

VALLEYCARE
OLIVE VIEW-UCLA MEDICAL CENTER/HEALTH CENTERS
RESPIRATORY CARE SERVICES – NICU
POLICY & PROCEDURE

NUMBER: 1957
VERSION: 1

SUBJECT/TITLE: NEOBAR

POLICY: Intubated patients and those receiving NCPAP will have their endotracheal tubes and binasal airways secured with a NeoBar.

PURPOSE: To explain the application and use of Neobar with endotracheal tubes and binasal airways.

DEPARTMENTS: RESPIRATORY CARE SERVICES

DEFINITIONS:

PROCEDURE: After intubation of NICU patients, secure the endotracheal tube to the NeoBar.

Equipment

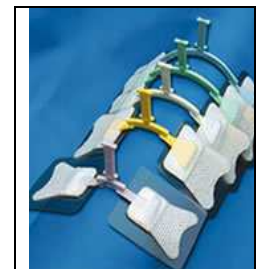
- NeoBar
- Normal Saline pads
- 2X2 gauze
- Cloth tape cut to approximately ½ inch wide by 3 to 5 inches long

Before or after intubation, take a normal saline pad and clean the patient’s cheeks to remove any vernix caseosa, blood, amniotic fluid or other debris that may compromise securing the NeoBar to the cheeks. Allow the cheeks to dry thoroughly.

NeoBar Selection

There are 5 NeoBars available:

- Mini (purple) 700 gm or less.
- Ultra (yellow) 700 to 1000 gms.
- Micro (white) 1000 to 1500 gms.
- Small (green) 1500 to 2200 gms.
- Large (blue) 2200 to above.



Use the size chart as a guideline and then take the size bar it recommends and the next larger size to the bedside.

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Hold the bar ¼ inch away from the lips midline. Make sure the tabs will go all the way back to the ears. If they don't, then you will want to use the next larger size. See illustration "The NeoBar in Place" below.

Positioning

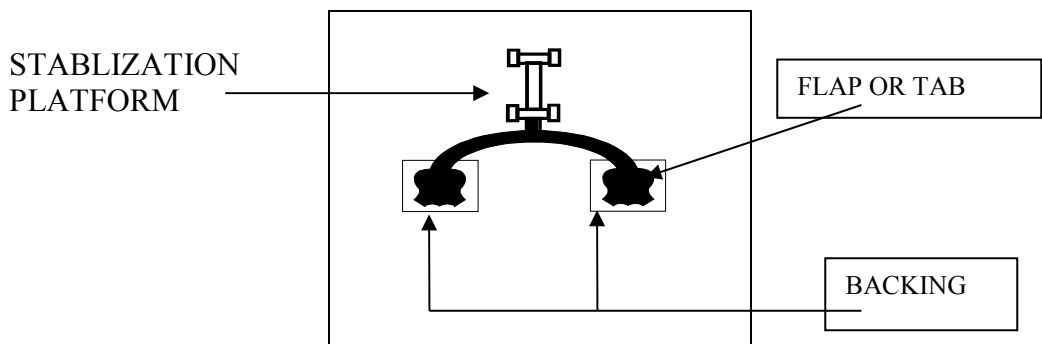
Before applying the NeoBar, it is recommended to introduce the bar to heat first by applying a heel warmer or holding the bar under the radiant warmer for a few seconds with the clear tabs still in place or the heat of your hands will also help the hydrocolloid adhere to the skin. After you place the bar on the face, hold down the tabs for at least 60 seconds, covering the entire surface of the tabs.

Note:

The tabs of the NeoBar contain hydrocolloid, similar to duoderm. It is skin friendly allows the skin to breathe. Make sure the skin is clean and dry before applying the NeoBar. Avoid alcohol it will immediately break down the hydrocolloid on the tabs and it will not adhere to the cheeks.

Assured of the proper position, remove the backing from the flaps. Place the flaps in front of the ears on the maxillary bone with the NeoBar ¼ inch away from the infant's lips. Hold for 60 seconds.

With the NeoBar secured to the cheeks, take the ½ inch cloth tape and tape 360 degrees around the ETT first, then wrap the same tape around the ETT stabilization platform and the ETT at least twice. Make sure the tube is under the platform of the bar.



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Removing the NeoBar

- The NeoBar lasts on average of 5-7 days.
- Remove the tape from the stabilization platform.
- The NeoBar may be removed with water. Adhesive remover is not necessary.
- Saturate the tab in warm water with 2x2 gauze.
- Remove the gauze.
- Start removing the tab from a corner with either a wet 2x2 or a wet swab.
- Discard the Neobar in a proper receptacle.

Benefits

- With proper sizing of the bar endotracheal tube “play” is reduced.
- The tab has foam in it to assure that plastic is not touching or pushing into the patient’s skin.
- Allows easy access to the oral cavity for suctioning and oral care.
- Keeps tape off of the skin.
- Adjustment of the endotracheal tube may be accomplished without having to remove the bar or tape from the baby’s face.

Precautions

- Under high humidity the bar may become loose and or come off.
- Assessment of the skin and NeoBar after 7 days for flap security and Neobar replacement is highly recommended is not secure.
- The tabs have been known to loosen in the presence of excessive oral secretions.
- In extremely premature neonates, the NeoBar may not be indicated.

Binasal Airway Application with a NeoBar

The binasal airway for CPAP may be secured to the NeoBar the same way as for the endotracheal tube. Selection applying the bar, securing the airway with tape, and removal of NeoBar remain the same.

Documentation

Charting for the NeoBar is completed on the ventilator flowsheet.

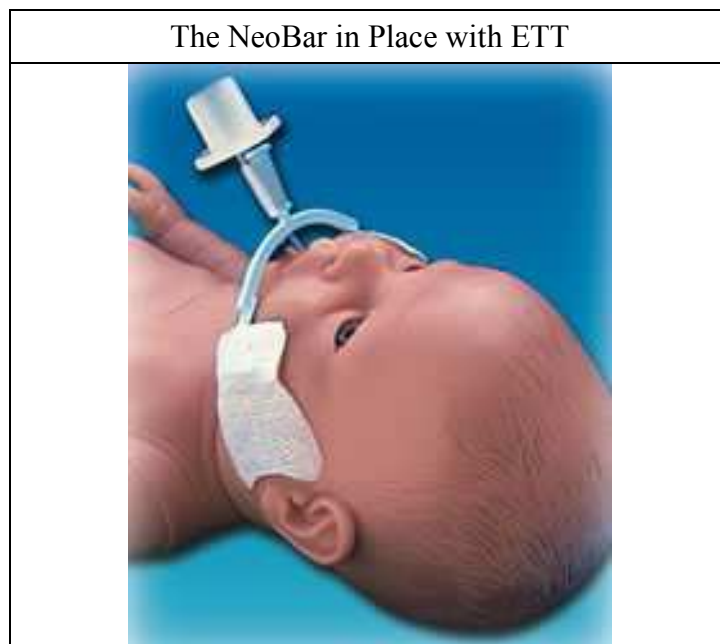
Indicate:

- NeoBar was used to secure tube/ binasal airway.
- Size of the bar.
- Where ETT is secured at the lip.
- Any NeoBar change and for what purpose.

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References: 1) NeoBar directions for use, Neotech products 2002. 2) Neobar tips & techniques by Cindy Cisneros.	
Approved by: Edward Richard Lind (Chief of Respiratory Therapy), Richard Findlay (Unassigned)	Date: 10/18/2017
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