

The Kauvery Experience

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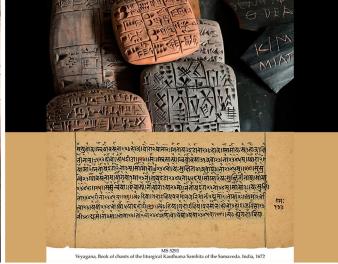
Consultant Intensivist Kauvery Hospital, Chennai





When did human civilisation begin?

















Our Experience

Patient Group

Patients stepping down from ICU to wards – all medical and surgical except cardiac and cardiothoracic



Study type

Before and after study Observational study design used to assess effect of an intervention based on comparison of outcomes prior to it's use and afterwards



Time Period

3 months April, May and June 2022



Intervention

Wearable biosensor patch – "Life Signs", a CE and FDA approved wearable device with factory pre sets for abnormal values

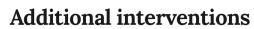


Cardiac arrests / Code Blues per month



Vital signs measured

Heart rate, respiratory rate, skin temperature, Oxygen saturation, pulse rate



Hospital wide wifi capability with additional routers. dedicated PC dashboard, dedicated mobile for alerts, 24 x7 ANM cover







You can choose to insert any additional pictures/graphs/tables or any other additional information













Parameters	April	May	June		
Total no. of patients on wireless patch monitoring	87	67	70		
Total no. of patients transferred to ICU	5	4	3		
Return to ICU within 48 hour (critical transfers)	2	1	0		
No. of MEAT Call	11	12	9		
No. of Code Blue	0	0	0		
Total no. of patches	109	72	72		





Parameters Vitals











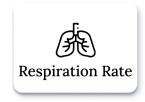












Table 1 Characteristics of the included studies Table 1 Characteristics of the included studies Source Country **Population** Sample size Interventions Vital signs measured by Age (years) Sex (% male) WMS **WMS** HR RR SpO2 BP T Control WMS Control WMS Total Control (EWS) *Included studies and outcomes* Meta-analysis Skraastad et al. 2019 195 Intermittent vital signs PSE (NEWS) + ESS Norway General surgery 62 61 63% 63% (NEWS) Downey et al. 2020 UK 135 Intermittent vital signs SensiumVitals + NEWS x 62 65 54% 52% General surgery (NEWS) Downey et al. 2018 UK General surgery 226 Intermittent vital signs SensiumVitals + NEWS x 63.7 65.2 45% 54% (NEWS) Kisner et al. 2009 Switzerland General surgery 357 Intermittent vital signs 62.7 65 75% 75% Auricall (Unknown) Weller et al. 2018 USA Neurology and neurosur-1958 Intermittent vital signs VisiMobile 59.3 60.5 58% 54% (Unknown) Verrillo et al. 2018 USA Orthopaedic, spinal and 849 Intermittent vital signs VisiMobile 51.4 54.5 58% 54% trauma general care (Unknown) Watkinson et al. 2020 UK Intermittent vital signs 63 Gastro intestinal surgery 407 Avant-4100 63 56% 58% (CEWS) Narrative Weenk et al. 2019 Netherlands Surgical and internal medi- 60* Intermittent measurement VisiMobile N/A 63 N/A 60% cine ward (MEWS) HealthPatch N/A 56 N/A 73.3% Netherlands Surgical and internal medi- 90* Intermittent measurement VisiMobile Weenk et al. 2020 62 63 67% 60% cine ward (MEWS) HealthPatch 56 73.3% x** Monson et al. 2020 USA Labour and delivery ward Standard external monitor- Monica 28.6 29.2 0% 0%

WMS: wearable monitoring system. BP: blood pressure, CEWS: centile-based early warning score, ESS: efficacy safety score, EWS: early warning Score, HR: heart rate, NEWS: national early warning socre, PSE: Patient Status Engine, RR: respiratory rate, SpO2: peripheral oxygen saturation, T: temperature, x: device measures that vital sign. *Same patients. Weenk et al. 2020 Added 30 controls. **Both maternal and fetal heart rate

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Vital sign thresholds (delay before alarm in seconds)									
Study	HR/PR		RR		SpO2	ВР	N	MAP T	
	High	Low	High	Low	Low	High SBP	Low DBP L	.ow	
Weller et al. 2018	HR: 150 (15) PR: 150 (60)	HR: 39 (15) PR: 39 (60)	35 (120)	4 (120)	85 (90)	200 (240)	58 (6	50)	Sound Central sta- tion + nurse phone
Kisner et al. 2009	Individualised (imm	nediate)			Pre-set individual- ised (immediate)				Sound Pager or SMS to doc tor and nurse
Verrilo et al. 2018	Pre-set (5)		Pre-set (120)		Pre-set (60)	Pre-set (120)			Sound Central moni- tor + nurse mobile
Downey et al. 2018	Pre-set, individualis (immediate)	ed if required	Pre-set, individu required (imme					Pre-set, individu- alised if required (immediate)	Sound Mobile device to nurse
Downey et al. 2020	Pre-set, individualis (immediate)	ed if required	Pre-set, individu required (imme					Pre-set, individu- alised if required (immediate)	Sound Mobile device to nurse
Weenk et al. 2019 & 2020	Individualised (imm	nediate)	Individualised (i	mmediate)	Individualised (immediate)	Individualised (immedia	ite)	Individualised (immediate)	Sound Nurse station
5kraastad et al. 2020	As per NEWS score		As per NEWS sco	ore	As per NEWS score	As per NEWS score		As per NEWS score	Visual only Warnings at patient bedside
Score name Al	Merting score thresholds								
Vi	tal signs included	in score F	Range Thre	shold	Time to alarm				

BP: blood pressure, DBP: diastolic blood pressure, HR: heart rate, MAP: mean arterial pressure. PDA: personal digital assistant, PR: pulse rate, RR: respiratory rate, SBP: systolic blood pressure, SMS: short message service, SpO2: Peripheral oxygen saturation, T: temperature, VSI: Visensia Safety Index





Study or Subgroup	WMS Events Tota	Standard of Events		Weight	Risk Ra M-H, Randoi	atio m, 95% Cl Year	Risk Ra M-H, Randon		
1.1.1 RCTs and clust Downey et al. 2018 Downey et al. 2020 Subtotal (95% CI) Total events Heterogeneity: Tau ² : Test for overall effect	3 1 4 = 0.08; Chi²	60 200 = 1.08, df =	2 5 7 1 (P =	86 65 151 : 0.30); F	1.7% 4.2%	0.92 [0.16, 5.40] 0.22 [0.03, 1.80] 0.50 [0.12, 2.07]			
1.1.2 Before-after Weller et al. 2017 Verrilo et al. 2018 Watkinson et al. 202 Subtotal (95% CI) Total events Heterogeneity: Tau ² : Test for overall effect	88 = 0.01; Chi²	422 207 1698 = 2.27, df =	48 22 20 90 2 (P =	889 427 200 1516 : 0.32); F	21.7% 25.8% 95.8 %	0.74 [0.50, 1.11] 0.87 [0.48, 1.59] 1.26 [0.72, 2.18] 0.90 [0.66, 1.22]	2018		•
Total (95% CI) Total events Heterogeneity: Tau ² : Test for overall effect Test for subgroup di	z = 0.99 (F	= 3.96, df = ' = 0.32)		0.41); l²		0.87 [0.66, 1.15]		0.01 0.1 Favours W	10 100 MS Favours Standard Care

Fig. 3 Meta-analysis forest plots comparing WMS and standard care ICU transfer risk ratio. WMS: wearable monitoring systems, CI: confidence intervals, M-H: Mantel-Haenszel, RCT: randomised controlled trial

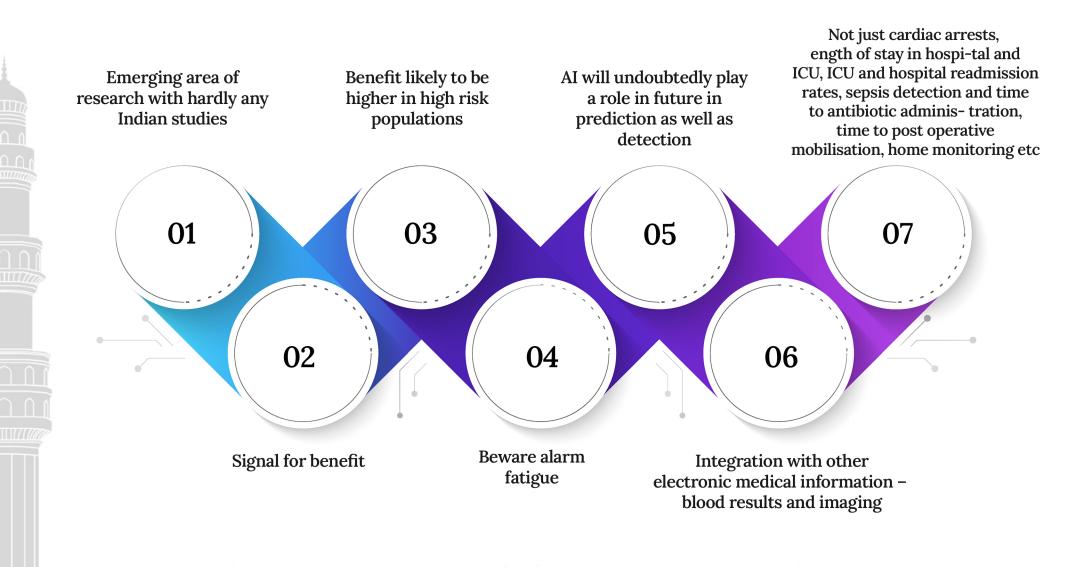


Fig. 4 Meta-analysis forest plots comparing WMS and standard care rapid response or cardiac arrest team activation risk ratio. WMS: wearable monitoring systems, CI: confidence intervals, M-H: Mantel-Haenszel





Summary



CAHOCON 2023



Thank You

