



INITIAL VENTILATOR & EARLY EXTUBATION GUIDELINE (25-27 WKS)

v.10-8-20

PLACE ON CONVENTIONAL VENTILATOR: Initial settings: SIMV/VG; TV 4-6ml/kg; PEEP 6; Rate 30; Ti 0.3s; PIP 25 limiting pressure; PS 8 (Goal of PS is to attain comfortable WOB, not to match TV of vent breaths). Consider changing to PC/PS if unable to maintain on VG due to airleak

LAB WORK:

- iSTAT gases every 4h x 24h and prn if intubated. Consider decreased frequency if TCOM in place and correlating, or after 24h.

MEDICATIONS:

- See Surfactant Delivery Guidelines.
- Caffeine 25 mg/kg IV x 1 load upon admission, then 10 mg/kg IV q 24hrs.
If extubation is 12-24hrs after loading dose, give 1st maintenance dose just prior to extubation.

ADDITIONAL CONSIDERATIONS:

- CXR at least q day until extubated to monitor chest expansion. CXR within 2h after any surfactant.
- Transcutaneous pCO₂ monitor.

BLOOD GAS CRITERIA FOR VENTILATOR MANAGEMENT:

Age		Immediate Evaluation *Notify Provider* Recheck gas 30-60” after intervention	Increase PIP pCO ₂	Hold pCO ₂	Wean PIP pCO ₂	Immediate Evaluation *Notify Provider* Aggressive Wean Recheck gas 30-60”
0-72h	ABG/CBG	pH <7.2 OR pCO ₂ >70	56-70	45-55	40-45	pH >7.45 OR pCO ₂ <40
3+days	ABG/CBG	pH <7.2 OR pCO ₂ >70	61-70	50-60	40-49	pH >7.45 OR pCO ₂ <40

- Notify Provider if FiO₂ >50% or rapidly increasing.
- Any value in “immediate evaluation” category takes precedence.
- Any gas rechecks due to “immediate evaluation” category are in addition to routinely scheduled gases.
- Wean as tolerated with goal to achieve extubatable settings in ≤ 24 hrs.

EXTUBATION CRITERIA:

- HFOV:** FiO₂ <0.4; MAP ≤10; Delta P ≤15; pCO₂ <60
Avea: FiO₂ <0.4; Rate 20; PEEP 5. PIP based on weight:

Weight	<750 gm	750-1000 gm	1001-1500 gm	>1500
Total PIP	13 cm H₂O	14 cm H₂O	15 cm H₂O	16 cm H₂O

- Hold all sedation for at least 12h prior to extubation. Consider Narcan/Flumazenil rather than reintubation if oversedation occurs post extubation.
- Call MD/NNP just prior to extubation.
- Refer to NIV order set.
- Follow Intubation & Extubation Criteria, post-extubation gas criteria (on NIPPV order set)
- If extubation fails, consider conventional ventilation after reintubation.