



50% of all hospital **DEATHS** takes place in **Intensive Care Units**



INTELE-NEWS

Critical News - Anytime, Anywhere!

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Newsletter of IntelICU™

Over all around the globe intensive care unit (ICU) admissions are steadily increasing. A similar trend prevails in India too. Increase in the aging population, better awareness among public in seeking timely medical care, affordability and accessibility to health care are among the various reasons for the increase in ICU admissions. This increase has been noted in urban, semi-urban and rural areas across India. The sudden, rapid rise in the volume of patients admitted to intensive care units places a huge demand on the health care system. There is an acute need for qualified critical care physicians who can provide round the clock care to these sick patients.

At present even hospitals in metros are finding it difficult to match the needs for ICU beds imposed on them.



The gap between the availability of workforce and the demands is even wider in semi-urban and rural areas. It is impractical for any physician to be available 24x7 and constantly titrate care. One solution that has bridged this gap between the supply and demand is the TeleICU model, where ICUs are monitored by experienced ICU doctors and nurses from a remote location, bedside team guided and management plans constantly monitored and modified.



Though the Tele ICU model has been in existence for more than a decade in western world, this modality has not been explored or utilized in India.

We are proud to announce that the first such free standing TeleICU service called "IntelICU™" has been started and remote TeleICU service is being provided by 24x7 Healthvision, from Chennai.

The IntelICU™ program has been up and running successfully since June 1st 2013 and 24x7 coverage is currently being provided to Gitanjali Medical Center, Trichy and Sri Renga Hospital, Chengalpattu. We believe that this technology will bring expertise that is rarely present in semi-urban and rural areas to the bedside routinely, negating the need for transfer of patients from these locations to nearby cities.



Over the past three months, we have provided care to over 250 Patient patients at these 2 Hospitals and have made an impact on the quality of care with our nursing education, protocolized care and constant presence.

Inauguration of Gitanjali TeleICU



The Inaugural Ceremony of TeleICU Services at Gitanjali Medical Centre Trichy on 29-Jun-13 was attended by more than 300 doctors and eminent citizens of Trichy. Dr. M.S Ashraf was the Chief guest and Dr. M. Chenniappan & Dr. R. Gunasekaran graced the occasion.



The Inauguration of the TeleICU services at Gitanjali Medical Centre was followed by two CME programs at Ariyalur and Lalgudi specifically aimed at creating awareness of the TeleICU program among the local Physicians.

Inauguration of Sree Renga TeleICU

A six-bed TeleICU unit was also launched at Sree Renga Hospital, Chengalpattu, India. A sensitization programme targeting the public and a CME programme oriented towards doctors practising in the communities around Chengalpattu were held over two weekends in August 2013.



Dr. N. Ramakrishnan enlightened the medical fraternity about the logistics of the TeleICU model.



Dr. K. P. Pichumani, highlighted and shared the competencies gained during the two-month testing phase of IntelICU at Sree Renga Hospital along with testimonials from the participant surgeons.



The Inauguration was attended by over 200 people and was graced by leaders of the Lions Club, the Rotary Club and eminent citizens of the community.

Partnership with Philips

Philips India is a market leader in medical devices in India with over 45% market share in ICU Monitoring equipment.



Dr .N. Ramakrishnan MD & CEO of 24x7 Healthvision with Wido Menhardt CEO - Philips Innovation Campus & Arjen Head of Philips APAC during their meeting at New Delhi



Philips is also a strategic partner for IntelICU™ program and is committed in utilising its R&D and resources across India to ensure the success of the IntelICU™ program.

Clinical Vignettes

Here we share details of two patients in whom our team promptly identified an event, intervened immediately and successfully abated adverse outcomes.



The first patient was a victim of road-traffic accident, who presented to the ICU with hemodynamic instability late in the evening. The Intel-Physician who was monitoring the patient at night evaluated him and noticed a substantial drop in his haemoglobin and immediately requested an ultrasound of the abdomen. The ultrasound was done, interpreted and the surgeon on call notified without any delay. The Surgeon saw the patient at 2 AM and performed an emergent

exploratory laparotomy and found a hepatic laceration for which appropriate haemostasis was done and patient stabilized.



The second patient was an elderly gentleman who was admitted with hypotension, severe azotemia, oliguria and hyperkalemia. After evaluation by our team, arterial blood gas was done which revealed combined severe metabolic & respiratory acidosis. The Primary physician was informed by the IntelICU™ staff about patient's acute condition and the need for immediate dialysis and further work up. Dialysis was initiated emergently and metabolic parameters normalized. Both these patients were discharged from the ICU successfully within the next few days.

These two Clinical Vignettes point to the easy availability of timely intervention from an expert Intensivist through the IntelICU™ program which leads to improved patient outcomes at a place and time where expert clinical work force was otherwise limited. In the coming months, we aim to expand the IntelICU™ program to many more hospitals and will continue to augment bedside care by 24x7 remote monitoring and constant titration of care. We are excited with this new venture and sincerely believe we can make a positive impact to the quality of ICU care provided across the country.