



Strategies to ensure extubation within 6 hours of surgery are recommended.

Class (Strength) of Recommendation	Class IIa (Moderate)
Level (Quality) of Evidence	Level B-NR (Non-randomized)

### Main Points

- Prolonged mechanical ventilation after cardiac surgery is associated with higher morbidity, mortality, and increased costs.
- Early extubation within 6 hours is safe and can be achieved with time directed protocols and low dose opioid anesthesia.
- Factors associated with prolonged mechanical ventilation include depressed level of consciousness due to anesthetic agents administered in the operating room and ICU.
- Programmatic transitioning to earlier extubation is cost-effective and associated with decreased ICU LOS.

### Key References

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