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USING MULTIPLE STRATEGIES CARE TO IMPROVED UNPLANNED EXTUBATION IN RESPIRATORY CENTER

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INTRODUCTION

Patients with successful unplanned extubations had significantly shorter MV days, higher overall weaning rate, and lower mortality than those with unsuccessful unplanned extubations. To evaluate the effectiveness of a bundle care to reduce unplanned extubations in a respiratory care center and to verify the factors associated with unplanned extubations. Patients receiving MV should be assessed daily for weaning indications to reduce unplanned extubation ,delayed extubation, and therefore, effort to decrease unplanned extubations occurrence.

RESULTS

Between June 2022-Dec 2022 ,before the implementation of the intervention A total of 182 intubations were performed.there were 5 patients have unplanned extubations events in the respiratory care center, with an incidence rate of 3.1% to 5.4%. after the intervention with Intervention study was in a medical center hospital in Taiwan respiratory care center between June 2022-Dec 2022 . All ventilated patient were included. The multiple strategies care including:new tracheal tube fixation model, daily pause sedation assessment , identification of patient at risk of unplanned extubations,teaching using of creative restraints,Communicate with the patient every day to confirm the patient's willingness and ability to cooperate with the treatment,and debriefing after unplanned extubation episodes. No one has unplanned extubations , the incidence rate of unplanned extubations was effectively improved.

AIM

- 1.Using the bundle care to reduce unplanned extubation in a respiratory care center.
- 2.Factors associated with unplanned extubation.
- 3.Daily assessment reduces delayed extubation.

Keywords: respiratory care center, multiple strategies care, unplanned extubation,

Conclusion

Patients with failed unintended extubation not only have a poorer prognosis but also have an increased length of hospital stay. Therefore, the use of multi-strategy nursing can effectively improve unexpected extubation and effectively improve the quality of care.

METHOD

Intervention study was in a medical center hospital in Taiwan respiratory care center between June 2022-Dec 2022 . All ventilated patient were included. The multiple strategies care including:new tracheal tube fixation model, daily pause sedation assessment , identification of patient at risk of unplanned extubations,teaching using of creative restraints,Communicate with the patient every day to confirm the patient's willingness and ability to cooperate with the treatment, and debriefing after unplanned extubation episodes.

改良式氣管內管固定方式。



氣管內管組合式照護。



溝通卡



每日評估病人自拔管路風險

強化約束處置評估技巧

- A.躁動病人：使用約束筒+約束帶+固定於床架上
B.意識不清或可配合病人：使用約束筒+約束帶



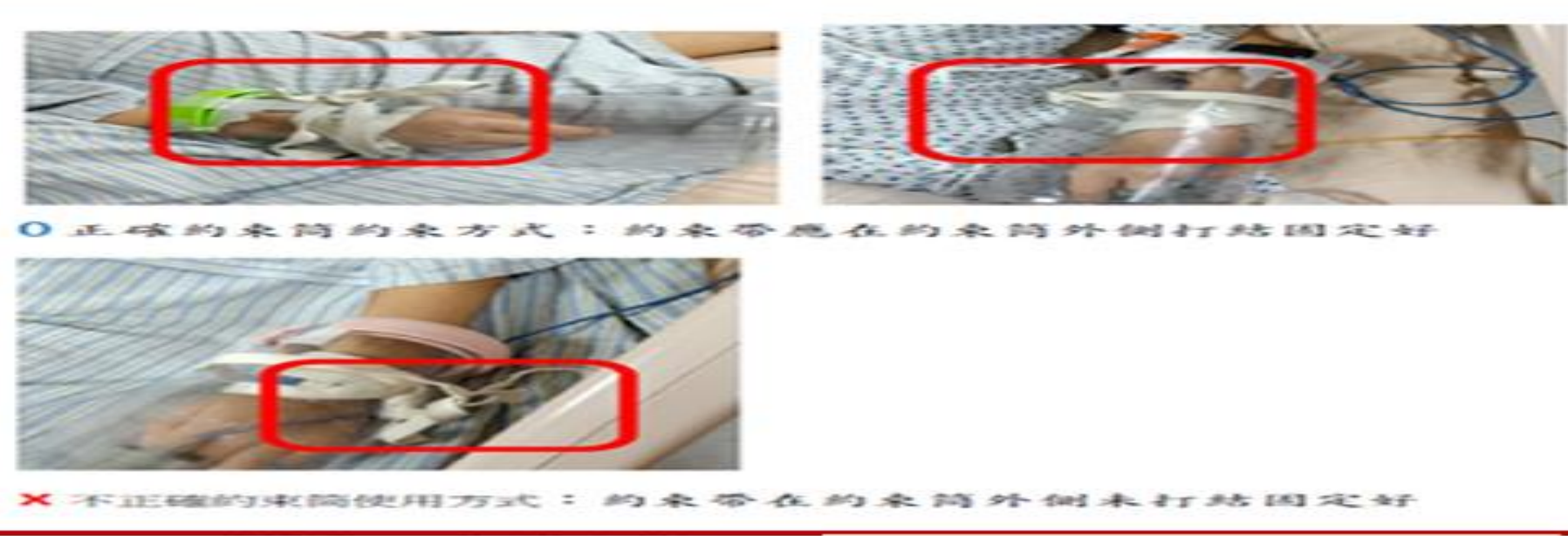
躁動病人：使用約束筒+約束帶+固定於床架上



意識不清或可配合病人：使用約束筒+約束帶

教導正確約束技巧

- A. 依照病人手臂狀況選擇大小適中的約束筒，避免病人掙脫約束筒
B. 落實正確約束筒約束方式：約束帶應在約束筒外側打結固定好



躁動病人：使用約束筒+約束帶+固定於床架上

意識不清或可配合病人：使用約束筒+約束帶



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精神：誠勤樸慎 創新 宗旨：持續提升醫療品質 善盡社會醫療責任 願景：成為民眾首選的醫學中心