

Knowledge of Evidence-Based Guidelines for Preventing of Ventilator-Associated Pneumonia

Gender: Female Male

How many years of work experience do you have as a critical care nurse? <1year 1-5 years 6-10 years >10 years

Have you obtained/Do you have a post-graduate degree in intensive care, provided by a Higher Education institution or similarly professionally accredited organisation? Yes No

How many bed positions does your intensive care unit have?

1. Oral vs. nasal route for endotracheal intubation

- Oral intubation is recommended
- Nasal intubation is recommended
- Both routes of intubation can be recommended
- I do not know

2. Frequency of ventilator circuits changes

- It is recommended to change circuits every 48 hrs (or when clinically indicated)
- It is recommended to change circuits every week (or when clinically indicated)
- It is recommended to change circuits for every new patient (or when clinically indicated)
- I do not know

3. Type of airway humidifier

- Heated humidifiers are recommended
- Heat and moisture exchangers are recommended
- Both types of humidifiers can be recommended
- I do not know

4. Frequency of humidifier changes

- It is recommended to change humidifiers every 48 hrs (or when clinically indicated)
- It is recommended to change humidifiers every 72 hrs (or when clinically indicated)
- It is recommended to change humidifiers every week (or when clinically indicated)
- I do not know

5. Open vs. closed suction systems

- Open suction systems are recommended
- Closed suction systems are recommended
- Both systems can be recommended
- I do not know

6. Frequency of change in suction systems

- Daily changes are recommended (or when clinically indicated)
- Weekly changes are recommended (or when clinically indicated)
- It is recommended to change systems for every new patient (or when clinically indicated)
- I do not know

7. Endotracheal tubes with extra lumen for drainage of subglottic secretions

- These endotracheal tubes reduce the risk of VAP
- These endotracheal tubes increase the risk of VAP
- These endotracheal tubes do not influence the risk of VAP
- I do not know

8. Kinetic vs. standard beds

- Kinetic beds increase the risk of VAP
- Kinetic beds reduce the risk of VAP
- The use of kinetic beds does not influence the risk of VAP
- I do not know

9. Patient positioning

- Supine positioning is recommended
- Semi-recumbent positioning is recommended
- The position of the patient does not influence the risk of VAP
- I do not know