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IntelliSpace

Critical Care
and Anesthesia

Electronic documentation
for your acute patients

End to end data capture with clinical decision support for the acute care environment

Access to comprehensive patient information is vital in the clinical decision-making process. Nowhere is this more evident than in the hospital critical care environment, where patient care generates a massive amount of data. Yet the ability to integrate, aggregate, and analyze this data remains a tedious and time-consuming process for most healthcare facilities.

- Access to relevant patient information when and where you need it
- Provides clinical decision support[1] to help you with your patient assessment process
- Support to maintain an end to end patient documentation across units, institutions and hospitals
- Leverages industry standard interfaces to expand clinical capabilities

Philips IntelliSpace Critical Care and Anesthesia (ICCA) is a clinical decision support and documentation solution. Specializing in the complex critical care environment, ICCA provides a set of HL7 interfaces that supports the exchange of information with other documentation systems to enable accurate patient documentation throughout the continuum of care.

ICCA centralizes and organizes patient data, including admissions documents, vital signs, labs, and consult notes — to put the clinical information that you need front and center. Through embedded clinical decision support, ICCA assembles information, helping you to make informed decisions, warning about potential adverse events and enables accurate patient documentation.

Clinical workflow support

Access to the right information
With the extensive data collected on critical care patients, it can be difficult to focus on the specific information you need. ICCA's patient summary can be configured to show the relevant information for patient care used most frequently at your institution.

Create an ongoing record

The Care Continuum feature supports the flow of information from the ICU flowsheet to the anesthesia record, and vice versa. The care treatment of those patients who receive care in both the OR and the ICU is supported by an ongoing record of care, focusing on intake sites, output sites, fluid totals, and key intake therapies.

Integrated order management

With ICCA, orders for infusions, IV drips, and medications, as well as interventions, are automatically reflected throughout a patient's chart and on nurses' worklists. Plus, thanks to the Philips focus on delivering interoperable clinical IT solutions, the solution integrates with any HL7-based, in-house Computerized Physician Order Entry (CPOE) and pharmacy information system.

Adverse Drug Event (ADE) identification

When you enter a drug order, ICCA's Medical Reference module displays adverse drugs, allergy contraindications, or inappropriate drug therapies. These potential adverse events are defined and identified by a third-party medical reference vendor.

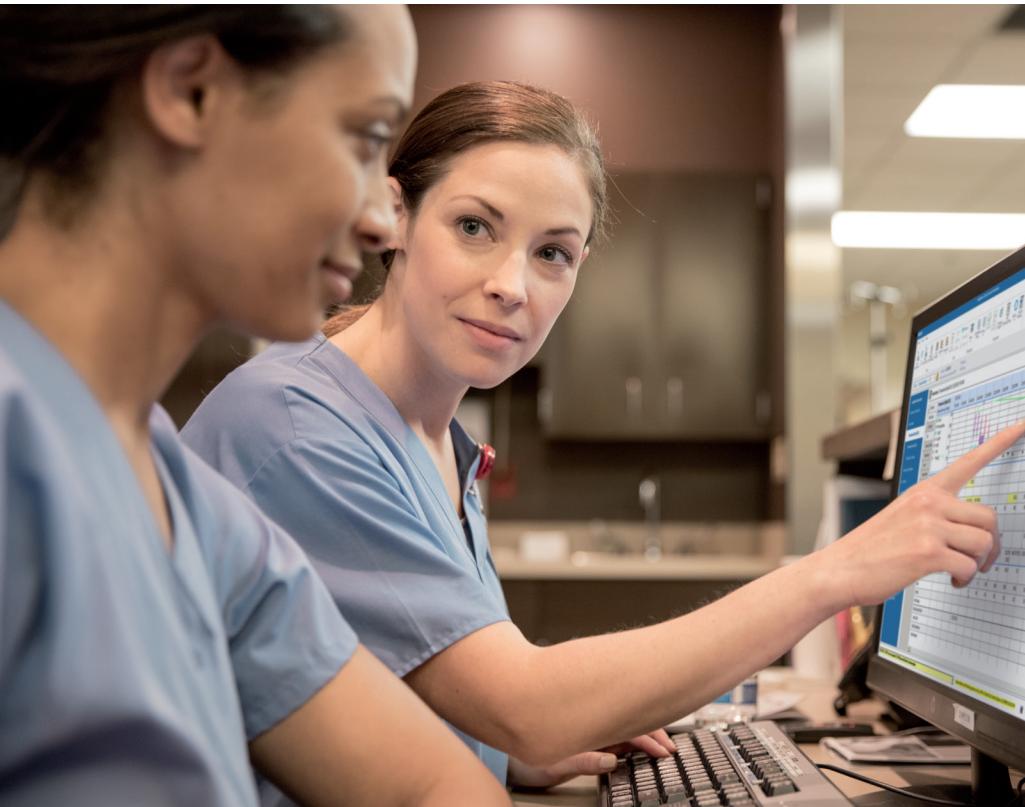### Distinction among drug lists for different units

Because different drugs are used depending on the unit and clinical situation, ICCA allows you to configure multiple medication lists for discrete dose medications and drips.

Fixed volume dosing for NICU drip orders

Fixed volume dosing allows your neonate patients to receive the prescribed amount of fluid. When you adjust the infused drug rate, the concentration changes while the infused volume rate remains constant.

Increased mobility

ICCA adapts to hospital IT and mobility strategies. Access patient charts securely from virtually wherever you are – in your office, on the IntelliVue patient monitor at the bedside, on a laptop. It is all about making relevant, actionable information accessible at the point of need, wherever that may be.

IntelliSpace Critical Care and Anesthesia – like other Philips clinical informatics and patient care solutions – is designed to support clinician workflow.

Additional support

Driving toward appropriate reimbursement
Diagnoses and procedures can be entered either in free text – by selecting from standard coding catalogs – or from easily integrated house catalogs. An embedded search engine and hit lists make it easy to find the codes you need quickly.

Standardized infrastructure
ICCA leverages internal reference terminology to support both report standardization and customization to meet unique hospital conditions.

Use existing IT infrastructure
We provide standards-based interoperability. Our solutions support IHE standards and builds on your technology allowing information to be aggregated during patient care supporting clinician workflow.

Reduce complications with clinical support[1,2,3]
Clinical Decision Support (CDS) tools use targeted alerts and advisories to allow clinicians to identify potential complications early. ICCA has developed CDS tools to help clinicians evaluate patients and plan interventions. ICCA comes with evidence-based advisories with the potential to create more. With a flexible rules engine, each hospital is able to create their own advisories, driving the workflow and care that their individual institution demands.

Drive evidence-based care
Care bundles can help you increase compliance with evidence-based care guidelines[3]. ICCA contains five key care bundles: ventilator associated pneumonia, central line associated bloodstream infection, glucose management, deep vein thrombosis identification, and sepsis resuscitation and management.

Quality, research, administration reporting
One of the greatest values in a clinical information system comes from what you do with the information. Due to the visionary ICCA architecture, the reporting database doesn't interfere with documentation at the patient point of care: in fact, reporting database is separate from the database used in documenting patient care.

Easily access clinical business intelligence
ICCA extends the power of the IntelliSpace Data Analysis and Reporting (DAR) module by offering self-service clinical business intelligence tools and templates, so you can perform your own data analysis and reporting rather than relying on reporting specialists with advanced technical skills.

Whether you want to measure, analyze, and report by unit, time, person, disease, process, or in a number of combinations, or whether you want to report on sepsis improvement, LOS by department, medication costs, or regulatory filings, ICCA has the capability to capture the relevant data.

1. Bourdeaux, C., Ghosh, E., Atallah, L., Palanisamy, K., Patel, P., Thomas, M., Gould, T., Warburton, J., Rivers, J., & Hadfield, J. (2020, November 23). Impact of a computerized decision support tool deployed in two intensive care units on acute kidney injury progression and guideline compliance: A prospective observational study. Critical care (London, England), 24(1), 656. https://doi.org/10.1186/s13054-020-03343-1

2. Hermon, Andrew, Andrew Hermon, Pain, Terina, Beckett, Penelope, Jerrett, Heather, Llewellyn, Nicola, Lawrence, Paul, & Szakmany, Tamas (2015, July). Improving compliance with central venous catheter care bundles using electronic records. Nursing in Critical Care, 20(4), 196-203.

3. Potes, C., Conroy, B., Xu-Wilson, M., Newth, C., Inwald, D., & Frassica, J. (2017, November 20). A clinical prediction model to identify patients at high risk of hemodynamic instability in the pediatric intensive care unit. Critical Care, 21(1), 1-8.

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