

**Adult level 3 Critically Ill Patients Outside Critical Care Areas-
Management of- ICU Clinical Guideline – Burton Sites Only**

Reference no.: CG-ICU/2020/3538

Introduction

There may be occasions where level 3 critically ill patients need to be cared for outside the designated critical care unit (ITU). These occasions should be seen as exceptional and temporary. It is essential that patients receiving such care should be adequately monitored and supervised. Such patients should have clear plans to limit the time that level 3 care is delivered outside ITU.

Patients

The following circumstances might give rise to the need to provide level 3 care outside ITU:

1. Patients awaiting ICU level 3 care who are in discussion with the ITU consultant in any clinical area of the hospital
2. Patients admitted through A&E who are undergoing assessment prior to decisions regarding ongoing care (eg traumatic brain injury)
3. Patients requiring only very short periods of level 3 care post operatively (eg partial reversal of neuromuscular blockade)

Locations

Temporary level three care may be provided in the ‘resus’ room in A&E, any operating theatre within the Trust and the recovery areas of main theatres and orthopaedic theatres.

Supervision

All patients receiving level 3 care must have direct care provided by suitable qualified medical, nursing and/or ODP staff.

Medical staff

Overall responsibility for care of such patients will remain with the admitting specialty team (including emergency department) until care is agreed and accepted by the on call ITU consultant. Arrangements for tertiary opinions and transfer to tertiary care will be made by the admitting specialty team (including emergency department).

Patient who require intubation and / or mechanical ventilation must also be constantly supervised by an anaesthetist. This would usually be the 1st on call anaesthetist (bleep 511). If the 1st on call anaesthetist is not available he or she will make alternative arrangements after discussion with the general consultant anaesthetist on call.

All patients receiving level 3 care outside ITU should be discussed with the ITU resident medical staff (bleep 510) at an early stage. They will liaise with the ITU consultant on call to consider whether and how on going level 3 care will be provided.

Nursing Staff

Patients receiving level 3 care outside ITU will continue to have nursing care provided by nursing staff in the area concerned (emergency department, theatres, recovery). Nursing care will be provided on a one nurse to one patient basis.

Additional Staff

Additional help may be provided by ODP staff and / or outreach staff as appropriate.

Monitoring & equipment

All patients receiving level 3 care should have monitoring available according to their needs. As a minimum this should include continuous ECG, pulse oximetry, non invasive blood pressure and temperature. Where appropriate facilities to monitor invasive pressures, end-tidal CO₂ and cardiac output should be available.

Suitable multimodal monitoring equipment is available:

- 1) In all bays of A&E 'resus' room
- 2) The transfer trolley on ITU
- 3) All operating theatres
- 4) Main theatre and orthopaedic theatre recovery

Infusion devices capable of safely delivering both intravenous fluids and drugs (including sedation and vasoactive drugs) should be available in adequate number.

Suitable infusion equipment is available:

- 1) The transfer trolley on ITU
- 2) Spare pumps and syringe drivers ITU/HDU

Mechanical ventilators suitable for the patients needs should be available and familiar to the staff looking after such patients

Suitable ventilator equipment is available :

- 1) The transfer trolley on ITU (Oxylog 2000)
- 2) Resus room A&E
- 3) Theatres and recovery (Penlon AV800 / anaesthetic machine)
- 4) Spare ventilators on ITU (Horus / Drager Evita XL)

An adequate, contemporaneous record of monitored physiological variables must be kept. This may require use of anaesthetic charts, ITU or HDU charts depending upon the patients needs.

Transfer of patients

Where level three patients require either *intra*-hospital transfer (eg for imaging) or *inter*-hospital transfer (eg for tertiary care), they must be accompanied by suitable qualified medical, nursing and/or ODP staff. Suitable transfer trolleys are available for both intra-hospital and inter-hospital transfers in the ITU.

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