

HOW TO PREVENT VENTILATOR ASSOCIATED PNEUMONIA IN YOUR HEALTHCARE SETTING?

RESPIRATORY INFECTION OR PNEUMONIA OCCUR IN VENTILATED OR TRACHEOSTOMIZED PATIENTS AFTER 48 HOURS IN HOSPITAL



- ✚ *FEVER OR CHILLS*
- ✚ *INCREASE OF LEUKOCYTE COUNT*
- ✚ *INFECTION MARKERS*
- ✚ *SPUTUM OR RESPIRATORY CHANGES*
- ✚ *CHEST X-RAY SHOWING INFILTRATE*
- ✚ *ISOLATED ORGANISM IN RESPIRATORY CULTURE*

➤ PREVENTION

- HEAD OF THE BED SHOULD BE 10-30
- MOUTH CARE/MOUTH RINSES
- SUCTION PRN /USE OF CLOSED SUCTION
- PUD PROPHYLAXIS
- DVT PROPHYLAXIS
- SEDATION VACATION DAILY
- ASAP WEANING IF CONDITION PERMITS
- POSTURAL DRAINAGE
- CHANGE VENTILATOR TUBINGS IF SOILED
- MAINTAIN ET CUFF PRESSURE IN NORMAL LEVEL
- USE ET TUBES WITH SUBGLOTTIC SUCTION PORTS
- USE OF VAP BUNDLES

