Gaylord Hospital’s Pulmonary and Ventilator Weaning Program is now able to provide increased mobility and improved rehabilitation. This is made possible through the purchase of three, high-end portable ventilators. These light-weight, compact ventilators allow vent-dependent patients the chance for early mobilization. This, in turn, lets them realize the benefits of movement and exercise, increases their chances of successful weaning and permits them the freedom to enjoy their surroundings.

**Is every vent patient trialed on the portable vent?**
No, not every patient. We evaluate each ventilator patient for mobility and only when the patient is deemed safe to begin mobilization, is the portable vent used in conjunction with the therapy department. Gaylord uses the portable vents (pv) to transport patients to procedures and to the therapy gyms to receive therapy services.

**What criteria would keep a patient off a portable vent trial?**
Any hemodynamically unstable patient would not use the pv for mobilization. However, the portable vents Gaylord Hospital uses - Flight Medical Flight 60 - have most of the same modes, settings, and capabilities as our standard vents and all patients can use them for transport, or to travel outside of their room with a respiratory therapist present.

**After how many days at Gaylord Hospital does respiratory staff trial the portable vent?**
We do not have a standard time frame. Once PT does their initial mobility eval, we work together to start scheduling time to mobilize the patients. We have worked with PT and recently developed a co-treat board to better coordinate patients using the portable vents during therapy sessions.
How involved is the Gaylord medical staff with the portable vent and its role in the plan of care?
Gaylord’s attending will order the early mobilization pathway upon admission. Physical therapy uses specific criteria to evaluate the patient and deem which mobilizations are appropriate. The pv is set at the same settings as the standard vent, so it does not require a separate physician order for use. However, if a physician wants a patient to mobilize out of the room on the portable vent, they can put in an order to do so. Gaylord’s pulmonary consultants are also involved in the Early Ambulation Program and can request early mobilization for patients they provide consultation to they have not already been assessed by RT and PT.

How many minutes or hours can someone use the portable vent?
The portable vents have a 12-hour battery and additional batteries can be swapped out while in use. As long as the patient is tolerating the pv, there is no time limit to use. The pv also has a screen that can be clearly seen when patient is outdoors.

Does the respiratory therapist (RT) need to remain with patient at all times?
At this time, the pv’s cannot be connected to Gaylord’s Bernoulli ventilator alarm system, so the RT needs to monitor at all times. However, the patients can be allowed to be mobile on the unit with the vent in use since nursing and RT staff is present. Bernoulli and Flight Medic are currently working together on the technology that would make the Flight 60 compatible with the Bernoulli ventilator alarm system.

Is pv used in patients room first?
The patient is trialled on the pv in their room and assessed to ensure it is tolerated, vital signs remain stable and the patient has a comfortable pace while breathing. Once the vent has been placed in use, the patient can travel anywhere that is needed. Usually they start in the hallway for mobilization, but some have gone straight to the gym for therapies. Patients have also gone outdoors to allow for a change of setting, as long as the weather permits.

How does the use of a portable vent fit with the clinical philosophy of treatment at Gaylord?
Gaylord purchased the pv’s to take advantage of the available technology, to allow flexibility and to improve mobilization of ventilator patients. Early use with new vent admissions will allow for quicker out-of-bed-time and sooner progression to walking and therapy. Respiratory therapists want patients to be able to get out of their rooms, see other people, enjoy fresh air and maybe even feel the sunlight on their face. Any illness that renders a person dependent on a ventilator for long or short-term can be very difficult emotionally and psychologically. The team wants to help patients wean faster by mobilizing earlier and for those with difficulty weaning, to enjoy their surroundings and benefit from getting out of the confines of a hospital room, which will have tremendous psychological, emotional and social benefits. Patients can interact with others, see the outside again and start to have more freedom as we work to mobilize them.

What is coming next to benefit patient care?
Gaylord will be one of the beta test sites for all software upgrades on the Flight 60 vent. This enables Gaylord to be a part of cutting edge technology and the possibility to publish studies related to new modes and trends in ventilation. Gaylord will also be the test site for the volume guaranteed mode which is a new mode to be offered on the Flight 60 ventilator. This mode can increase patient’s level of breathing comfortability while on the vent and help the patients to better tolerate mechanical ventilation until they can be successfully weaned.

To speak with a member of the respiratory team at Gaylord Hospital:

Peggy Bartram, MHA, RRT-NPS
Director of Respiratory Care
pbartram@gaylord.org | 203.679.3539

Lorraine Cullen, BA, RRT
Supervisor of Respiratory Care
lcullen@gaylord.org | 203.284.2800 Ext. 3364