Prevention of Unplanned Extubations

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Unplanned Extubations

- The trend of unplanned extubations is rising.
- Unplanned extubations are a safety concern for patients.
- A ventilator bundle is in place to guide nurses and respiratory therapists for weaning and extubating patients who meet criteria; it is not always being used.
- This concern has been discussed at the ICU safety team, ICU NP, ICU ROE, and ICU leadership meetings.

Evidence

- Evidence has proven the implementation of a ventilator bundle guiding team members to extubate patients when ready prevents unplanned extubations.
  - Does the patient meet criteria?
  - Was the reason for mechanical ventilation resolved?
  - If yes to both above, extubate patient independently.
  - The bundle does not require physician contact.

Extubation Criteria

- Respiratory < 30
- Heart - > 50 < 120
- Normothermic - > 97 < 100.4
- BP Systolic > 90
- SpO2 ≥ 90
- ETCO2 stable trend
- FiO2 < 50
- PEEP ≤ 5
- Pressure Support ≤ 8
- Alert to voice
- Stable if on vasoactive drips
- No accessory muscle use
- Minimal secretions
- No significant pulmonary disease
- Cough, gag reflex
- No continuous IV drip for sedation
- Glasgow coma score > 9

Getting your patient extubated when they are ready is the right thing to do!

References