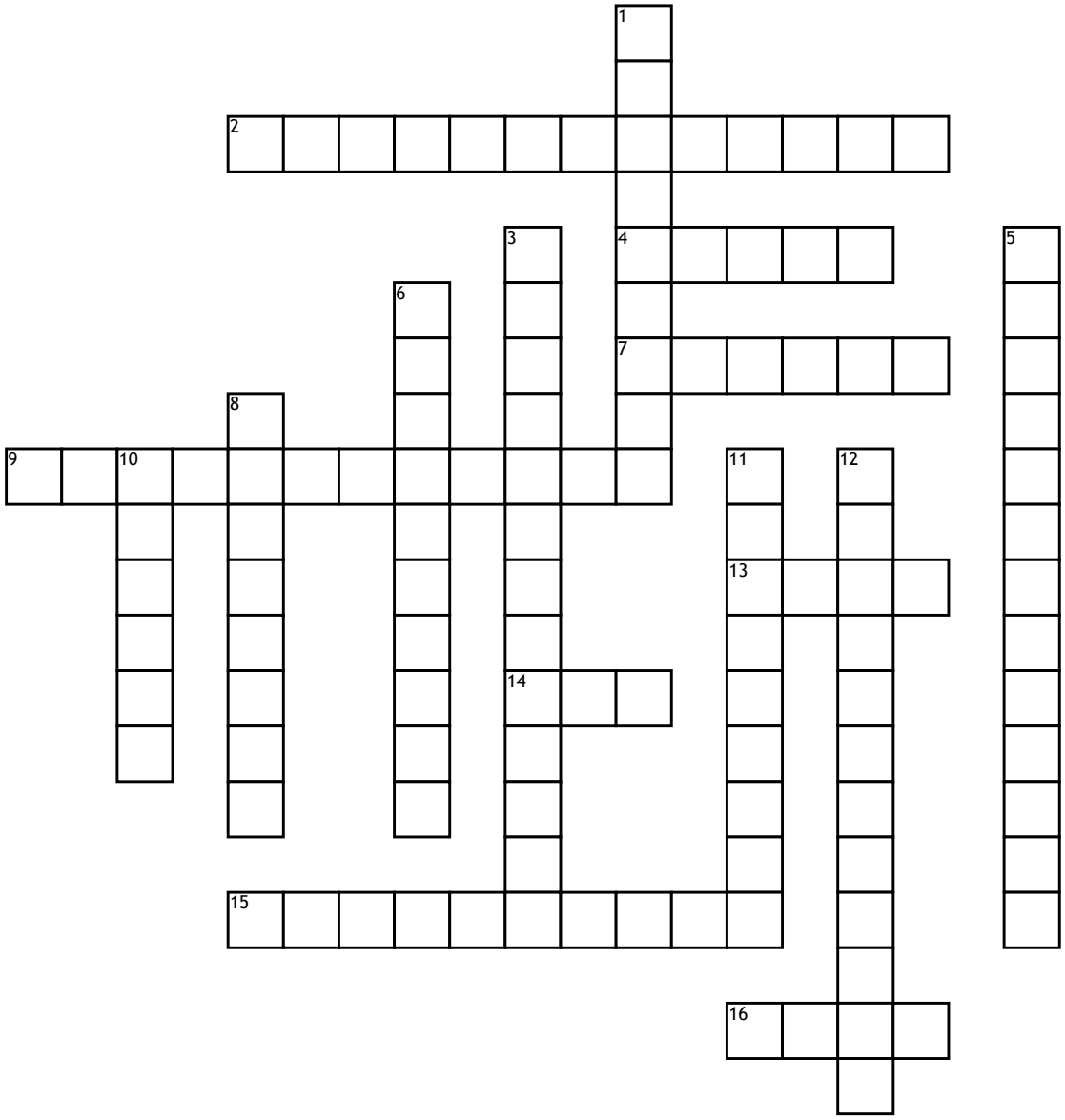
Name: _____ Date: _____

Mechanincal Ventilation



Across

2. atelectasis, barotruma, volutrauma, VAP

4. perfusion without ventilation

7. high pressure, low pressure, volume

9. awakening and breathing, choice of sedation, delirium monitoring, early mobilization, family

13. this setting used to be commonly initiated at 5 and now the standard is 8

14. most successful predictor of ventilator liberation is _____

15. assist control, intermittent mandatory

16. results in diffuse alveolar damage, pulmonary microvascular thrombosis, and low lung compliance

Down

1. ventilation without perfusion

3. Increaseed PEEP can cause decreased _____ (cardiac effect)

5. combats neuromuscular effects

6. reversal of indication for mechanical ventilation, adequate gas exchange, ability to initiate a breath, hemodynamic stability

8. propofol, fentanyl, precedex

10. how to evaluate delirium in ventilated patient

11. oral care, head of bed 30degrees, SBT, sedation holiday, peptic ulcer prophylaxis, OG vs NG, hand hygiene

12. pressure support, pressure control, APRV

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