



مرکز پژوهشی، آموزشی و درمانی کوثر



دانشگاه علوم پزشکی خدمات بهداشتی درمانی کرمان



ICU

Kowsar hospital has five intensive care units (ICU 1, ICU 2, ICU 3, ICU 4, BICU) equipped according to the latest world standards. All the intensive care units are designed to enjoy sterile air conditioning and natural lighting to provide a pleasant condition for patients.

ICU1, 2, 3 with total capacity of 30 beds are located in the first floor of the hospital.

ICU4 and BICU are located in the ground floor next to the emergency ward.

ICU wards are equipped with cutting edge facilities and central monitoring systems. The hospital is ready to admit critically ill patients in ICU wards. The highly skillful and committed staff are constantly supervised and educated through conferences and educational programs so

that world class services are provided to the patients.

Anesthesiologists attend the ICU wards every day in 24 hours shifts.

Special services of ICU wards

- ✓ Bathing the patients twice or three times a week
- ✓ Standard number of staff per patients
- ✓ Up-dated educational programs for the ward nurses and staff
- ✓ Isolated rooms for patients with critical or special conditions
- ✓ Equipped beds with monitoring, pulse oximetry, blood pressure, skin thermometer, anal thermometer, central oxygen, central suction, CVP and arterial pressure transducer systems and devices.
- ✓ Echocardiography
- ✓ Portable sonography
- ✓ Portable bronchoscopy
- ✓ Advanced wounds dressing and care, supervised and conducted by the wounds clinic
- Ventilation and air conditioning for brain and respiratory critically ill patients like CRF, CVA, poisoned, and cancer patients who need vital signs monitoring

ICU staff and management

An ICU ward is managed by an anesthesiologist as a ward head. A head nurse controls the nursing services. Documentation is controlled by a medical secretary and cleaning services are scheduled and done every day.

Routine nursing services for ICU patients

- ✓ Monitoring the vital signs every two hours
- ✓ Mouth irrigation, three times a day
- ✓ Massage and position changing every two hours
- ✓ Moisturizing skin around the mouth for preventing angular cheilitis and fixing the tracheal tube using sterile gauze twice a day
- ✓ Monitoring pressure and position of the tracheal tube
- ✓ Mouth suction or PRN tracheostomy
- ✓ Tracheostomy cleaning through N/S and changing the gauze
- ✓ Bed wounds irrigation with normal saline
- ✓ Betadine perineal irrigation three times a day
- ✓ Bed bathing twice a week

- ✓ Chest tubes and charts control
- ✓ NGT control
- ✓ Dressing change according to sterilization guidelines
- ✓ Respiratory physiotherapy and motivational spirometry
- ✓ Liquid intake and urine output check
- ✓ Foley catheter and NGT changing every ten days