CROUSE INTENSIVE CARE UNIT CURRICULUM

TEAM

INTENSIVISTS- Dr. Dan Polacek, Dr. Russ Acevedo, Dr. David Landsberg, Dr. Michael Maguire

CRITICAL CARE NURSES & AIDES

SECRETARY – Karen (days) Joyce Houston (eves) Helen Bain (nights) Mykel Lynn Butts (weekends)

RESPIRATORY THERAPISTS- make all vent settings when ordered. Bill Eklund RT makes rounds with the team in the morning

CLINICAL DIETICIAN- Maria Meola-makes recommendations for patient dietary needs

CARE COORDINATORS- Dawn Erno-Kane & Erica Sheets ---- follow ICU patients re: advanced directives, home care, rehab, financial concerns

CLINICAL PHARMACIST- Andrea Call - follows Vancomycin & Gentamycin dosing & orders levels routinely. Follows Coumadin protocols for ICU pts.

ADVANCED CARE/PALLIATIVE CARE – Kelly Wheeler NP, Peter Sinatra NP & Dr Melinda McMinn
Family support for medical regime discussions, palliative care discussions and family/patient support in general

GENERAL

• 22 BEDS MED-SURG

• CENSUS BOARD WITH PATIENT NAME & MD & RN ASSIGNED IS LOCATED AT MAIN DESK BY SECRETARY. The patient census is determined by available nurses and beds...so an ‘empty’ bed can’t always be filled
CALL ROOMS-

• Resident Resource Book - located in rolling chart rack at the desk. See attached index

UNIT PHONE – All Crouse phone #'s begin with 470
ICU = 470-7037 470-7038 470-7039
Crouse operator = 470-7111 from outside the hospital

INFECTION CONTROL - wash hands on entering unit and before and after touching patients & after removing gloves

*CONFERENCE ROOM OUTSIDE OF ICU JUST BEFORE THE WAITING ROOM – has a phone, computer and PACS for your use

COMPUTERS – please avoid using the secretary and charge nurse computers. We have several others available at each desk area.

MAR sees all patients considered for ICU admission. They may be asked to assess a floor patient who may need an ICU bed. You may also be asked to re-assess patients in the ED and PACU waiting for ICU beds and see if they can be downgraded to a floor bed. Please discuss admissions with charge run to plan bed allocation.

LECTURES- WED 1P-2P IN CONFERENCE ROOM A
THURS 1P -2P IN CONFERENCE ROOM A

PROTOCOLS AND SPECIAL INFO

• Insulin
  (Daily Lantus dose (1200) must be ordered on morning rounds)
* Restraints- must be reassessed and ordered daily
• Sedation
• RER- routine electrolyte replacement
• Diprivan can only be used on a non-vented patient who has a dx of DT’s (all others must be on a vent)
• NO Verbal orders are allowed except during an emergency and telephone orders are discouraged
• Blood transfusion consents
• Frequently used order forms are found in slots near the fax machine across from bed # 3. Keep blank order forms in your pockets or on the mobile chart rack for rounds. (antibx form , TPN form , transfusion form)
• TPN orders must be done on morning rounds or by 1300
• DNR orders – a resident can sign as a concurring MD and get a verbal order from attending on call.

ADMISSIONS (FROM ED OR DIRECT FROM ANOTHER HOSP)

• PREPRINTED ICU ORDERS
• ANTIBIOTICS NEED ANTIBIOTIC FORM
• MEDICATION RECONCILIATION ORDERS NEED TO BE DONE ON ALL PATIENTS...(STARTED BY ED RN OR ADMITTING ICU RN)
• “CHECKLIST” TO BE PRINTED BY MAR ON ALL ADMISSIONS TO PREPARE FOR ROUNDING THE NEXT DAY
• ADD TO ICU SIGNOUT LIST ON THE DESKTOP OF ALL COMPUTERS - include key facts re: history meds, current issues, update changes during ICU stay

TRANSFERS IN FROM THE MED-SURG FLOORS

• USE PRE-PRINTED ICU ORDER FORMS
• MED REQ FORM MUST BE PRINTED FROM COMPUTER FOR ALL TRANSFERS
• ADD TO ICU SIGNOUT LIST ON COMPUTER

TRANSFERS OUT OF THE UNIT

* PREPRINTED ORDERS
* ALL PATIENTS ON INSULIN – USE PREPRINTED ORDER FORM FOR MED SURG (SEE RESIDENT RESOURCE BOOK)

• MED REQ FORM TO BE FILLED OUT
• ALL ICU ATTENDING PATIENTS GET TRANSFERED TO THE HOSPITALIST SERVICE BY THE ATTENDING
• DELETE PT INFO FROM THE ICU SIGN OUT IF NOT DONE BY THE CHARGE RN

ROUNDS

• BEGIN BETWEEN 0830-0900 QAM WITH ATTENDING, RESPIRATORY, CHG RN AND BEDSIDE RN
• AFTERNOON ROUNDS BEGIN BETWEEN 1300-1500 WITH ATTENDING
• CHECKLIST TO BE READY FOR ROUNDS. THE ADMITTING RESIDENT SHOULD PULL IT FOR ROUNDS

CODES

• Resident and intern will carry the code beeper
• There will be a daily “test” beep that you will need to call the operator and tell her you received it

CODE A    - respiratory or cardiac arrest (ICU RN, anesthesia, IV team, respiratory, MAR, nursing supervisor)  
CODE M    - Medical response team called due to change in patient condition (nursing supervisor- MAR & respiratory)  
CODE B    - Stroke emergency- (MAR- neurology – nursing supervisor- respiratory- ct scan , transport )

BEDSIDE PROCEDURES-

• All invasive procedures need a procedural consent and a “time-out” procedure performed as well as a procedure note
• All central line procedures must have all present in the room in gown, glove, mask and cap
• We have a Site Sono machine that can be used for line insertion
• Interns may do central lines under the direct supervision of a resident that has central line privileges
<table>
<thead>
<tr>
<th>CRITICAL CARE RESIDENT INFORMATION RESOURCE BOOK</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADMISSION ORDERS TO ICU- MED RECONCILIATION ORDER FORMS</td>
</tr>
<tr>
<td>PLEASE BE SURE TO MARK ALLERGIES ON ADMIT ORDERS- NARCOTIC RENEWAL Q 7 DAYS</td>
</tr>
<tr>
<td>BLOOD TRANSFUSION &amp; CONSENT FORMS</td>
</tr>
<tr>
<td>BOWEL PROTOCOL</td>
</tr>
<tr>
<td>CODE POLICY- CODE A, CODE B, CODE M (STROKE ADMISSION PACKET FOR CODE B)</td>
</tr>
<tr>
<td>COMFORT CARE ORDERS</td>
</tr>
<tr>
<td>DAILY LABS &amp; XRAYS</td>
</tr>
<tr>
<td>DVT PROPHYLAXIS</td>
</tr>
<tr>
<td>GI PROPHYLAXIS</td>
</tr>
<tr>
<td>GREEN BEDSIDE BINDERS</td>
</tr>
<tr>
<td>HANDWASHING- INFECTION CONTROL</td>
</tr>
<tr>
<td>HEPARIN  INFUSION PROTOCOL</td>
</tr>
<tr>
<td>HYPOPERFUSION PROTOCOL FOR CODE M'S</td>
</tr>
<tr>
<td>INSULIN PROTOCOL'S &amp; FAQ'S/ NOT FOR DKA PATIENTS</td>
</tr>
<tr>
<td>ISOLATION POLICIES / AIRBORNE, CONTACT, DROPLET</td>
</tr>
<tr>
<td>RER/ ROUTINE ELECTROLYTE REPLACEMENT</td>
</tr>
<tr>
<td>RESTRAINT GUIDE</td>
</tr>
<tr>
<td>SEDATION PROTOCOL</td>
</tr>
<tr>
<td>SPONTANEOUS BREATHING TRIAL POLICY</td>
</tr>
<tr>
<td>STERILE PROCEDURES/ LINE PLACEMENT</td>
</tr>
<tr>
<td>TPN ORDER SHEET</td>
</tr>
<tr>
<td>TRANSFER OUT ORDER SHEET/ TRANSFER MEDICATION ORDERS/ TRANSFER MED-SURG INSULIN PROTOCOL</td>
</tr>
<tr>
<td>TUBE FEEDING ORDER FORM</td>
</tr>
<tr>
<td>VISITOR INFORMATION SHEET</td>
</tr>
</tbody>
</table>

Review & Revised by: D. Landsberg, MD
Date Revised: 06/09/2012