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WHO DOES WHAT IN THE ECT ROOM IN COPENHAGEN

REGION HOVEDSTADENS PSYKIATRI

- ✘ Covers 40% of the danish population
- ✘ Treats about 40.000 patients/year
- ✘ Employs about 5300 persons
- ✘ Consists of 10 hospitals (centers) Each with approximately 100-180 beds
- ✘ ECT is a standard treatment at all hospitals

BACKGROUND

- ✘ In 2008 it was decided to standardize how ECT treatment was performed in Copenhagen
- ✘ A task force were appointed
- ✘ Their Backgroundmaterial were the Danish ECT manual AND the standards suggested by Joint Commission International (JCI)

THE AREAS IDENTIFIED WERE

- ✘ Who decides ECT treatment
- ✘ Who informs the patient
- ✘ How is consent obtained
- ✘ What treatment should be performed
- ✘ How should the staff be trained

SPECIFIC ACTIONS TAKEN

- ✘ An ECT working instruction was made
- ✘ A patient folder was written
- ✘ A DVD was made
- ✘ A special ECT file was made
- ✘ Time-out procedure was invented
- ✘ Education/training was standardized

TIME OUT PROCEDURE

- ✘ Is it the right patient
- ✘ Is it the correct treatment electrode placement
- ✘ Is the ECT machine set correct
- ✘ Is the correct sedative used
- ✘ Is there a teeth protection kit present
- ✘ Is baseline activity registered

WHAT HAPPENED IN REAL LIFE?

- ✘ An ECT team were appointed at all hospitals
- ✘ A senior Psychiatrist
- ✘ A junior psychiatrist
- ✘ An ECT nurse

RESPONSIBILITIES OF THE ECT TEAM

- ✘ Organize local training of personnel
- ✘ Arrange frequent ECT Conferences
- ✘ Abide to the different instructions
- ✘ Secure collaboration with the Anaesthesia department
- ✘ Collaborate with the ECT machine vendor
- ✘ Eat sumptuous dinners at the monthly QA meetings (or not)

WHEN A PATIENT NEEDS ECT TREATMENT

- ✘ The deciding physician (senior)
- ✘ The treating physician
- ✘ The ECT nurse
- ✘ The Nursing staff from the ward
- ✘ The anaesthetist

WHEN A PATIENT NEEDS ECT TREATMENT

- ✘ The deciding physician is responsible for:
- ✘ Correct indication (and contraindication)
- ✘ Evaluation of comorbid somatic diseases
- ✘ Evaluation of the ongoing medical treatment
- ✘ Information of the patient (and family)
- ✘ Deciding number of treatments
- ✘ Deciding Energy level for the first treatment and electrode placement
- ✘ Filling out the papers
- ✘ Ongoing evaluation of the patient's treatment response

THE NURSE ON THE WARD

- ✘ Must be permanently employed
- ✘ Take a two hours theory course and three supervised treatments

- ✘ At the ward, the nurse is responsible for:
 - ✘ All relevant paraclinical tests are performed
 - ✘ Coordinate patient logistics to/from the treatment room
 - ✘ Escorting the patient to/from the treatment room
 - ✘ Perform post-treatment observation of the patient

ECT TRAINING FOR THE NURSING STAFF

The theoretical course shall include the following subject

- ✘ Indications for ECT treatment
- ✘ Contraindikations
- ✘ Risks/Side effects
- ✘ Issues regarding anaesthesia

- ✘ Instruction in the written guidelines and instructions covering this field

- ✘ Nursing tasks connected to patient care prior to ECT treatment
- ✘ Knowledge of the relevant patient observations in the post-treatment period

- ✘ Knowledge of possible/likely complications and relevant interventions

- ✘ Aware of the procedure and criteria for discharge to the hospital ward

- ✘ Knowledge of which written demands for documentation that exists

NURSES TASKS:

- ✘ Make sure that relevant blood tests and ECG's are expedited
- ✘ Measure Blood pressure, Pulse and temperature
- ✘ Makes sure that the patient is fasting according to local rules
- ✘ Escorts the patient to and from the ECT treatment room
- ✘ Observes the patient in the recovery room (bp, P, Oxygenlevels)

THE TREATING PHYSICIAN

- ✘ To be certified junior doctor with permission to perform actual ECT treatment it is required
- ✘ The person must be an MD (not medical student)
- ✘ 1½ hour theory
- ✘ 10 supervised treatments
- ✘ A diploma confirms the ECT privilege and has to be kept at the personnel file

THE THEORETICAL COURSE INCLUDES

- ✘ Pre-treatment physical examination
- ✘ Indications/ Contraindications
- ✘ Risks/ Side effects
- ✘ Complicating somatic illnesses
- ✘ Medical treatment with somatic medicine
- Anaesthesia
- ✘ Monitoring/classification of the convulsion
- ✘ Stimulus dosing and titration
- ✘ Electrode placement
- ✘ Informed consent
- ✘ Hands on the apparatus
- ✘ Local procedures



Kursusbevis

For teoretisk undervisning i ECT-behandling

Målgruppe: Læger ansat ved Region Hovedstadens Psykiatri med funktion på Psykiatrisk Center Glostrup

Navn: Diana Kn

Cpr.nr.: _____

Formål: At tilbringe læger teoretisk viden om behandling med ECT, således at kursisten efter praktisk oplæring kan varetage ECT-behandling selvstændigt.

Indhold: Kurset omhandler følgende emner: Forundersøgelser indikationer, kontraindikationer, og risici, bivirkninger, forhold ved samtidig behandling med medicin, forhold ved samtidig søvnløsning, lidelse anæstesi-forhold, anfaldsmonitorering, stimulusdosering og elektrodeplacering, informeret samtykke, demonstration og brug af apparatur, lokale procedurer.

Ovenstående har modtaget undervisning i ECT-behandling.

20107
Date

[Signature]
Underskrift ECT-ansvarlig læge

IN THE ECT ROOM – THE PSYCHIATRIST

- ✘ Is responsible for the treatment
 - + Correct stimulus parameters used
 - + Evaluation of the convulsion's effect
 - + Re-stimulation or not
 - + Deciding energy level at the next session
- ✘ Is responsible for the patient:
 - + Identifying the patient at arrival
 - + Leading the Time-out procedure

THE ECT NURSE

- ✘ Special training programme
- ✘ Including 10 supervised sessions
- ✘ 1½ hours theory
- ✘ Coordinates all patient logistics
- ✘ Attaches the different treatment electrodes
- ✘ Responsible for the Equipment
- ✘ Responsible for the ECT room maintenance

THE ANAESTHETIST

Are responsible for the anaesthesia procedures

Inserts the rubber teeth protection before treatment

Have the right to refuse sedating the patient if it seems to be too risky

Discharges the patient from the recovery room post-treatment

RECOMMENDATIONS

- ✘ Indication for ECT must be stated in the patient file
- ✘ The effect of the ECT treatment must be evaluated systematically and stated clearly in the patient file.
- ✘ A treatment plan must be made for each patient where duration and frequency of ECT is clearly stated
- ✘ For patients with heart disease, extra caution must be exercised by the treating physician

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- ✘ The patient must have completed a full physical examination before initiation of ECT treatment
 - ✘ Pre-treatment physical examination of the patient includes: ECG, Hb, Na, K, Crea, Glucose, stet. Pulm/Cor. BP/Pulse, Height/
 - ✘ Weight, Allergies,

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- ✘ A pre-treatment risk-assessment must be made by the psychiatrist/anaesthetist.
 - ✘ This assessment should include evaluation of the need for special pre-treatment physical examinations (e.g. Cardiac tests)
 - ✘ and what to do, if intubation might be necessary

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- ✘ The local written instructions must also address
 - ✘ how to handle pre-treatment evaluation of the acutely unstable patient
 - ✘ how patients in maintenance treatment should be monitored