

VANDERBILT  UNIVERSITY  
MEDICAL CENTER

**Guideline:** Spontaneous Awakening Trial

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**Content Experts**

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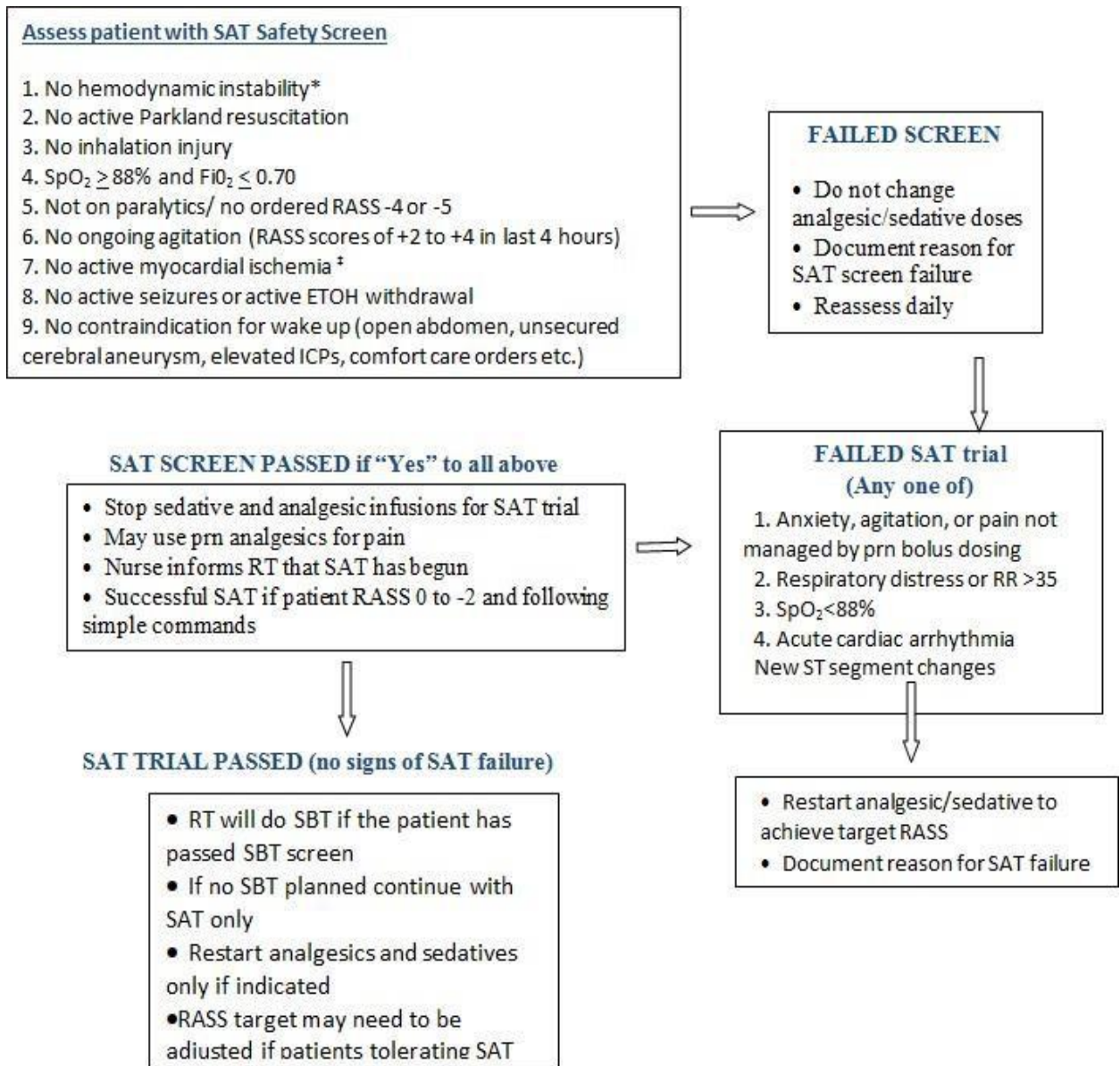
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I. **Population:**

The following protocol applies to all intubated patients in the Burn ICU.

II. **Assessment/ InterventionAlgorithm:**



III. Definitions

‡ No active myocardial ischemia: defined as a troponin > 0.2 µg/L

\*No hemodynamic instability in the previous 4-6 hours: defined as use of 2 concurrent

- vasopressors/inotropes or
- > 7.5 mcg/min norepinephrine or epinephrine or
- > 7.5 mcg/kg/min of dopamine or dobutamine

IV: Required Documentation:

1. Did the patient PASS a SAT Screen?
  - Yes
  - No
  
2. If No- why did the patient fail the SAT screen (choose one of following choices)
  - SAT Safety Screen
    - Hemodynamic instability in previous 4-6 hours\*
    - Currently on Parkland Resuscitation
    - Inhalation Injury
    - SpO<sub>2</sub> < 88% and FiO<sub>2</sub> > 0.70
    - On paralytics or patients' ordered RASS was -4 or -5
    - Ongoing agitation (RASS scores of +2 to +4 in last 4 hours)
    - Current myocardial ischemia
    - Active seizures or ETOH withdrawal
    - Other contraindication for wake up (e.g. open abdomen, unsecured cerebral aneurysm, elevated ICPs >20, comfort care orders etc.)
  
3. If yes, was a SAT performed?
  - Yes
  - No
  
4. Did the patient pass SAT?
  - Yes
  - No
  
5. If No- reason for failed SAT
  - Anxiety, agitation, or pain
  - Respiratory distress or RR >35
  - SpO<sub>2</sub> < 88%
  - Acute cardiac arrhythmia
  - New ST segment changes