**ICU Extubation Version 1 5/29/14**

**Nursing Orders**

 Incentive spirometry cough and deep breathing every 2 hours while awake for 48 hours after extubation

**Respiratory**

 Extubate

 Oxygen Delivery RN/RT to Determine Titrate to maintain Oxygen saturation greater than 90%

 Blood gas, arterial 2 hours after extubation

 CPAP May use home equipment and settings [ ] Yes [ ] No

Frequency \_\_\_\_\_\_

Duration \_\_\_\_\_\_\_

Additional instructions \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medications**

 ***Bronchodilators : Nebulized***

 albuterol-ipratropium 2.5 mg-0.5 mg/3 mL soln for inhalation (DUONEB)

 3 milliliter by nebulizer every 4 hours

 3 milliliter by nebulizer every 4 hours, while awake

 albuterol 2.5 mg/0.5 mL neb solution (VENTOLIN)

 2.5 milligram by nebulizer every 4 hours

 2.5 milligram by nebulizer every 4 hours, while awake

 2.5 milligram by nebulizer every 2 hours as needed for shortness of breath or wheezing

 ipratropium 0.5 mg/2.5 ml neb solution (ATROVENT)

 0.5 milligram by nebulizer every 4 hours

 0.5 milligram by nebulizer every 4 hours, while awake