



ECMO Care Team (ECT) Model

Medical Intensive Care Unit

Henry Ford Hospital

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ECMO Care Team: Comprised of ECMO rounding staff and the MICU rounding team from which the patient on ECMO has been assigned.

- All MICU patients receiving VV-ECMO will be under the care of the **ECMO rounding staff** regardless of the pod from which the patient originated.
- The original MICU rounding team will continue to care for the patient along with the ECMO rounding staff.

Objectives:

1. To identify key MICU personnel who will provide continuous ECMO management and describe his/her role.
2. To provide directed education and supervision for the MICU fellows, residents, and APPs while providing ECMO management.
3. To create a formal mechanism for communication amongst the multidisciplinary team providing ECMO management.

System:

1. To identify critical care trained staff as **ECMO rounding staff** with proficiency in the management of patients on ECMO to provide primary management of MICU patients who are placed on ECMO.
2. To describe the management process by the ECMO care team.

Patient Location:

- Patients will be cared for on P5 (CVICU) unit

ECMO Care Team:

- ECMO care team will consist of an ECMO rounding staff and MICU rounding team from which the patient on ECMO has been assigned.
- The MICU rounding team caring for the ECMO patient **does not** change once ECMO is initiated.

- MICU ECMO rounding staff will supervise the MICU rounding team in providing care when a patient is initiated on VV-ECMO.
- Rounds on ECMO patients will begin after rounding with usual MICU teams at **11am**.
- If a patient is placed on ECMO after normal rounding times the MICU fellow will arrange with the ECMO rounding staff a time to round that day.
- ECMO rounds to be conducted in a collaborative fashion with bedside P5 RN, RT, and perfusionist.
- Overnight issues that require input will be directed to the on-call resident/fellow and may be escalated to staff as deemed necessary.

Staffed as per model below:

- Resident/APPs:
 - Will continue providing usual patient care following placement of a patient on ECMO.
 - Will complete daily progress note documentation.
- Fellow:
 - Will obtain consent prior to placement on ECMO and complete family meeting form **(.ecmofamilymeeting)**
 - Will continue providing usual patient care following placement of a patient on ECMO.
 - Should contact P5 bedside nurse by 8:30am to discuss tentative daily plans prior to formal rounds if necessary.
 - Will be present for ECMO patient rounds either during (if ECMO rounding staff is a member of the team) or immediately following rounds at **11am** (if ECMO rounding staff is the member of a different rounding team).
 - Should be available to respond during rounds for emergencies requiring acute intervention.
- ECMO Rounding Staff:
 - Designated MICU staff, with ECMO proficiency, will be selectively scheduled to round on MICU patients placed on ECMO.
 - Will perform detailed duties for two-week blocks (including scheduled weekends) of time during regular MICU rounding weeks.
 - Will complete a consult note on each patient evaluated for ECMO **(.ecmoassessment)**
 - Will complete a daily ECMO progress note **(.ecmo)**

ECMO Rounding Staff Weekend Coverage:

- ECMO rounding staff will be expected to provide weekend coverage for patients on ECMO during their scheduled MICU weekend rounding time.
- ECMO rounding staff may be expected to round on ECMO patients when covering a service outside of the MICU i.e. F2, pulm HTN, pulm consult, pulm transplant.
- Coverage includes being present to round on ECMO patients (when able) as well as address day issues prior to the night intensivist's arrival.
- Issues that require input will be directed first to the on-call resident/fellow and may be escalated to staff as deemed necessary.

Designated contact phone/ person:

- MICU resident and fellow on ECMO Care Team
- ECMO rounding staff via Halo

Other Contacts:

P5 charge nurse: 916-0060

Cardiothoracic Surgery: 916-2698

ECMO perfusion phone: 916-3570