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Effective Utilization of Progressive Mobility Programs in Medical Intensive Care Units (MICU's)

Abby Davis, OTS & Megan Palczewski, OTS

Case

In medical intensive care units (MICU's), the OT frequently works with clients who are in the early stages of mobility. Clients with orders of bed rest are at heightened risk to co-morbid conditions that significantly impact client health. The OT plays an important role in the mobility process, and wants to know the most effective utilization of progressive mobility programs. The OT is ideally interested in their role in the progressive mobility process.



1 Ask: Research Question

What is the most effective utilization of progressive mobility programs in medical intensive care units (MICU's), including the Occupational Therapist's role, as well the effective frequency and duration of mobilization?

2a Acquire: Search Terms

Patient/Client group: Medical Intensive Care Unit (MICU), Intensive Care Unit (ICU)

Intervention: Progressive Mobility Program, Early Mobilization, Occupational Therapy, Progressive Activity, Interventions, Treatment

Comparison: Not Required

Outcome(s): Not Required

2b Acquire: Selected Articles

Schweickert et al. (2009): Randomized control trial (RCT) that assesses the effectiveness of early Physical and Occupational Therapy on functional outcomes in 104 mechanically ventilated patients in the ICU.

Letzkus et al. (2013): Quasi-experimental study assessing the effectiveness of a Progressive Mobility Program (PMP). Includes sixteen children with impaired bed mobility and the effects of therapy on functional outcomes.

Azuh (2016): Pilot study with a prospective consecutive case series design that examines the benefits of early mobility in the medical intensive care unit (MICU).

3a Appraise: Study Quality

Schweickert et al. (2009): Preponderant: Large n-size (n=49) Results show higher levels of functional independence when Physical and Occupational Therapy are started earlier.

Letzkus et al. (2013): Suggestive: Small n-size (n=16). Specific to the pediatric population. Lacks significant statistics to back up evidence found, possibility of confounds influencing results.

Azuh et al. (2016): Preponderant: Large n-size (n=3233). Randomized protocol was too difficult to implement, but would have increased the study's power.

3b Appraise: Study Results The findings of these studies suggest that the sooner a patient is mobilized by the interdisciplinary team, the better the outcomes. When utilizing a progressive mobility program, there were reduced costs, increased function, a decrease in length of stay, and comorbid conditions. The studies suggest that scheduled head of bed elevation, manual turning, and early Occupational Therapy intervention results in improved patient outcomes. When the early mobilization process is started as soon as the patient is medically stable, these studies suggest a decrease in bedsores, readmission, falls, and costs.

4 Apply: Conclusions for Practice Nursing has been the leading force behind preliminary research on progressive mobility. In the medical intensive care unit, early mobilization plays a big role in the outcomes of patients. By using specific schedules and procedures, progressive mobilization streamlines this early mobilization process. However, the coordination of the interdisciplinary team will act as a major barrier to implementation and future research. Each member of the interdisciplinary team will have an important role to fill in the mobilization process. Occupational Therapy will be required to administer graded Activities of Daily Living (ADLs), such as self-care, feeding, bathing, dressing, or grooming. Using clinical reasoning and progressive mobility guidelines, these therapeutic activities will progress in difficulty as the client advances into later phases of the progressive mobility program. Current findings demonstrate the benefits that come from progressive mobility, such as decreased length of stay, decreased number of pressure sores and falls, increased functional outcomes, and major decreases in costs. For best practice, progressive mobility programs should be implemented and researched more thoroughly, finding a progressive mobility program that will best benefit the patient.

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