

APPENDIX – Cardiovascular ICU Discharge Report

UNIT OF ORIGIN: ICU CARDIOVASCULAR

DESTINATION UNIT :

NAME	RECORD	AGE	GENDER	ICU ADMISSION DATE	ICU DISCHARGE DATE
REASON ICU ADMISSION :					

Illness Severity	STABLE, WATCHER, UNSTABLE
Patient Summary	Clinical situation that led to surgical intervention and preoperative exams
	Surgical strategy performed in view of the patient's clinical condition: (number of by-pass graft performed, etc.)
	Perioperative evolution, by-pass time and ICU admission conditions
	Evolution in the ICU: (hemodynamics, need for blood components and clinical conditions)
	Clinical status at discharge from the ICU
Action List	
Situation Awareness] and contingence plans	

*Tese**Paulo César Correia*

ALERGIES
() No allergy reports () Yes: Describe
DVT PROPHYLAXIS
() Enoxaparin 40 mg/dia () Heparin 5000 unid/0.25ml Others
ANALGESIA FOR ICU DISCHARGE
() Not necessary () Yes: Describe
GLYCAEMIC PROFILE
NUTRITION
MEDICATION LIST
Highlight potentially dangerous medications

ICU DISCHARGE “Survey Questions Instrument” (Supplementary Appendix).

PATIENT NUMBER

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INITIAIS: _____

ICU DISCHARGE DATA: _____

Previous history was described ?

1- Totally	<input type="checkbox"/>
2- Partially	<input type="checkbox"/>
3- Insufficiently	<input type="checkbox"/>
4- Not	<input type="checkbox"/>
5- These questions do not apply to the case	<input type="checkbox"/>
6- I do not know how to answer the question	<input type="checkbox"/>

Did you understand surgical strategy ?

1- Totally	<input type="checkbox"/>
2- Partially	<input type="checkbox"/>
3- Insufficiently	<input type="checkbox"/>
4- Not	<input type="checkbox"/>
5- These questions do not apply to the case	<input type="checkbox"/>
6- I do not know how to answer the question	<input type="checkbox"/>

ICU clinical evolution was described ?

1- Totally	<input type="checkbox"/>
2- Partially	<input type="checkbox"/>
3- Insufficiently	<input type="checkbox"/>
4- Not	<input type="checkbox"/>
5- These questions do not apply to the case	<input type="checkbox"/>
6- I do not know how to answer the question	<input type="checkbox"/>

Nutrition was described ?

1- Totally	<input type="checkbox"/>
2- Partially	<input type="checkbox"/>
3- Insufficiently	<input type="checkbox"/>
4- Not	<input type="checkbox"/>
5- These questions do not apply to the case	<input type="checkbox"/>
6- I do not know how to answer the question	<input type="checkbox"/>

DVT prophylaxy was understood ?

1- Totally	<input type="checkbox"/>
2- Partially	<input type="checkbox"/>
3- Insufficiently	<input type="checkbox"/>
4- Not	<input type="checkbox"/>
5- These questions do not apply to the case	<input type="checkbox"/>
6- I do not know how to answer the question	<input type="checkbox"/>

Has analgesia strategy been described?

1- Totally	<input type="checkbox"/>
2- Partially	<input type="checkbox"/>
3- Insufficiently	<input type="checkbox"/>
4- Not	<input type="checkbox"/>
5- These questions do not apply to the case	<input type="checkbox"/>
6- I do not know how to answer the question	<input type="checkbox"/>

The glaucemyc profile were described ?

1- Totally	<input type="checkbox"/>
2- Partially	<input type="checkbox"/>
3- Insufficiently	<input type="checkbox"/>
4- Not	<input type="checkbox"/>
5- These questions do not apply to the case	<input type="checkbox"/>
6- I do not know how to answer the question	<input type="checkbox"/>

Is it clear for you if this patient uses potentially dangerous medications?

1- Totally	<input type="checkbox"/>
2- Partially	<input type="checkbox"/>
3- Insufficiently	<input type="checkbox"/>
4- Not	<input type="checkbox"/>
5- These questions do not apply to the case	<input type="checkbox"/>
6- I do not know how to answer the question	<input type="checkbox"/>

Did you understand the care plan suggested by the ICU team?

1- Totally	<input type="checkbox"/>
2- Partially	<input type="checkbox"/>
3- Insufficiently	<input type="checkbox"/>
4- Not	<input type="checkbox"/>
5- These questions do not apply to the case	<input type="checkbox"/>
6- I do not know how to answer the question	<input type="checkbox"/>

The information, overall, on ICU discharge was understood?

1- Totally	<input type="checkbox"/>
2- Partially	<input type="checkbox"/>
3- Insufficiently	<input type="checkbox"/>
4- Not	<input type="checkbox"/>
5- These questions do not apply to the case	<input type="checkbox"/>
6- I do not know how to answer the question	<input type="checkbox"/>

ICU DISCHARGE “Handover report evaluation” (Supplementary Appendix).

Evaluation of the I-PAS mnemonic is present on the printed handover document.

Mnemonic	Description	Yes	No
1. I llness Severity	Identification as stable, “watcher”, or unstable		
2. P atient Summary	<u>Minimum of three:</u> events leading up to ICU admission, ICU course, ongoing assessment, care plan		
3. A ction List	To do list; timeline and ownership		
4. S ituation Awareness/ Contingency Planning	Know what’s going on; plan for what might happen		
		es	o
5- Allergies			
6- Medication list			

7. Rate the length of the printed handoff document:

Very excessive length
 Excessive length
 Appropriate length
 Abbreviated length
 Very abbreviated length

8- Quality of Patient Summaries

1-Poor 2- Fair 3- Good 4- Very Good 5-Excellent

9. Did you observe any erroneous information on the printed tool? Yes No

