

### 8.01 An audit of long-term non-invasive ventilation initiation in patients with COPD

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**Background:** Long-term non-invasive ventilation (NIV) can reduce hospital readmissions and exacerbation rates in selected COPD patients. 2019 ERS and 2020 ATS guidelines recommend initiating long-term NIV in COPD patients with “stable hypercapnia”. **Methods:** We performed a retrospective audit of patients with an acute COPD exacerbation with T2RF admitted to the NIV unit in St Vincent’s Hospital between December’2023 and March’2024, to assess long-term NIV assessment practices. Charts were reviewed to confirm “stable” blood gas assessment, documentation of decision-making, and long-term NIV prescriptions initiated by discharge. **Results:** 12 patients (16 admissions) were included. Five (41.7%) were prescribed long-term NIV whilst inpatient. Two (28.6%) were referred to community hubs for follow-up regarding NIV. There was no documentation among the remaining five (41.7%) regarding inpatient consideration of NIV or outpatient follow-up. Three (25%) had preceding admissions requiring NIV, of which only one (33.3%) was commenced on long-term NIV. **Conclusions:** Only a minority of patients admitted with an acute COPD exacerbation requiring NIV were initiated on long-term NIV, including those with recurrent admissions. Decision-making and clinical practice was poorly documented and variable, suggesting the need for more standardized operating procedures. **Keywords:** NIV, COPD **Disclosures:** The authors declare that they have no conflict of interest.