Protocolized weaning management for mechanically ventilated patients in the ICU

Ineffective weaning management can lead to high costs and lengthly weaning processes

Mechanical ventilation is associated with $27 billion in annual cost in the U.S., representing 12% of all hospital costs. The weaning process accounts for ~25% total time on a ventilator.

300,000 mechanically ventilated patients in the U.S. per year

TOO LATE

Failure to recognize ventilator withdrawal potential results in increased costs and lengthened stays.

TOO EARLY

A failed extubation is associated with increased mortality risk.

EVIDENCE

Protocol-driven weaning has been shown to reduce costs and length of stay.

THE SOLUTION

Vital Sync™ weaning readiness and spontaneous breathing trial (SBT) monitoring app

Weaning readiness:

- Set weaning criteria based on AARC standards or your hospital's protocol
- Continuously monitor patients and receive alerts when they are ready to begin a trial

SBT monitoring:

- Track the breath-by-breath progress of your patient through the trial from wherever you are
- Define guardrails that determine the trial's progress
- Receive an alert if your patient falls outside those thresholds

Learn more at medtronic.com/vital-sync-sbt-app