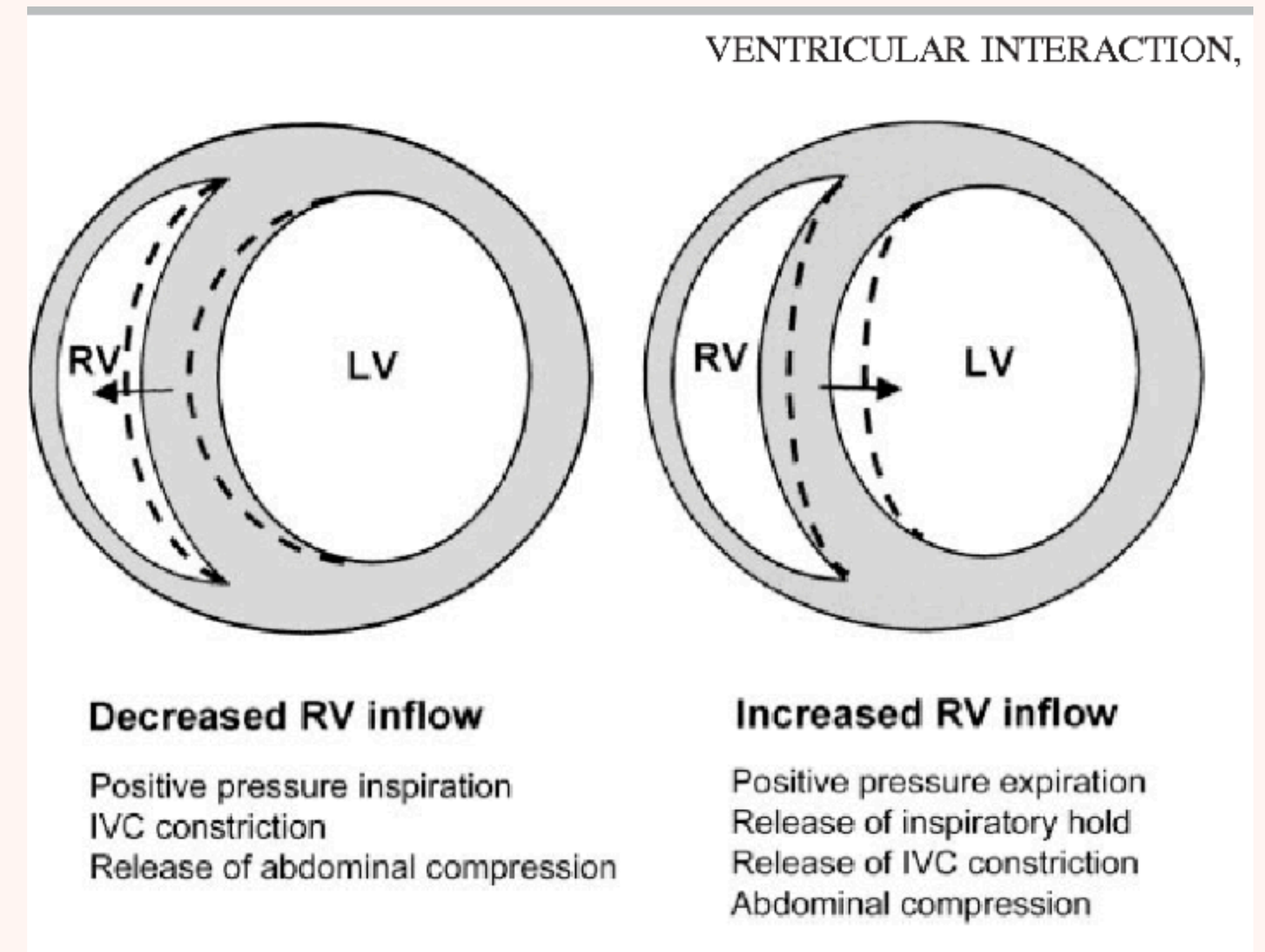


# MECHANICAL VENTILATION

- rise in intrathoracic pressure impedes filling
- extra alveolar capillaries compressed - increasing afterload
- can lead to marked systolic pressure/SV variation mimicking hypovolaemia
- Overdistension of lung leads to increase in PVR



# RV ASSESSMENT

- raised JVP, Kussmaul's sign (paradoxical rise in JVP during inspiration)
- CVP
  - increasing CVP in RV dysfunction bad sign
- evidence of organ hypo perfusion (renal, lactate, liver)
- BNP
- ECG can be normal, RAD, RBBB, RVHT, RV strain pattern S1Q3T3
- CXR limited due to RV position. lateral CXR best view where enlarged RV will fill the retrosternal space
- TTE
- TOE
- PA catheter

