VENTILATOR STEER PROTOCOL

Simplified View of Algorithm

Assess patient BID

Does the patient have contraindications to measure Rapid Shallow Breathing Index (RSBI)/Tobin Index?

PEEP > 5, FiO₂ > .45, SaO₂ < 92%, hemodynamic instability, HR >140, unstable angina, increased ICP, neuromuscular blockers, sedation drip, T > 39, or physician has requested patient not to have measurement or trials completed.

NO

*Measure RSBI/Tobin Index for 1 minute with CPAP/PS of 1-5 cm H₂O after appropriate stabilization

*Once MD has given approval for protocol

NO

f/VT ≥ 100 (RR/Vt in liters)

CPAP* trial x2 hours with 1-5 cm H₂O

*May utilize trach collar after first CPAP trial

NO

Trial successfully completed

NO

Record duration of trial and post-trial Tobin Index Score

Start at the beginning of algorithm for 2nd trial within same day

NO

If after 2 days, patient does not achieve 2 hours, then classify as "Failure of CPAP trial, Not Progressing" and notify MD

YES

Contact MD to extubate patient or for further plans

YES

Record duration of trial

Start at beginning of algorithm for 2nd trial

NO

If after 2 days patient does not tolerate decrease in support, classify as "Failure of Pressure Support Trial, Not Progressing" and notify MD

**Augmented Pressure Support Trial x 30 minutes

1) If no previous PS trial: Set PS to 20 and decrease by 5 until RR = 25-35
2) If previous PS trial lasted < 30 min: PS unchanged from last trial
3) If previous PS trial lasted 30 min: Decrease PS by 5 cm H₂O

** If SIMV/PS is preferred, refer to page 197 in PDP manual or speak to RCP for details

Note: This algorithm to be used to assist in clinical efficiency but is not a substitute for clinical judgment

© 2001