

VENTILATION ORDERS RT

Ventilation Orders Respiratory Therapy

NURSING

Elevate head of bed (HOB) 30 degrees or greater except as required for procedures or contraindicated. [Evidence](#)

Insert nasogastric tube/orogastric tube

Gastic Tube Mode:

- | | |
|--|---|
| <input type="checkbox"/> Clamp | <input type="checkbox"/> Low intermittent suction |
| <input type="checkbox"/> Medium continuous suction | <input type="checkbox"/> Low continuous suction |
| <input type="checkbox"/> To gravity | |

RESPIRATORY

REMINDER: Extubation readiness should be assessed Q shift before multidisciplinary rounds 

[Evidence](#)

REMINDER: Every patient in MICU/SICU on a mechanical ventilator must be evaluated for potential extubation Q shift before multidisciplinary rounds unless the pt meets **any** 1 of the following **EXCLUSION** criteria:

- | | |
|---|--|
| <ul style="list-style-type: none">• MD order to hold weaning• FiO₂ >50• Hemodynamic instability: MAP < 60 or HR > 120 | <ul style="list-style-type: none">• Temp > 101.5°C at the time of assessment• Undergoing dialysis at the time for weaning• Patient receiving paralytic agents |
|---|--|

Ventilator Settings:

Vent Mode: AC IMV CPAP PC PRVC

Rate: _____ Tidal Volume: _____ FiO₂: _____ PEEP: _____

Pressure Support : _____ Inspiratory Pressure: _____

Arterial Blood Gas (ABG) Prn? Yes No

- Daily Weaning Parameters: Goal Rapid shallow breathing index: f/Vt < 100 NIF- 30
Respiratory rate < 30 unless 'DO NOT institute ventilator weaning' is ordered

Do Not Institute Ventilator Weaning

NUTRITION

NPO

MEDICATIONS

REMINDER: Use an inhaled short-acting beta - 2 agonist for treatment of acute asthma symptoms.

[Evidence](#)

Respiratory medications: Beta - 2 Agonists + Anticholinergic Agents

- Duoneb (albuterol 2.5 mg/ipratropium 0.5 mg) 3 mL via nebulizer Q 6 Hrs
 Duoneb (albuterol 2.5 mg/ipratropium 0.5 mg) 3 mL via nebulizer Q 2 Hrs Prn wheezing

Respiratory medications: Beta - 2 Agonists [Evidence](#)

- Albuterol (Proventil) 2.5 mg/0.5 mL via nebulizer Q 6 Hrs
 Albuterol (Proventil) 2.5 mg/0.5 mL via nebulizer Q 2 Hrs Prn wheezing
 Albuterol (Proventil) MDI 6 puffs Q 6 Hrs
 Albuterol (Proventil) MDI 6 puffs Q 2 Hrs Prn wheezing

Respiratory medications: Levalbuterol *Physician to select **ONE** dose only*

RESTRICTION CRITERIA: Levalbuterol (Xopenex) (please select one criteria if ordering)

Patients who were on levalbuterol PTA.

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MEDITECH NAME: VENTILATION ORDERS RT

MEDITECH MNEMONIC:CC.VENT

Zynx- Ventilator SS

Nancy Christensen/Sjauwoekloy

V:\SJO Ordersets\Order Sets\MEDICAL INFECTIOUS DX\VENTILATOR

- Patients who developed side effects to albuterol (Tachycardia, Tremors, etc.)
- Patients who cannot take albuterol due to side effects (Tachycardia, tremors, etc.)
- Other: _____
- Levalbuterol (Xopenex) 0.63 mg via nebulizer Q 8 Hrs
- Levalbuterol (Xopenex) 1.25 mg via nebulizer Q 8 Hrs

Respiratory medication: Anticholinergic Agents [Evidence](#)

- Ipratropium (Atrovent) 0.5 mg via nebulizer Q 6 Hrs
- Ipratropium (Atrovent) 0.5 mg via nebulizer Q 2 Hrs Prn wheezing

***All labs/diagnostics will be drawn/done routine now unless otherwise specified**

LABORATORY – Blood Gas

- Arterial Blood Gas – within 60 minutes after patient placed on ventilator
- Arterial Blood Gas - In AM

DIAGNOSTICS – Radiography

- Chest X-ray (CXR) 1 view – STAT; Reason for exam: ET Tube Placement
- Chest X-ray (CXR) 1 view – In AM Daily x 7 days; Reason for exam: _____