

# What to expect while your loved one is in intensive care

**Intensive care units (ICUs) provide the highest degree of care to patients with a life-threatening illness or injury.**

**Seeing someone you love who is very sick or badly injured can be scary and stressful. This brochure will help you understand what will happen while they are in an ICU.**



## What to expect?

The ICU is noisy and busy. It may feel unfamiliar and disorientating. Nurses will do their best to help you and keep you informed. Please ask if you have any questions or concerns.

There are complex-looking machines and tubes, with alarms and flashing lights. These help staff to manage treatment and care and do not always indicate that something is wrong.

Patients often need sedatives or strong pain-killing drugs. These can make communicating difficult.

Talking or touching your loved one can be reassuring and is encouraged. Check with the bedside nurse for advice about the best way to communicate with them.



## Who is caring for your loved one?

There is a team of specialist clinicians caring for your loved one. This includes doctors, nurses, physiotherapists, social workers, dietitians, pharmacists, occupational and speech therapists.

The bedside nurse can answer many of your questions and explain the daily routine in the ICU. They will also arrange for you to speak to others involved in your loved one's care.

Staff will ask you about your loved one to get to know them better.



## Visiting hours

ICUs have more flexible visiting hours than other hospital wards. Staff will let you know the visiting hours and any restrictions on visiting numbers.

If you want to bring a child to visit a loved one in the ICU, it's important to prepare them ahead of time. We recommend talking to the nursing staff or social worker to get some advice on how best to do this.



When you walk into the ICU you will find bottles of alcohol-based hand rub in accessible places. Please help us to reduce the risk of infection and use this each time you enter and leave the ICU.

You may also need to wear an apron or gown and a mask when you visit your loved one - the staff will assist you with this.



**If you are not feeling well, please do not come to visit your loved one.**



## What is your role?

You are the important link between your loved one and the clinicians taking care of them. If your loved one is unconscious, you may need to speak on their behalf and share their wishes. This can be stressful. Please let the staff know if you have any concerns so that we can provide you with the support you need.

The intensive care team will keep you informed of how your loved one is progressing. Please don't get deterred by how busy the staff seem – this is typical for them.

Please bring in your loved one's preferred toiletries and any special items. This includes things like:

- toothbrush and toothpaste
- hairbrush or comb
- shaving equipment
- deodorant
- photos for their bedside.

You can pamper your loved one if you would like to. Talk to the bedside nurse for ideas, but they could include:

- hand and foot massage
- manicure
- brushing hair.

We encourage you to give care and connect. It is always good to ask about other ideas such as bringing in music to play or 'virtual visits' using a tablet or phone.



## Looking after yourself

It is important that both patients and families get the rest they need. You need to have time away from the ICU to sleep, eat and exercise. You shouldn't feel guilty for not being by your loved one's bedside 24 hours a day. The skilled team caring for your loved one will contact you if there are any significant changes.

Remember the staff are here to care for you as well as your loved one.

Social workers are available to talk to you about how to cope with your loved one's illness or injury. They will give guidance on how to manage difficult feelings. They can also help with accommodation, public transport, and financial and legal matters. The social worker can provide support when attending family meetings. Let the bedside nurse know you would like to speak to a social worker if you haven't already met them.



## Spiritual support

We have support for most religions, and some ICUs may also have non-denominational pastoral carers. The staff will be happy to arrange for them to visit at your request. Most hospitals also have a dedicated quiet room for peace and meditation. These are for people of every faith and belief system. Please ask the staff where to find this space.



## Discharge from ICU

The ICU specialist doctor (intensivist) decides when to transfer your loved one from ICU. This happens during their daily rounds. Discharge happens when your loved one no longer needs the special monitoring equipment in the ICU. On the medical ward they are able to move around much more and wear their own pyjamas or clothes. In the ward, the admitting team take over their ongoing care.

If you have any concerns or questions about this process, talk to the nursing staff.

**If there is anything troubling you, or you wish to raise a complaint, concern or compliment, speak to the bedside nurse or the nurse unit manager.**



## Useful links

### Intensive Care NSW

<https://aci.health.nsw.gov.au/networks/icnsw/patients-and-families>

### Australian Charter of Healthcare Rights

<https://safetyandquality.gov.au/consumers/working-your-healthcare-provider/australian-charter-healthcare-rights>

### Health Consumers NSW

<https://hcnsw.org.au/>