

Ventilator Management & Spontaneous Awakening Trials (SAT)

Nursing Education

Summary

The background features a complex, abstract design of overlapping, semi-transparent blue triangles and polygons. The colors range from a very light, pale blue to a deep, dark navy blue. The shapes are layered, creating a sense of depth and movement. The overall composition is modern and clean, typical of a corporate or professional presentation.

FOR ALL Ventilated PATIENTS:

Done *TWICE* a day, *EVERY* day!

DOCUMENTED UNDER “Critical Care Flow Record” → “Document ventilator Management”

1. RN performs/documents “SAT Safety Screen”

- ▶ Fail = STOP
- ▶ Pass = continue w/ step 2



2. RN performs/documents “SAT”

- ▶ Fail = STOP
- ▶ Pass = continue w/ step 3



3. RT performs/documents “SBT”

- ▶ Pass/Fail

The image displays three overlapping screenshots from a clinical information system:

- Top Screenshot:** A 'Process Care Items' window showing a list of care items for a patient. The 'Critical Care Flow Record' item is highlighted with a green box.
- Middle Screenshot:** A 'Critical Care Flowsheet' window for '05/30/1348'. It shows a 'Document ventilator management:' section with a table:

	Document ventilator management:
1	Yes
2	No

A green arrow points to the 'Yes' entry in row 1.
- Bottom Screenshot:** A 'Ventilator Management' window showing a 'SAT safety screen pass/fail:' section with a table:

	SAT safety screen pass/fail:	Proceed with SAT if:
1	Pass	No Agitation
2	Fail	No Myocardial ischemia
		No Paralytics
		No Abnormal intracranial pressure
		No Active seizures, No withdrawal from alcohol

Details

The background features a complex, abstract design of overlapping, semi-transparent blue triangles and polygons. The colors range from light sky blue to deep navy blue. The shapes are layered, creating a sense of depth and movement. The design is primarily concentrated on the right side of the frame, with some shapes extending towards the left.

Where to document?

Critical Care Flow Record → Document ventilator management

The image shows a screenshot of a medical software interface. The main window is titled "Process Care Items" and displays a list of care items. The "Critical Care Flow Record" item is highlighted with a green box. A secondary window titled "Critical Care Flowsheet 05/30 1348" is overlaid on the right, showing a list of items to document. The "Document ventilator management:" item is highlighted with a green box, and a green arrow points to the "1 Yes" option.

Process Care Items Window:

Current Date/Time LW I: 00 of 51

Document Now Document Inter's Add Interv Select Interv's Change Status View History Order Detail Edit Text

Patient [redacted] Status [redacted] Room [redacted]

Resuscitation Status Full Code Admit [redacted] Bed [redacted]

Attend Dr [redacted] Age/Sex [redacted] Location [redacted]

Start Date [redacted] at 0000 End Date [redacted] at 2359 Med Edit [redacted] Un [redacted]

Include A,D AS,CP,MO,OE,PS 1:99 OWN INT Acuity [redacted]

Care Items	Sts	Directions	OD	Doc	S
History					
-Admission Health History +	A		4d	C	
Assessments					
-Admission/Shift Assessment +	A		6h	C	
-Quick Start +	A		3d	P	
-Safety/Risk/Regulatory +	A		6h	C	
-1st Point of Contact MRSA/TB/RESP +	A		4d	C	
-Pain Assessment +	A		6h	C	
-Frequent Neuro Checks +	A		10h	C	
-RASS/CAM ICU +	A		1d	C	
-Sleep Apnea Screening +	A		4d	C	
Routine Care					
-Vitals/Ht/ Wt/ Measurements +	A		1d	C	
-Vitals/Resp/Alim Monitor +	A		2d	M	
-Critical Care Flow Record +	A		4h	C	
-Clinical Monitor Interface +	A		2h	M	

Critical Care Flowsheet 05/30 1348 Window:

Document ventilator management:

- 1 Yes
- 2 No

Document vitals: >

Document pre transfusion vitals: >

Document ventilator management: >

Document glasgow coma scale: >

Document RASS/CAM ICU: >

Document train of four: >

Document intake and output: >

Document lines, drains and airways: >

Document IV drip: >

Document PAR assessment: >

(End) >

RN: SAT Safety Screen

Ventilator Management

SAT safety screen pass/fail:

- 1 Pass
- 2 Fail

Proceed with SAT if:

- No Agitation
- No Myocardial ischemia
- No Paralytics
- No Abnormal intracranial pressure
- No Active seizures, No withdrawal from alcohol

SAT safety screen pass/fail:

SAT safety screen failure reasons:

SAT pass/fail:

SAT failed reason:

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**FAIL = *STOP* NO SAT (or SBT) @ this time
NO NEED TO DOCUMENT ANY FURTHER**

PASS = Proceed to SAT

Assess if patient is a candidate for Spontaneous Awakening Trial (SAT)??

Fail = Not Ready for SAT:

- Uncontrolled anxiety, agitation or pain & receiving escalating sedation/analgesia
- Respiratory rate > 35/min
- Acute cardiac dysrhythmia
- SpO2 < 88%

Pass = Ready for SAT:

- No agitation
- No myocardial ischemia
- No paralytics
- Normal intracranial pressure (if being measured)
- No active seizures
- No alcohol withdrawal

RN: SAT

Ventilator Management

OK SAT pass/fail:

- 1 Pass
- 2 Fail

SAT safety screen pass/fail:→Pass

SAT safety screen failure reasons:

SAT pass/fail:→

SAT failed reason:

(Next Page)

FAIL = *STOP* NO SBT @ this time
Resume sedatives at ½ original rate, then titrate to RASS as ordered.

PASS = Proceed to SBT (*Notify RT*)

Hold sedation to achieve
RASS of 0 to +1
(Calm & Cooperative)
In MOST patients, this
means to STOP sedation.

Fail = Not Ready for SBT:

↑ agitation, pain (CPOT), anxiety
RR > 35
ACUTE cardiac dysrhythmias

Pass = Ready for SBT:

No Increased Tachycardia, Tachypnea,
Hypertension
No Decreased SpO₂

Great!

Call the Respiratory Therapist to start
SBT!