



Bwrdd Iechyd Prifysgol  
Caerdydd a'r Fro  
Cardiff and Vale  
University Health Board



# ICU: Prone Ventilation

TIME & DATE:

Minimum 7 person Team

Include:

ST5 or above anaesthetics or ICM,  
Prone Team Lead and 5 others

NAME & GRADE & ROLE (S)

1.

2.

3.

4.

5.

6.

7.

Patient ID sticker

## Checks

Team introductions (MANDATORY).....

All team familiar with Cardiff proning technique.....

Ensure patient receiving PEEP = 16cmH<sub>2</sub>O and FiO<sub>2</sub> ≥ 0.60.....

If not, increase PEEP, providing no contraindications – i.e.:

No undrained pneumothorax – if present, drain prior to proceeding

No cardiovascular instability (defined as NAd >0.5mcg/kg/min + MAP <60mmHg)

No uncontrolled ICP (defined as ICP > 25cmH<sub>2</sub>O

CXR – should be performed within 24hrs, if acute deterioration or possible ETT displacement

No of pneumothorax.....

Correct ETT position.....

No large pleural effusion – seek help if uncertain regarding need to site intercostal drain.....

Mandatory ventilation .....

Adequate sedation and paralysis.....

Ensure no imminent need for patient to remain in supine position – e.g. awaiting CVC/ vascath placement,  
echocardiogram, abdominal ultrasound scan, for transfer to alternative location.....

Ensure no contraindications to prone ventilation:

### Absolute

Untrained staff.....

Spinal instability.....

Open abdominal/ chest wounds.....

Undrained pneumothorax.....

Uncontrolled ICP.....

Pregnancy.....

Abdominal compartment syndrome....

Unstable pelvic/ facial fractures.....

### Relative

Difficult intubation.....

Recent tracheal surgery.....

CVS instability.....

Malignant arrhythmias.....

Recent pacemaker insertion.....

Intra-aortic balloon pump.....

Recent thoracic/ abdominal surgery.....

Massive haemoptysis.....

# Prone Ventilation

Prone Procedure

Prone equipment collected including 3 slide sheets, prone sheet, 3 straps, 3 pillows, 2 flat sheets and ECG stickers.....

Prepare bed area ready for prone.....

Allocate job roles to team members.....

Increase the FiO<sub>2</sub> to 1.0 .....

Decide in which direction to turn (Consider the position of Arterial & CVC lines).....

Brief the team and decide actions in the event of an adverse event during the procedure .....

Place the arms to the side (palms facing thighs)

Roll the patient to:

Change the bottom sheet

Insert the slide sheet (excess slide sheet on the side the patient is being turned towards)

Then the prone sheet (On top of the slide sheets top edge level with the shoulder Fig 1.)

Roll the patient back onto their back

Centre the patient on the prone sheet (adjust the patient's position if indicated)

Remove the ECG leads and stickers or any other monitoring if required

Place the 3 pillows horizontally across (Fig 2.). 1. Chest (level with the shoulder clear of the airway); 2. Pelvis and 3. Knees .....

Position straps – Lock the loop of the strap (Clip facing out), onto the handle of the prone sheet on the side the patient is turning to face, place strap through the handle on the other side and lay them over the patient (1 strap over chest, pelvis and knee). .....

Slide the patient so their head is off the bed and slide to the opposite corner of the bed.....

Position the staff - 3 nurses on the side the patient is turning to face, 2 nurses on the other side.....

Staff on the turn side should pull the strap tight with one hand, and brace the patient with the other hand.....

Nurses on the on the other side pull the top slide sheet downwards (ensure the excess slide sheets are free)

1<sup>st</sup> Movement to Turn the patient through 90 degrees on their side .....

2<sup>nd</sup> Movement Lower the patient to the prone position .....

Turn the head to face the ventilator and slide the patient down the bed.....

Unclip and remove the straps and the prone sheet.....

Reattach ECG and any other monitoring.....

Adjust the pillows – ensure the pillows are under the chest, pelvis and knees ) not under the abdomen .....

Brace the patient remove the slide sheets.....

Position the arms in the swimmers position (head facing arm up).....

Place the Kerapro (sacral) under the cheek.....

Ensure there is no pressure on the globe of the eye and that the eyes are closed and protected.....

Check that all drains are unclamped and functioning.....

Check that limbs are not resting infusions/ monitoring lines, reattach all any non- critical infusions disconnected for the turn and return oxygen to baseline.....

TEAM SIGN OUT

**MANDATORY CHECK 1: Position and ventilation crosschecked by adequate tidal volume and etCO<sub>2</sub> trace.....**

**MANDATORY CHECK 2: PaO<sub>2</sub> 15mins post procedure.....**

**MANDATORY CHECK 3: Ensure furosemide 20mg BD for all patients with positive fluid balance and NAd < 0.5mcg with MAP > 60mmHg.....**

**DATE / TIME DUE FOR RETURN TO SUPINE POSITION: \_\_\_/\_\_\_/\_\_\_ \_\_\_:\_\_\_**