## Outcome of Early Mobilization Protocol at Gunma University Hospital ICU

Makoto Hasegawa<sup>1</sup>, Masayuki Tazawa<sup>1</sup>, Hiroomi Yamaguchi<sup>1</sup>, Kazuhiro Takahashi<sup>1</sup>, Tomoaki Sugaya<sup>1</sup>, Masafumi Kanamoto<sup>2</sup>, Minori Kurosaki<sup>1</sup>, Yoko Ibe<sup>1</sup>, Hiroshi Hinohara<sup>2</sup>, Naoki Wada<sup>1</sup>

Department of Rehabilitation Medicine, Gunma University Hospital<sup>1</sup>, Department of Intensive care unit, Gunma University Hospital, Japan<sup>2</sup>

[Background and aims]

In recent years, rehabilitation of early mobilization in the intensive care unit (ICU) is common practice in a lot of hospitals. In our hospital, we assigned physical therapists to the ICU in part-time, for the early mobilization purpose from 2012. In intervention, we use original Gunma university early mobilization protocol. We report the operative results and outcome of the early mobilization protocol of our hospital. [Gunma University Early Mobilization Protocol (figure1)]

We created the protocol together at the rehabilitation staff and the ICU staff. The protocol adapted for all patients entering the ICU. However, the patients with mobilization restrictions are considered individually. The adaptation of this protocol is discussed by the many types of medical staff (rehabilitation doctor, ICU doctors, nurses, physical therapists, pharmacist, medical engineer, and medical clerk) in conference in the morning. In the conference, medical staffs are discussed patients about a treatment strategy and a mobilization level and the rest state. When the criteria of protocol met, the rehabilitation intervenes sitting, standing, and walking. We suspend intervention when we confirm suspension criteria.

[Results]

The ICU admission were 2,728 patients from October 2016 to September 2018, and 1181 patients (66.4%) were provided rehabilitation therapy. Among them, the number of patients who could be evaluated was 1314 patients at the time of discharge from the ICU. 1122 patients (84.6%) were able to do sitting, 901 patients (68.6%) to standing, 685 patients (52.1%) to walking.

[Conclusions]

Using early mobilization protocol, rehabilitation therapy was possible in ICU. During ICU admission, in more than 68% of patients were possible sitting and standing in the bedside. The visualized protocol and participation of the many types of medical staffs are necessary to be effective intervention and safety.

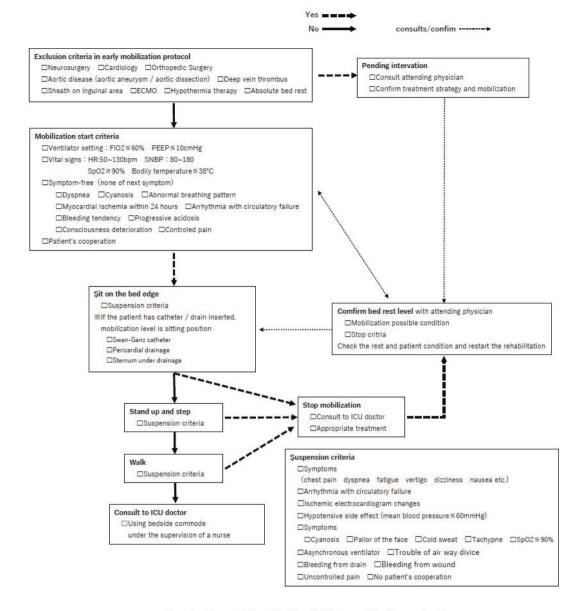


figure1 Gunma University Hospital Early mobilization protocol