

6. Referral process

Recommendations

- Consultant physicians should be more involved in the referral of patients under their care to ICU. The referral of an acutely unwell medical patient to ICU without involvement or knowledge of a consultant physician should rarely happen.
- It is inappropriate for referral and acceptance to ICU to happen at junior doctor (SHO) level.
- Any delay in admission to critical care should be recorded as a critical incident through the appropriate hospital incident monitoring and clinical governance system.
- All inpatient referrals to ICU should be assessed prior to ICU admission. Only in exceptional circumstances should a patient be accepted for ICU care without prior review.