Bedside Treatments for ABCDE Protocol

**Awakening and Breathing Coordination**

**Eligibility for ABC = On the ventilator**

**SAT Safety Screen:** No active seizures, no active alcohol withdrawal, no active agitation, no active paralytics, no active myocardial ischemia, no evidence of ↑ intracranial pressure

If passed the safety screen, Perform SAT  
(stop all sedatives/analgesics used for sedation)

If fail → restart sedatives if necessary at ½ dose and titrate as needed
If pass → Perform SBT safety screen

**SBT Safety Screen:** No active agitation, oxygen saturation > 88%, FiO₂ ≤ 50%, PEEP ≤ 7.5 cm H₂O, no active myocardial ischemia, no significant vasopressor use, displays any inspiratory efforts

If passed the safety screen, Perform SBT

SBT is discontinuation of active ventilator support through a T-tube or ventilator with a rate set as 0, CPAP/PEEP ≤ 5 cmH₂O, and pressure support ≤ 5 cmH₂O.

If fail → Return to ventilator support at previous settings
If pass → Team should consider extubation

**Delirium Nonpharmacologic Interventions**

**Eligibility for D = RASS > -3 (any movement or eye opening to voice)**

**Pain:** Monitor and/or manage pain using an objective scale

**Orientation:** Talk about day, date, place; discuss current events; update white boards with caregiver names; use clock and calendar in room

**Sensory:** Determine need for hearing aids and/or eye glasses

**Sleep:** Provide & encourage sleep preservation techniques like noise reduction, day-night variation, "time-out" to minimize interruptions of sleep, promoting comfort & relaxation

**Early Exercise and Mobility**

**Eligibility for E = All MIND-USA study patients**

**Exercise Safety Screen:** RASS > -3, FiO₂ ≤ 0.6, PEEP ≤ 10 cm H₂O, no increase in vasopressor dose (2 hrs), no active myocardial ischemia (24 hrs), no arrhythmia requiring the administration of a new antiarrhythmic agent (24hrs)

**Levels of Therapy** (if passes safety screen):

1. Active range of motion exercises in bed and sitting position in bed
2. Dangling
3. Transfer to chair (active), includes standing without marching in place
4. Ambulation (marching in place, walking in room/hall)

These activities will be actively monitored as part of the MIND-USA study with the goal for bedside staff to perform with study patients by 2 pm daily.

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