

MCH Advanced Ventilation Physician Team

Call Transfer Center for on call physician 24 hours a day

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ADVANCED VENTILATION TEAM (AVT)

- 8 Critical Care Physicians based out of Medical City Dallas and Medical City Plano
- On Call 24/7 for transfer center to accept calls / consults from outlying facilities concerning patients with Severe Respiratory failure.
- All physicians have experience with advanced rescue vent modes and therapies including APRV, iNO, Proning, and ECMO.
- Within the team there is also further expertise with advanced APRV, Advanced ECMO VV & VA cannulation, inhaled Epoprostenol, and Critical Care transport.
- Ability to accept into two large tertiary-care ECMO Capable hospitals.
 - Additional hospital capabilities include:
 - Advanced Cardiac Support (LVAD, Impella)
 - Burn and Level 1 trauma
 - Comprehensive / Interventional Stroke
- Continuous real-time communication amongst the team to collaborate on patient transport, destination, and therapy.

ADULT SPECIALTY TRANSPORT TEAM

Collaboration between Medical City HealthCare and PHI Air medical

- Team consists of:
 - Critical Care PHI Flight Medic & Nurse
 - Critical Care Physician (From the AVT)
 - MedCity One (EC-135) aircraft and Pilot.
 - Instrument flight and Longer distance capable,
 - Based out of McKinney, TX airport.
- Activated for:
 - Transport of patients requiring multiple rescue therapies
 - For Ventilation iNO, ECMO team
 - Shock Therapy: IABP and Impella
 - Advanced Ventilation Team with C.C. MD in flight.
 - ECMO team transport for Cannulation.
- Can bring portable iNO from Medical City Plano to the bedside.
- If Grounded for weather: the same crew above can also transport by ground

Together both teams create a comprehensive Critical Care outreach program. A program that not only can consult and accept patients for "higher level" ventilation / shock / critical care support, but also can provide unique and cutting-edge transport options. This includes bringing multiple level, physician lead, support to the sending facility.

Within this system the most critical patients are taken care of from "initial call" to "transfer" to "advanced support" by one team that has the flexibility to adjust instantly to the condition of the patient.

When to call us
(meets all 3 criteria)

- 1) PEEP > 12 2) FIO > 75 3) PaO2 / FIO2 < 150

Call for tele-consult or transfer

Indications

Age <60

AND

Severe ARDS meeting 1 of the 3 following criteria (EOLIA trial) of disease severity despite optimization of mechanical ventilation with a high PEEP strategy and rescue maneuvers* (SEE BELOW)

1. PaO2/FiO2 ratio <50 mmHg with FiO2 >80% for 3 hours
2. PaO2/FiO2 ratio <80 mmHg with FiO2 >80% for 6 hours
3. pH <7.25 with PaCO2 >60mmHg for 6 hours resulting from mechanical ventilation settings adjusted to keep P_{plat} <32cmH2O

Contraindications

- DNR or terminal illness (Absolute)
- Supplemental home oxygen therapy/severe chronic lung disease (Absolute)
- Multi-organ failure (Absolute)
- Cardiac arrest (Absolute)
- Malignancy (Absolute)
- Contraindications to anticoagulation (Absolute)
- High-dose vasopressor or inotropic requirements (Absolute)
- Pre-existing chronic illness with poor long-term prognosis (Absolute)
- Age >60 (Relative)
- BMI >45 (Relative)
- Mechanical Ventilation >7 days (Relative)

*Our recent experience indicates improved outcomes when AVT is called early