

ICU Discharge

Patient Identification Information

To print blank form

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Please also complete discharge entries under Transitions of Care

(Hospital.ICUDischargeCompleteStatus) **Form Completion Status**
☐ Not Started
☐ In Process
☐ Complete
☐ Queries Outstanding
☐ Not Performed

Discharge Status (Hospital.ICUDischargeStatus) ☐ Alive
☐ Dead
☐ Unknown

ICU Discharge Date & Time (Hospital.ICUDischDate) dd-mmm-yyyy (Hospital.ICUDischTime) hh:mm

Discharge to: (Hospital.ICUDischargeTo) ☐ General ward
☐ Other ICU
☐ Other hospital
☐ Rehab unit
☐ Home
☐ Nursing home
☐ Step down/high care unit
☐ Other
☐ Unknown
(Hospital.ICUDischargeToOther) Specify other:

Hospital Discharge Date & Time

(Hospital.HospDischDate) dd-mmm-yyyy (Hospital.HospDischTime) hh:mm

Reason for discharge (Hospital.HospDischargeReason) ☐ No institutional care necessary
☐ No institutional care in trauma center necessary
☐ Clinical rehab required but not approved
☐ Waiting list for rehab
☐ Clinical rehab required and approved
☐ No benefit of clinical rehab anticipated
☐ Other
(Hospital.HospDischargeReasonOther) Specify other:

GCS at ICU Discharge

Eye opening (Hospital.ICUGCSDischargeEyes) ☐ 1-None
☐ 2-To pain
☐ 3-To speech
☐ 4-Spontaneously
☐ Untestable (swollen)
☐ Untestable (other)
☐ Unknown

Motor (Hospital.ICUGCSDischargeMotor) ☐ 1-None
☐ 2-Abnormal extension
☐ 3-Abnormal flexion
☐ 4-Normal flexion/withdrawal
☐ 5-Localizes to pain
☐ 6-Obeys command
☐ Untestable (Deep sedation/paralyzed)
☐ Untestable (Other)
☐ Unknown

Verbal (Hospital.ICUGCSDischargeVerbal) ☐ 1-None
☐ 2-Incomprehensible sound
☐ 3-Inappropriate words
☐ 4-Confused
☐ 5-Oriented
☐ Untestable (tracheotomy/endotracheal tube)
☐ Untestable (tracheotomy/endotracheal tube)
☐ Untestable (Other)
☐ Unknown

GCS Score (Hospital.ICUGCSDischargeScore)

Complications/Adverse Events Summary

Intracranial complication (requiring treatment)

Delayed haematoma (Hospital.ICUDisComplSeromaHematoma) ☐ No ☐ Yes

Raised ICP (Hospital.ICUDisComplRaisedICP) ☐ No ☐ Yes

Meningitis/Ventriculitis (Hospital.ICUDisComplMeningitis) ☐ No ☐ Yes

Seizures (Hospital.ICUDisComplSeizure) ☐ No ☐ Yes

Other (Hospital.ICUDisComplIntraCranOther) ☐ No ☐ Yes
(Hospital.ICUDisComplIntraCranOtherTxt) Specify other:

Systemic complication (serious)

Respiratory (Hospital.ICUDisComplRespiratoryFailure) No Yes

VAP (Hospital.ICUDisComplVAP) No Yes

Cardiovascular (Hospital.ICUDisComplCardiacArrest) No Yes

Metabolic (Hospital.ICUDisComplMetabolic) No Yes

CRBSI (Hospital.ICUDisComplCRBSI) No Yes

(Hospital.ComplCRBSIDateDiagnosis) Date of Diagnosis

DVT (Hospital.ICUDisComplDVT) No Yes

Pulmonary embolus (Hospital.ICUDisComplPE) No Yes

Urinary tract infection (Hospital.ICUComplUTI) No Yes

Pressures sores (decubitus) (Hospital.ICUDisComplPressureSores) No Yes

Other (Hospital.ICUDisComplSystemOther) No Yes

(Hospital.ICUDisComplSystemOtherTxt) Specify other:

Details ventilator associated pneumonia

Nosocomial pneumonia number (Hospital.ICUDisNosocomialPneumNum)

Date of occurrence (Hospital.ICUDisPneumDate) (dd-mmm-yyyy)

Sepsis or septic shock associated (Hospital.ICUDisPneumSepsis) No Yes

Clinical (Hospital.ICUDisPneumClinical) Fever >=38degC or hypothermia <=36degC

Purulent trachea aspirations

Leukocytes >=12000/ml or <=4000/ml

Chest X-ray (Hospital.ICUDisPneumChestX) New pneumonia

Modification of an old one

No infiltrate

Diffuse (or patchy) infiltrate

Localized infiltrate

Blood gas (Hospital.ICUDisPneumBloodPaO2mmHg) PaO2 (Hospital.ICUDisPneumBloodFiO2pc) FIO2 %

(Hospital.ICUDisPneumBloodPF) P/F

(Hospital.ICUDisPneumBloodPaCO2mmHg) PaCO2 mmHg (Hospital.ICUDisPneumBloodPEPcmH2O) PEEP cmH2O

Bacteriological sample* (Hospital.ICUDisPneumBacteriaSmpl) BAL

Tracheal suction

PDP

Brush

* 1000 UFC/ml if bronchoscopy or PDP and 10000 UFC/ml if BAL and 106 if tracheal suction

Responsible pathogens (Hospital.ICUDisPneumPathogen1) Name of pathogen (Hospital.ICUDisPneumPathogen1QuantUCFml) Quantification (UCF/ml)

(Hospital.ICUDisPneumPathogen2) (Hospital.ICUDisPneumPathogen2QuantUCFml)

(Hospital.ICUDisPneumPathogen3) (Hospital.ICUDisPneumPathogen3QuantUCFml)

(Hospital.ICUDisPneumPathogen4) (Hospital.ICUDisPneumPathogen4QuantUCFml)

Antibiotic treatment (Hospital.ICUDisPneumAntibioticTreat) No Yes

(Hospital.ICUDisPneumAntibiotic1StartDate) Date of beginning (dd-mmm-yyyy)

(Hospital.ICUDisPneumAntibiotic2StartDate)

(Hospital.ICUDisPneumAntibiotic3StartDate)

(Hospital.ICUDisPneumAntibiotic4StartDate)

ICD Codes

Version (Hospital.ICUDischargeICDCode1) (Hospital.ICUDischargeICDCode2) (Hospital.ICUDischargeICDCode3) (Hospital.ICUDischargeICDCode4) (Hospital.ICUDischargeICDCode5) (Hospital.ICUDischargeICDCode6) (Hospital.ICUDischargeICDCode7) (Hospital.ICUDischargeICDCode8)

(Hospital.ICUDischargeICDCodeVersion) (Hospital.ICUDischargeICDCode9) (Hospital.ICUDischargeICDCode10) (Hospital.ICUDischargeICDCode11) (Hospital.ICUDischargeICDCode12) (Hospital.ICUDischargeICDCode13) (Hospital.ICUDischargeICDCode14) (Hospital.ICUDischargeICDCode15) (Hospital.ICUDischargeICDCode16)

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Death Information

Death Date (Subject.DeathDate) dd-mmm-yyyy

Death Time (Subject.DeathTime) hh:mm

Principal cause of death (Hospital.DeathCause) Head injury/initial injury

Head injury/secondary intracranial damage

Systemic trauma

Medical complications

Other

(Hospital.DeathCauseOther) Specify other:

Autopsy performed? (Hospital.DeathAutopsy) No

Yes, forensic

Yes, clinical

Unknown

Patient declared dead on the ICU (Hospital.ICUDisPatDeadAtICU) No Yes

Withdrawal of life-sustaining measures**

For severity of TBI (Hospital.DeadSeverityofTBI) No Yes Unknown

For reason of age (Hospital.DeadAge) No Yes Unknown

For reason of co-morbidities (Hospital.DeadCoMorbidities) No Yes Unknown

On request of relatives (Hospital.DeadRequestRelatives) No Yes Unknown

Following living will of patient (Hospital.DeadPatWill) No Yes Unknown

Determination of brain death (Hospital.DeadDeterminationOfBrainDeath) No Yes Unknown

(according to national law) (Hospital.DeadOrganDonation) Is this followed by organ donation?

No Yes Unknown

(Hospital.OrganDonationDate) Date of organ donation (Hospital.OrganDonationTime) Time of organ donation

dd-mmm-yyyy hh:mm

(Hospital.TimeSinceICUAdmisDeath)

Time between admission in the ICU and death

Date & Time of brain death (Hospital.BrainDeathDate) dd-mmm-yyyy (Hospital.BrainDeathTime) hh:mm

hh:mm

**Mechanical ventilation; vaso-active medication;

CVVH; intravenous fluids

Withdrawal of Treatment

Decision to withdraw active treatment

Decision Date & Time

Support withdrawn Date & Time

(Hospital.ICUDisWithdrawTreatmentDecision) ☐ Multi disciplinary

☐ By a single physician

☐ With relatives

(Hospital.ICUDisWithdrawalTreatmentDecisionDate) dd-mm-yyyy

(Hospital.ICUDisSupportWithdrawnDate) dd-mm-yyyy

(Hospital.ICUDisWithdrawalTreatmentDecisionTime) hh:mm

(Hospital.ICUDisSupportWithdrawnTime) hh:mm

Early Endpoints

Neuroworsening (any episode)

Time to obey commands (days)

PTA on discharge (days)

Duration ventilation (days)

(Subject.SubjectID) Number of CT's performed (All CTs until ICU discharge including Adm CT)

CT progression

(Hospital.ICUDisNeuroworseEpisode) ☐

No ☐ Yes

(Hospital.ICUDisTimeToObeyCommands) ☐ N/A

(Hospital.ICUDisTimeToObeyCommandsNA) ☐ N/A

(Hospital.ICUDischPTADays) ☐

(Hospital.ICUDishDurVent) ☐

(Hospital.ICUDisNumCT) ☐

(Hospital.ICUDisCTProg) ☐ No ☐ Yes

(Hospital.ICUDisSchPTAOngoing) ☐ Ongoing

(Hospital.ICUDishDurVentNA) ☐ N/A

(Hospital.ICUDisCTProgYes) If yes:

☐ Increase in initial lesion

☐ Development of new lesion

Additional Studies Performed

MRI

Coagulation studies

TEG/ROTEM

High resolution ICU monitoring

Electrocorticography (ECoG)

Continuous EEG

(Subject.Cohort) ☐ No ☐ Yes

(Hospital.ICUDisAdditionalStudiesCoag) ☐ No ☐ Yes

(Hospital.ICUDisAdditionalStudiesTEGRotem) ☐ No ☐ Yes

(Hospital.AdditionalStudiesHiResICUMont) ☐ No ☐ Yes

(Hospital.AdditionalStudiesECoG) ☐ No ☐ Yes

(Hospital.AdditionalStudiesEEG) ☐ No ☐ Yes

Physician Estimate of Six Month Outcome

Type of physician

Qualification

(Hospital.ICUDisSixMonthOutcomeType) ☐ ER physician

☐ Intensive care physician

☐ Neurology

☐ Neurosurgery

☐ Traumatology

☐ Unknown

☐ Other

(Hospital.ICUDisSixMonthOutcomeQualification) ☐ Resident

☐ Junior staff (< 5 years)

☐ Senior staff (>5 years)

☐ Head of department

Given all current available information, what is, in your subjective opinion, the most likely 6-month outcome of this patient?
To be based upon information on discharge ICU

Expected (GOS*)

Risk of unfavorable outcome (D, VS, SD)

Date of prognostic estimate

(Hospital.ICUDisSixMonthOutcomeGOS) ☐ Death

☐ Vegetative state

☐ Severe Disability

☐ Moderate Disability

☐ Good Recovery

(Hospital.ICUDisSixMonthOutcomeUnfavourable) ☐ % (0-100)

(Hospital.ICUDisSixMonthOutcomeDate) dd-mm-yyyy

Variable Analysis

Error:1146:Table 'centertbiqua.ddElementDefinition' doesn't exist
Query:select * from ddElementDefinition where Element="ICUDisSixMonthOutcomeType"