Date:	Patient's sticky label
Time:	

Name of RT / Doctor:

Non-Cardiac ERT / Cardiac ERT (circle one)

Extubation Readiness Test (ERT) Worksheet

Screen MV Patients Daily between 6am - 10am Is SBS Sedation score -1 to +1?



Do not start SBT Address sedation with ICU team



1. ERT Screening and Readiness Parameters No planned procedure with GA in the next 24 hours? \(\text{D} \) Y		
140 planned procedure with off in the next 24 hours.	es □ No	
No increase in ventilator settings for the past 12 hours?		
No muscle relaxants for the past 12 hours for patients who have received continuous IV muscle		
relaxants for at least 24 hours?		
Spontaneous respirations within acceptable parameters?	es □ No	
• Exhaled $V_T \ge 4 \text{ mL/kg}$ and $PIP \le 20 \text{ cm H}_2O$		
• PEEP ≤ 8		
• SpO ₂ 92 – 97% on FIO ₂ \leq 0.5 in patients without congenital heart disease or patients with		
acyanotic heart defect		
• SpO ₂ \geq 75% on FIO ₂ \leq 0.4 in patients with cyanotic congenital heart disease		
RR within target range for age?		
Age RR		
< 1 year < 30 – 40 /min		
1-5 years $25-40 / min$		
5-12 years $20-25 / min$		
> 12 years		
Acceptable blood gas and lactate $< 2 \text{ mmol/L}$ within last 12 hours and with pH > 7.3 ?	es □ No	
Acceptable haemoglobin > 8 g/dL?	es □ No	
Low dose of sedatives and adequate level of consciousness	es □ No	
State Behavioural Scale (SBS) sedation score -1 to +1		
• Patient on less than 2 of these sedatives: <u>Midazolam</u> infusion ≤ 2 mcg/kg/min; <u>Morphine</u>		
infusion $\leq 20 \text{ mcg/kg/hr}$; $\frac{\text{Fentanyl}}{\text{Infusion}} = 3 \text{ mcg/kg/hr}$; $\frac{\text{Ketamine}}{\text{Ketamine}} \leq 10 \text{ mcg/kg/hr}$		
Patient to be able to follow commands. For patients who are unable to follow commands,		
there should be spontaneous eye opening and/or spontaneous limb movements		
Stable hemodynamically and with acceptable blood pressure and HR?	es □ No	
• 1-2 vasoactive drugs with no increase in rate for the last 12 hours		
Adrenaline ≤ 0.1 mcg/kg/min Age Systolic blood pressure (SBP)		
Age Heart Rate Systone blood pressure (SBT) Age Heart Rate < 1 month > 60 mmHg		
110 160/min 1 month to 1		
> /0 mmHg		
1-5 years 95 - 140/min SRP > 70 + (age in years x 2)		
$\begin{vmatrix} 5-12 \text{ years} & 80-120/\text{min} \end{vmatrix} > 1 \text{ year}$		
> 12 years 60 – 100/min	es □ No	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	es No Piscuss with	
button not more often than every 2 nours unless otherwise agrees of 100 team	n to proceed	
	es \square No	
	iscuss with	
	n to proceed	
· '	es □ No	



For NON-CARDIAC patients:

Perform SBT for 2 hours. Settings: Mode of Pressure Support Ventilation (Spont), current FIO₂, current PEEP and PS level based on ETT size

 $(ETT 3.0 - 3.5, PS = 10; ETT 4 - 4.5, PS = 8; ETT \ge 5, PS = 6).$

May titrate to a PS of 5 cm H₂O if patient tolerates initial PS setting for 1 hour.

FOR CARDIAC patients, perform cardiac SBT:

Begin SBT as per for NON-Cardiac patients with PS based on ETT size, current FIO₂ and current PEEP for 1 hour followed by SBT with PS = 0 for another 1 hour

If any checks above are NO (except for items with *), do NOT begin SBT and discuss with ICU team.



2. Monitoring Patient During SBT		
If SBT not performed despite meeting screening criteria, indicate reason here:		
SBT to be terminated immediately if patient displayed any of the following at any point during the SBT (place patient back on previous ventilator settings and inform ICU team):		
Desaturation	□ Yes □ No	
• SpO ₂ < 92% in patients without congenital heart disease or patients with acyanotic heart defect		
• SpO ₂ decrease by $> 5\%$ from baseline in patients with cyanotic congenital heart disease		
RR increased above normal range	□ Yes □ No	
Exhaled $V_T < 4 \text{ mL/kg}$	□ Yes □ No	
Respiratory distress indicated by accessory muscle use, diaphoresis, nasal flaring	□ Yes □ No	
Hemodynamic compromise	□ Yes □ No	
• HR ± 20% from baseline		
• BP \pm 20% from baseline		
Patient went into apnea with ventilator backup ventilation	□ Yes □ No	
ETCO ₂ > 55 mm Hg or increase by 10 mm Hg or by 20% from baseline	□ Yes □ No	
3. Post SBT	CODE 1	
If all above checks in section "2. Monitoring Patient During SBT" are NO at the end of 2 hou		
blood gas. Inform ICU team of patient readiness for extubation, set time for extubation and de	ecide on post-	
extubation respiratory support level. Inform RN to hold feeds if not already done so. Ensure order to extubate is entered into patient's electronic		
medical record before extubation can proceed.		
inedical record before extubation can proceed.		
If order to extubate not given, please document reason(s) in comments section and place patient back to previous ventilator settings		
□ Upcoming surgery or procedure (e.g. MRI) □ No provider to monitor extubation		
□ Excessive suctioning □ ICU team preference □ Others:		
Comments:		