HFNC Adjustment Guidance for Hospitalists

HFNC provides life-saving respiratory support for patients with acute hypoxic respiratory failure due to COVID-19. While APP and physician clinicians order this for patients, **titration of HFNC settings are guided by Respiratory Therapy.**

If a patient on HFNC has acute decompensation:
Prone the patient
Contact Respiratory Therapy to adjust HFNC
Assess for IV furosemide administration.

In the rare instances where an RT is unavailable to physically adjust HFNC settings for a patient on HFNC with acute decompensation, APP/physician clinicians may make temporary adjustments while awaiting arrival of the RT.

When needing to adjust HFNC to improve oxygenation, APP/physician clinicians should first increase FiO2 up to 100%.

If that is unsuccessful, the APP/physician clinician should increase the flow rate in increments of 5L/minute to improve oxygenation and patient comfort. They should remain at the bedside for all changes and for 5-10 minutes afterward and/or until Respiratory Therapy is present. If necessary, the flow rate may be increased again by 5L/minute for patient comfort. If Respiratory Therapy isn't available within a short period of time, call the RT supervisor via Amion.

NB - Photos of how to adjust the FiO2 on each type of device at UNM are forthcoming.

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