



# A guide to...

## Discharge from Critical Care *Patient Information*

### How to contact us

#### Intensive Care Unit (ICU)

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If you need this leaflet in another language, large print, Braille or audio version, please call **01923 217 198** or email [westherts.pals@nhs.net](mailto:westherts.pals@nhs.net)



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## **Discharge from critical care: Your questions answered**

We understand that patients and relatives often are concerned when the time comes for patients to leave our unit and return to ward care, so we have put together this information leaflet to explain how we manage the discharge of patients to a ward.

### **Who takes the decision?**

The decision to discharge from ICU is made by a consultant and is based on whether the patient still needs an 'organ' support (eg help with breathing from our ventilators or a kidney machine), the stronger medications that are only given in the ICU, or close monitoring if they are thought to be at risk of immediate deterioration.

We expect our patients to benefit from intensive care treatment. When they are discharged, they will not have recovered completely, and we expect that they will continue to improve on the ward.

### **Is ICU the best place for me or my loved one?**

Some patients may not benefit from intensive care, and we review if we have done all we can to give that patient their best chance of recovery, sometimes survival.

If it is felt that we have no more treatment that would be of benefit to them, we will discharge the patient to a ward bed. All of our patients are very different — some may be given certain treatments that others are not, depending on their needs.

We always consider that all our interventions are associated with risks and are generally uncomfortable for the patients. Many of our patients become delirious, confused or disorientated, often hallucinating. This can be distressing for patients and families; more information is available in the waiting area or from the nurses.

The delirium may not be completely resolved before discharge from ICU as it can take over a week to improve.

The ward staff will receive a detailed handover about each patient, including full information on any ongoing confusion that the patient may be experiencing.

### **Does leaving intensive care mean that recovery is complete?**

A critical care admission leaves most patients weak, having lost a lot of muscle. They may also experience problems with concentration. Their recovery may take weeks, in some cases months, and depending on how long they were ill, they may not recover to their previous level of fitness or function.

On discharge from intensive care, patients are at the beginning of their rehabilitation so will still need considerable help and care.

## **What's next?**

Once a decision is made that a patient is ready for discharge, a ward bed will be requested for that day. If there is no acute ward bed available, then the patient will stay on the ICU until one becomes available.

Our patients are not moved to another ward without the family being informed. Patients are only moved overnight in exceptional circumstances.

Our critical care outreach team will follow the patient in the ward for a period, until they are ready to be discharged from this service.

Once a patient goes home, our follow-up nurse will contact them to see how they are getting on and to offer a critical care follow-up clinic appointment if they feel that would be helpful.

## **Further information**

If you have any further questions or concerns, feel free to contact the following people, either via Intensive Care Unit staff or the contact details listed:

### **Matron - Intensive Care Unit**

Tel: 01923 217913

Email: [westherts.criticalcare@nhs.net](mailto:westherts.criticalcare@nhs.net)

### **Clinical Lead - Intensive Care Unit**

Tel: 01923 217610 (leave message)

Email: [westherts.criticalcare@nhs.net](mailto:westherts.criticalcare@nhs.net)

### **Intensive Care Unit - follow-up clinic**

Tel: 01923 217142 - answering service