

## Transfer Out Of ICU Criteria

- Patients should be transferred out of the ICU when they no longer require critical care services
- Patients that meet criteria for transfer may remain in the ICU if
- this is agreed to be in the patient's best interest after a discussion between the primary surgeon and the surgical intensivist
- Criteria for transfer out of the ICU:
  - Mechanical ventilation no longer needed (unless PSCCU)
  - If PSCCU, mechanical ventilation with tracheostomy
  - PSV mode with PEEP  $\leq 8$  cmH<sub>2</sub>O
  - Oxygen saturations  $\geq 90$  % on FIO<sub>2</sub>  $\leq 50$  %
  - Frequency of airway clearance interventions  $\geq$  q 4 hours
  - Absence of respiratory distress
  - SBP  $\geq 100$  mmHg and  $\leq 220$  mmHg for 24 hours
  - Heart rate between 50 and 110 bpm
  - No need for inotropes or vasopressors for 24 hours
  - No need for  $> 2$  L of IVF boluses or  $> 2$  units PRBC's for 24 hrs
  - No evidence of hypoperfusion
    - Confusion
    - Cool, cyanotic extremities
    - Poor capillary refill
    - Metabolic acidosis
    - Poor urine output
  - No need for medication infusions that can't continue outside of the ICU (ie. Atrial fibrillation medications)
  - Stable GCS and seizures are controlled
  - No need for invasive neurologic monitoring
  - Neurologic checks less frequent than every hour
  - Any altered mental status can be safely managed outside of the ICU
  - No evidence of new, un-treated infection
    - New onset SIRS
  - No deterioration in renal function in last 24 hours
    - Increased creatinine by  $\geq 50$  %
    - New onset oliguria