

Telecritical Care Checklist

This checklist is designed as a reminder of what issues need to be addressed prior to a Tele critical care engagement between hospitals for COVID-19 coverage.

Assessment of remote facility to include:

- total hospital beds, average daily census
- number of ICU beds
- number of PACU beds and ORs that might be transitioned to ICU or transitional care beds and any ambulatory surgery facilities
- number of monitored beds (hard wire and telemetry)
- type of monitors available within the facility (brand and monitoring capability)
- average daily ICU census Including average daily number of ventilated patients
- number and type of ventilators in house (including OR)
- other equipment such as twitch monitors
- Current staffing model for ICU (Contracted hospitalists, local med staff, specialty mix of hospital medical staff with ICU privileges)
- level and capacity of respiratory therapy support
- 24 hour pharmacy support
- normal protocols for airway management (anesthesia support, ED staff, etc.)
- HIPPA compliant video conferencing available in ICU with 24 hour technical support
- EHR type, process and software for remote access and IT support
- Proxy Privileging and credentialing voted by hospital medical staff (Acceptance of UC privileging and credentialing)
- laboratory capabilities
- local Covid testing capability
- imaging capabilities including CT and MR

Contractual relationship to include:

- term of agreement
 - level of service contemplated (Peer to peer consulting versus for management of patients including orders)
 - reimbursement model
 - hospital liability coverage
 - determine community hospital coverage, acknowledge that many physicians will have personal PL coverage with different carriers (impacts liability)
- Etc

Mentoring and Training:

- nurse training- proning, medication, etc.
- peer-to-peer nurse mentoring. - video connections between nurses to help with setting up drips etc.
- physician education and training video
- establishing an early and centralized triage of patients within geographic areas

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