Patient Name:..... Client ID in HESN.....

Section 4: Ventilator Bundle Daily Review

Date	Daily Bundle Review 1	2	3	4	5	6	7	8	9	Unit	Device necessity	Signs and Symptoms	Sample taken + Type of Sample	Date and time of sample taken	Removed	Reason of removal	infection within 2 calender days	End Surveillance	Reason for ending surveillance

Note: fill (Device necessity,Signs & symptoms, Sample taken, Removed, Infection in day 2, End surveillance) columns with either YES or NO

Reasons for removal: (Infection, Recovery, Death, Discharged, Other)

Reasons for ending surveillance : (Moved to Non-Surveillance Unit + 2 CD, 2CD post removal of all divices, Discharged from Hospital, Transferred to another hospital, Death, Other)

Daily Bundle Review Elements (With Indicies), Answer each one with Yes, No, ND, NA)

1- Elevation of the Head of the Bed (Between 30 and 45 Degrees for adults and pediatrics and 15 - 30 Degrees for neonates)	2- Daily Sedation Interruption (for adults only) and Daily Assessment of Readiness to Extubate (for all ages)	3- Peptic Ulcer Disease (PUD) Prophylaxis (for adults and neonates only)
4- Deep Venous Thrombosis Prophylaxis unless contraindicated (for adults and neonates only)	5- Daily Oral Care	6- Keep the Vent Circuit Free from Condensation every 2-4 hours (for pediatrics and neonates only)
7- Use Meticulous Hand Hygiene Before & After Contact with Ventilator Circuits (for pediatrics and	8- Change In-Line Suction Catheter Systems only when soiled or every 72 hours (for pediatrics and neonates only)	9- Store Oral Suction Device in a Clean Nonn-Sealed Plastic Bag when not in use (for pediatrics and neonates only)