

The Role of Respiratory Therapists in Critical Care: Optimizing Ventilator Management and Patient Outcomes

¹Abdullah Sultan Alangari, ²Hamad Mohammed Alsulaiman, ³Ibrahim Mohamed Alfahad, ⁴Majed Nawar Almutairi, ⁵Sahar AbdulRzaq Aljowaiser, ⁶Majdi Fazi Almutairi

¹Corresponding Author, Respiratory Therapy, KASCH
^{2,4,5,6}Respiratory Therapist, King Abdulaziz Medical City
³Respiratory Therapist, National Guard Hospital

Corresponding Author: Abdullah Sultan Alangari

Paper Publication Date: 9th February-2021

Abstract-

Respiratory therapists play a crucial role in critical care settings, especially when it comes to ventilator management for patients in need of respiratory support. This essay explores the importance of respiratory therapists in optimizing ventilator management and improving patient outcomes in critical care. The methods used by respiratory therapists, the results achieved through their interventions, and the implications for patient care are discussed. Ultimately, the role of respiratory therapists in critical care is essential for providing high-quality, personalized care to patients on mechanical ventilation.

Keywords: respiratory therapists, critical care, ventilator management, patient outcomes, mechanical ventilation.



Published in IJIRMPMS (E-ISSN: 2349-7300), Volume 9, Issue 1, Jan- Feb 2021

License: [Creative Commons Attribution-ShareAlike 4.0 International License](https://creativecommons.org/licenses/by-sa/4.0/)



Introduction:

In critical care settings, patients who require mechanical ventilation often have complex respiratory conditions that require specialized care. Respiratory therapists are key members of the healthcare team who are trained to provide respiratory support and manage ventilators for critically ill patients. Their expertise in assessing lung function, adjusting ventilator settings, and monitoring patient response to therapy is essential in optimizing ventilator management and improving patient outcomes.

Respiratory therapists play a vital role in critical care settings, working closely with patients who have acute or chronic respiratory conditions. Their expertise in assessing, managing, and monitoring respiratory function is crucial in the intensive care unit (ICU) and other critical care areas. Here are some key responsibilities and contributions of respiratory therapists in critical care:

Airway Management: Respiratory therapists are skilled in airway management techniques. They assist with intubation, extubation, and the insertion and management of artificial airways, such as endotracheal tubes or tracheostomies. They ensure proper placement and function of these airway devices and provide ongoing monitoring and support.

Mechanical Ventilation: Respiratory therapists are experts in mechanical ventilation, which involves the use of ventilators to support patients who are unable to breathe adequately on their own. They assess patients'

respiratory status, adjust ventilator settings, and ensure proper oxygenation and ventilation. They also monitor for complications and make necessary adjustments to optimize patient outcomes.

Oxygen Therapy: Respiratory therapists are responsible for assessing and delivering appropriate oxygen therapy to patients in critical care. They determine the optimal oxygen delivery method, such as nasal cannula, mask, or high-flow systems, and monitor oxygen saturation levels to ensure adequate oxygenation.

Pulmonary Function Testing: Respiratory therapists perform and interpret pulmonary function tests (PFTs) to assess lung function and diagnose respiratory conditions. These tests help in understanding a patient's respiratory capacity, gas exchange, and overall lung health. The results guide treatment planning and assist in evaluating the effectiveness of interventions.

Arterial Blood Gas Analysis: Respiratory therapists are skilled in obtaining and analyzing arterial blood gas (ABG) samples. ABG analysis provides crucial information about a patient's acid-base balance, oxygenation, and ventilation status. Respiratory therapists interpret ABG results, make recommendations for appropriate interventions, and monitor the patient's response to treatment.

Bronchial Hygiene Therapy: In critical care, patients may have excessive mucus production or difficulty clearing secretions from their airways. Respiratory therapists perform bronchial hygiene techniques, such as chest physiotherapy, postural drainage, and suctioning, to help mobilize and remove secretions, improving lung function and reducing the risk of complications.

Rapid Response and Code Blue Teams: Respiratory therapists are often part of rapid response and code blue teams, which are activated in emergency situations. They provide immediate respiratory support, assist with airway management, and coordinate efforts to stabilize patients in critical condition. Their expertise and quick response can be crucial in saving lives.

Patient Education: Respiratory therapists play a significant role in educating patients and their families about respiratory conditions, treatment options, and self-management techniques. They provide instructions on inhaler use, oxygen therapy at home, and strategies to optimize lung health. Patient education helps promote adherence to treatment plans and empowers patients to actively participate in their respiratory care.

Respiratory therapists work closely with other members of the healthcare team, including physicians, nurses, and occupational therapists, to provide comprehensive care to critically ill patients. Their expertise in respiratory management is essential for optimizing patient outcomes and ensuring the best possible respiratory function in critical care settings.

Method:

Respiratory therapists utilize a variety of techniques and strategies to optimize ventilator management for patients in critical care. These include assessing lung function through arterial blood gas analysis, adjusting ventilator settings based on patient response and clinical indicators, and implementing strategies to prevent complications such as ventilator-associated pneumonia. Respiratory therapists also play a crucial role inaning patients off mechanical ventilation and transitioning them to less invasive forms of respiratory support.

Results:

The interventions and strategies implemented by respiratory therapists have been shown to improve patient outcomes in critical care settings. Studies have demonstrated that early intervention by respiratory therapists can lead to shorter durations of mechanical ventilation, reduced incidence of ventilator-associated complications, and improved overall outcomes for patients on mechanical ventilation. By optimizing ventilator management and providing personalized care to patients, respiratory therapists can help accelerate recovery and enhance quality of life for patients in critical care.

Discussion:

The role of respiratory therapists in critical care is multifaceted and essential for the overall management of patients on mechanical ventilation. Respiratory therapists work closely with physicians, nurses, and other members of the healthcare team to develop individualized care plans that address the unique needs of each patient. Their expertise in assessing and managing respiratory function allows them to optimize ventilator settings, prevent complications, and promote successful weaning from mechanical ventilation.

In addition to their clinical skills, respiratory therapists also provide education and support to patients and their families, helping them understand the importance of respiratory therapy and how it can improve outcomes. By serving as advocates for patients in critical care, respiratory therapists ensure that patients receive the highest quality care and achieve the best possible outcomes.

Conclusion:

In conclusion, respiratory therapists play a vital role in critical care settings by optimizing ventilator management and improving patient outcomes for those on mechanical ventilation. Their expertise in assessing lung function, adjusting ventilator settings, and monitoring patient response to therapy is essential for providing personalized care and ensuring the best possible outcomes for patients in critical care. By working collaboratively with the healthcare team and advocating for patients, respiratory therapists help to optimize care and promote recovery in critical care settings.

REFERENCES:

- 1 .Fuller BM, Mohr NM, Roberts BW. Respiratory Therapist-Driven Protocols Optimize Ventilator Management and Patient Outcomes. *Respir Care*. 2015;60(3):394-8.
- 2 .Gamberini L, Tonetti T, Spadaro S, Zani G, Mazzoli CA, Capozzi C, Giampalma E, Tartaglione M, Cavalli C, Villani P, Pasquini A, Castelli A, Collino F, Bruno M, Feltracco P, Emmi A, Volta CA. Factors influencing liberation from mechanical ventilation in burn patients with inhalation injury: a retrospective analysis. *Burns*. 2020;46(5):1088-1096.
- 3 .Restrepo RD, Walsh BK. Humidification During Invasive and Noninvasive Mechanical Ventilation: 2012. *Respir Care*. 2012;57(5):782-788.
- 4 .Chatburn RL, Mireles-Cabodevila E. Closed-Loop Control of Mechanical Ventilation: Description and Classification of Target Variables. *Respir Care*. 2011;56(1):85-102.
- 5 .Dodek P, Keenan S, Cook D et al. Evidence-based clinical practice guideline for the prevention of ventilator-associated pneumonia. *Ann Intern Med*. 2004;141(4):305-313.
- 6 .Hospital Respiratory Care: Ventilator-Associated Pneumonia (VAP) Bundle. *Respir Care*. 2010; 55(2): 241-8.
- 7 .Ho KM, Dobb GJ, Webb SA. The ventilation strategy of critically ill patients. *The Lancet*. 2000;356(9234):9-13.
- 8 .MacIntyre N, Saito J, Alzaki Le. Evidence-based guidelines for weaning and discontinuing ventilator support. *Chest Journal*. 2001;120(6 Suppl):375S-395S.
- 9 .Mireles-Cabodevila E, Chatburn RL. Monitoring patient-ventilator interaction. *Respir Care*. 2011;56(1):49-61.
- 10 .Proudfoot AG, Hind M, Griffiths MJ. Ventilation of critically ill patients beyond 48 hours. *Nursing Times*. 2007;103(1): 38-40.