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Prevalence and risk factors of delirium in intensive care unit and emergency department of tikur anbessa specialized university hospital

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Abstract

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conference highlighted that the assessment of an EP diagnostic reasoning skills is vital to effective training and patient safety.EM is young field of study in Ethiopia. Very little is known about EMCC residents' accuracy in interpretation of emergency cranial CT scans. This study aimed in determining the accuracy of emergency cranial CT reading of EMCC residents of Addis Ababa University & St Paul Millennium Medical College as compared to neuroradiologist. A prospective cross-sectional study Sepsis holds 22.5% of a reason for admission. The mean

time in days \pm SD until the occurrence of delirium for ICU is 4.12 ± 2.9 and emergency is 2.4 ± 1.5 days. There was a significant relationship between mechanical ventilation and

development of delirium after 24 hours (X ² (1, N=120)

=7.68, p=0.06). Most patients, 72.5% had polypharmacy and just over a half of patients had a restraint applied to them. There is a significant relationship between benzodiazepine use and development of delirium after 24 hours, $x^2(1, N=120) = 4.83$, p=0.003. Delirium was found to be prevalent in emergency and ICU.

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