**CardioHelp Alarm and Intervention Settings:**

PURPOSE:

To identify the venous and arterial pressures in relationship to pump flow and to identify any potential clotting problems within the oxygenator.

SUPPORTIVE DATA:

As preload decreases and venous pressure reaches a threshold, CardioHelp pump flows will begin to readjust and slow themselves down. At high negative pressures, there may be evidence of line chatter and increasing hemolysis. Venous pressure alarm will be set at -60mm Hg on CardioHelp, and the pump will slow down to not allow pressures greater than -100.

The post-oxygenator arterial pressure alarm limit is set at: 350 mmHg for neonatal and pediatric circuits. As the afterload increases and arterial pressure reaches a threshold, the flow may readjust and slow down. At high positive pressures, there may be evidence of increasing hemolysis.

The pre-oxygenator arterial pressure (internal) is set at: 350 mmHg for neonatal and pediatric circuits. The pre-oxygenator (internal) arterial pressure reflects the pressure necessary to drive blood through the oxygenator. **An increase in pre-oxygenator pressure and delta P may reflect clotting through the oxygenator.**

DOCUMENTATION:

Record venous, arterial, and internal pressures hourly in the ECLS Flow Sheet in EPIC. CardioHelp also documents delta P, which is the difference between the Pre-oxygenator pressure (Pint) and Post-oxygenator pressure (Part), and is an indicator of oxygenator health.