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# A guide to the Critical Care Unit

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## **Chelsea and Sutton**

**Information for patients and relatives**





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## Introduction

This booklet is a brief overview of what you and your relative can expect during your stay in the Critical Care Unit (CCU). The length of your stay may vary according to your clinical condition. Your condition can sometimes change quickly while you are on CCU. Doctors and nurses are available to answer any questions that you may have, as we realise that this may be an anxious time for you and your relatives.

## What is the Critical Care Unit (CCU)?

CCUs are specialist hospital wards that provide treatment and monitoring for patients that are critically ill or in an unstable condition. These include patients who have had major surgery or patients whose condition require close monitoring and support with specialist equipment and medications. A team of highly trained specialist medical and nursing staff and allied health professionals provide care in CCU.

## The CCU at The Royal Marsden

The CCU at The Royal Marsden is one of UK's largest units dedicated to caring for patients with cancer. The unit in Chelsea has 16 beds; seven of these beds are single side rooms. The side rooms are generally reserved for patients that need isolation due to their underlying clinical condition or for specific infection control precautions. There is also a two bedded satellite unit in Sutton called the Step Up Unit.

## Visiting times

Recommended visiting times in CCU are 11am - 8pm, however patients have a rest period in the afternoon from 12.30pm - 2pm. Outside these times, visiting is flexible and at the discretion of the nurse in charge.

## Information about the CCU before admission

If you need CCU care after surgery, you will be informed by the nurses and doctors in the admission and pre-assessment clinic

(APU). Here, you will have an opportunity to ask questions about your CCU stay. Most patients remain on CCU for just a few days, but you may need to be in CCU longer depending on the complexity of your operation and your body's response. Your care on CCU will be adjusted to your body's needs and in some cases this might include more complex monitoring and support, such as kidney or breathing assistance. After some operations, you may be kept anaesthetised or sedated for a longer period, such as overnight or longer if this is needed. This is to let you rest and recover from surgery at your own pace, while the critical care team support you fully. We will do our best to advise you if we think these measures may be needed. If you are admitted to the CCU as an emergency, the doctors and nurses will usually discuss with you and your relatives your need for CCU. Your requirement for sedation and organ support on the CCU will vary according to your clinical condition.

## **What happens when you initially arrive on the CCU?**

When you arrive in CCU, the doctors and nurses will first assess you and stabilise your condition. They will attach the appropriate equipment and try to make you feel as comfortable as possible. It is routine for your relatives or visitors to be asked to wait in the relatives' room during this time.

## **Where is the CCU?**

The CCU on the Chelsea site is located on the first floor of the Chelsea Wing. The CCU on the Sutton site is located on the second floor in the middle section of Bud Flanagan West ward.

If visiting someone on CCU, please report to the CCU reception; from here you will be directed to your relative.

## **What does CCU look like?**

When you go into CCU you will notice there is a large amount of equipment around the bed space that is monitoring your condition. To get a better sense of the unit it may be useful to

watch our CCU patient video guide: [www.royalmarsden.nhs.uk/our-consultants-units-and-wards/chelsea-london/critical-care-unit](http://www.royalmarsden.nhs.uk/our-consultants-units-and-wards/chelsea-london/critical-care-unit)

## What equipment might be attached to me and what is it for?

The amount of equipment around you can seem daunting at first. It may be helpful to understand what the following pieces of equipment are used for. You may have some or all of these attached to you:

### **A monitor**

This records your heart rate, blood pressure, and oxygen levels. You will be connected to this through a number of leads attached to sticky dots on your chest, either a cuff on your arm or a drip in your wrist, and a plastic peg on your finger.

### **For breathing:**

#### **Oxygen**

Most patients in CCU need extra oxygen. This can be given through small plastic tubes that sit in your nostrils, a soft plastic mask or a tight plastic one called a CPAP mask. If you need more help with your breathing you may need support from a ventilator through a tube placed in your mouth (endotracheal tube) or neck (tracheostomy tube).

#### **A ventilator**

This is a breathing machine that blows air into the lungs either to support or take over your breathing. A breathing tube (endotracheal tube) is placed in the windpipe (through the mouth) under general anaesthetic and is attached to the ventilator to help you breathe. While you are on the breathing machine, you will be given sedative medication to keep you comfortable and asleep. If you need help with your breathing for more than a few days, a temporary tracheostomy may be performed. This is where a tube is inserted directly into the windpipe through a small incision at the front of the neck

under general anaesthetic. This is usually not permanent and will be removed once you get better. Initially, you may not be able to talk whilst this tube is in place. You will still be able to communicate using other methods such as writing or gesturing. You will be gradually weaned off the ventilator as your condition improves.

## **For eating and drinking:**

### **Drip**

This is a small tube placed into a vein usually in the side of the neck, arm or hand often called a 'line'. These can be used for giving fluids and certain drugs. You may have several drips at the same time. Machines called 'pumps' are used to help deliver these fluids and drugs over a set period of time and are programmed by the nurses.

### **A feeding tube**

This is a tube passed into the stomach through the nose or through the wall of the abdomen into the small intestine to provide food to you if you are not well enough to eat. This ensures that you receive the nutrients you need to help you get better. Liquid food is given through these tubes on the advice of your surgeons or specialist medical team and dietitians. Sometimes a patient is unable to tolerate tube feeding so they will be fed through a drip into a vein.

### **Kidney support therapy**

If your kidneys are not working as well as they should, they may need support from a kidney machine for a period of time. This machine mimics the work of the kidneys by filtering the blood. A special drip needs to be inserted into a large vein either in the neck or groin.

### **A urinary catheter**

This is a tube that is placed into the bladder to drain urine.



## **For pain control**

Pain relief will be given to you regularly. Most patients are unable to swallow tablets during their stay in CCU so may receive their pain relief in other ways. This may be directly into a vein, through a pump called a patient controlled analgesia (PCA) or through a small plastic device in the back (epidural). If you have a PCA, you should push the PCA button if you are experiencing any pain or discomfort. There is no risk of overdose with the PCA as it has a special built in safety mechanism to prevent this. However, it is important that your relative does not press the PCA button for you as this can potentially be dangerous. The nurses by the bedside will be continuously assessing your pain requirement and adjusting them to your needs.

## **Use of telemedicine in the Sutton unit**

The Sutton Critical Care Unit works as a satellite to the main Critical Care Unit based at the Chelsea site. You will be cared by a team of specialist critical care nurses and doctors based on the Sutton site. On occasions, in order to plan your critical care treatment with the duty critical care consultant, we may be required to use the video camera which is located in the Step Up unit in Sutton. The video camera will only be activated if it is a necessary part of your care. We assure you that the camera image feed is live and it is not possible to make a recording. The images are only viewable by the critical care consultants who are directly involved with your care on a screen situated in a secure room. If you have any concerns about your privacy or dignity, please discuss this with the critical care team.

## **The daily routine**

All patients' needs vary so there is no such thing as a typical day. Mornings tend to be the busiest times. The multidisciplinary team does a morning ward round between 8am - 10am where the CCU and specialist medical teams will discuss your progress with you and make plans for the day. There is also an evening ward round between 4pm - 7pm.

## What staff will I meet in CCU?

A number of health professionals will be involved in your care. These will include doctors, nurses, physiotherapists, pharmacists and dietitians.

**Nurses** – you will usually be looked after by one nurse during a 12 hour shift. Team nursing is used within the unit, so you will, when possible, be looked after by nurses from the same team to allow continuity of care. In the CCU, one nurse will look after one, or at most two patients. Your nurse will be primarily responsible for the care you need. They will work with other professionals, such as doctors and physiotherapists, to ensure that you receive the care and treatment that you need.

**Doctors** – in the CCU there will be a specialist team of doctors who look after you 24 hours a day. They do twice daily ward rounds and whenever possible, discuss their plan for treatment and care with you. The CCU consultants change over every week. The surgeons or your specialist medical team will also visit every day and work with the critical care doctors and other multidisciplinary team members in deciding the best treatment for you.

### Other people you may meet

**Physiotherapists** visit CCU daily and concentrate on your mobility and lung function. Following surgery, or periods of bed rest, many patients are at risk of chest infections because their lungs are not functioning as well as normal. The physiotherapists will create a personalised rehabilitation program for you consisting of exercises to strengthen your muscles and lungs to help facilitate your recovery.

**Radiographers** visit CCU to take portable chest x-rays.

A specialist **pharmacist** works on CCU and monitors the various medicines given to you.

**Dietitians** visit the unit daily and will make adjustments to ensure that you are receiving sufficient nutrition.

**Speech and Language Therapists** visit the unit regularly for patients who need support with swallowing, speech or communication, especially if you have a tracheostomy or have undergone head and neck surgery.

**Occupational Therapists** also regularly visit the unit to provide rehabilitation by supporting patients to return to their normal daily activities, such as washing themselves, dressing and other everyday activities. They also support patients if they have difficulty with their concentration, memory and problem solving.

**Complementary Therapists** and an **Art Therapist** also visit the unit to offer aromatherapy massage, reflexology and art therapy. If you would like to access any of these, please ask your nurse to make a referral.

## Who can update my relatives and me about my condition?

**Nurses** - The nurses looking after you will often be a good source of information regarding your condition. They will be able to tell you about any changes in your condition and any plans for your transfer out of critical care to the ward. Please ensure that the nurses have your next of kin contact details so that they can contact them to let them know about any changes in your condition and any transfer plans. Please also inform your nurse if you do not wish us to contact your relative or update them about your condition.

**Doctors** - The critical care doctors and your specialist team will be able to give you more detailed information about your condition, your progress and current treatment plans. Please tell the nurses if you or your relative would like to speak to the doctors and we will try to arrange this as soon as it is possible.

## What can my relatives expect when they visit me?

Your relative should let a member of staff know when they are visiting. Your relative may be asked to wait in the relatives' waiting area if you are receiving treatment.

Your relative may notice that there is a lot of noise in CCU because of the monitoring equipment. This is normal and does not mean that something is necessarily wrong.

It is not uncommon for relatives to get upset when they first see you in CCU. The staff will explain what is happening and will answer any questions they may have. You may respond differently from when your relative last saw you because you may be unconscious or sedated. You may be more forgetful, sleepy or sometimes appear a little confused and behave differently. It is not unusual for patients to suffer from delirium and confusion whilst they are on the CCU. This is often related to their underlying condition or medications. More information about this can be found in our *Delirium and Critical Care* booklet.

## Other important information

### **'About me' boards**

At each bedspace we have a patient 'About me' board. We ask you and your relatives to help us complete this so that we know important things about you, key family members, your likes and dislikes and anything else you think we should know. We also use the same board to document your agreed rehabilitation plan over the week.

### **Mobile phones**

Patients and visitors can use mobile phones in visitors' and communal areas but please be sensitive to the needs of others when using mobile phones in the CCU. Phone cameras must not be used in the CCU areas due to breach of privacy and confidentiality.

### **Flowers**

Flowers are not allowed by the CCU bed space due to infection control reasons.

## **Patients' property**

We have very limited space on the CCU for storing property therefore we ask patients and their relatives to only bring essential personal items with them. Money and other valuable items such as jewellery needs to be taken home or locked in our safe.

## **Patient and relative feedback**

Feedback is important to us. Every patient is given a CCU patient experience survey on discharge to the ward. We would be grateful if you could take some time to fill the survey out for us. Relatives also have the opportunity to provide feedback using the feedback cards in the waiting areas.

## **Frequently asked questions for relatives, carers and friends**

These are some questions that relatives, carers and friends often ask us.

### **Can I touch my relative?**

Yes. It is important to feel that you can touch your relative if you want to. The nurse by the bed side will guide you. Please speak to the nurse who is looking after your relative if you feel that tubes and wires are in the way. After a few visits on CCU you may want to participate in the care of your loved ones, for example, combing their hair or washing their face. Please mention this to the nurse and he or she will help you carry out these activities.

### **Can I talk to my relative if they are unconscious?**

Yes. Your relative may still be able to hear you, even if they cannot respond to you. Staff will also talk to your relative and let them know what is happening.

### **Who can visit my relative on CCU?**

We are happy for your relative to be visited by family and friends. When you arrive please use the intercom system or

the telephone outside CCU to call the unit before entering. A member of staff will then come to meet you at the entrance. Sometimes you may be asked to wait in the waiting area while the relative is having a therapy or if the doctors are on their ward round.

We ask all visitors to the unit to use the alcohol hand gel on entering the unit and to put a plastic apron on at the bedside. We also ask that only **two** visitors be at the bedside at any one time.

Please remove the apron when leaving the bedside and use the hand gel again on the way out of the unit. This is part of our infection control procedure and is designed to reduce the risk of infections being brought in and spread around the unit. Please do not visit the unit if you are ill, have had an infection or recently had diarrhoea and/or vomiting. Please wait at least 48 hours after your last bout of diarrhoea and/or vomiting before visiting the unit.

Children of any age are also welcome on the CCU; please speak to the Nurse in Charge so that we can assist and plan the visits for you. For more information please see our guide to children visiting. *Should children visit? Information for families considering whether children should visit a relative in intensive care* available at CCU.

### **Who can telephone CCU?**

We are happy for you to telephone us. However, if you have a large family please choose one or two representatives as the main point of contact with CCU to assist ease of communication.

### **How do I recognise the staff?**

We have many different healthcare professionals working on the unit; all staff should have a large visible name badge and an identity card with their picture on it. All staff endeavour to introduce themselves before they speak with you. There is also a staff photo board outside the unit with all the CCU staff featured.

## Contact details

You can telephone us on:

Intensive Care Unit:

Bed 1-12      020 7808 2040

020 7808 2007

Bed 13-16    020 7811 8143

## Information and support services at The Royal Marsden

**AskMACC (Ask Marsden Critical Care)** - You can contact us with any suggestions or queries about critical care and recovery from critical care by emailing [askmacc@rmh.nhs.uk](mailto:askmacc@rmh.nhs.uk). Please note the email inbox will only be monitored every 48 hours. For urgent clinical enquiries always contact your team or key worker.

**Pastoral Care** - The Royal Marsden chaplains are available to visit you or your relative to offer pastoral care. The four chaplains represent the Church of England, Roman Catholic, Free Church and Muslim faiths. You can contact a chaplain on x 2818 from inside the hospital or on 020 7808 2818 if calling from outside the hospital. There is an answer phone for you to leave a message. Alternatively please ask the nurses to contact the Pastoral Care team on your behalf. The Pastoral Care team can also assist you to contact a representative of your own faith.

**Psychological Care** - Sometimes patients require more support which can be provided by the psychological care team. We can also offer family support if needed. Please let the nurses know if you or your relative would like to speak a member of their team so that we can arrange this for you.

**Patient Advice and Liaison Service (PALS)** - The PALS team at The Royal Marsden, Chelsea is based in the outpatients department on the ground floor of the Chelsea Wing, opposite

the Medical Day Unit (MDU). At The Royal Marsden, Sutton the PALS team is based on the ground floor to the left of main reception. They are available to provide information and advice to patients and their relatives. You can contact them on x 2083 from inside the hospital or on 020 7808 2083 or 0800 783 7176 if you are calling from outside the hospital.

## Other useful information and support services

**HealthTalk** - The award winning website of the DIPEX charity, shares other people's experiences of health and illness.

*[www.healthtalk.org/Intensive\\_care](http://www.healthtalk.org/Intensive_care)*

**ICUsteps** - A support group, set up by former patients and family members, to help those who have been unfortunate enough to suffer a life threatening injury or illness come to terms with their experience and find support and reassurance in the long recovery period.

*[www.icusteps.org](http://www.icusteps.org)*

**The Intensive Care Society** – The society provides information to patients and relatives on each step of a patient's treatment and recovery from critical illness. There is also information on support groups.

*[www.ics.ac.uk/ICS/relatives.aspx](http://www.ics.ac.uk/ICS/relatives.aspx)*

*[www.ics.ac.uk/ICS/patient.aspx](http://www.ics.ac.uk/ICS/patient.aspx)*

**Macmillan Cancer Support** - Over 6,000 pages of up-to-date cancer information, practical advice and support for cancer patients, their families and carers.

*[www.macmillan.org.uk](http://www.macmillan.org.uk)*



## Notes and questions



## Macmillan Hotline number 020 8915 6899

You can ring the Hotline 24 hours a day, 7 days a week.

Call us straight away if you are feeling unwell or are worried about the side effects of cancer treatments.

This service provides specialist advice and support to all Royal Marsden patients, as well as to their carers, and both hospital and community-based doctors and nurses caring for Royal Marsden patients.

For further information, please visit The Royal Marsden website: [www.royalmarsden.nhs.uk/your-care/support-services/royal-marsden-macmillan-hotline](http://www.royalmarsden.nhs.uk/your-care/support-services/royal-marsden-macmillan-hotline)

### References

This booklet is evidence based wherever the appropriate evidence is available, and represents an accumulation of expert opinion and professional interpretation.

Details of the references used in writing this booklet are available on request from:

The Royal Marsden Help Centre  
Freephone: 0800 783 7176  
Email: [patientcentre@rmh.nhs.uk](mailto:patientcentre@rmh.nhs.uk)

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Should you require information in an alternative format, please contact The Royal Marsden Help Centre.



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