My Patient May Be Ready to Come Off the Ventilator… Now What Do I Do?

1) Assess Readiness for a Spontaneous Breathing Trial

Is the primary problem getting better?
Are they requiring an F_{I_2}O_2 < 0.4 and a PEEP < 8 cm H_2O?
Is the minute ventilation ≤ 15 L/min?

If the answer to all questions is “Yes,” proceed to the next step. If the answer is “No,” continue volume assist control

2) Lighten Sedation (often referred to as Spontaneous Awakening Trial, SAT)

Turn propofol off. Some patients may require a low-dose of propofol due to anxiety around the time of the spontaneous breathing trial

3) Start Spontaneous Breathing Trial (SBT)

Place the patient on Pressure Support of 5 cm H_{2O} with a PEEP of 5 cm H_{2O} for 30 minutes

4) Assessing the Spontaneous Breathing Trial

5) Assess Mental Status and Ability to Protect Airway

Normal mental status: Extubate patient

Altered mental status: Extubate patient if they have:

• A good cough
• A gag reflex
• No-to-minimal airway secretions