

Patients admitted to contemporary coronary intensive care units (CICUs) are at risk for common and preventable critical care complications, yet many CICUs have not adopted standard-of-care prevention protocols and practices from general ICUs” van Diepen et al (2016).

Abstract:

Over the past half century, coronary care units have expanded from specialized ischemia arrhythmia monitoring units into intensive care units (ICUs) for acutely ill and medically complex patients with a primary cardiac diagnosis. Patients admitted to contemporary coronary intensive care units (CICUs) are at risk for common and preventable critical care complications, yet many CICUs have not adopted standard-of-care prevention protocols and practices from general ICUs. In this article, we (1) review evidence-based interventions and care bundles that reduce the incidence of ventilator-associated pneumonia, excess sedation during mechanical ventilation, central line infections, stress ulcers, malnutrition, delirium, and medication errors and (2) recommend pragmatic adaptations for common conditions in critically ill patients with cardiac disease, and (3) provide example order sets and practical CICU protocol implementation strategies.

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Reference:

van Diepen, S., Sligl, W.I., Washam, J.B., Gilchrist, I.C., Arora, R.C. and Katz, J.N. (2016) Prevention of Critical Care Complications in the Coronary Intensive Care Unit: Protocols, Bundles, and Insights From Intensive Care Studies. The Canadian Journal of Cardiology. July 1st. .

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