

Recognizing Post Intensive Care Syndrome in Intensive Care Survivors in the Outpatient

Setting: Policy Change

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Abstract

Background: The progression of medical science in the United States has resulted in a growing number of intensive care unit (ICU) survivors. Approximately two-thirds of ICU survivors will suffer long-term debilitating cognitive, psychological, and/or functional effects related to their ICU stay, a phenomenon known as Post Intensive Care Syndrome (PICS).

Local Problem: A gap in practice was identified at an outpatient clinic in North Idaho; the clinic lacks policies and protocols for screening and management of PICS.

Purpose: The purpose of this project was to help bridge the gap in care for ICU survivors when transitioning from inpatient to the outpatient setting.

Methods: Networking with outside organizations regarding policies and protocols for care of the ICU survivor was done. Literature on existing PICS policies was reviewed. The CDC's Policy Analytical Framework was used to guide new policy development for screening and treatment of PICS.

Intervention: The aim of this policy change project was to develop an evidence-based policy for caring for post-ICU survivors in the outpatient setting.

Results: An evidence-based multidisciplinary PICS policy was developed to bridge the gap in care for ICU survivors when transitioning from the inpatient to the outpatient setting.

Conclusion: Despite advances in PICS research and inpatient practices, outpatient settings continue to experience a gap in the care and needs of these patients. In an attempt to help close

this gap in care when transitioning from inpatient to the outpatient setting a PICS policy was developed at an outpatient clinic in North Idaho.