

Ventilator Associated Pneumonia Prevention

Purpose: To provide guidelines for the critical care healthcare staff in preventing ventilator associated pneumonia (VAP)

Expected Practice:

1. Hand washing shall be performed before and after every patient or equipment contact.
2. Elevation of head of bed (HOB) 30 – 45 degrees. Patients with contraindications for elevated head of bed shall be placed in reverse Trendelenberg.
 - a. Contraindications to elevated HOB
 - i. Present or suspected spine injury
 - ii. Prone positioning patients
 - b. In the NICU patients shall be placed in reverse Trendelenberg if medically appropriate.
3. Daily Awakening Trials shall be performed on appropriate patients as per physician preference.
 - a. If unable to wean sedation the physician shall document in the progress notes the patient's medical condition.
4. Patients shall be assessed for readiness to extubate daily. All attempts shall be made to wean. Once the patient is on minimal ventilator settings weaning parameters shall be performed and documented on the ventilator management flow sheet.
 - a. If unable to wean ventilator the physician shall document in the progress notes the patient's medical condition.
5. Patients shall be placed on peptic ulcer prophylaxis (PUD) unless contraindicated.
6. Patients shall be placed on DVT prophylaxis unless contraindicated.
 - a. Patients shall have both pharmacologic as well as non – pharmacologic prophylaxis provided if indicated by the physicians.
 - b. If contraindication present the physician shall document in the progress notes the patient's medical condition.
7. Early assessment of nutritional needs shall be completed and recommendations performed.

Resources:

1. Institute for Healthcare Improvement. www.ihl.org
2. AACN Practice Alert: Ventilator associated pneumonia (VAP). (5/2004).
3. Pruitt, B., Jacobs, M. (2006). Best practice interventions: How can you prevent ventilator – associated pneumonia. *Nursing 2006* 36 (2) 36 – 42.
4. Evans, B. (2005). Best practice protocols: VAP prevention. *Nursing Management 2005* 36 (12) 10-16.
5. Oral Care Guidelines. LSUHSC – Shreveport. Critical Care