**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