

Interprofessional Communication in Neuroscience Intensive Care Unit for Palliative Care Patients

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Introduction

Care of a patient within the medical aid unit typically needs multiple groups of aid staff, together with the physicians, nursing and allied health and any miscommunication may lead to accidental damage to patients. It's been shown systematically that interprofessional communication and cooperation are coupled on to positive patient care and family outcomes together with reduction in ICU length of keep and decreasing the utilization of unsought or ineffective treatments.

Many patients pay their previous couple of moments within the ICU wherever additional life-prolonging measures are deemed to be futile. Patients, relatives and physicians area unit typically at a loss once the care changes focus to palliation, once dying is close at hand. This is often very true within the neurobiology medical aid unit wherever a significant trauma or bleed is ruinous and will suddenly render an antecedently healthy individual unsalvageable. Physicians could notice it troublesome to interrupt dangerous news or broach the topic of palliation. While not the physicians' lead, nursing and allied health could notice it troublesome to debate patient care with the families. Families might not totally comprehend medical jargon, perceive the complexities of ICU patient care or be at numerous stages of grief.

It has been shown that communication relating to finish of life problems is very troublesome in associate degree Asian society, wherever physicians typically notice it easier to continue vital treatment; instead of check with families and withhold or withdraw treatment; because of numerous reasons like ethic legal and spiritual problems.

Palliative care isn't an exact side of apply model that dominates within the ICU setting. Since effective communication has been known as a very important side that holds interprofessional groups along and facilitates coordination of look after patients and families, it's necessary that this side of interprofessional collaboration is investigated additional.

A literature search was performed to seem for any tools that might be accustomed facilitate interprofessional communication. We have a tendency to found the palliative outfit developed by admiral et al., consisting of three tools: A family meeting planner; a gathering guide for families. A family meeting documentation model, to be probably helpful. There's

but, a distinction in Western versus Asian values and culture [9]. Applying the toolkit to our native population with numerous races and languages could also be troublesome likewise. We have a tendency to so sought-after to assess if this outfit was applicable to our native context through a pilot study and verify if we have a tendency to might adopt it in our neurobiology ICU.

We used associate degree educative-research strategy. This refers to the cooperative inquiry method that focuses on the examination and transformation of ideas and practices through dialogue and action. The first investigator and co-investigators can work with aid practitioners UN agency look after palliative patients within the ICU, with the goal of developing and ever-changing ideas to suit our native context and cultural variations, and ever-changing native establishment practices with synchronous phases of current analysis, dialogue and reflection. The native institutional review board approved release of consent for this pilot study.

We aimed to recruit forty patients among a month's amount for the study. The nurses screened ICU patients for palliative care with the subsequent criteria: City Coma Scale (GCS) but five with sedation; severe hypoxic ischemic encephalopathy; severe neural structure hemorrhage; severe traumatic brain injury as deemed unsalvageable by the sawbones. The patients were then flagged for nurse-physician collaboration victimization the palliative outfit within the ICU.

The ICU palliative outfit could be a three-prong approach consisting of:

- Family meeting planner (appendix 1).
- Guide for families (appendix 2).
- Family meeting documentation model (appendix 3).

ICU family meeting is a necessary forum for communication and decision-making concerning acceptable goals of look after critically unwell patients. Inter-disciplinary ICU team conferences supply a broader varies of data, views and resources to support agitated families. Early family conferences to see the goals of care have necessary outcomes for families, patients and for aid systems.

Implementation of family conferences throughout the primary five days for patients at highest risk of poor outcomes achieved important reduction in ICU length of keep and conflict

over goals for care. During this project, we have a tendency to aimed to organise and facilitate a multidisciplinary family conference for the higher than subgroup of patients by day five of ICU keep.

The ICU family meeting planner (Appendix 1) is associate degree body tool employed by the ICU team to trace essential

steps before the family conference. It serves to align everybody on to identical page, providing a timeline for events, so focusing attention on the patient for discussion of goals of care. Nursing took a primary role in finishing this tool, as they were those nearest to the families and in consistent contact with them.