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patient with a stable lung problem, what type of ventilation is best for them? Pressure regulated volume control. (KM) A patient comes in to the ER with a severe injury and the physician wants the patient put on mechanical ventilation, what type of support would be needed and in what ...

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WorkBook Answer Key ... Intubate and place on mechanical ventilation. (The patient is suffering from a neuromuscular disorder and is already showing signs of breathing difficulties. She is having difficulty swallowing, which necessitates protection of the airway.) 2. BSA = 1.82 m²; 1.82 m² × 3.5 = 6.4 L/min

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Before an ABG, when physician has entered new orders, before hemodynamic data or bedside pulmonary function data are measured, when vent changes have been made, acute change in pt's condition, when pt. returns from testing, when vent performance is questionable

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However, if the patient's secretions cannot be mobilized, the patient may require intubation and mechanical ventilation. 3. VC-CMV or PC-CMV could be used. With VC-CMV, the tidal volume should be between 6 and 8 mL/kg mL. Using a volume of 600 mL would require a ventilator frequency of 14 ...

mechanical ventilation therapy pilbeam's Flashcards and ... Mechanical ventilation because the pt is unconscious, has a ventilation and oxygenation problem, and their SpO2 is really low, plus they cannot achieve an appropriate level of ventilation to maintain adequate gas exchange and acid-base balance: A patient is admitted to the ED with complaints of tingling in their fingers and toes.

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(c) neurological function, (d) renal function, and (e)
gastrointestinal function. 2.

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List the settings that affect ventilation, and then those that affect oxygenation. (ApQ)-Ventilation: RR, Vt or PC, and PS
-Oxygenation: FiO2, PEEP, Itime, Hgb, circulation, adequate ventilation (BH) You are giving an aerosol to a ventilated patient and they look like they are having a hard time taking a breath when they want to.

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