

New protocol aims for early extubation in cardiac surgery patients

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increased to 72.5 percent of patients (153 of 211) following implementation of the fast-track extubation protocol and improved care processes. There were no differences observed in the reintubation rate, length of stay, or 30-day mortality between cohorts.

"Collaborative implementation of a standardized extubation protocol and redesigned patient care processes helped us successfully achieve the goal of reducing intubation time in <u>patients</u> in stable condition after <u>cardiac surgery</u>," the authors write.

One author disclosed financial ties to a medical resource software system.

More information: Abstract/Full Text

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(HealthDay)—The Define, Measure, Analyze, Improve, and Control quality improvement approach can be used to increase the rate of early extubation in adults following cardiac surgery, according to a study published in the June 1 issue of *Critical Care Nurse*.

Myra F. Ellis, R.N., from Duke University Hospital in Durham, North Carolina, and colleagues examined barriers to extubation and designed a protocol-driven approach to extubation for the cardiothoracic intensive care unit. The preimplementation cohort included 101 patients, and the postimplementation cohort included 211 patients.

The researchers reported that in the preimplementation cohort, early extubation (within six hours after intensive care unit admission following cardiac surgery) was achieved in 47.5 percent of patients (48 of 101) who were designated for early extubation on admission to the cardiothoracic intensive care unit. This percentage



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