

# MKAIC

Muhimbili-Karolinska  
Anaesthesia &  
Intensive Care Collaboration



**Intensive Care**

**Muhimbili National Hospital  
9-11 November 2011**

# Recap Day 1

What did we learn yesterday?

**ABCDE!**

- First, some background to Critical Care

- Critical care is for all critically ill patients, not just on ICU
- Critically ill is a patient with a failing organ
  - Eg airway, lungs, heart
- Critically ill cannot look after themselves – we must do it for them

- Started by Florence Nightingale, a nurse
- All critically ill patients together for close observation
- **OBSERVE OBSERVE OBSERVE**

- >10% of patients in Karolinska “critically ill”
- Even if 5% of patients at Muhimbili  
= 5% x 1500 = 75!

- What is Goal Directed Therapy?



- Goal Directed Therapy
  - Acceptable values
  - Reaction values

		Normal	Critically ill
A	Airway	clear	Noisy/blocked
B	Resp rate	10-20	>30
	O2 saturations	>94%	<90%
C	Pulse	60-90	>130
	BP systolic	100-140	<90
	Capillary refill	<2 secs	>2 secs
D	Conscious level	Awake	Reduced / fitting
E	Other		Nurse/clinician seriously concerned

- Once stabilised, Head to Toe
- N
- R
- C
- I
- K
- GI
- Coag

- Observe.
- Document.
- React.

- Brain dead = dead  
(for Swedes...)

**ABCDE!**

- Why ABCDE?

- We need a system when stressed
- Easy to remember
- Treats most urgent things first



A?

Airway

B?

Breathing

C?

Circulation

D?

Disability (Conscious level)



E?

Everything Else

What are the first things to do?

- Recognise that the patient is critically ill
- Call for Help
- Then **ASSESS & TREAT**

- How do you assess Airway?

- Feel breaths
- Look in mouth
- Look/feel chest expansion

How do you treat Airway problem?

- Chin Lift
- Jaw Thrust
  
- Oro-pharyngeal airway (must always be kept on ICU)
- Recovery position (not lying flat on back)
- Suction (gurgling)
- Intubation



- How do you assess Breathing?

- Count breathing rate
  - Normal <20. Critical >30/min
- Listen lungs
- Pulse oximetry
- Cyanosis (VERY LATE SIGN)

- How to treat Breathing Problem?

- **OXYGEN!**

- How much oxygen?

- Nasal Prongs 2-4L = 28%
- Mask >5L = 50%
  - (with reservoir bag 80%)

- Other treatments for Breathing problem?

- Salbutamol
  - Acute medicine – must always be on ICU
- Bag & Mask
- Intubate & Ventilate



- What is respiration for?

- O<sub>2</sub>
- CO<sub>2</sub>

- Which patients at risk for obstructed airway?

- Unconscious patients
- All critically ill

- Many die from obstructed airway

(not from malaria/pneumonia etc)

- Questions?

Today

# Thursday timetable

8.00:	Recap
8.30:	Circulation
9.30:	Scenarios
10.30:	<u>Coffee</u>
11.00:	Fluids
12:00:	Scenarios
13.00:	<u>Lunch</u>
13.45:	Supportive Care & ICU Nursing
14.45:	Seminars
15.30:	End