# Pediatric Ventilator Admission Guidelines

Our goal is to optimize patient's success with ventilator free breathing time through strengthening and breathing re-training.

## MEDICAL READINESS GUIDELINES

In addition to a patient's medical clearance, the patient must:

- Meet the pre-admission respiratory criteria below
- Have the potential to tolerate 3 hours of therapy/day
- Plan to minimize return appointments at acute care hospital
- Have an appropriate pulmonology plan for after discharge from Shirley Ryan AbilityLab

#### **MEDICAL STATUS**

- Medical work-up to be complete and with treatment plan agreed upon by primary and consulting services
- Medical records will be reviewed for medication, infection control and treatment criteria, consistent with all Shirley Ryan AbilityLab admissions

### **RESPIRATORY**

- Suctioning requirements at a maximum frequency of every 4 hours
- Trach should be changed within 30 days and > 24 hours before arrival
- Patient vent settings should be stable 48 hours prior to transfer
- Respiratory treatments administered at max of every 6 hours
- Peep must be < 8 cm H20
- No FiO2 > 40%

#### DIET

- PO diet or able to tolerate feedings via G tube
- Unable to accept NG tube with a vented patient

# APPROPRIATE DIAGNOSTIC GROUPS

- Spinal Cord Injury
- Neuromuscular Disease
  - Guillen-Barre Syndrome
  - Transverse Myelitis
  - Acute Flaccid Myelitis
- Neurological Disease
  - Acquired brain injury (traumatic or oncology-based)
  - Febrile infection-related epilepsy syndrome (FIRES)
- Other critical illness neuropathy or myopathy with ongoing recovery



