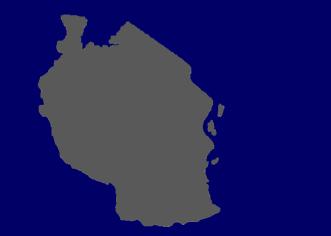
Care of the Critically Unwell Patient...

Critical care



Jonas Blixt Specialist anesthesiologist Intensive care department

Definition

 care given to patients with serious (life threatening) and reversible diseases



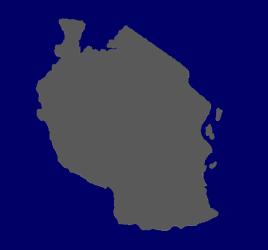
History CC in Europe

- 1543 ventilation of an animal
- 1904-15 mechanical ventilation
- 1854-56 Florence Nightingale
 - the first to have used an intensive care unit.
- 1930 first post op
- 1950s poliomyelitis
 - 1960 training program in cc

Increasing need

Europe heading towards >10%

of beds for CC



Which patients

 those who could most benefit from the critical care, i.e. those who have life threatening conditions and have a *reasonable* chance of recovery within reasonable time

Organ dysfunction

- The main purpose with CC is to support failing organs and to prevent further organ dysfunction

 gas exchange failure
 - pump failure

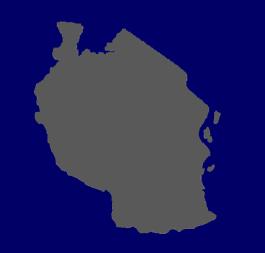
Organ dysfunctions will present as a – ABCD problem

- A airway
- B breathing
- C circulation
- D disability



Patient unable to look after himself

observe, observe, observe !!!
evaluate all bodily functions repeatedly 24/7



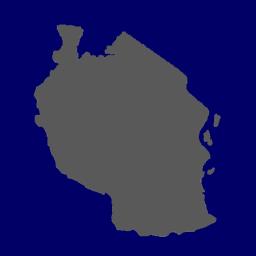
Remember

- first ICU was introduced by a nurse
- nurses remain very important
- essential for continuous intensive care of the critically ill



How do we achieve our goals?

Goal directed therapy



Define goals for each patient – specific goals during the day

Define acceptable values – where there are no specific goals

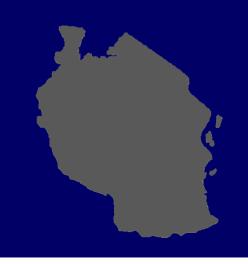
Define reaction values – what not to accept and what to do if it happens

Tabell från TIM



Head to toe

- Head
- Respiration
- Circulation
- Infection
- Kidney
- Gastrointestinal
- Koagulation



What to focus on

- Optimise basic treatments for
 ABCD
- Continuous Supportive care and nutrition
- Goal directed care

Karolinska

- 1 nurse / patient
- Allways at the patient
- Hourly checks of all parameters
- Treats according to goals
- Contacts doctor when concerned or when outside goals

Observe
Document
React