

HYPOXIA Unexplained acute oxygen desaturation	
IMMEDIATE ACTION	
Declare to the team	
Oxygen	100%
Assess pulse	+/- CARDIAC ARREST
Monitor ETCO₂	+/- Falling ETCO ₂
Ventilator PAWP	+/- Sudden rise in PAWP
CHECK	
Patient	Bilateral chest expansion Palpable pulse
ETT	Position/patency/ cuff leak
Monitor	ETCO ₂ / Vitals/ SpO ₂ probe off?
Ventilator	Circuit connections/ settings/PEEP
Oxygen supply	Content gauge/ Cylinder open
DO	
Consider hand ventilation with Mapleson C (ensure tight seal and HME filter attached to the mask if ?Covid-19)) 15L O ₂ + PEEP valve	
THINK CAUSES	
Tension Pneumothorax	Clinical or US features Consider decompression
Alveolar oedema/ Atelectasis/ Lobar collapse	Apply PEEP Consider recruitment manoeuvre
Ventilator/patient dyssynchrony	Administer paralytic +/- sedative
Bronchospasm	Carrinal irritation- pull ETT back Anaphylaxis – Adrenaline 500mcg IM
Mucus plugging	Suction ETT +/- saline lavage
Gastric distention	OG/NG tube