

- Directions:**
1. Mark through the item you do not wish to order
 2. Indicate choice when options are available by placing a check (√) in the parenthesis

Weaning of Mechanical Ventilation: Routine Orders for Adult Patients	
1. Ventilator Settings:	Begin Trial with most recent orders for settings OR () Change Ventilator Settings to those below: Mode: _____ Rate: _____ Tidal Volume: _____ FIO ₂ : _____ PEEP: _____ Pressure Support: _____
2. Monitoring:	VS every 15 minutes through 1 hour after weaning trial, then routine for unit
3. Activity:	Continue Bedrest with HOB elevated 45 degrees; Stop Passive ROM until after Weaning Trial
4. Oral Care:	Mouth care and oral suctioning prior to starting Weaning Trial
5. Respiratory Care:	If Nebulized medication is ordered, administer prior to starting Weaning Trial Nursing or Respiratory Care to suction as needed for congestion or secretions (maintaining closed system) Ventilator weaning parameters and lung mechanics, measured during sedation vacation*
6. Nutrition:	Stop tube feedings until after Weaning Trial. Resume 1 hour after failed Trial or get new orders for extubated patient Nasogastric tube to low intermittent suction during Weaning Trial OR Aspirate Nasoduodenal tube for residual and clamp until Weaning Trial completed
7. Diagnostic Studies:	Arterial blood gases at start of Weaning Trial (unless ABGs from today available on same settings) Arterial blood gases after 30 minutes of mechanical ventilation and PRN for change in status
8. Medications:	Stop Sedation at least one hour before beginning weaning trial until patient is able to cooperate Continue indicated Pain Medications for adequate pain control
9. Modified t-piece Trial:	CPAP 5cm, pressure support 5cm, inspired oxygen to maintain saturation of at least 92% Stop Weaning Trial and resume previous ventilator settings if patient fails by protocol criteria below. Obtain arterial blood gases after 30 minutes of spontaneous breathing. Notify physician of results.
10. Weaning Trial Failure:	If patient fails the Weaning Trial by protocol criteria, resume previous ventilator settings. If patient doesn't fail, but looks marginal, request that the physician order another 30 minute breathing trial
11. Weaning Trial Success:	If patient meets protocol criteria for success, request physician order for extubation Assemble equipment and supplies for re-intubation at bedside. If patient appears stable, request a physician order, suction and extubate patient
12. Post-extubation Orders:	Place on appropriate O ₂ device and titrate by 1 liter per minute or 5% increments until O ₂ sat is 95% or greater Continue any nebulized medication treatments Stop previous orders for sedation, pain medication and paralytics and request that any required meds be re-ordered Continue close observation for signs of fatigue or ventilatory failure and notify physician of any significant changes

() Verbal Order Verification

Physician's Signature: _____ Date/Time: _____

***Criteria for Modified t-piece Trial of Spontaneous Breathing**

- Negative inspiratory force of 20cm or more
- Spontaneous respiratory rate of less than 30 breaths per minute
- Spontaneous tidal volume or 300ml or over 5ml/kg
- Vital capacity over 10ml/kg
- Minute ventilation less than 15 liters per minute resting
- Inspired oxygen requirement 50% or less
- Positive end expiratory pressure 5cm or less
- Glasgow coma scale of 8 or greater
- Cough or gag reflex present
- PO₂:FiO₂ ration greater than 200
- Rapid shallow breathing index of 100 or less
- Hemodynamically stable off pressors
- Primary breathing disorder stable or improving

Weaning Trial Protocol Criteria for Failure

- Signs and symptoms of respiratory distress
- Respiratory rate greater than 30 per minute
- Heart rate greater than 120 or less than 50 per minute
- Change in blood pressure of 20mm systolic or 10mm diastolic
- Inspired oxygen requirement greater than 60%
- Carbon dioxide retention of 45mm Hg or above baseline

Patient Identification