
Neuroscience ICU Early Mobilisation Protocol



Researchers in the U.S. have developed a multidisciplinary Neuro Early Mobilisation Protocol for complex patients in the neuroscience intensive care unit (NSICU). They said developing an evidence-based protocol with interprofessional stakeholders was essential for its successful implementation. Their work is published in the journal *Intensive and Critical Care Nursing*.

Many patients in the ICU are kept immobile as their medical condition and associated treatments are viewed as nonconductive to early mobilisation. Specifically, patients admitted to the NSICU often suffer from neurological injuries, which can affect their long-term functional outcome. Hence, immobilisation may further negatively impact the outcomes for this patient population, as it has become clear that immobilisation negatively impacts the outcomes for ICU patients in general.

Patients in the NSICU do typically receive physical therapy (PT) and occupational therapy (OT) consults for early mobilisation. While research is limited, studies have shown no reduction in hospital length of stay or mechanical ventilation use. This may be due to the variation in the implementation of such therapy.

There have been several protocols developed and implemented in various ICU settings, including the NSICU, but there currently is not a single tested and validated early mobilisation protocol designed for use in the NSICU. Through evaluation of the literature and working with key stakeholders from multiple professions, the researchers designed and refined a Neuro Early Mobilisation Protocol for use with all patients cared for in the NSICU. This project took place at a large academic medical centre in the southeast United States classified as both a Level I Trauma Centre and Comprehensive Stroke Centre.

Following finalisation of the revised protocol by the key stakeholders, the protocol was tested in the NSICU. Participants were asked to provide feedback through a pre- and a post-implementation survey on the tools needed to implement the protocol along with the perceived benefits of using the protocol to mobilise patients in the NSICU, and the tools needed to enhance mobility on the unit.

The researchers say future work will consist of protocol implementation and evaluation in order to increase patient mobilisation in the NSICU.

Source: [Intensive and Critical Care Nursing](#)

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