware that the surround of the power connection has a retention clip which locks the power cable into place if pressed down. The retention clip can be lifted upwards in order to unlock the power cable for easier transport. Plug the machine into the mains and it will automatically come on and the screen will light up.

At the rear of the machine is the air outlet, where you attach an external filter (supplied by department) and onto this filter attach the hose from your mask.

To switch the machine on or off simply press the Start/Stop Button once which is located on top of the device.

Once the device has been running for a few minutes all lights on the machine will go off but pressure will still be delivered.

##### Stellar □

Turn on the black rocker switch on the rear of the ventilator (on the left hand side). Press the power button on (flat one on the top). To turn off, press the flat power button on the top and then confirm you wish to switch it off by pressing on the raised button.

## Information for Patients

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### Cleaning your machine and mask

#### Daily

It is important to wipe the mask every 1–2 days with a damp cloth or even an antiseptic or baby wipe. Ensure the wipes do not contain alcohol or Lanolin, as these substances can rot the silicone of the mask. The more you look after your mask the longer it will last.

#### Weekly

##### Mask

The mask will most likely need a better clean every week or two. To do this, start in the morning, separate mask from all attachments and wash it gently in warm, soapy water (mild detergent e.g. washing up liquid). Rinse with clean, warm water and paper towel dry before allowing to air dry before using.

Do not dry near a source of direct heat.

##### Tube

The same procedure can be used to clean the tube. Shake off all excess water after rinsing and hang the tubing vertically to allow the water to drain and dry completely.

#### **IMPORTANT: Masks and tubing must be dried fully before use with your NIV machine**

Disconnect from power supply before cleaning. Do not immerse the machine in water! Do not use any cleaning agents on the device. Wipe the machine with a clean, damp cloth and then dry with a soft cloth. Wait until the machine is completely dry before reconnecting power supply.

#### Benefits of NIV

NIV can improve sleep quality leading to better energy and concentration levels during the day. It can also help you feel less breathless than before. This may mean you may be able to perform more daily tasks. You may also feel brighter on waking and headache free if this was a problem previously. It can also decrease the likelihood of being re-admitted to hospital.

#### Are there any side effects or risks to the treatment?

As with any treatment, side effects can occur. However, the side effects associated with NIV are rarely severe and easily resolved.

#### Common problems include

##### Mask seal problems

A small leak from the bottom of the mask is common and will not affect the performance of the NIV device. However, a large leak or a leak into the eyes can be problematic. You can try tightening the headgear straps slightly at home, but bear in mind this can cause further problems. It is preferable to contact the Lung Function and Sleep department where experts can adjust the mask for you or even try a different style. There are many types of mask and it can sometimes take a number of attempts to find the most comfortable and effective mask.

##### Soreness on the nasal bridge

Soreness on the bridge of the nose is an indication that the mask is too tight at the top or a poor fit. The mask will either need refitting or replacing as the soreness can become worse over time. Contact the Lung Function and Sleep department immediately for advice – do not wait until your next appointment.

### Throat dryness

A dry mouth is very common when using NIV, particularly with a mask that covers the mouth. Usually, a glass of water by the bed can enough to resolve this but, in severe cases, humidification devices are available.

### Nasal problems

It is common to suffer from nasal stuffiness, or sneezing and a running nose when you first start treatment. This should settle on its own. If it doesn't settle after a week contact your GP and ask for a prescription for a nasal spray such as Flixonase, Beconase, or Nasonex.

### Are there any alternatives to NIV?

There are no similar non-invasive alternatives to NIV treatment.

## FAQs

### Q. Can I survive a night without my ventilator?

A. Yes, most patients can spend one or two nights off their machine. They won't be very comfortable and symptoms of tiredness and headache may reappear – but rarely will this be dangerous.

### Q. Does my ventilator need a service?

A. Your ventilator and circuit must be checked every 12 months at the same time that we see you to assess your treatment. Tubing, mask and filters will be changed or checked and if there is a performance problem we may swap your machine for another.

### Q. My ventilator doesn't feel comfortable or gives me a breath at the wrong time. Is this OK?

A. If your machine doesn't feel right you should get in touch with us on the next working day and bring your machine and circuit with you to the Lung Function and Sleep department at an agreed time.

### Q. Do I need to bring my ventilator in the ambulance if I am admitted to hospital?

A. Yes, yes and yes! You must insist that your NIV machine comes with you to the hospital. This is very important. You may need it and there may not be an NIV machine available at the hospital.

### Q. Should I use my ventilator in the daytime?

A. If you want to have a nap in the day or have got a chest infection, it may be good to use your ventilator during the day as well as at night. You won't become dependent on it – but you will gain relief from wearing it.

### Q. Is there anyone I can contact out of hours if there's a problem with my ventilator or breathing?

A. No, we don't have resources to provide an on-call service. If you feel your breathing is getting worse, or you are more unwell, call your

GP or contact your out of hours service provider (with your ventilator) and they may if needed refer you to hospital to be seen by a medical expert. If your machine malfunctions and you can manage a few nights without it, contact us on the next working day.

### Q. Can I use oxygen whilst on my ventilator?

## Information for Patients

**A.** Yes, some people may already have oxygen with your ventilator. It is important that any oxygen tubing has a white plastic “fire-break” between the mask and the oxygen source.

### If there is a problem

If the problem is related to your NIV treatment, do not struggle, the NIV Physiologists are here to help you and can be contacted as detailed below. If you feel unwell please contact your GP.

Please call the Lung Function and Sleep department on the number shown on this leaflet.

Opening hours are Monday to Friday, 09:00–17:00.

Telephone Number: **0121 371 3870**

### Your information

Name: ..... Date issued: .....

Your machine: .....

Your mask:.....

Breathing settings:	Date 1	Date 2	Date 3
EPAP cmH2O			
IPAP cmH2O			
Rise Time			
Breath Rate bpm			
Inspiratory trigger			
Expiratory trigger			
Oxygen flow			

## Information for Patients

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### **Lung Function and Sleep**

#### **Level 0, Outpatient Area 3**

Queen Elizabeth Hospital Birmingham

Mindelsohn Way, Edgbaston, Birmingham, B15 2GW

Telephone: 0121 3713870

(Monday–Friday, 09:00–16:00 ask for an NIV Physiologist)

Email: [NIVReferrals@uhb.nhs.uk](mailto:NIVReferrals@uhb.nhs.uk)

If you require this information in another format, such as a different language, large print, braille or audio version please ask a member of staff or email [patientexperience@uhb.nhs.uk](mailto:patientexperience@uhb.nhs.uk).