

Patient flow control rules for those Covid patients potentially requiring intensive care

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The purpose of this note is not to explain to intensive care professionals how they should treat their patients but rather to provide useful guidelines for the purposes of better managing patient flow and creating some room to manoeuvre during these straining times. The end objective here is therefore to reduce the use of intensive care beds as much as possible from a practical standpoint.

Guiding principles should therefore be born in mind, although these are effectively “common sense” procedures which are a part of standard intensive care service operations. They do bear reminding however.

- Opening up continuous monitoring (USC) unit beds for intensive care use. These beds do not consume as much professional time or materials.
- Reserve intensive care beds for patients on ventilation, those close to requiring ventilation or those at high risk of requiring ventilation. To this end the recommendations the Swiss health care system have implemented which Didier Dreyfuss sent over are quite clear and severe in this respect.
- Do not systematically intubate all patients who are dependent on oxygen (e.g. those cases over 6l/min as may have previously be claimed). While this was undoubtedly the case at the start of the crisis - where patients with certain oxygen levels would require ventilation - it is no longer the case as patients are younger now. Optiflow appears to be a very solid solution in this respect.

With these principles in place we should expect to see USC patients never end up in intensive care as well as patients only temporarily spending time in intensive care, therefore freeing up beds sooner rather than later and giving ourselves more room to manoeuvre, in addition to seeing our consumption of medical supplies reduced.

The other aspect under consideration here would naturally be the application of the withdrawal document for those patients on ventilation with the development and securing of post-intensive care rehabilitation beds.