

Title: Rehabilitating Critical Ill patients: Modalities, Visibility, and Safety.

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Abstract

It has been proven by evidence based that rehabilitating critically ill patients has very good impact on their outcomes. There are a lot of modalities to mobilize critically ill patients specially intubated patients. In this presentation we will go over these modalities, visibility and safety. In addition, this presentation will show the literature what found about ICU length of stay, mechanical ventilation days, and motility rate. Despite the historical precedent of mobilizing critically ill patients, bed rest is common practice in ICUs worldwide, especially for mechanically ventilated patients. ICU-acquired weakness is an increasingly recognized problem, with sequelae that may last for months and years following ICU discharge. The combination of critical illness and bed rest results in substantial muscle wasting during an ICU stay. When initiated shortly after the start of mechanical ventilation, mobilization and rehabilitation can play an important role in decreasing the duration of mechanical ventilation and hospital stay and improving patients' return to functional independence. This review summarizes recent evidence supporting the safety, feasibility, and benefits of early mobilization future directions for this field.

Biography

Mohammad M. Alqahtani has completed his Master degree in Respiratory Care from Georgia State University, GA, USA. He is the Head of respiratory care emergency section at King Fahad Medical City, KSA..



1. The paradox of the scientific career of a highly qualified pediatric surgeon in Russia and Israel.
2. The most impressive results have been achieved in the non-surgical section of medicine.
3. Work in the Siberian clinic of pediatric surgery is the responsibility of treatment of children with the most aggressive.
4. Acute pneumonia at an early stage of the disease.
5. The high concentration of such patients (up to 10 and more at the same time), the rapid development of purulent complications and high mortality (up to 10% or more) are forced to look for ways to solve this problem.

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