

Goal:

1. SBT is a very good tool to assess patient readiness for extubation
2. Continuously assess readiness to wean ventilation
3. Consider extubation when patient can demonstrate adequate respiratory drive, PEEP<6cmH2O, MAP 7cmH2O, either set or need to maintain VG <4-5ml/kg, FiO2 30% or no change from Pre SBT oxygenation requirements

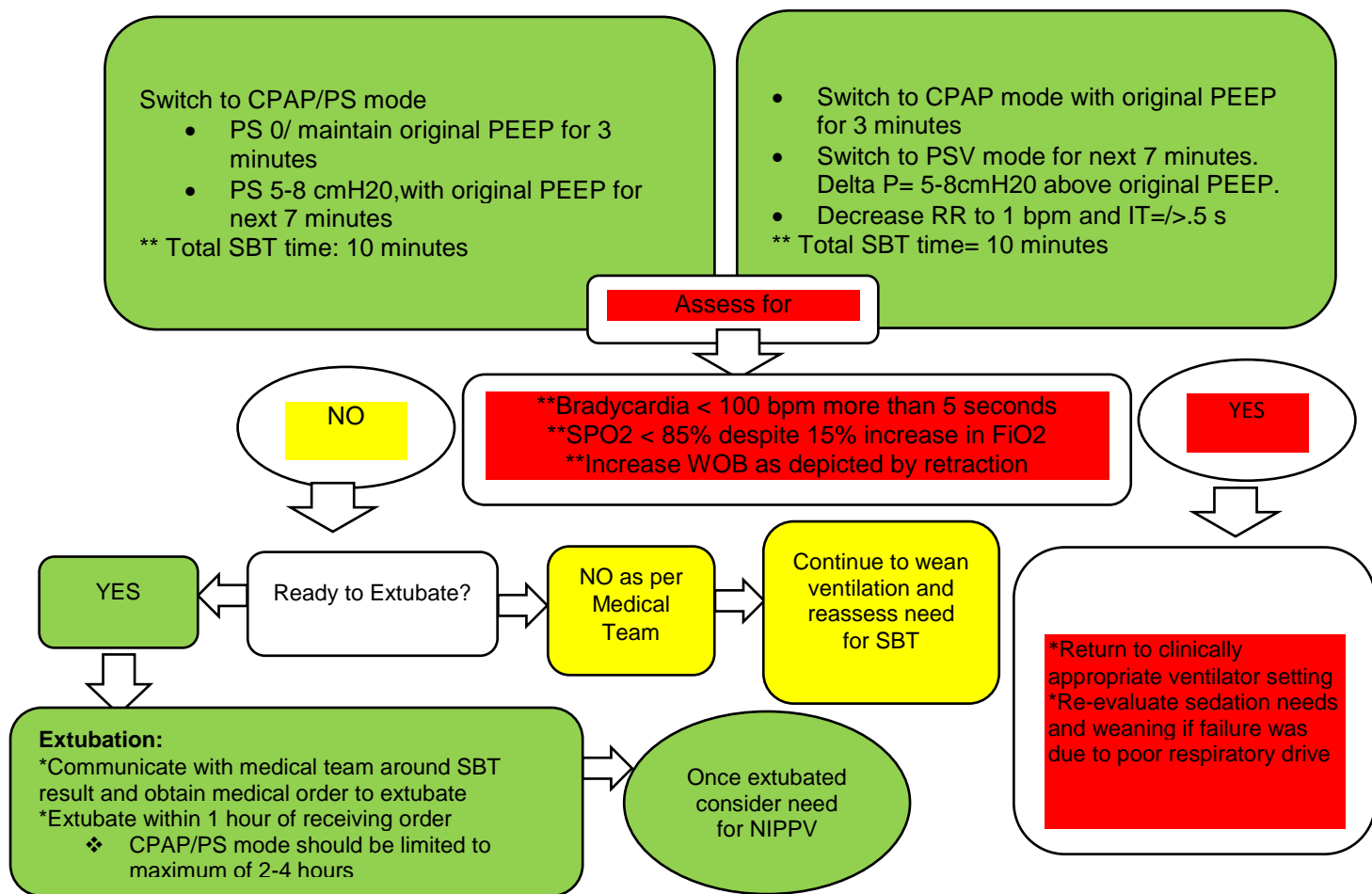
Patient status:

1. Stable Temperature (exception: therapeutic hypothermia)
2. Stable vital signs (HR>100 bpm, SPO2 >85%,spontaneous breathing)
3. Consider presence of gag reflex
4. Blood gases and or/Co2 monitoring in target ranges
5. Blood pressure stable without inotropes
6. Sedation reviewed
7. SPO2 within appropriate range as per NICU guideline or MD's order

Ventilator Status:

1. Set RR =/< 45 bpm
2. Vt=4-6 ml/kg
3. Mean airway pressure =/< 7 cmH2O
4. PEEP =/< 6cmH2O (if extubating to NIV-CMV may accept PEEP > 6cmH2O)
5. FiO2=/< 30%

Spontaneous Breathing Trial Algorithm



"Clinical guidelines are guidelines only. The interpretation and application of clinical guidelines will remain the responsibility of the

Figure 1: Algorithm for weaning from Conventional Ventilation using extubation bundle