



HURON PERTH HEALTHCARE ALLIANCE

Allergies: NKA or: _____

Weight (kg) _____ Height (cm) _____

SCAN ALL ORDERS TO PHARMACY

HPHA ACUTE RESPIRATORY DISTRESS SYNDROME (ARDS) FOR VENTILATED PATIENTS ORDER SET

See Appendix A "Guidelines for Managing ARDS" for approach to ARDS management

INVASIVE VENTILATION FOR ARDS:

MODE: Assist Control Other _____

VT goal of 4-6mL per kg per patient's ideal body weight

Titrate O2 to keep O2 saturations 88-95% PaO2 55-80 mmHg

PEEP as per ARDSnet Chart High Peep/Lower FiO₂

RT to adjust tidal volume and PEEP as clinically indicated

Recruitment maneuvers PRN

Paralysis - The HPHA Critical Care Neuromuscular Blockade Order Set **must be filled out.**

Prone Positioning

Insert Esophageal Pressure Monitor

ARDS Ventilation PEEP/FiO₂ Table

FiO ₂	0.3	0.3	0.3	0.4	0.4	0.4	0.4	0.4	0.5	0.5	0.6	0.7	0.8	0.8	0.9	1.0	1.0
PEEP	5	8	10	10	12	14	16	18	18	20	20	20	20	22	22	22	24

VITALS/MONITORING:

Obtain patient weight and height

Continuous cardiac monitoring

Continuous SpO₂

Continuous Arterial Line Monitoring

HR, RR, BP Q1H

T Q4H

Intake and Output Q1H

GCS Q____H

Pain assessment Q4H and PRN with each bolus or change in sedation

Assess and document Richmond Agitation and Sedation Scale (RASS) Q4H and PRN with each bolus or infusion change. RASS target is ideally 0 . **RASS TARGET** _____ (Required)

Confusion Assessment Method (CAM)

INVESTIGATIONS:

ABG Q AM and PRN and 30 minutes post vent setting changes

VBG

IMAGING:

X-Ray Chest, portable. Query: _____

OTHER ORDERS:

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SCAN ALL ORDERS TO PHARMACY

APPENDIX A: GUIDELINES FOR MANAGING ARDS

Guidelines for Managing ARDS

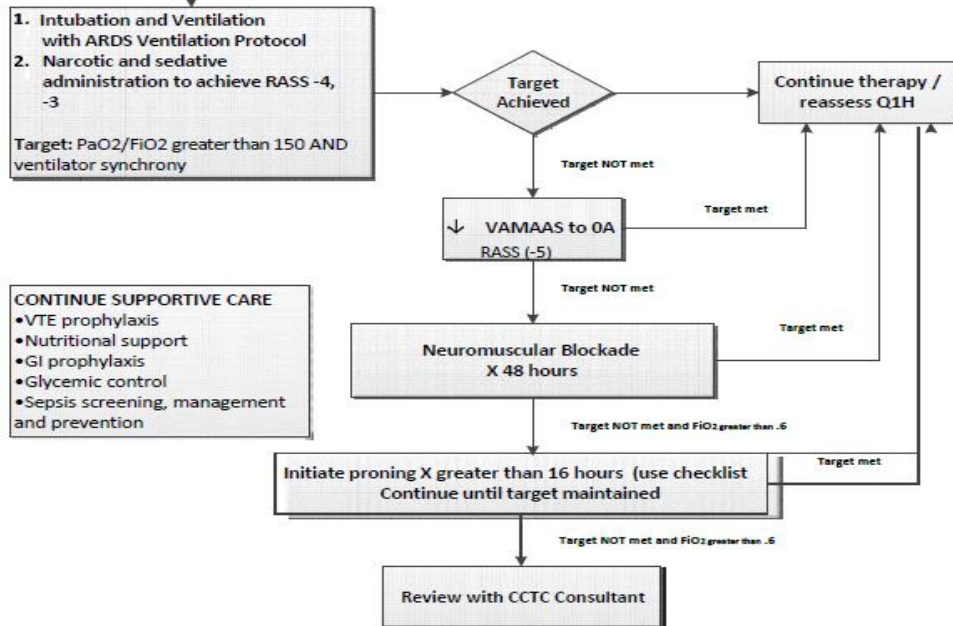
BERLIN CRITERIA FOR IDENTIFICATION OF ARDS

1. Acute onset within 7 days
2. Rule out cardiogenic pulmonary edema/other causes for hypoxemic respiratory failure
3. Bilateral opacities consistent with edema; cannot be fully explained by effusions, collapse or nodules
4. Respiratory failure not fully explained by cardiac failure or volume overload

If above criteria is met, mild, moderate or severe ARDS is defined by the PaO₂/FiO₂ ratio on greater than PEEP 5 cm H₂O. If no arterial line is present, an SpO₂/FiO₂ of less than 315 (where SpO₂ is less than 100%) would indicate a PaO₂/FiO₂ ratio of less than 300.

Mild greater than 200 and less than 300
 Moderate greater than 100 and less than 200
 Severe less than 100

**Management Guideline for Moderate and Severe ARDS
 (Berlin Criteria PLUS PaO₂/FiO₂ ratio less than 200)**



Created by: CCTC Clin Practice June 15, 2017

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