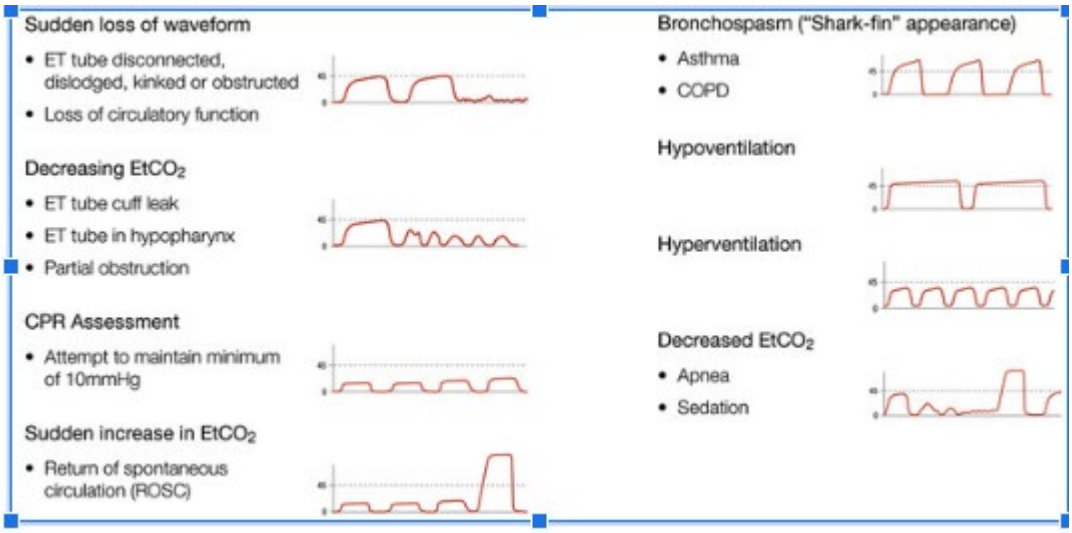
ExamFacts
ICU Monitoring Study Guide

EtCO2



If EtCO2 increases most likely PaCO2 is increasing, however certain high dead space disease processes will not correlate. EtCO2 will be low or normal even if PaCO2 is high.

A-Line Troubleshooting

Overdamped

Air Bubbles in Line
Obstruction

Underdamped

Stiff Tubing
Hypothermia
Dysrhythmias

Positioning Issues (Re-zero)

Above Mid-Chest
Reads Lower
Below Mid- Chest
Reads Higher

ExamFacts
ICU Monitoring Study Guide

HbCO/COHb → Must run in any smoke inhalation /burn

N 0.5 – 1.5%

- > 10% Smokers
- > 20% Burns/Inhalation Issues
- > 60 – 80% Death

PaO2 & SaO2 are useless

Met/hb any number > 0 is abnormal

NO_2-INO byproduct cause **Met/hb**

TX is Methylene Blue

_____

_____

_____

Pneumothorax, Hemothorax,

Chest tube (air, blood , fluid)	**Pleual Effusion**
Mid clavicular	Anterior 2nd intercostal
2-4th intercostal space Air	Lateral 5th intercostal
Hemothorax lower	10 – 20 mL exudate is normal
3 Chambers	Can require frequent drainage
Suction continuous bubbling	Is not continuous, always done
WS **intermittent** Bubbling tiding rising	as a procedure
WS Continuous bubbling means LEAK	

INO Nitric Oxide

- Potent Pulmonary Vasodilator
- 2 – 80 ppm
- Initial Dose 20 ppm
- >34 wks Neonates with Hypoxic Respiratory Failure
- PPHN
- ARDS
- Patient is hypoxic on high FIO2