

Case #1

A 74-year-old male patient was transferred to Regency after spending forty-six days in an acute care facility. A 900-lb gate fall had fallen on the patient and he was suffering from multitraumas; right multiple rib fractures, left hip fracture, pneumothorax, compression of the lumbar 1 and 2 fractures, and a left femoral neck fracture. A spinal fusion, hip fracture and decubital wound repairs, and a tracheostomy had been performed. The patient arrived at Regency with chronic respiratory failure, was unweanable/ventilator dependent, suffered malnutrition and had several decubitus ulcers.

Care Plan

Prior to admission to Regency, numerous attempts to wean the patient from mechanical ventilation were unsuccessful. He was nutritionally compromised, as well as physically deconditioned. Regency's care plan was to address these issues and provide a consistent, collaborative multidisciplinary team approach to the care of this patient.

Respiratory Progress

The patient was on mechanical rate of fourteen when admitted from the referring facility and was receiving bronchodilators and steroid therapy. Additionally, he required two additional surgeries. Once his wound care and nutritional needs were adequately met, he was gradually weaned to pressure support ventilation. Once on pressure support, the patient was able to tolerate passy-muir speaking valve trials for five to fifteen minutes a day, progressing to several hours a day. He progressed to pressure support ventilation at night, and then was gradually able to tolerate being off the vent for twenty-four hours. After forty-eight hours off the vent, the patient was decaunlated and no longer required oxygen from the ventilator.

Patient Outcome

This patient was discharged to a specialized rehabilitation facility when he was ready for additional physical and occupational therapy. Regency's aggressive therapies, constant team collaboration, vigilant assessment and prompt multidisciplinary intervention resulted in this patient's weaning from long-term mechanical ventilation. The caring attitude and team approach to his management provided the support necessary to meet the demands of weaning and facilitated his independence from the ventilator.

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