



Physiotherapy in **Critical Care**

Physiotherapy Service

Introduction

This leaflet is designed for patients and families admitted to the Critical Care Unit to provide an overview of the Physiotherapy service, and what to expect if they need physiotherapy.

People admitted to the Critical Care Unit need specialist monitoring, support and treatment. Many patients need mechanical ventilation to help with their breathing.

It is normal for patients to experience physical and psychological stress during a critical illness. Intensive care staff are aware of this and the impact it can have on them and their families. If you have any further questions or concerns, please talk to one of the Physiotherapists or other staff members on the unit.

Role of Physiotherapy

Physiotherapists in Critical Care work as part of a team of healthcare professionals to help manage and prevent chest infections as well as promoting mobility and rehabilitation of patients.

Chest Physiotherapy

Physiotherapists help keep a patient's lungs clear of sputum to help prevent and treat infections, with ventilated and non-ventilated patients. This can involve different treatments such as positioning, manual techniques, use of equipment, suctioning, breathing exercises and early mobilisation as appropriate.

Mobility and Rehabilitation

It is common for people to lose strength in their arms and legs as well as experience some stiffness in their joints, which can cause pain, as patients are seriously ill and are initially treated in bed.

Physiotherapists will help patients with their rehabilitation to regain strength and function following their admission. This can involve:

- Stretching of ventilated patients to maintain their muscle range and flexibility, while some may be provided with splints to maintain joint position.
- Setting goals to structure their rehabilitation and monitor progress.

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- ❖ Sitting up on the edge of the bed with support to begin regaining awareness of surroundings and balance.
- ❖ Sitting in a chair for longer periods to strengthen muscles, help clear secretions, improve exercise tolerance and begin simple exercises.
- ❖ Standing practice, mobility practice and exercises. Physiotherapists are able to use different equipment to support this as needed. It is important to be consistent with any exercise program developed with the therapists to have the best results.

Discharge from ICU

Most patients, once they are well enough, will be moved from ICU to a ward. This is a positive step in the recovery process. This decision is made by the ICU consultants with the support of the rest of the staff on the unit.

Recovery from ICU can be a long process, taking weeks or months to return to normal.

Once on a ward, patients will find that they will be expected to do more for themselves to promote independence and return to a more normal level of activity. This will be supported by staff on the wards. If ongoing rehab is required, this can be provided in another hospital or the community following discharge.

Relatives and friends

It is likely that the physiotherapists will provide an exercise programme to help complete with the patient and it is usually recommended to bring in some comfortable loose clothing and suitable footwear for rehab.

It can also be useful to help maintain as normal a routine as possible and bring in some personal items like favourite books, pictures or music to ensure suitable orientation and activity.

Useful Links

Keeping Me Well

(www.keepingmewell.com/i-need-help-with/recovery-after-critical-illness/)

ICU Steps

(www.icusteps.com)

Intensive Care Society Patient and Relative Section

(www.ics.ac.uk/patientsandrelativessection)

Contact number:

Grange University Hospital Critical Care Unit Reception - 01633 493154

This document is available in Welsh / Mae'r ddogfen hon ar gael yn Gymraeg

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