

FAST HUGS BID

Routine Care for ICU Patients to Review on Daily Rounds

F Feeding	What feeds or diet is the patient receiving? Can this be optimized? If NPO, do they still need to be? If projected to be NPO for a long time, should TPN be considered?
A Analgesia	Is pain control adequate? Are non-opioid adjuncts being used? Can oral analgesics be added instead of IV infusions?
S Sedation	Is sedation being minimized as much as possible? Is a non-benzodiazepine strategy being used, if possible?
T Thromboembolic prophylaxis	Is the patient receiving VTE prophylaxis? Does the VTE prophylaxis need to be adjusted for renal function? For patients at high bleeding risk, are TEDS or SCDs being used?
H Head of Bed Elevated	Is head of bed elevated to at least 30 degrees?
U Ulcer prophylaxis	Does this patient require stress ulcer prophylaxis? Can stress ulcer prophylaxis be discontinued?
G Glycemic control	Is glycemic control adequate (blood glucose target generally 6-10mmol/L)?
S Spontaneous breathing trial	Does this patient qualify for a spontaneous breathing trial and has it been performed?
B Bowel regimen	Is a bowel routine ordered? Does the bowel routine need to be adjusted or escalated?
I Indwelling catheters and lines	Can the central line or arterial line be removed? Does the patient still require a foley catheter?
D Deescalate antibiotics	Can the patient's antibiotics be narrowed or discontinued? Do all antibiotics have stop dates?