Supportive Care and ICU nursing

Patient status

- Medical history
- What is the problem now?
- Check the patient
- Check the documentation
- All stuff speaks to each other! Teamwork!
- If something wrong Call for help!

CARESTATUS

- Respiration
- Cirkulation
- Neurology
- Infection
- Nutrition
- Kidney function, Abdomen
- Supportive treatment
- Skin status
- Family

Respiration

Airway and Breathing

- Breath sounds.
- Chest moovements.
- Count respiratory rate.
- Check Oxygen Saturation
- If the patient is in ventilator. Check the setting and alarms
- Check the documentation. Is there changes?

Circulation

- Measure pulse
- Measure blood pressure
- Capillary refill time
- Skin colour
- Urine output
- Everything else? Labs? Glucose, Hb
- Trombosprofylaxis
- Oedema
- Weight

Neurology

Conscious level

AVPU

- **A** = Alert. Is the patient awake and speaks normal?
- V = Respond to Voice. If you speak to the patient: Is he responding? The patient listen what you say?

Conscious Level

AVPU

- **P** = Responds to Pain. If you pinch the patient is the patient responding? Is the patient trying to take away your hand?
- **U** = Unresponsive. The patient does not speak to you and is not moving at all. Is the patient unconsiousness?

• Check pupills: size, reaction and movement

Infection

- Fever? Check the temperature!
- Antibiotics?
- What kind of infection? Malaria? Pneumonia?
- Blood cultures

Nutrition

- The patient must eat. It is important for the recovery so the patient can go home. If the patient can not eat. Give the patient nutritionfluids.
- NG tube. Clamped? Gravity?
- Vomitus

Kidney function

- Check the urine output. Colour? Haematuria (blood)? In the ICU every hour.
- Stop in the catheter?
- Count fluid balance every 8 hour.
- Laboratory samples (Kreatinin)

Abdomen

- Listen, is there bowelsounds?
- Stomache palpation: Soft? Hard? Tender?
- Has the patient empty his stomache, stool?

Supportive treatment

- Pain relief. If the patient is in pain. How do you know that? Give the patient pain medication. If the pain is not better. Reassess and give the patient more pain medication.
- Make the patient comfortable in bed. Turn
 the patient as often as necessary to the sides.
- **Sleep.** Try to give the patient time for rest especially in nights. Lights off and stuff don't speak loud.

FAMILY

Can they enter? How often? How long?

Skinstatus

- From head to toe
- Wounds ? Red marks ? Something else?
- Catheter care! Cannulas, All access, CVK
- Skin care (water, creme)
- Mouth care
- Take care of the eyes

- Observe
- Document
- REACT !!!!!!!!!!!!!!!

ALWAYS THE BEST CARE FOR THE PATIENT

ASANTE!