



Veterinary Health Center

MANHATTAN, KANSAS

OFFICIAL PROTOCOL

ICU/ER Process and Procedures

Purpose: To outline and enhance communications in between SAICU and SAER departments, and ultimately promote inpatient care and staff/student training and teaching.

When the ER service admits a patient to the ICU, the following procedures must be followed:

1. All necessary diagnostics have been performed and initial patient stability has been accomplished.
2. Patient has been added to the ICU Instinct Board (SA ICU Medicine or Surgery, or Exotics)
3. A treatment sheet has been created for the patient in Instinct.
4. Attending clinician has rounded a service RVT (preferred) or service assistant if an RVT is not available. ICU staff will not begin treatments until they have received rounds.
5. Exception to this process is given to patients needing oxygen cage during ER work up.

ER student responsibility of ICU inpatients is as follows:

1. Responsible for the 7am and 7pm treatments of the ER inpatients.
2. All client patient status updates.
3. Help with other ICU treatments during ER down time.

Code 10 procedure:

1. If a code 10 is called by the desk staff, ER will triage to determine if the patient should go immediately to ICU for stabilization.
2. If a code 10 is called to ICU, ER clinician/intern and ER staff must respond immediately.

After hour client visitation:

1. ER service is responsible for coordinating after hours client visitations. If the client visit is in ICU, ICU client visitation protocol must be followed.

In the event one of the service areas has an unexpected staff member absent from a shift, the service areas will work together to provide patient care to both services. Proper communication must be made by ICU nursing supervisor and ER staff supervisor to determine the best option for service coverage.