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Diploma in Pharmacy 2nd Year
Community Pharmacy & Management
Experiment

To study appropriate handling with correct administration techniques of nebulisers.

Aim:

To study appropriate handling with correct administration techniques of nebulisers.

Reference :

‘ Dr. Gupta G.D. , Dr. Sharma Shailesh, Dr. Gupta Richa, “Practical Manual of Community Pharmacy and Management” Published by Nirali Prakashan, Page no 101 – 104

Theory :

A nebuliser turns medication into a mist so that it can be inhaled into the lungs.

Handling and Administration Technique of Nebulisers

1. Following supplies should be gathered before performing:
   i. Air compressor
   ii. Nebuliser cup
   iii. Mask or mouthpiece
   iv. Medication (either unit dose vials or bottles with measuring devices)
   v. Compressor tubing
2. The air compressor should be placed on a flat, sturdy surface. It should be plugged into a grounded (three prong) electrical outlet.
3. Hands should be washed with soap and water and dried completely.
4. The medication should be placed into the nebulizer cup. Most are delivered in vials with pre-measured unit doses. A separate clean measuring device should be used for each medication to measure.
5. The nebuliser cup and mask or mouthpiece should be collected.

6. The tubing should be connected to both the aerosol compressor and the nebuliser cup
7. The compressor should be turned on to confirm that the compressor is operating properly. A thin mist should be visible coming from the tube's back.
8. Comfortable chair should be used to sit up straight. Child may sit on lap if they are receiving treatment. A mask should be used. It should be confirmed that it is comfortable and secure. A mouthpiece should be used between child's teeth and lips should be sealed around it.
9. Slow, deep breaths should be taken. If possible, each breath should be held for 2 or 3 seconds before breathing out. This enables the drug to enter airways.
10. The procedure should be continued until all of the medicine is gone. Small liquid will remain in the cup, and the nebuliser will begin to sputter
11. The treatment should be stopped and rest of about 5 minutes should be taken if the patient is getting dizzy or jittery. The treatment should be continued while attempting to breathe more slowly. The doctor should be informed if the problem persists during treatments.

Cleaning the Nebuliser

1) The nebuliser cup should be washed thoroughly with warm water, shaked off excess water and then dried after each treatment. The cup and the mask or mouthpiece should be washed in warm water with a mild detergent. It should be washed thoroughly and dried. The compressor tubing should not be cleaned
2) The equipment should be disinfected with either a vinegar/water solution or a disinfectant solution every day after washing it. ½ cup of white vinegar should be mixed with 1½ cups of water to make vinegar solution. The equipment should be submerged in water for 20 minutes before being thoroughly washed. The extra water should be shaked off and then dried in air on a piece of paper. It should be confirmed that it is completely dry before storing it in a plastic zippered plastic bag.

Result :

Appropriate handling with correct administration techniques of nebulizers was studied.

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