

## SELF-EXTUBATION CASE REVIEW

Definition: self-removal of endotracheal tube, either deliberately or accidentally by a mechanically ventilated patient. The rate of unplanned extubation reported in previous surgical ICU studies ranges between 1.8% and 15%

Name:	Date of Event:	MRN:
Diagnosis:		
Case summary:		
Outcome: reintubated    remained extubated		

<p><b>Type of Self-extubation:</b></p> <input type="checkbox"/> patient-induced <input type="checkbox"/> accidental (coughing, change of position, during bedside procedures)	<p><b>Circumstances surrounding self-extubation:</b></p> <input type="checkbox"/> sedation vacation for SBT <input type="checkbox"/> sedation vacation for neuro exam <input type="checkbox"/> during transport <input type="checkbox"/> during weaning <input type="checkbox"/> during procedure* <input type="checkbox"/> shift change <input type="checkbox"/> multiple prior displacement	<p><b>Risk Factors:</b></p> <input type="checkbox"/> Agitation, anxiety, restlessness <input type="checkbox"/> Psychiatric disorder <input type="checkbox"/> GCS 9-12 <input type="checkbox"/> Male <input type="checkbox"/> Age >69 <input type="checkbox"/> Smoker <input type="checkbox"/> PNA <input type="checkbox"/> ARDs <input type="checkbox"/> Sepsis	<p><b>Provider / RN / RT-related:</b></p> <input type="checkbox"/> inadequate sedation <input type="checkbox"/> nursing experience / supervision <input type="checkbox"/> restraints <input type="checkbox"/> use of controlled medication <input type="checkbox"/> ETT improperly secured <input type="checkbox"/> Overly inflated cuff volume
<p><b>Complications:</b></p> <input type="checkbox"/> Cardiac arrest <input type="checkbox"/> Hypotension <input type="checkbox"/> Damage to larynx <input type="checkbox"/> Bronchospasm <input type="checkbox"/> Edema <input type="checkbox"/> Aspiration of airway secretions <input type="checkbox"/> Bleeding <input type="checkbox"/> Difficulty reintubation	<p><b>RECOMMENDATIONS:</b></p> <p><b>Secure ETT</b></p> <input type="checkbox"/> standardize method for securing ETT <input type="checkbox"/> regular ETT checks (as part of vent system checks) (RTs) <input type="checkbox"/> document ETT position – teeth/gums / post-intubation CXR <input type="checkbox"/> ETT checks before, during and after intra-hospital transports (RTs) <input type="checkbox"/> use of commercial tube holders (ETT with securement devices) <p><b>Prevent Agitation</b></p> <input type="checkbox"/> effective sedation protocol – address pain and agitation <input type="checkbox"/> monitoring ETT cuff pressures and volumes <input type="checkbox"/> ensure vent circuit is maintained on an arm-support <input type="checkbox"/> alternate protocols in place of physical and pharmacological restraints <input type="checkbox"/> fast-track trial of extubation for patients who meet weaning readiness criteria <p><b>Education</b></p> <input type="checkbox"/> provide staff education / updated info on best practices <input type="checkbox"/> surveillance program with QI updates on performance <p><b>Staff</b></p> <input type="checkbox"/> increase staff during nursing interventions		

\*specify procedure \_\_\_\_\_

RASS scores:  
LOS: