

Humana NIV Checklist

All Patients:		
Absence of Contraindications: Confusion or altered mental status; OR Drowsiness or loss of consciousnes production); OR Facial abnormalities/trauma; OR Hemodynamic instability; OR Nausea/vomiting; OR arrest.		
COPD	Vos	No
(Either box 1 or box 2, plus box 3)	Yes	No
1. Absence of clinical evidence of OSA/central sleep apnea (CSA) ** OR a previously negative polysomnogram (sleep study). Clinical evidence of OSA may include excessive daytime sleepiness (eg, inability to remain fully awake or alert) despite a full night's sleep, nonrestorative sleep (waking up from sleep without feeling rested), bed partner reports loud snoring, gasping, choking, snorting or interruptions in breathing while sleeping.		
2. OR The patient has COPD with OSA, and traditional positive airway pressure		
devices have failed to improve hypercapnia or oxygen saturation level		
3. AND Chronic hypercapnia with PaCO2 greater than or equal to 52 mmHg		
Neuromuscular Disease with Respiratory Insufficiency (Any one box)	Yes	No
1. Nocturnal oximetry less than or equal to 88% for 5 consecutive minutes		
2. OR Arterial PaCO2 greater than or equal to 45 mmHg		
3. OR Forced vital capacity less than 50% predicted		
4. OR Maximum inspiratory pressure less than 60 cm H2O		
Obesity Hypoventilation Syndrome (Must check all boxes)	Yes	No
1. BMI greater than 30		
2. AND daytime hypercapnia with PaCO2 greater than or equal to 45 mmHg		
3. AND A polysomnogram ruling out OSA/CSA		
Restrictive Thoracic Cage Abnormalities (Box 1 with either box 2 or 3)	Yes	No
1. Absence of clinical evidence of OSA/CSA or previous negative polysomnogram		
2. Hypercapnia with PaCO2 greater than or equal to 45 mmHg		
3. OR Oxygen saturation less than or equal to 88% for 5 consecutive minutes during nocturnal oximetry		