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ICU Survival Rates Drastically Improved With Philips' Virtual ICU



According to a recent study conducted by Dr. Craig Lilly, a professor at University of Massachusetts Medical School and Director of the eICU Program at UMass Memorial Medical Center, and published online in the journal CHEST, it was found that a virtual ICU, staffed by one specialist doctor and three critical care nurses at the service of 150 patients, can improve survival by 26% over a traditional ICU.

Subject of the research was the examination of Andover-based Philips Healthcare's remote Intensive Care Unit Program's performance via the assessment of its use at both UMass Memorial and at Steward Health Care System.

Evaluating 120,000 critical care patients at 32 hospitals within 19 hospital systems, the team's findings include that patients in the virtual ICUs had a 26% higher probability of surviving their stay in the ICU and a 16% greater likelihood of surviving the hospitalization as a whole and be discharged. The discharge was faster too, at 20% from the ICU and at 15% from the hospital as a whole.

Dr. Brian Rosenfeld, chief medical officer of Philips Healthcare Telehealth, described the cause for improved outcomes is simple by explaining that traditional ICU staffing reduces over the weekends and in the evenings, whereas the virtual ICU enables a specialist to conduct an exam from 5,000 miles away as if they were in the room with the patient.

Bi-directional audio/video technology, clinical decision support tools to guide care, population management tools and real-time reporting tools are in use by the Philips Healthcare system, currently installed in 50 hospital systems across the US.

With hospitals consolidating into ever-larger systems seeking economies of scale, it is expected for virtual ICUs and other virtual hospital departments to become increasingly popular.

Source: [Boston Business Journal](#)

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