



# CCSSA

CRITICAL CARE SOCIETY OF  
SOUTHERN AFRICA

## Understanding ICU



## What patients and loved ones should know

Admission into the **Intensive Care Unit (ICU)** can be a stressful and distressing experience, whether you are the patient or a family member.

The information contained in this pamphlet will help you understand how the **ICU** functions and what you can expect once you've been admitted.

### Why ICU?



When a patient becomes seriously ill, they will require closer observation and monitoring. For this reason the patient will be referred to the **Intensive Care Unit (ICU)**, a unit within the hospital especially designed for those who are seriously ill. Here, they are taken care of by a team of specialist critical care professionals, including doctors and other specially trained **ICU** staff who work with the patient and their loved ones to ensure that they receive the highest quality of care in a nurturing and supportive environment.

**ICU** staff will inform family and loved ones of any changes in the patient's condition or the treatment provided. However, it is not always possible to do this if urgent treatment is required. At such times, information will be provided as soon as possible after the event.

If you have any questions or concerns, please do not hesitate to speak to your nurse or any member of the nursing team. If necessary, your nurse will discuss the concerns with the intensivist or doctor in charge of the **ICU**.

### Taking care of the Patient

Our multi-disciplinary team of specially trained **ICU** caregivers is made up of **doctors, nurses, physiotherapists, pharmacists, dieticians** and other health professionals. This team works together to ensure that the patient receives the best possible care and that families are given the emotional and practical support needed to help the patient get well.

Usually, either a senior doctor or an **intensivist**, will be in charge of the **ICU** at all times. When one doctor hands

over to another, full details of patients are transferred. This means that the doctor or intensivist in charge will know all about each patient and will be happy to discuss the condition and progress with you.

A senior **ICU nurse** will always be present in the unit and is in charge of the unit. These specialist nurses provide all round care for the critically ill patient and are in close contact with their families and loved ones. The **ICU** nurse assists all those involved in caring for the patient to communicate with each other and to coordinate their care. Together with the patient, their loved ones and other caregivers, the **ICU** nurse plays a central role in decision-making in the best interests of the patient.

## What to expect in ICU

**ICU** beds are usually clustered around the nurses' station to allow for close monitoring of the patient.

Many patients will need the help of a **ventilator** to breathe. The ventilator may be connected to a breathing tube called an **endotracheal tube (ETT)**, or a **tracheostomy tube**, sometimes called a '**trachy**'. Although the patient will not be able to speak while the breathing tube is in place, their voice will return when the tube has been removed.

The patient may be connected to various other pieces of equipment which may be alarming to family and loved ones. These machines provide the **ICU** staff with the information they need to effectively monitor the patient. The most common of these machines include:

- A **monitor**: to display the patient's heartbeat, breathing rate, oxygen level and blood pressure. Information is recorded via the sticky pads on the patient's chest.
- An **arterial** line: a tube inserted into an artery, allowing staff to collect blood samples without having to use a needle each time. It also measures the patient's blood pressure.
- A **urinary catheter**: to monitor the urinary output and fluid balance accurately.
- The patient may have **drips** going into the veins of their hands, neck or groin. These are used to give the patient medicines, fluids and blood transfusions. **Drips** may also be used to deliver special nutrition to the patient.

- Similar drips are used to connect to a **dialysis machine** which 'cleans' the blood when the patient's kidneys are not working adequately.
- Some patients may have a tube into their nose or mouth to give medicines and liquid nutrition. This tube passes from the nose to the stomach, and is called a **nasogastric tube (NG tube)**.

Alarms which are set off by the equipment alert staff to a change in the patient's condition but do not necessarily mean that something bad has happened.

## Common ICU terminology

**Multi-disciplinary team:** a team of healthcare professionals providing care to the critically ill patient as a team. This team often includes: doctors, nurses, physiotherapists, clinical pharmacists, dieticians and other staff members.

**Intensivist:** a doctor who has specialised in the field of **ICU** medicine

**Dialysis:** the process of removing waste products and excess fluid from the body. Dialysis is necessary when the kidneys are not able to properly filter the blood.

**Organs of the body:** Including the heart, lungs, kidneys, liver and brain.

**Low blood pressure:** When the flow of blood to the organs of the body is inadequate.

**High blood pressure:** When the long-term force of the blood against the artery walls is high enough to eventually cause health problems.

**Inotropes & vasopressors (adrenaline):** These medicines are used to increase blood pressure when it is too low.

**Organ failure:** When a particular organ does not work properly.

**Ischaemia:** When an organ doesn't get enough oxygen because of a low oxygen level in the blood, or poor perfusion.

**Perfusion:** Blood flow to an organ or around the body.

**Sedation/pain control:** Life-saving treatments needed by patients in **ICU** sometimes make it necessary to keep them

sedated with pain and sleep medication to allow them to rest. As the patient begins to recover, medication is usually reduced. All patients receive pain medication to keep them as pain-free as possible.

## Infection control

Keeping your hands clean is one of the most effective ways to prevent the spread of infection around the hospital. Please help by washing your hands, putting on an apron and using the alcohol gel or hand spray every time you enter and leave the **ICU**. It is important to keep your forearms bare by rolling up your sleeves, and removing jewellery and watches.

## What to bring for your loved one in ICU

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- Face cloth X 2
- Bath soap
- Body lotion
- Shampoo
- Comb or brush
- Toothpaste and toothbrush
- Shaving equipment for men
- Vaseline or lip balm

It is not necessary to bring pyjamas as patients wear hospital gowns in **ICU**.

Fresh flowers, plants and latex balloons are not permitted in the unit due to the risk of infection.

Cards, photographs and something for the patient to read are welcome.

## Important information for patients in private hospitals

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Please note that **doctors, physiotherapists, dieticians, radiologists and laboratory services** may not be part of the hospital and therefore may bill separately. Some medical aids limit cover for these services or do not provide cover at all. If you are a medical aid patient, it is important that you discuss this with your treating doctor.

## Visiting your loved one

Some **ICUs** have strict policies regarding visiting hours and may restrict the number of visitors allowed at the bedside at any one time. This is to assist staff in caring for your family member and allow for the patient to rest.

***Please remember to switch cell phones off as they are disturbing to other patients.***

### Contact information

Name of Unit:

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Telephone numbers:

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Intensivist/Doctor in charge:

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Unit manager:

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Visiting hours:

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Please ensure that we have contact numbers for two family members or next of kin. Please ensure that the contact person is available at all times in case of emergency.

This information is brought to you by the Critical Care Society of Southern Africa. To find out more, go to:  
[www.criticalcare.org.za](http://www.criticalcare.org.za)



***Dedicated to quality care for the critically ill***

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