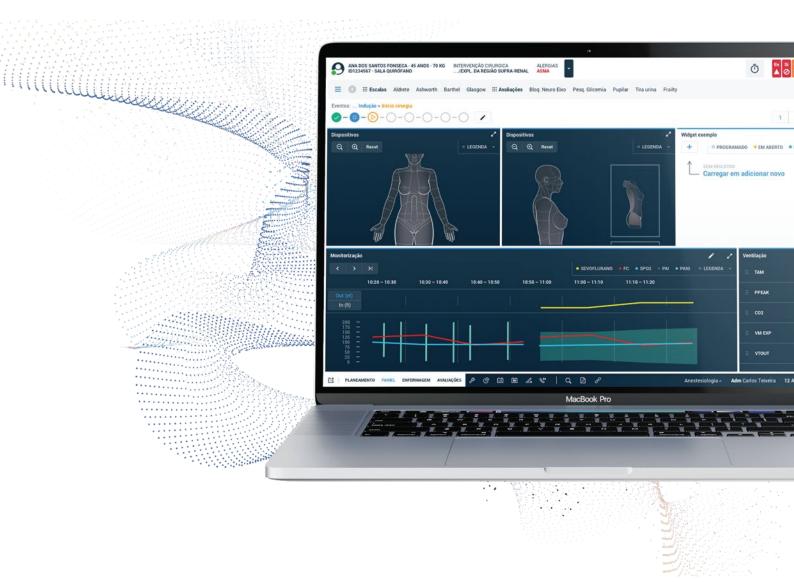


PatientCare Intensive CareUnit







Intensive CareUnit General



I Index

- 1 PATIENTCARE UCI application
- 2 Features of PATIENTCARE UCI
 - 2.1 Medical Area
 - 2.2 Nursery area
 - 2.3 Administrative Area

1 PaTIENTCARE UCI Application

The PATIENTCARE ICU app consists of an electronic clinical record for the Intensive Care Service. It is designed by health professionals specialists in the field - intensive care physicians - and nurses. Easy to integrate, PATIENTCARE ICU ensures data interoperability with other systems already implemented in the Hospital. It functions as a system integrator, gathering in one application the information obtained from medical devices, such as vital signs, infusion pumps, laboratory and main admission system.

With an intuitive graphical interface, PATIENTCARE ICU has a simple learning adaptation and provides a logical workflow, from which stands out the most important information being possible to comply with clinical protocols and enjoy a useful tool for decision making.

PATIENTCARE ICU serves as a repository of patient data, serving to support healthcare professionals in the retrospective analysis of patient data, including the recording of clinical and administrative data, including admissions, hospitalization data (e.g., therapy, severity indices, infections, complications, diagnoses and problems, etc.) and their discharge scores.

Connects to the different medical devices in the unit – hemodynamic monitors; fans; infusion pumps – in order to store this data for future analysis.

It is prepared to connect to the Hospital Information System - HIS and import the administrative data of users.

1 PaTIENTCARE UCI Application

The existence of the concept of differentiated user profiles allows to implement, with ease, granular and easy-to-configuration security mechanisms that favors the delegation of responsibilities in the management of all information, but always with the possibility of resetting previously changed data. Physician Profile; Nurse Profile; Profile of Supervising Physician; Profile of Nurse Supervisor; Administrator Profile.

2 Features PaTIENTCARE ICU

The application has specific areas for the different types of health professionals: Doctors; Nurses; Administrative/General, whose functionalities are described below, as well as the identification of the scales, evaluations and severity indices present in the solution.

Cancelar entrada Cancelar ep	teodio Continuer Ingreso 💿		,	« LIYIDBA Médico Enfermero		
D ENTRADA	00010	MOTIVO ADMISIÓN / ENFERMEDAD ACTUAL	00000	EXPLORACIÓN FÍSICA / PLAN		
Datos Administrativos 🖍 Admisión urgencia		Motivo de admisión y antecedentes Foco de infección al ingreso	No	Exploración Física Tendencia al sueño. Reservorio, sin trabajo respiratorio. Necesidad de NA a		
Admisión hospitalaria	11/02/2022, 14:22	Motivo de admisión		dosis minimas.		
Día de ingreso	11/02/2022, 19:51	Neoplasia maligna de cuerpo de páncreas	1	ACP: Tonos riterricos sin sopios. MVC sin ruidos esbreañadidos. Abdomen doloroso a la palpación. Drenaje en flanco derecho con contenido serothemistico e izquierdo con contenido hemático. Colostomía en fosa lítica izquierda.		
Box	Box 4	Diagnósticos Asociados				
		Dislipidemias	1	MMII sin edemas. MSD con deformación genética. Fistula en MSI.		
atos Clínicos 🖌	a.	Aritmias	1	Drenajes con abundante contenido hemático, NA en ascenso y coagulopatía leve, Hb 9. Aviso de nuevo a Crugía general para valoración.		
Tipo admisión	Cirugia programada	Gastritis Aguda	1	PRUEBAS COMPLEMENTARIAS:		
frauma	No	Antecedentes personales		 AS: Hb 9, leucocitos 26180 con N 86%, plaquetas 217000. INR 1.5, TP 		
Trauma es el motivo principal de admisión?	No	Asma	/	18, TTPa 30. Glucesa 200, urea 93, creatinina 1.5, Na 134, K 4.5. pH 7.26, pC02 36, láctico 3.2, HC03 16.		
Bravedad del paciente	Nivel I - Recuperación	Miopatia	1			
		Observaciones sobre	-NAMC	General		
Clasificación del Tipo de Paciente en la Admisión Potencial donante órgano -		antecedentes personales	- MSD con deformación genética. - Cirrosis por VHC (tratada, con carga viral negativa) con descompensaciones hidrópicas.	Glasgow: 6 (0+2 : V+2 : M+2) / Función motora: Espástica, Herniparesia derecha		
rocedencia /			Insuficiencia renal crónica con diálisis (13 meses, Fístula MSI	O Plan +		
Tipo Procedencia	Hospital Hospital QuirónSalud Malaga	Enfermediad Actual				
Jnidad	Cirugia General y del Aparato Digestivo	Mujer de 57 años que ingresa en UC abdomino-perineal de recto con colo				

2 Features PaTIENTCARE ICU

2.1 Medical area

Admission

- Patient registration: Import of administrative Objective Examination: Registration of data from the central system of the hospital. the patient's examination by systems,
- Reason for admission: Diagnostics log based on ICD9/10-CM - Possibility to define list of favorite ICD9/10-CM of the unit.
- Clinical History: Description of the patient's clinical status.
- Objective Examination: Registration of the patient's examination by systems, and with predefined help texts: Vital Parameters; General; Neurological; Respiratory; Cardiovascular; Renal; Digestive; Cutaneous-Mucous and Infectious.
- Invasive Procedures / Techniques: Definition of procedures performed on the patient on the basis of ICD9/10-CM. Possibility to set list of favorites.

Evolucion

- Recording of data by day and systems: Description of the patient's condition, for days and by systems: General; Neurological; Respiratory; Cardiovascular; Digestive; Cutaneous-Mucous; Infectious and Renal.
- Registration of information by technicians: Possibility of recording data by health professionals outside the ICU.

Monitoring

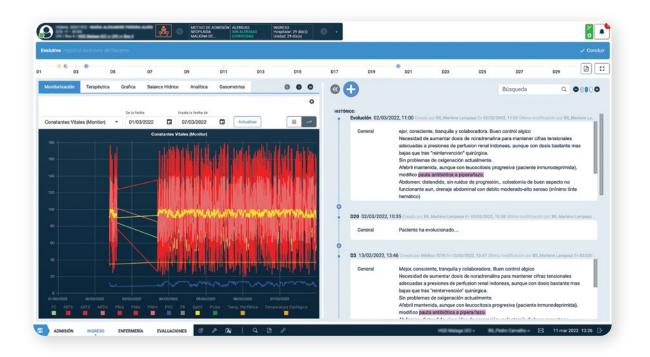
• Vital Signs: Temporal visualization of the patient's vital parameters as acquired at the monitoring center. Possibility to filter curves and viewing intervals.

Plan

- Severity Indices: Record of specific severity indices for ICU of adults: CRIB; NNRS; NTISS; PRISM; APACHEII; SAPSII; SAPSIII; GRACE, TIMI, TISS28; SOFA; TIMI; GRACE
- Topogram: Possibility to graphically record medical or nursing actions in the patient's topogram.
- Infection: Recording of infection data with the possibility of specifying products, agents, sensitivities;

- Ventilation: Manual recording or direct import of ventilation data.
- Logsheet: Overview of information in 24-hour periods. Users can combine the visualization of modules such as ventilation, Water Balance, Vital Signs, etc.
- Visualization of data related to infection in DashBoard: Infections; Antibiotics; Agents; Procedures; Analysis; Vital Signs;
- Procedures: Definition of procedures performed on the patient on the basis of ICD9/10-CM. Possibility to set list of favorites.

2 Features PaTIENTCARE ICU



Discharge

- Therapy: Medical attitudes; Prescription of DCIs; Enteric feeding; Parenteral feeding.
- Scheduling prescription with direct connection to the nursing work plan.
- High Registration: General high data register.
- Objective Examination: Registration of the examination of the patient to discharge by systems, and with predefined help texts: General; Neurological; Respiratory;

Cardiovascular; Renal; Digestive; Cutaneous-Mucous; Infectious; Other.

- Discharge diagnoses: Possibility of marking the patient's diagnoses as being discharged or adding new diagnoses
- Discharge Plan: Specification of the patient discharge plan.

2.2 Nursing area

Evaluations

- Pain Assessment
- Water Balance
- Neurological Assessment (Glasgow Scale)
- Registration and appreciation of Wound/Ulcer
- Risk determination scales for pressure ulcers (Norton Scale)
- Capillary Glucose Monitoring
- Ventilation Monitoring
- Vital Signs Monitoring

Features Patientcare ICU 2

Work plan

• Graphical visualization of the entire work plan of the nurse.

Diagnostics

• Construction of Diagnoses (Nursing Foci) based on the ICNP.

Interventions

- Association of interventions with prescribed
 Possibility of associating interventions medical attitudes; unknown attitudes; nursing foci.
- without predefined attitude.

2.3 Administrative area

Administrative

- Admission of the patient, with data synchronization with HIS and bed assignment within the unit.
- Document Management: Possibility of associating documents of different formats to the patient's form; PDF, Docs, images, scans, etc.

General

- Pre-defined reports: Admission Note; Medical Journal Summary; High Note; Infection Summary.
- · Bespoke reports: Development of reports according to the needs of the unit.

Integration

- Interoperability: PATIENTCARE ICU is prepared to import data in HL7 version 2.3 format or higher from medical devices that make data available in this format.
- Export of data: Export of reports to other information systems, such as HIS (Note of dischargeS; MCDTS)
- Integration with HELICS platform for data export;
- CheckList CheckList: The Unit Director has the possibility to define a series of procedures without which the patient is executed may not be discharged, in order to ensure the integration of data.

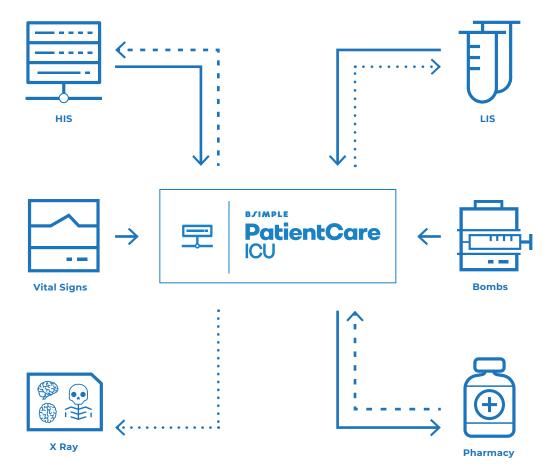
2 Features PaTIENTCARE ICU

The relationship with the different applications in the intensive care unit varies depending on the type of data each treats. In some situations the data are imported for further analysis, whether clinical, statistical or research. PATIENT-CARE ICU records essentially clinical and nursing data, and in some situations it is necessary to record administrative data for correct identification of patients.

The following illustrates the flow of information between applications and the following table illustrates the type of interconnection.

Caption:

- - Patientcare ICU data export
- Importing data into PATIENTCARE ICU
- ••••• Data binding. Make a connection to the local application and position itself in the patient's



Data interconnection scheme





Leading Healthcare Digitization

Porto, Portugal R. Prof. Manuel Baganha 219, 4350-009 Porto

www.verticaresystems.com

