

## 招 2 Mechanical Ventilation: Initiation, Management and Weaning by Respiratory Care Practitioners in the U.S.A.

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This paper presents specifics of therapist directed protocols relating to the management of mechanical ventilation by Respiratory Care Practitioners (RCPs) in the U.S.A. Decision making criteria are detailed for the management and weaning of patients in intensive care units by Respiratory Care Practitioners. The role of the RCP in the management of mechanical ventilation in the U.S.A. is explained. The paper further explores adverse incidents during mechanical ventilation which may be prevented by the use of standardized treatment protocols managed by RCPs specifically educated in these processes.

The clinical implications of respiratory therapists using standardized protocols are discussed in the context of the following: infection-control practices, patient-ventilator system checks (monitoring), clinical use of arterial blood gases, inhaled bronchodilator administration and weaning from mechanical ventilation. The paper will present data documenting that respiratory therapist directed protocols

can reduce intubation time, improve patient outcome and reduce length of stay for hospitalized patients without increasing adverse events or mortality. Comparative data will be presented for therapist directed respiratory care and physician directed respiratory care. Finally, the paper identifies other potential benefits resulting from respiratory therapists using standardized protocols for the management of mechanical ventilation.