# Monitoring inadvertent Hypothermia in Intensive Care patients-An Audit.

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#### BACKGROUND

- Thermoregulation is a dynamic part of homeostasis controlled by the anterior hypothalamus, often disrupted in the critically ill
- Neurological, cardiorespiratory, metabolic and infective compromise can be potential manifestations.
- Close monitoring and regulation of body temperature forms an important part of critical care.
- In a retrospective audit done on 5050 consecutive patients admitted to ICU after surgery, 35% were hypothermic and 6% were severely hypothermic.
- In-hospital mortality was 5.6% for normothermic patients, 8.9% for all hypothermic patients (p<0.001), and 14.7% for severely hypothermic patients (p<0.001).
- We designed and conducted this audit in the critical care unit of our center based on an audit published in RCOA compendium of audits 3rd edition and NICE guidelines-65.

### METHODS

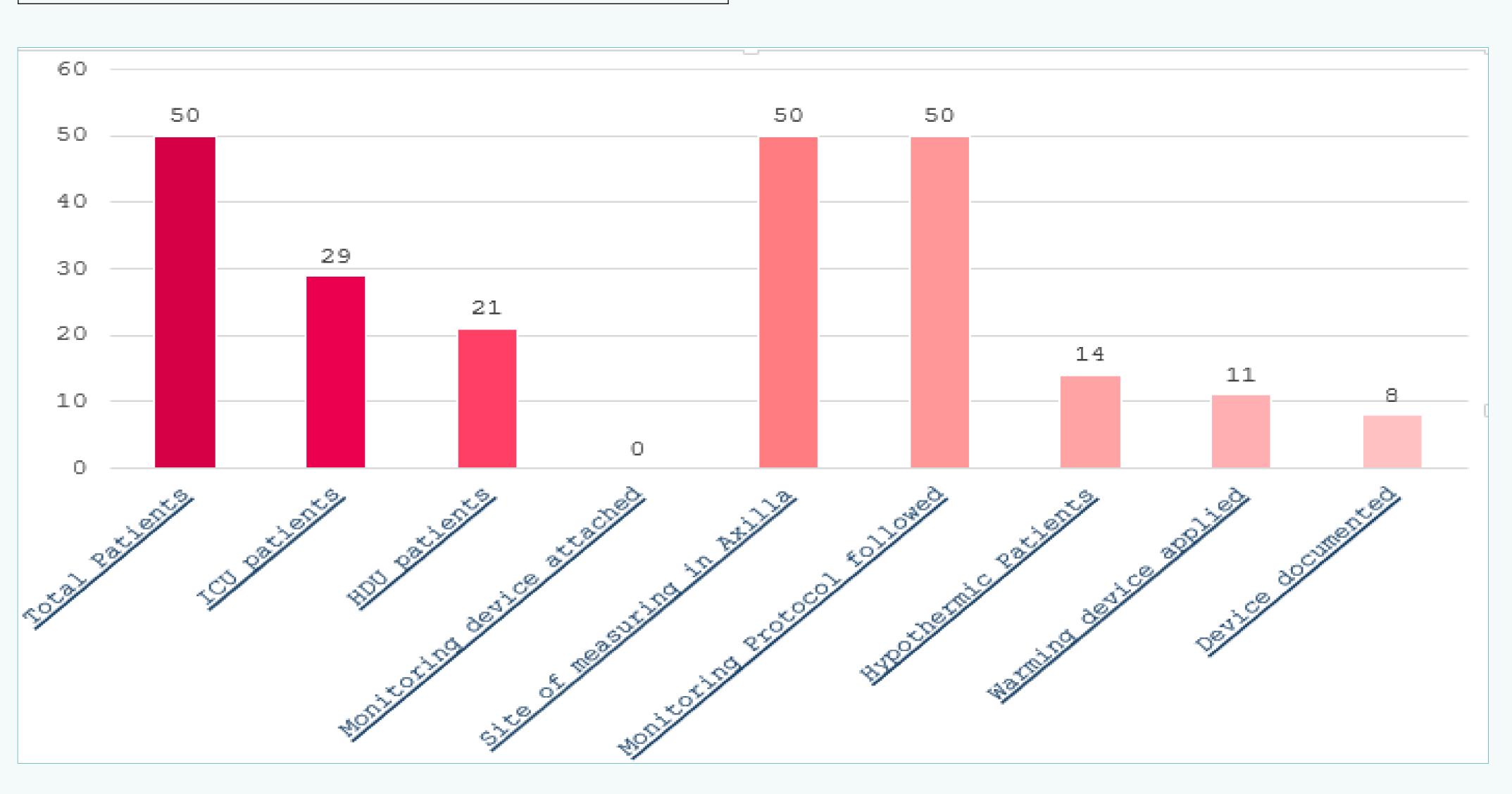
- After QPSD approval the audit was conducted on a prospective sample size of 50 patients.
- Patients admitted to the ICU at SKMCH Lahore during a period of 2 months starting from 3-2-2025 to 31-3-2025 were included.
- Both HDU and ICU patients were observed for inadvertent Hypothermia.
- Results were recorded on a specifically designed proforma.
  Data was analyzed through an excel sheet and displayed in form of charts.

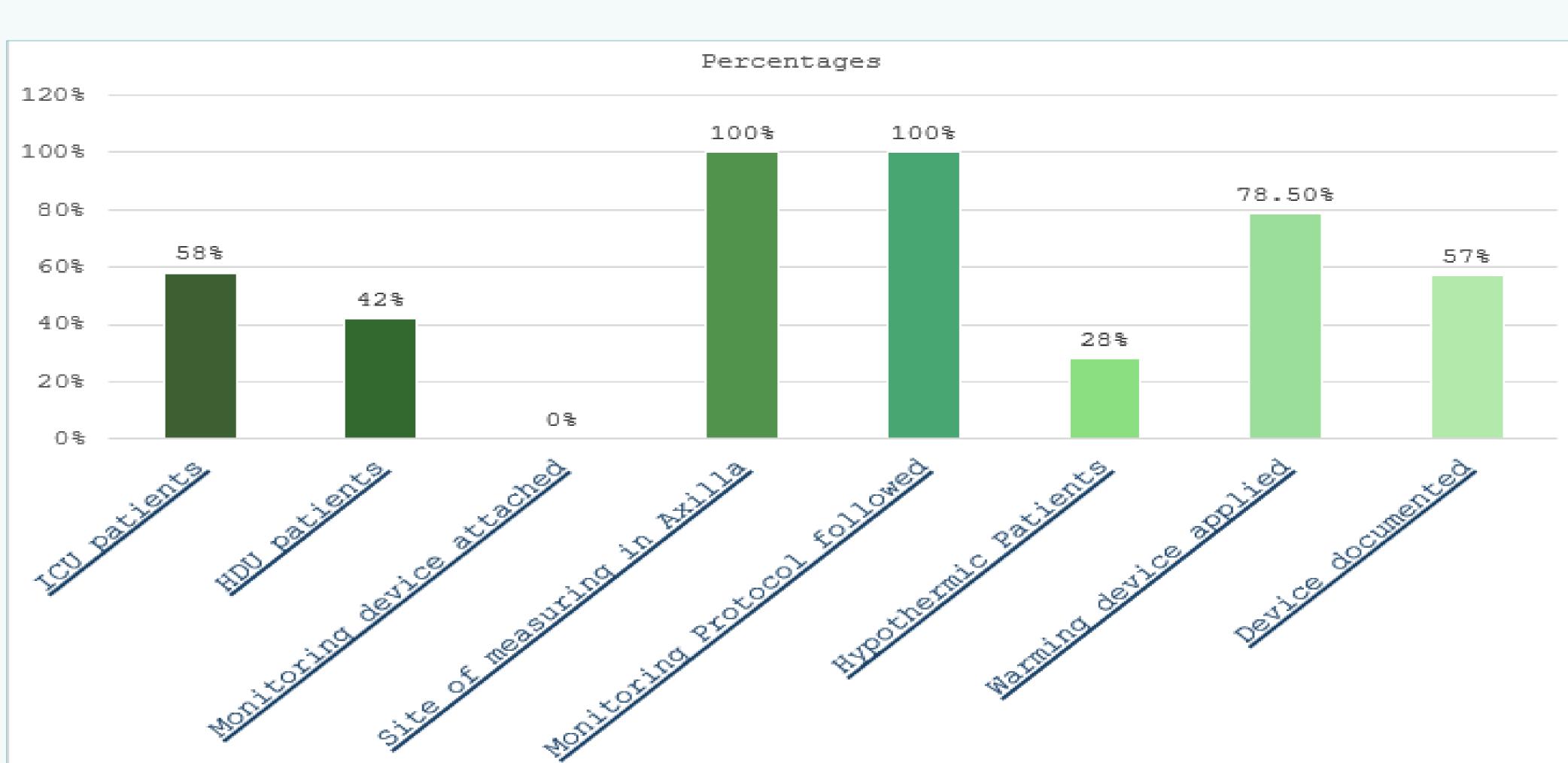
#### RESULTS

- Out of total 50 patients 29 were on ICU bed and 21 were on an HDU bed.
- Monitoring in all patients was according to ICU protocol.
- Hypothermia was observed in 14 patients out of which 2 were on HDU bed and rest on ICU bed.
- Warming device was attached and documented in 11 of the 14 patients.
- Documentation of warming device was missed in 3 of the 11 patients mentioned above.

## CONCLUSION

- We found that all the patients were being monitored according to ICU protocol.
- Our target standard based on RCOA compendium of audits, that 0% percent of the patients should experience hypothermia was not met.
- Moreover, proper documentation of warming devices was missed.





## RECOMMENDATIONS

- Teaching sessions should be held with all members of the nursing team and doctors in ICU to emphasize the importance of temperature monitoring, hypothermia, prevention and their impact on the critically ill.
- Frequent similar audits can be done by the hospital itself, to ensure compliance with adequate monitoring, timely interventions and proper documentation.

