

Critical care strategies: Patient and nurse well-being.

Emma L. Foster*

Department of Critical Care Nursing, Greenfield University, United States

Introduction

This article highlights essential nursing strategies for preventing Ventilator-Associated Pneumonia (VAP) in adult intensive care units. It emphasizes the importance of head-of-bed elevation, oral hygiene with chlorhexidine, spontaneous awakening and breathing trials, and cuff pressure management as key interventions to significantly reduce VAP incidence, ultimately improving patient outcomes and reducing healthcare costs [1].

This systematic review and meta-analysis demonstrates that early mobilization in mechanically ventilated critical care patients positively impacts clinical outcomes. It suggests that initiating physical therapy and activity soon after intubation can shorten ICU and hospital stays, reduce ventilator days, and improve functional independence, underscoring its crucial role in holistic patient management in the ICU [2].

This study reveals that implementing a nurse-led, protocolized approach to sedation and delirium management significantly improves outcomes for critically ill patients. The protocol standardizes assessment tools and interventions, leading to reduced duration of mechanical ventilation, shorter ICU stays, and a lower incidence of delirium, highlighting the critical role of nursing autonomy and standardized care pathways [3].

This scoping review explores the perspectives of nurses, physicians, and patients on interprofessional communication within critical care settings. It underscores that effective and clear communication among the healthcare team and with patients is fundamental for safety, quality of care, and positive patient experiences, emphasizing the need for structured communication tools and team-based approaches in the ICU [4].

This review synthesizes current practices and emerging evidence in pain management for intensive care unit patients. It highlights the complexity of pain assessment in non-verbal patients and advocates for multimodal analgesic strategies, regular assessment using validated tools, and non-pharmacological interventions to ensure adequate pain control while minimizing adverse effects from sedatives and opioids, crucial for recovery [5].

This narrative review examines the latest evidence concerning nutritional support for critically ill patients, emphasizing the timing, route, and type of nutrition. It underlines the importance of early enteral nutrition over parenteral whenever feasible, aiming to preserve gut integrity, reduce infection risk, and improve overall patient outcomes by preventing malnutrition and supporting metabolic needs during critical illness [6].

This systematic review identifies key predictors of successful weaning from mechanical ventilation, providing valuable insights for nurses and intensivists. It highlights respiratory mechanics, gas exchange parameters, neurological status, and cardiovascular stability as critical factors, underscoring the need for comprehensive patient assessment and individualized weaning protocols to optimize liberation from ventilator support and improve long-term outcomes [7].

This systematic review and meta-analysis examines the prevalence and contributing factors of burnout among intensive care unit nurses, particularly in the context of the COVID-19 pandemic. It reveals high rates of emotional exhaustion and depersonalization, emphasizing the urgent need for organizational support, adequate staffing, and psychological interventions to mitigate burnout and ensure sustainable critical care workforce well-being [8].

This scoping review explores the multifaceted role of digital technology in critical care nursing, highlighting its impact on patient monitoring, data management, and decision-making. It identifies how innovations like advanced patient monitors, electronic health records, and telemedicine enhance care delivery, but also points to the necessity of adequate training and support for nurses to effectively integrate these tools into practice [9].

This scoping review investigates nurse-led interventions for family-centered care in adult intensive care units. It reveals that effective communication strategies, emotional support, and facilitating family presence during patient care activities are crucial for supporting families and improving their satisfaction, emphasizing the nurse's pivotal role in integrating families into the care team and decision-making processes [10].

*Correspondence to: Emma L. Foster, Department of Critical Care Nursing, Greenfield University, United States. E-mail: emma.foster@criticalnurse.edu

Received: 03-Jun-2025, Manuscript No. AAICCN-25-266; Editor assigned: 05-Jun-2025, Pre QC No. AAICCN-25-266 (PQ); Reviewed: 25-Jun-2025, QC No. AAICCN-25-266; Revised: 04-Jul-2025, Manuscript No. AAICCN-25-266 (R); Published: 15-Jul-2025, DOI: 10.35841/AAICCN-8.3.266

Conclusion

In critical care, several core strategies significantly enhance patient outcomes and improve the work environment for nurses. Preventing Ventilator-Associated Pneumonia (VAP) relies on specific nursing interventions like head-of-bed elevation and oral hygiene. Early mobilization for mechanically ventilated patients shortens recovery times and boosts functional independence. Furthermore, implementing nurse-led, protocolized approaches for sedation and delirium management reduces ventilation duration and ICU stays, emphasizing the vital role of nursing autonomy in standardized care. Effective interprofessional communication among healthcare teams and with patients is fundamental for patient safety and quality of care, advocating for structured tools and team-based strategies.

Pain management in the ICU involves multimodal analgesic strategies and non-pharmacological interventions, crucial for patient recovery while minimizing adverse effects. Optimal nutritional support, prioritizing early enteral nutrition, is essential to preserve gut integrity, reduce infection risks, and prevent malnutrition. Successful weaning from mechanical ventilation depends on a comprehensive assessment of respiratory mechanics, gas exchange, neurological status, and cardiovascular stability, necessitating individualized protocols. The challenge of nurse burnout, exacerbated by events like the COVID-19 pandemic, highlights the urgent need for organizational support and psychological interventions to sustain the critical care workforce. Digital technology, including advanced monitors and electronic health records, transforms patient monitoring and decision-making, though it requires adequate training for nurses. Finally, nurse-led interventions for family-centered care, such as communication and emotional support, significantly enhance family satisfaction and integrate them into the care process.

References

1. Aziza AH, Mariya AJ, Buthaina AR. Ventilator-Associated Pneumonia: *A Scoping Review of Prevention Strategies in Adult Intensive Care Units. Sultan Qaboos Univ Med J.* 2023;23(3):e381-e390.
2. Bochun M, Yanli Z, Yang H. Early Mobilization and Its Impact on Outcomes in Mechanically Ventilated Critically Ill Patients: A Systematic Review and Meta-Analysis. *Crit Care Med.* 2022;50(2):e132-e145.
3. Jing Z, Ying L, Chunlan Y. The impact of a nurse-led protocolized sedation and delirium management on clinical outcomes in critically ill patients: a quasi-experimental study. *BMC Nurs.* 2023;22(1):107.
4. Sofia K, Emma J, Susanne BP. Interprofessional communication in critical care: A scoping review on perspectives of nurses, physicians and patients. *Intensive Crit Care Nurs.* 2021;67:103099.
5. Céline G, Kathleen AP, Mélanie B. Pain management in the intensive care unit: current practices and emerging evidence. *Curr Opin Crit Care.* 2022;28(4):440-447.
6. Lisa SC, Michael JC, Sharon LP. Current evidence on nutritional support in critical care: *A narrative review. Aust Crit Care.* 2021;34(5):432-440.
7. Abdullah A, Hassan A, Zainab A. Predictors of Weaning Success from Mechanical Ventilation: A Systematic Review and Meta-Analysis. *Front Med (Lausanne).* 2023;10:1195328.
8. Marie-Caroline P, Flavien V, Mathieu N. The impact of COVID-19 pandemic on nurses' burnout in intensive care units: A systematic review and meta-analysis. *Intensive Crit Care Nurs.* 2023;74:103328.
9. Malak A, Rawand Q, Haneen A. The Role of Digital Technology in Critical Care Nursing: *A Scoping Review. CIN Comput Inform Nurs.* 2023;41(12):741-750.
10. Malak A, Margaret OS, Elaine L. Family-Centered Care in the Adult Intensive Care Unit: A Scoping Review of Nurse-Led Interventions. *Intensive Crit Care Nurs.* 2023;79:103445.

Citation: Foster EL. Critical care strategies: Patient and nurse well-being. *J Intensive Crit Care Nurs.* 2025;08(03):266.