



A lifetime of specialist care

Adult intensive care unit (AICU): a guide

Introduction

Welcome to the Adult Intensive Care Unit (AICU) at the Royal Brompton Hospital.

This guide will give you some information about the AICU here at the Brompton. In the relatives' waiting room, you will also find a copy of a guide to the local area for help with finding facilities in and around the local area. You will also find a guide to intensive care in general in the relatives room (a booklet produced by the Charity ICUSteps).

Having a friend or relative as a patient in AICU can be a very stressful experience. The staff are here not only to care for patients on the unit and we also aim to offer you support and help during this time. If you have questions, please don't hesitate to ask a member of staff at any time.



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The daily routine

The AICU is a busy place. Our day starts at 0800 with staff handover and the morning ward round. This is where we review all patients for the day and aim to make decisions for their care that day. After this there is a summary board round. To allow the ward round to take place in as confidential a fashion as possible we restrict visiting until after 1030.

Patients are given time for lunch at 1200 and the afternoon ward round starts at 1400. The evening handover starts at 1700, and further handover happens at 2000. The night team have a ward round toward the end of the day. Because of this activity, we have restricted visiting hours to allow patients to have the care they need.

Visiting Hours

1030 to 1200

1630 to 1930

Overview of the unit

The unit is a 20 bedded unit. We have four general bays with four side rooms. One of the bays has an internal side room. We look after patients with heart and lung disorders that need one-to-one nursing, and have illnesses that require support of their bodily organs. Many of our patients come to the unit to help them recover after heart or lung surgery.

Visiting the Unit

Use the phone outside the AICU to speak to one of the receptionists who will let you through the double doors. Walk through the double doors. Immediately at the end of the corridor turn right and into the AICU. Please gel your hands to prevent the spread of infection. On your right after two side rooms is the reception desk. Please make yourself known to one of the receptionists and they will instruct you on where your relative is and where you can leave your coats. Please speak to the nurse looking after your relative or friend before approaching the bed space.



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At times on the unit, visitors may be asked to leave. This can be to protect the dignity of the patients, but may also be for confidentiality and safety reasons. The AICU is a busy unit, and if there is an emergency, we would ask you to step outside the bay and wait to be called back in. Often the staff will be busy, so please bear with us.

The Staff

The unit is staffed by a range of professionals. All professionals should introduce themselves and explain their job to you. Please don't hesitate to ask. We have:

- **Doctors.** Normally dressed in pale blue scrubs with red badges. A named consultant will be appointed to look after each patient at all times.
- **Nurses.** Normally dressed in darker blue scrubs with a green name badge. Each patient will have a named nurse. The sister in charge of the unit will have a red badge.
- **Occupational therapists.** Normally dressed in a white uniform with a green edge. They will have a green badge.
- **Pharmacists, Dieticians, Speech therapists.** Without a specific uniform but with a green identity badge.
- **Physiotherapists.** Normally dressed in a white uniform with a blue edge. They will have a green badge
- **Visiting staff to the unit.** No specific uniform, will have other hospital identification.
- **Ward Clerks.** Without a specific uniform, but with a yellow badge, and based normally around the reception desk, Frank Bogie and Sehtjin Woo.



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Equipment



Ventilator. This machine is used to support a patient who needs help with their breathing. It is connected to the patient by flexible tubing. The monitor helps show doctors and nurses how the patient is breathing.

Kidney Filter

This machine is used to support patients whose kidneys aren't working. The machine takes a patient's blood and washes it through a filter before pumping it back.



Infusion Pumps

These pumps help give medicines to the patient in a controlled manner. They will often contain pain relieving and sedative medicines as well as other drugs to support the heart. The pumps will often beep.



Urinary Catheter

A place to monitor and collect urine





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Monitor

This machine monitors the patient's vital signs, including their heart rate, blood pressure, oxygen levels, and temperature. These numbers are used in context to guide the treatment of the patient. It is important to remember that numbers alone don't tell the whole picture of a patient's condition.



Drains

These drains are used to help empty parts of body that might have an unwanted collection of blood or air. They are placed routinely after surgery to help in the healing process.



ECMO machine

A machine to help ensure the blood has enough oxygen. Please see separate guidance leaflet, available from the receptionists.



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Procedures

During a patient's stay in ITU they may well have additional procedures to help them recover. From inserting a drip, through to having a drain placed, there are many procedures that we can do. A member of the team should explain the procedure before it takes place (excepting in an emergency) to the patient and their next of kin. If you are not sure, please ask.

Communication

Communication can be a challenge for patients and their relatives. Patients may be disoriented and confused, and may have difficulty in speaking or communicating in general. Some patients will hallucinate, seeing and hearing things that aren't real. Other patients may also have unwelcome thoughts. This can be distressing to witness, and if you think your relative is confused, disoriented or hallucinating, you should check that the nursing staff are aware, and ask them for advice on how to best communicate with your relatives. For further information, this topic is covered in the ICUSteps booklet in the relatives' room

Your wellbeing

Undoubtedly this is an emotional and stressful time. It is important to try to look after yourself, and taking breaks from the unit may help you cope. Of course the staff on the unit will aim to help you through this difficult time. Other relatives can be a source of support. For spiritual support, we have onsite chaplains. Local facilities are listed in a separate guide. The ICUSteps booklet is also a good guide to help you understand this period of time.



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Follow up clinic

After a patient's stay in the intensive care unit, it may take a while for them to recover their health. We will invite patients who have had a long or difficult stay in AICU to come back to see us in clinic a few months after their discharge. If you notice on going issues (medical, psychological or physical) and think your relative or friend might benefit from being seen we can be contacted as below. Some patients travel to the Brompton from afar, and we can offer telephone advice to yourself and to your GP if required. The follow up clinic can be contacted on:

Phone: +44 (0)20 7352 8121 x2674

Email: afteraicu@rbht.nhs.uk

Postal: Dr Anthony Bastin
Adult Intensive Care Unit
Royal Brompton Hospital
Sydney Street
London SW3 6NP

About this guide:

This guide was produced by staff on the intensive care unit. If there is information that you feel should be in the guide, or that needs changing, please let us know so we can update it. Speak to one of the receptionists or contact us as above.