

Clinical profile of clients with FAST HUGS BID

Prachi C.Sherekar¹, Mahesh B. Chendake², DR. Vaishali R. Mohite³, Manisha C. Gholap⁴,
Samir K. Choudhari⁵

¹Final Year B.B.sc. Nursing, Krishna Institute of Nursing Sciences, Karad. prachi143shere@gmail.com

²Associate Professor, Krishna Institute of Nursing Sciences, Karad maheshchendake@rediffmail.com

³Professor & Principal, Krishna Institute of Nursing Sciences, Karad. kinsprincipal@rediffmail.com

⁴Associate Professor, Krishna Institute of Nursing Sciences, Karad manishacgholap@gmail.com

⁵Clinical Instructor, Krishna Institute of Nursing Sciences, Karad sarsenal.choudhary@gmail.com

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ABSTRACT

Background Sir JL Vincent attributes the origins of FAST HUG mnemonic (Feeding, Analgesia, Sedation, Thromboembolic prophylaxis, Head-of-bed elevation, stress Ulcer prevention, and Glucose control) as a means of identifying and checking some of the critical aspects in the general care of all critically ill patients. The WR Vincent and Hatton updated the FAST HUG mnemonic by adding some components and convert it to FAST HUGS BID. Pneumonic is improving the routine care of critically ill patients admitted to the critical care unit.

Objective To assess the clinical profile of clients with FAST HUGS BID admitted in the intensive care unit & To associate the clinical profile of clients with demographic variables.

Methods Descriptive approach used. The Pre - experimental research design used in the study. Study conducted in *the* intensive care unit of tertiary care hospital, Karad Sample Size 100. Sampling Technique used Non-probability convenient sampling.technique.Tool consists of Section I Demographic variable and Section II Clinical assessment proforma FAST HUGS BID. Ethical permission obtained.

Results Age-wise distribution of cases shows maximum cases, i.e. 39 % and 36% in the age group 41-60 and 61-80 years of age respectively, while minimum subjects 2% in age group in 1-20 years of age. Sex wise distribution of cases shows the maximum case 64% as a male while 36% as a female. Distribution of patients according to diagnosis shows 20% having CVA, followed by head injury 17%. 7% of patients having Organophosphorous poisoning and septic shock 6% cases having acute coronary syndrome, Acute kidney disease, Chronic Kidney Disease and Congestive Cardiac Failure. There is a significant association with all clinical profile with age, sex, religion and occupation

Conclusion FAST HUG BID mnemonic may use to assess critically ill clients in ICU, which will not only help to reduce errors but also improve quality care. This proforma is a useful tool to evaluate clients with Pneumonics FAST HUG BID with every shift.

Keywords FAST HUG BID, clinical profile, intensive care unit, critically ill. Assessment tool

1. Introduction

The mnemonic is commonly used in education as cognitive instruments to guide around the world. Sir JL Vincent attributes the origins of FAST HUG mnemonic (feeding, analgesia, sedation, thromboembolic prophylaxis, head-of-bed elevation, and stress ulcer prevention, and glucose control) as a means of identifying and checking critical aspects in the care of all patients in ICU. He published an article to give your patient a FAST HUG (at least) once a day in 2005. [1] The WR Vincent and Hatton updated the FAST HUG mnemonic by adding some components and convert to FAST HUGS BID. Pneumonic is improving the routine care of ICU patients admitted in the critical care unit. [2]

in the emergency care unit usually, constant efforts made to improvise the quality of the patient's care. The FAST HUGS BID mnemonic proposed to highlight a key aspect of maintenance of the seriously ill patient. Regularly reviewing these elements enhances efficiency, safety, and quality of care in the Intensive care unit. [3]

Feeding means nutrition. Critically ill patients have problems maintaining food intake, and it is a challenge for nursing staff to provide nourishment. These patients quickly develop energy malnutrition which increased due to the inflammatory conditions, metabolic stress, and bed rest. So nutrition support means all essential nutrients like protein fat carbohydrate, fluid and electrolyte and vitamins and minerals enteral or parenterally to patients [4]

Assessment of ICU Patients is necessary for checking the level of consciousness, vital signs, GCS score, and dependency of patients to give appropriate care to patients. Pain is common and distressing symptoms in ICU patients which is the fifth vital finding. Analgesia defined as pain management in the form of elimination of pain. Sedation is a state sleepy because of a drug. To maintain patient comfort, to eliminate pain, anxiety, delirium, and other forms of distress, analgesic and sedatives commonly used in intensive care units.[5]

Thromboembolic prophylaxis is a significant complication in admitted clients. Coronary care unit patients have the highest risk of thromboembolism due to bedridden state, artificial ventilation, and central venous catheters. The risk of thromboembolic prophylaxis is higher with patients admitted to ICU, due to the more risk factors specific to ICUs., etc. Prophylaxis with heparin recommended at the time of admission to the ICU.[6]

Head elevation of bed used to prevent bed sour and aspiration in bedridden and ventilated patients.[7]

Stress ulcer prophylaxis recommended in seriously ill patients those who are prone to have gastrointestinal bleeding. [8]

Hyperglycemia is common in seriously ill, even the patients who have not previously diagnosed with diabetes. Strict control of the blood sugar level considered vital because it may minimize mortality and morbidity.[9]

There were supporting devices used in life-threatening conditions for ICU patients. Patients treated with the ABCDE bundle experience more no of days breathing without support and a shorter duration of ICU delirium. Adoption of this interprofessional, multi-component bundle into routine clinical care is warranted.[10] Use of the FAST HUGS BID concept decreases the number of cases with ventilator-associated pneumonia (VAP) in a surgical intensive care unit. [11]

Constipation is common in ICU patients. The ICU bowel regimen is effective for encouraging defecation in seriously ill patients.[12]

Investigation is essential in assisting and management of the patient during treatment of disease besides diagnosis. Various investigations are used in the screening of diseases and in diagnosing the condition.[13] A systematic and holistic assessment of the seriously ill patient are considered necessary skills. Nursing care for a seriously ill patient is a challenging endeavour. The nurses always challenged to provide high-quality care. Their knowledge and experiences remain flexible and be creative. [14] Giving a patient a FAST HUGS BID mnemonic every shift as a means of identifying and checking some essential vital aspects in the ICU care patients. The FAST HUGS BID mnemonic provides a standardized baseline data that ensures shift to shift issues managed for safety, progression, and future planning.

Need for study

The supportive and preventive care for a seriously ill patient is a challenge. Regular assessment in the ICU consists mainly of ensuring that the patient does not develop any complication during the intensive care unit. The FAST HUGS BID mnemonic is the short and straightforward mnemonic to highlight some essential aspects of the general care of all seriously ill patients. These common elements are a vital part of the ICU related to the quality assurance process.[15]

The FAST HUGS BID mnemonic was recommended as an idea to be implemented every day, by nurses dealing with patients who are seriously ill. The nurse should use these mnemonic for the improve the quality of patient care in the intensive care unit. Nurses should use this mnemonic once a day and during the round. Use these mnemonic as a checklist for handing over information about patients while changing the shift of nurses. There are no many research studies done on this topic. Therefore there is a need to assess the clinical profile of clients with FAST HUGS BID admitted in the critical care unit.

Statement of Problem

Study to assess the clinical profile of clients with FAST HUGS BID admitted in the critical care unit of tertiary care hospital, Karad.

Objectives of the study

- To assess the clinical profile of clients with FAST HUGS BID admitted in the critical care unit.
- To associate the clinical profile of clients with demographic variables.

2. Research Methodology

Research approach -Descriptive approach

Research design- The Pre - experimental research designs

Dependant variable –clinical profile of client

Independent variables FAST HUGS BID pneumonic

Research setting applied - critical care unit of tertiary care hospital, Karad.

Population Patients admitted in the critical care unit of tertiary care hospital, Karad.

Sample Size -100 patients

Sampling Technique- Non-probability convenient sampling.technique.

Criteria For Sample Selection

- **Inclusion Criteria**
 - Patients admitted to the critical care unit.
- **Exclusion Criteria**
 - Samples not willing to participate in the study.

Tools for data collection

The tool was prepared based on the objectives of the study.

Tool developed in two sections :

Section I Demographic variable.

Section II Clinical assessment proforma to assess the clinical details of patients with FAST HUGS BID.

Collection of data and analysis

- To conduct study ethical clearance obtained from the Ethical committee of KIMSDU.
- To conduct study permission obtained from various authorities of Krishna hospital, Karad.
- Investigator introduced herself to patient's and explained the objectives and steps of the study, and written consent obtained.
- Selection of objects.
- Assess the clinical profile of clients admitted in the intensive care unit with FAST HUGS BID using clinical assessment proforma.
- Data analysis and interpretation made by using descriptive and inferential statistics and Instat software

3. RESULTS

Data Analysis

Table No 1: Distribution of cases according to demographic variable

N=100

Age-wise distribution of subject		
Age	Frequency	Percentage
1-20	2	2

21-40	16	16
41-60	39	39
61-80	36	36
81-100	7	7
Sex wise distribution of subjects		
Sex	Frequency	Percentage
Male	64	64
Female	36	36
Religion wise distribution of subjects		
Religion	Frequency	Percentage
Hindu	96	96
Muslim	04	04
Distribution of subject according to marital status		
Marital status	Frequency	Percentage
Married	95	95
Unmarried	05	05
Distribution of subject according to occupation		
Occupation	Frequency	Percentage
Farmer	17	17
Housewife	26	26
Service	15	15
Student	04	04
Worker	20	20
No job	18	18

Table No 2: Table showing the distribution of cases according to clinical profile N=100

Distribution of subject according to diagnosis		
Diagnosis	Frequency	Percentage
Acute coronary syndrome	06	06
Acute gastroenteritis	04	04
CVA, stroke, paralysis, paresis brain haemorrhage, thrombosis	20	20
CKD Acute kidney disease,	06	06
Alcoholic Liver disease	03	03
BPH, urosepsis	04	04
CCF	06	06
Diabetic ketoacidosis	02	02
GTCS	01	01

Head Injury	17	17
Hemolytic anemia	01	01
Left upper limb thrombus	01	01
Liver carcinoma	02	02
Pneumonia	03	03
OPP	07	07
pancreatitis	05	05
Retention of urine	02	02
upper GI bleed	02	02
Septic shock	07	07
Viral hepatitis	01	01
F- FEEDING		
Distribution of subject according to height		
	Frequency	Percentage
150-155 cm	28	28
156-160 cm	61	61
161-165 cm	11	11
Distribution of subject according to weight		
	Frequency	Percentage
50 – 55 Kg	27	27
56 - 60 Kg	50	50
61 - 65 Kg	23	23
Distribution of subject according to BMI		
	Frequency	Percentage
20 - 24	81	81
25 and above	19	19
Distribution of subject according to nutritional status		
	Frequency	Percentage
Normal	81	81
Overweight	19	19
Distribution of subject according to enteral intake		
	Frequency	Percentage
Nil	02	02
100 - 1000 ml	36	36
1100 - 2000 ml	47	47
2100- 3000 ml	15	15
Distribution of subject according to parenteral intake		
	Frequency	Percentage
Nil	01	01

100 -1000 ml	61	61
1100 – 2000 ml	35	35
2100 – 3000 ml	03	03
A- ASSESSMENT		
Distribution of subject according to the level of consciousness		
	Frequency	Percentage
conscious	82	82
semiconscious	17	17
Unconscious	01	01
Distribution of subject according to temperature		
Normal temperature	100	100
Distribution of subject according to pulse		
	Frequency	Percentage
Pulse rate		
min Pulse rate below 60 /per	02	02
Pulse rate between	66	66
60- 100/per min		
min Pulse rate above 100 /per	32	32
Distribution of subject according to Respiration		
	Frequency	Percentage
Respiration rate below	02	02
18 / min		
min Respiration rate 18-20 /	28	28
min Respiration rate 21-24 /	39	39
min Respiration rate 26-30 /	19	19
min Respiration rate 31-40/	12	12
Distribution of subject according to Blood pressure		
	Frequency	Percentage
110/70 mm of Hg	07	07
110/80 mm of Hg	12	12
120/90 mm of Hg	18	18
130/80 mm of Hg	02	02
130/90 mm of Hg	45	45
140/90 mm of Hg	13	13
140/100 mm of Hg	02	02
160/100 mm of Hg	01	01

Distribution of subject according to GCS score		
	Frequency	Percentage
GCS score 1	3	3
GCS score 9	2	2
GCS score 10	1	1
GCS score 11	8	8
GCS score 12	35	35
GCS score 13	37	37
GCS score 14	14	14
Distribution of subject according to physiotherapy		
	Frequency	Percentage
No	87	87
Yes	13	13
Distribution of subject according to dependency		
	Frequency	Percentage
Partial dependent	71	71
Total dependent	29	29
A- ANALGESIA		
Distribution of subject according to analgesia		
	Frequency	Percentage
Pain score 4	11	11
Pain score 5	07	07
Pain score 6	39	39
Pain score 7	26	26
Pain score 8	17	17
S- SEDATION		
Distribution of subject according to Ramsay sedation score		
Ramsay sedation score	Frequency	Percentage
1	25	25
2	43	43
3	30	30
5	2	2
S- SURGERY		
Distribution of subject according to surgery		
Surgery	Frequency	Percentage
No	79	79
Yes	21	21
S- SECRETION		
Distribution of subject according to secretion		

	Frequency	Percentage
No	77	77
Yes	23	23
S - SUCTION		
Distribution of subject according to suction		
	Frequency	Percentage
No	77	77
Yes	23	23
T- THROMBOPROPHYLAXIS		
Distribution of subject according to clotting time		
clotting time	Frequency	Percentage
3.40 -3.45 min	05	05
5 min	21	21
5.10-5.20 min	07	07
5.21-5.30 min	19	19
5.40- 5.50 min	22	22
6 min	26	26
Distribution of subject according to bleeding time		
Bleeding time	Frequency	Percentage
1.20 min	01	01
2 min	54	54
2.20-2.40 min	36	36
2.50 min	09	09
Distribution of subject according to platelet count		
platelet count	Frequency	Percentage
1-1.5 lac per cubic mm	18	18
1.51- 2.0 lac per cu mm	25	25
2.1- 2.5 lac per cu mm	31	31
2.51- 3.0 lac per cu mm	02	02
3.1 – 3.5 lac per cu mm	19	19
4.1-4.5 lac per cu mm	05	05
Distribution of subject according to a drug used		
Drug used	Frequency	Percentage
No	50	50
Aspirin	09	09
Heparin	38	38
Vitamin-k	03	03
T-TUBES		
Distribution of subject according to Tubes		

CVP Line	Frequency	Percentage
No	91	91
Yes	09	09
Distribution of subject according to IV line		
IV line	Frequency	Percentage
No	11	11
Yes	89	89
Distribution of subject according to ETT tube		
ETT tube	Frequency	Percentage
No	77	77
Yes	23	23
Distribution of subject according to NG Tubes		
NGT	Frequency	Percentage
No	28	28
Yes	72	72
Distribution of subject according to tracheostomy tube		
Tracheostomy tube	Frequency	Percentage
No	100	100
H-HEAD UP POSITION		
Distribution of subject according to bed elevation		
Bed elevation	Frequency	Percentage
30 to 45 elevation	100	100
Distribution of subject according to patients two-hourly position change		
Yes	100	100
Distribution of subject according to bedsore		
Bedsore	Frequency	Percentage
No	66	66
Yes	34	34
U- ULCER PROPHYLAXIS		
Distribution of subject according to GI bleeding		
GI bleeding	Frequency	Percentage
No	96	96
Yes	04	04
Distribution of subject according to medicine for ulcer prophylaxis		
Medicine for ulcer prophylaxis	Frequency	Percentage
No	96	96
H2-receptor Antagonist	02	02
proton pump inhibitor	02	02

U-URINE OUTPUT		
Distribution of subject according to urine output in last 24 hrs		
urine output in last 24 hrs	Frequency	Percentage
Less than 100 ml	05	05
100-500 ml	13	13
501-1000 ml	05	05
1001-1500 ml	33	33
1501-2000 ml	36	36
2001-2500 ml	07	07
More than 2500 ml	01	01
Distribution of subject according to the use of the urinary catheter		
Urinary catheter	Frequency	Percentage
No	07	07
Yes	93	83
Distribution of subject according to diuretic drug use		
Diuretic drug use	Frequency	Percentage
No	81	81
Yes	19	19
G- GLYCEMIC CONTROL		
Distribution of subject according to blood glucose level		
Blood glucose level	Frequency	Percentage
Less than 90 mg/dl	15	15
90-150 mg/dl	71	71
Above 150 mg/dl	14	14
Distribution of subject according to medicine- H. Actrapid		
medicine- H. Actrapid	Frequency	Percentage
No	86	86
Yes	14	14
S- SUPPORTING DEVICE		
Distribution of subject according to the use of oxygen mask		
use of oxygen mask	Frequency	Percentage
No	91	91
Yes	09	09
Distribution of subject according to the use of the ventilator		
use of ventilator	Frequency	Percentage
No	75	75
Yes	25	25
Distribution of subject according to the use of dialysis		
use of dialysis	Frequency	Percentage

No	100	100	
Distribution of subject according to the use of a pacemaker			
use of pacemaker	Frequency	Percentage	
No	100	100	
B-BOWEL MOVEMENT			
Distribution of subject according to bowel elimination in last 24 hrs			
24 hrs	bowel elimination in last	Frequency	Percentage
	No bowel movement	31	31
	Once	17	17
	Twice	32	32
	Thrice	4	4
	Four time	13	13
	Five time	03	03
Distribution of subject according to constipation			
constipation	Frequency	Percentage	
No	64	64	
Yes	36	36	
Distribution of subject according to treatment for constipation			
Treatment for constipation	Frequency	Percentage	
No	66	66	
Stool softeners	31	31	
Enema	03	03	
I-INVESTIGATION			
Distribution of subject according to routine investigation			
Routine investigation	Frequency	Percentage	
Blood glucose	01	01	
Blood glucose, Lipid profile	09	09	
urinalysis, CBC	11	11	
blood urea, creatinine	06	06	
CBC	30	30	
CBC with platelet count, urinalysis	03	03	
CBC, Blood urea, Creatinine, Urinalysis,	02	02	
CBC, Creatinine, Blood sugar Bilirubin, Urinalysis	20	20	
CBC, Urea and electrolytes, urinalysis	11	11	
chest x-ray, neutrophil	03	03	

leucocytes		
Serum bilirubin, Serum albumin, Serum alkaline phosphatase	04	04
Distribution of subject according to the special investigation		
special investigation	Frequency	Percentage
ABG, ECG	05	05
Chest Xray, USG,Blood culture	10	10
CT Scan, MRI	36	39
ECG, Chest X-Ray, USG	23	23
LFT	18	18
Coombs test	01	01
Stool culture	04	04
I-INFECTION		
Distribution of subject according to infection		
Infection	Frequency	Percentage
No	90	90
Yes	10	10
D-DRUGS		
Distribution of subject according to the name of the drug		
Name of drug	Frequency	Percentage
Inj Dexamethasone	02	02
Inj Heparin	23	23
Inj Lasix	06	06
Inj Levipil	06	06
Inj Meropenem	19	19
Inj Monocef	19	19
Inj Piperacillin	04	04
Inj. Metronidazole	03	03
Tab Ecosprin	14	14
Tab udiliv	04	04
Distribution of subject according to route		
route	Frequency	Percentage
IV	82	82
Oral	18	18
Distribution of subject according to the frequency of drug		
Frequency	Frequency	Percentage
OD	19	19
BD	46	46

TID	35	35
Distribution of subject according to dose		
Dose	Frequency	Percentage
1 gm	05	05
4 mg	06	06
20 mg	06	06
75 mg	14	14
100 ml	03	03
150 mg	01	01
300 mg	03	03
500 mg	39	39
5000 IU	23	23
D-DRESSING		
Distribution of subject according to dressing		
Dressing	Frequency	Percentage
No	75	75
Yes	25	25
D-DRAINAGES		
Distribution of subject according to drainages		
Drainages	Frequency	Percentage
No	98	98
Yes	02	02

Table no.3 Association between clinical profile and age

Demo graphic Variables	Clinical	Chi -Square	Chi Value	P-Value	Significance
Age	Distribution of subject according to Diagnosis	485	32.	0001	<0.0001
1-20	10				
21-40	20				
41-60	22				
61-80	17				
Age	Distribution of subject according to enteral intake	296	32.	0001	<0.0001
1-40	18				
41-60	39				

61-80	36				iated	
81-100	7					
Age	Distribution of subject according to parenteral intake	665	21.	0001	<0.	Varia bles are significantly Assoc iated
1-40	1					
41-60	61					
61-80	35					
81-100	3					
Age	Distribution of subject according to height	977	25.	0001	<0.	Varia bles are significantly Assoc iated
1-40	28					
41-60	61					
61-100	11					
Age	Distribution of subject according to weight	20	9.2	0100	<0.	Varia bles are significantly Assoc iated
1-40	27					
41-60	50					
61-100	23					
Age	Distribution of subject according to the level of consciousness	694	89.	0001	<0.	Varia bles are significantly Assoc iated
1-40	82					
41-60	17					
61-100	1					
Age	Distribution of subject according to pulse	356	21.	0001	<0.	Varia bles are significantly Assoc iated
1-40	2					
41-60	66					
61-100	32					
Age	Distribution of subject according to Respiration	43	9.8	0432	<0.	Varia bles are significantly Assoc iated
1-20	2					
21-40	28					
41-60	39					
61-80	19					
81-100	12					
Age	Distribution of subject according to Blood pressure					
1-20	19	31	27.	0001	<0.	Varia bles are significantly Assoc iated
21-40	20					
41-60	45					
61-80	13					

81-100	3					
Age	Distribution of subject according to GCS score	09	5.8	139	0.2	Variables are not significantly associated
1-20	5					
21-40	9					
41-60	35					
61-80	37					
81-100	14					
Age	Distribution of subject according to analgesia	532	15.	0037	<0.	Variables are significantly associated
1-20	11					
21-40	7					
41-60	39					
61-80	26					
81-100	17					
Age	Distribution of subject according to Ramsay sedation score	58	4.6	986	0.1	Variables are not significantly associated
1-40	25					
41-60	43					
61-80	30					
81-100	2					
Age	Distribution of subject according to clotting time	308	45.	0001	<0.	Variables are significantly associated
1-20	26					
21-40	7					
41-60	19					
61-80	22					
81-100	26					
Age	Distribution of subject according to bleeding time	880	17.	0005	<0.	Variables are significantly associated
1-40	1					
41-60	54					
61-80	36					
81-100	9					
Age	Distribution of subject according to platelet count	863	20.	0003	<0.	Variables are significantly associated
1-20	18					
21-40	25					
41-60	33					
61-80	19					
81-100	5					

Age	Distribution of subject according to a drug used	463	35.	0001	<0.	Variables are significantly associated
1-40	50					
41-60	9					
61-80	38					
81-100	3					
Age	Distribution of subject according to medicine for ulcer prophylaxis	.23	248	0001	<0.	Variables are significantly associated
1-40	96					
41-60	2					
61-100	2					
Age	Distribution of subject according to urine output in last 24 hrs	129	19.	0007	<0.	Variables are significantly associated
1-20	18					
21-40	5					
41-60	33					
61-80	36					
81-100	8					
Age	Distribution of subject according to blood glucose level	336	24.	0001	<0.	Variables are significantly associated
1-40	15					
41-60	71					
61-100	14					
Age	Distribution of subject according to bowel elimination in last 24 hrs	327	55.	0001	<0.	Variables are significantly associated
1-20	31					
21-40	17					
41-60	32					
61-80	4					
81-100	16					
Age	Distribution of subject according to treatment for constipation	125	63.	0001	<0.	Variables are significantly associated
1-40	66					
41-60	31					
61-100	3					
Age	Distribution of subject according to routine investigation	550	40.	0001	<0.	Variables are significantly associated
1-20	21					
21-40	39					
41-60	22					
61-80	14					

81-100	4				
Age	Distribution of subject according to the special investigation	057	28.	0001	<0.
1-20	15				
21-40	36				
41-60	23				
61-80	18				
81-100	5				
Age	Distribution of subject according to the name of the drug	963	87.	0001	<0.
1-20	25				
21-40	12				
41-60	19				
61-80	23				
81-100	21				
Age	Distribution of subject according to the frequency of drug	24	1.4	907	0.4
1-40	19				
41-60	46				
61-100	35				
Age	Distribution of subject according to dose	890	42.	0001	<0.
1-20	17				
21-40	14				
41-60	7				
61-80	39				
81-100	23				

Table no.4 Fisher's exact test showing an association between the clinical profile and sex

Demographic Variables	Clinical profile	P-Value	Significance
Sex	Distribution of subject according to BMI/ nutritional status	Two-sided P-value is 0.0109 considered significant	Association is Statistically significant
Male	81		
Female	19		
Sex	Distribution of subject according to the level of consciousness	Two-sided P-value is 0.0065 considered very significant	Association is Statistically significant
Male	82		
Female	18		
Sex	Distribution of subject according to pulse	Two-sided P-value is	Association is

Male	68	0.6545 considered not significant	Statistically not significant
Female	32		
Sex	Distribution of subject according to physiotherapy	Two-sided P-value is 0.0002 considered extremely significant	Association is Statistically significant
Male	87		
Female	13		
Sex	Distribution of subject according to dependency	Two-sided P-value is 0.3651 considered not significant	Association is Statistically not significant
Male	71		
Female	29		
Sex	Distribution of subject according to surgery	Two-sided P-value is 0.0278 considered significant	Association is Statistically significant
Male	79		
Female	21		
Sex	Distribution of subject according to secretion/suction/ETT	Two-sided P-value is 0.0623 considered not quite significant	Association is Statistically not significant
Male	77		
Female	23		
Sex	Distribution of subject according to Tubes/ use of oxygen mask	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Male	91		
Female	09		
Sex	Distribution of subject according to IV line	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Male	11		
Female	89		
Sex	Distribution of subject according to NG Tubes	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Male	28		
Female	72		
Sex	Distribution of subject according to bed sore	Two-sided P-value is 0.8822 considered not significant	Association is Statistically not significant
Male	66		
Female	34		
Sex	Distribution of subject according to GI bleeding/ulcer prophylaxis	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Male	96		
Female	04		
Sex	Distribution of subject according to the use of the urinary catheter	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Male	07		
Female	93		
Sex	Distribution of subject according to diuretic drug use	Two-sided P-value is 0.0109 considered significant	Association is Statistically significant
Male	81		
Female	19		

Sex	Distribution of subject according to medicine- H. Actrapid	Two-sided P-value is 0.0005 considered extremely significant	Association is Statistically significant
Male	86		
Female	14		
Sex	Distribution of subject according to the use of the ventilator	Two-sided P-value is 0.1242 considered not significant	Association is Statistically not significant
Male	75		
Female	25		
Sex	Distribution of subject according to constipation	Two-sided P-value is 0.8822 considered not significant	Association is Statistically not significant
Male	66		
Female	34		
Sex	Distribution of subject according to infection	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Male	90		
Female	10		
Sex	Distribution of subject according to route	Two-sided P-value is 0.0065 considered very significant	Association is Statistically significant
Male	82		
Female	18		
Sex	Distribution of subject according to drainages	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Male	98		
Female	02		

Table no.5 Fisher's exact test showing association between the clinical profile and Religion

Demographic Variables	Clinical profile	P-Value	Significance
Religion	Distribution of subject according to BMI/ nutritional status	Two-sided P-value is 0.0014 considered very significant	Association is Statistically significant
Hindu	81		
Muslim	19		
Religion	Distribution of subject according to the level of consciousness	Two-sided P-value is 0.0026 considered very significant	Association is Statistically significant
Hindu	82		
Muslim	18		
Religion	Distribution of subject according to pulse	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Hindu	68		
Muslim	32		
Religion	Distribution of subject according to physiotherapy	Two-sided P-value is 0.0398 considered significant	Association is Statistically significant
Hindu	87		
Muslim	13		
Religion	Distribution of subject according to dependency	Two-sided P-value is	Association is

Hindu	71	0.0001 considered extremely significant	Statistically significant
Muslim	29		
Religion	Distribution of subject according to surgery	Two-sided P-value is 0.0004 considered extremely significant	Association is Statistically significant
Hindu	79		
Muslim	21		
Religion	Distribution of subject according to secretion/suction/ETT	Two sided P value is 0.0001 considered extremely significant	Association is Statistically significant
Hindu	77		
Muslim	23		
Religion	Distribution of subject according to Tubes/ use of oxygen mask	Two-sided P-value is 0.2507 considered not significant	Association is Statistically not significant
Hindu	91		
Muslim	09		
Religion	Distribution of subject according to IV line	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Hindu	11		
Muslim	89		
Religion	Distribution of subject according to NG Tubes	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Hindu	28		
Muslim	72		
Religion	Distribution of subject according to bed sore	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Hindu	66		
Muslim	34		
Religion	Distribution of subject according to GI bleeding/ulcer prophylaxis	Two-sided P-value is 1.2791 considered not significant	Association is Statistically not significant
Hindu	96		
Muslim	04		
Religion	Distribution of subject according to the use of the urinary catheter	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Hindu	07		
Muslim	93		
Religion	Distribution of subject according to diuretic drug use	Two-sided P-value is 0.0014 considered very significant	Association is Statistically significant
Hindu	81		
Muslim	19		
Religion	Distribution of subject according to medicine- H. Actrapid	Two-sided P-value is 0.0238 considered significant	Association is Statistically significant
Hindu	86		
Muslim	14		
Religion	Distribution of subject according to the use of the ventilator	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Hindu	75		

Muslim	25		
Religion	Distribution of subject according to constipation	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Hindu	66		
Muslim	34		
Religion	Distribution of subject according to infection	Two-sided P-value is 0.1640 considered not significant	Association is Statistically not significant
Hindu	90		
Muslim	10		
Religion	Distribution of subject according to route	Two-sided P-value is 0.0014 considered very significant	Association is Statistically significant
Hindu	82		
Muslim	18		
Religion	Distribution of subject according to drainages	Two-sided P-value is 0.6827 considered not significant	Association is Statistically not significant
Hindu	98		
Muslim	02		

Table no.6 Fisher's exact test showing the association between the clinical profile and marital status

Demographic Variables	Clinical profile	P-Value	Significance
Marital status	Distribution of subject according to BMI/ nutritional status	Two-sided P-value is 0.0039 considered very significant	Association is Statistically significant
Married	81		
Unmarried	19		
Marital status	Distribution of subject according to the level of consciousness	Two-sided P-value is 0.0067 considered very significant	Association is Statistically significant
Married	82		
Unmarried	18		
Marital status	Distribution of subject according to pulse	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Married	68		
Unmarried	32		
Marital status	Distribution of subject according to physiotherapy	Two-sided P-value is 0.813 considered not quite significant	Association is Statistically not significant
Married	87		
Unmarried	13		
Marital status	Distribution of subject according to dependency	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Married	71		
Unmarried	29		
Marital status	Distribution of subject according to surgery	Two-sided P-value is 0.0012 considered very significant	Association is Statistically significant
Married	79		
Unmarried	21		
Marital status	Distribution of subject according to	Two sided P value is	Association is

	secretion/suction/ETT	0.0004 considered extremely significant	Statistically significant
Married	77		
Unmarried	23		
Marital status	Distribution of subject according to Tubes/ use of oxygen mask	Two-sided P-value is 0.468 considered not quite significant	Association is Statistically not significant
Married	91		
Unmarried	09		
Marital status	Distribution of subject according to IV line	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Married	11		
Unmarried	89		
Marital status	Distribution of subject according to NG Tubes	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Married	28		
Unmarried	72		
Marital status	Distribution of subject according to bedsore	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Married	66		
Unmarried	34		
Marital status	Distribution of subject according to GI bleeding/ulcer prophylaxis	Two-sided P-value is 1.0000 considered not significant	Association is Statistically not significant
Married	96		
Unmarried	04		
Marital status	Distribution of subject according to the use of the urinary catheter	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Married	07		
Unmarried	93		
Marital status	Distribution of subject according to diuretic drug use	Two-sided P-value is 0.0039 considered very significant	Association is Statistically significant
Married	81		
Unmarried	19		
Marital status	Distribution of subject according to medicine-H. Actrapid	Two-sided P-value is 0.513 considered not quite significant	Association is Statistically not significant
Married	86		
Unmarried	14		
Marital status	Distribution of subject according to the use of the ventilator	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Married	75		
Unmarried	25		
Marital status	Distribution of subject according to constipation	Two-sided P-value is 0.0001 considered extremely significant	Association is Statistically significant
Married	66		
Unmarried	34		
Marital status	Distribution of subject according to infection	Two-sided P-value is 0.2828 considered not	Association is Statistically not
Married	90		

Unmarried	10	significant	significant
Marital status	Distribution of subject according to route	Two-sided P-value is 0.0067 considered very significant	Association is Statistically significant
Married	82		
Unmarried	18		
Marital status	Distribution of subject according to drainages	Two-sided P-value is 0.4448 considered not significant	Association is Statistically not significant
Married	98		
Unmarried	02		

Table no.7 association between clinical profile and occupation

Demographic Variables	Clinical profile	Chi-Square	P-Value	Significance
Occupation	Distribution of subject according to Diagnosis	8.356	0.1377	Variables are not significantly Associated
Farmer	10			
Housewife	20			
Service	13			
Student	9			
Worker	17			
No job	31			
	Distribution of subject according to enteral intake	35.315	<0.0001	Variables are significantly Associated
Farmer	2			
Housewife	36			
Service	47			
worker	15			
Occupation	Distribution of subject according to parenteral intake	62.921	<0.0001	Variables are significantly Associated
Farmer	1			
Housewife	61			
Service	35			
worker	3			
Occupation	Distribution of subject according to Respiration	45.885	<0.0001	Variables are significantly Associated
Farmer	2			
Housewife	28			
Service	39			
Student	19			
worker	12			
Occupation	Distribution of subject according to Blood pressure	50.536	<0.0001	Variables are significantly

Farmer	19			Associated
Housewife	20			
Service	45			
Student	13			
worker	3			
Occupation	Distribution of subject according to GCS score	62.035	<0.0001	Variables are significantly Associated
Farmer	5			
Housewife	1			
Service	8			
Student	35			
Worker	37			
No job	14			
Occupation	Distribution of subject according to platelet count	13.654	<0.0180	Variables are significantly Associated
Farmer	18			
Housewife	25			
Service	31			
Student	2			
Worker	19			
No job	5			
Occupation	Distribution of subject according to clotting time	23.319	<0.0007	Variables are significantly Associated
Farmer	5			
Housewife	21			
Service	7			
Student	19			
Worker	22			
No job	26			
Occupation	Distribution of subject according to platelet count	13.654	<0.0180	Variables are significantly Associated
Farmer	18			
Housewife	25			
Service	31			
Student	2			
Worker	19			
No job	5			
Occupation	Distribution of subject according to urine output in last 24 hrs	68.074	<0.0001	Variables are significantly Associated
Farmer	18			

Housewife	5			
Service	33			
Student	36			
Worker	7			
No job	1			
Occupation	Distribution of subject according to bowel elimination in last 24 hrs	24.315	<0.0002	Variables are significantly Associated
Farmer	31			
Housewife	17			
Service	32			
Student	4			
Worker	13			
No job	3			
Occupation	Distribution of subject according to routine investigation	11.225	<0.0471	Variables are significantly Associated
Farmer	27			
Housewife	30			
Service	3			
Student	2			
Worker	20			
No job	18			
Occupation	Distribution of subject according to the special investigation	38.394	<0.0001	Variables are significantly Associated
Farmer	15			
Housewife	36			
Service	23			
Student	18			
Worker	1			
No job	4			
Occupation	Distribution of subject according to the name of the drug	21.532	<0.0006	Variables are significantly Associated
Farmer	37			
Housewife	19			
Service	19			
Student	4			
Worker	3			
No job	18			
Occupation	Distribution of subject according to dose	16.840	<0.0048	Variables are significantly Associated
Farmer	17			

Housewife	14			
Service	4			
Student	3			
Worker	39			
No job	23			
Occupation	Distribution of subject according to analgesia	47.043	<0.0001	Variables are significantly Associated
Farmer	11			
Housewife	7			
Service	39			
Student	26			
Worker	17			

Table No 1: Distribution of samples according to demographic variable

Age-wise distribution of cases shows maximum cases, i.e. 39 % and 36% in the age group 41-60 and 61-80 years of age respectively, while minimum subjects 2% in age group in 1-20 years of age.

Sex wise distribution of subjects shows maximum subjects 64% as a male while 36% as a female.

Religion wise distribution of subjects shows maximum subjects 96% as Hindu while 4% as a Muslim.

Distribution of subject according to marital status shows 95% subjects as married while 5% as unmarried.

The distribution of cases according to their occupation shows 26% and 20% of patients as housewives and workers, respectively.

Table No 2: Distribution of samples according to clinical profile

Distribution of subject according to diagnosis shows maximum cases 20% having CVA, followed by head injury 17%. 7% of patients having Organophosphorous poisoning and septic shock 6% cases having acute coronary syndrome, Acute kidney disease, Chronic Kidney Disease and Congestive Cardiac Failure.

F- FEEDING

- Distribution of subject according to height shows maximum 61 % having a length between 156-160 cm.
- Distribution of subject according to weight shows a maximum 50 % weighting 56 - 60 Kg.
- Distribution of subject according to BMI shows a maximum of 81 % between 20 – 24 and 25 and above were 19%.
- Distribution of subject according to nutritional status shows 81 % normal, while 19% were Overweight.
- Distribution of subject according to enteral intake 47% and 36% shows enteral intake between 1100 - 2000 ml and 100 - 1000 ml while 2% having nil.
- Distribution of subject according to parenteral intake 61% and 35% having 100 -1000 ml and 1100 – 2000 ml while 1% nil.

A- ASSESSMENT

- Distribution of subject according to the level of consciousness shows 82% conscious, 17 % semiconscious while 1% unconscious.
- Distribution of subject according to temperature shows 100% normal temperature.
- Distribution of subject according to pulse rate 66% shows Pulse rate between 60- 100/per min, 32% shows Pulse rate above 100 /per min while 2% shows Pulse rate below 60 /per min.

- Distribution of subject according to Respiration 39 % shows Respiration rate 21-24 / min, 28% shows Respiration rate 18-20 / min, 12 % shows Respiration rate 31-40/ min.
- Distribution of subject according to Blood pressure 45% shows 130/90 mm of Hg while 1% shows 160/100 mm of Hg.
- Distribution of subject according to GCS score 37% shows GCS score 13, 35% GCS score 12 while 3% having GCS score 1.
- Distribution of subject according to physiotherapy 87 % reported No while 13% reported yes.
- Distribution of subject according to dependency, 71% reported partial dependent while 29 % reported total dependent.

A- ANALGESIA

- Distribution of subject according to analgesia shows 39% Pain score 6, 17% Pain score eight while 11% reported Pain score four.

S- SEDATION

- Distribution of subject according to Ramsay sedation score 43 % reported 2 while 2% reported 5

S- SURGERY

- Distribution of cases according to surgery, 79 % reported no while 21 % reported yes.

S- SECRETION and S - SUCTION

- Distribution of subject according to secretion and suction 77 % reported no while 23% reported yes.

T- THROMBOPROPHYLAXIS

- Distribution of subject according to clotting time 26 % reported 6 min while 5% reported 3.40 -3.45 min.
- Distribution of subject according to bleeding time, 54 % reported 2 min, while 1% reported 1.20 min.
- Distribution of subject according to platelet count 31% reported 2.1- 2.5 lac per cubic mm while 18% reported 1-1.5 lac per cubic mm.
- Distribution of subject according to a drug used 59% reported no medications while 38% Heparin.

T-TUBES

- Distribution of subject according to CVP Line 91% reported no while 9 % reported yes
- Distribution of cases according to IV line, 89 % reported yes while 11% reported no.
- Distribution of subject according to ETT tube 77 % reported no while 23 % reported yes
- Distribution of cases according to Nasogastric, tubes 72 % reported yes, while 28 % reported no.
- Distribution of subject according to tracheostomy tube 100% reported no.

H-HEAD UP POSITION

- Distribution of subject according to bed elevation, 100% 30 to 45 elevation.
- Distribution of subject according to patients two-hourly position change 100 % yes.
- Distribution of subject according to bedsore, 66% reported no 34% reported yes.

U- ULCER PROPHYLAXIS

- Distribution of subject according to GI bleeding, 96% reported no 04% reported yes.

- Distribution of subject according to medicine for ulcer prophylaxis, 96% reported no 2% H2-receptor Antagonist and proton pump inhibitor.

U-URINE OUTPUT

- Distribution of subject according to urine output in last 24 hrs 36 % shows 1501-2000 ml while 5% shows Less than 100 ml.
- Distribution of subject according to the use of the urinary catheter, 7 % reported no 93% reported yes.
- Distribution of subject according to diuretic drug use,81% reported no 19% reported yes.

G- GLYCEMIC CONTROL

- Distribution of subject according to blood glucose level 71% reported 90-150 mg/dl,14% Above 150 mg/dl while 15% Less than 90 mg/dl.
- Distribution of subject according to medicine- H. Actrapid, 86% reported no 14% reported yes.

S- SUPPORTING DEVICE

- Distribution of subject according to the use of oxygen mask, 91% reported no 09% reported yes.
- Distribution of subject according to the use of a ventilator, 75% reported no 25% reported yes.
- Distribution of subject according to the use of dialysis,100 % reported no.
- Distribution of subject according to the use of a pacemaker, 100 % reported no.

B-BOWEL MOVEMENT

- Distribution of subject according to bowel elimination in last 24 hrs 32% reported twice while 31% reported No bowel movement.
- Distribution of subject according to constipation, 64% reported no 36 % reported yes.
- Distribution of subject according to treatment for constipation,66% reported no medicine 31% used Stool softeners and 3% used enema.

I-INVESTIGATION

- Distribution of subject according to routine investigation 20 % CBC, Creatinine, sugar Bilirubin, Urinalysis and 30% CBC.
- Distribution of subject according to the special investigation, 36% CT Scan, and MRI,23% ECG, Chest X-Ray, USG

I-INFECTION

- Distribution of cases according to infection, 90 % reported no 10 % reported yes.

D-DRUGS

- Distribution of subject according to the name of the drug,23% Inj Heparin,19% Inj Meropenem and Inj Monocef.
- Distribution of subject according to route, 82% IV,18% oral
- Distribution of subject according to the frequency of drug, 46% BD,35%TID
- Distribution of subject according to dose,39% 500mg,23% 5000 IU

D-DRESSING

- Distribution of subject according to dressing, 75 % reported no 25 % reported yes

D-DRAINAGES

Distribution of subject according to drainages,98 % reported no 02 % reported yes.

Table no.3 Chi score association between clinical profile and age

Variables are significantly associated with diagnosis, enteral intake, parenteral intake, height, weight, level of consciousness, pulse, Blood pressure, clotting time, a drug used, ulcer prophylaxis, blood glucose level, bowel elimination in last 24 hrs, treatment for constipation, routine investigation, special investigation, name of the medication, dose (P-value <0.0001 and considered extremely significant). Respiration (P-value <0.0432), analgesia (P-value <0.0037), bleeding time (P-value <0.0005), platelet count (P-value <0.0003), urine output in last 24 hrs (P-value <0.0007).

Table no.4 Fisher's exact test showing an association between the clinical profile and sex

Association is Statistically significant with Tubes/ use of oxygen mask, IV line, nasogastric tubes, GI bleeding/ulcer prophylaxis, use of a urinary catheter, infection, drainages (Two-sided P-value is 0.0001 and considered extremely significant.)

BMI/ nutritional status (Two-sided P-value is 0.0109), level of consciousness (Two-sided P-value is 0.0065), physiotherapy (Two-sided P-value is 0.0002), surgery (Two-sided P-value is 0.0278), diuretic drug use (Two-sided P-value is 0.0109), medicine- H. Actrapid (Two-sided P-value is 0.0005), route (Two-sided P-value is 0.0065).

Table no.5 Fisher's exact test showing an association between the clinical profile and Religion

Association is Statistically significant with the pulse, dependency, secretion/suction/ETT, IV line, nasogastric tubes, bed sore, use of the urinary catheter, use of a ventilator, constipation. (Two-sided P-value is 0.0001 considered extremely significant).

surgery (Two-sided P-value is 0.0004), diuretic drug use (Two-sided P-value is 0.0014), BMI/ nutritional status (Two-sided P-value is 0.0014), level of consciousness (Two-sided P-value is 0.0026), physiotherapy (Two-sided P-value is 0.0398), medicine- H. Actrapid (Two-sided P-value is 0.0238), route (Two-sided P-value is 0.0014).

Table no.6 Fisher's exact test showing an association between the clinical profile and marital status

Association is Statistically significant with pulse, dependency, IV line, nasogastric tubes, bed sore, use of urinary catheter, use of ventilator, constipation (Two-sided P-value is 0.0001 considered extremely significant), surgery (Two-sided P-value is 0.0012), secretion/suction/ETT (Two-sided P-value is 0.0004), BMI/ nutritional status (Two-sided P-value is 0.0039), level of consciousness (Two-sided P-value is 0.0067), diuretic drug use (Two-sided P-value is 0.0039), route (Two-sided P-value is 0.0067).

Table no.7 Chi score association between clinical profile and occupation

Variables are significantly associated with enteral intake, parenteral intake, respiration, blood pressure, GCS score, urine output in last 24 hrs, special investigation, analgesia (P-value is <0.0001 considered extremely significant), platelet count (P-value is <0.0180), clotting time (P-value is <0.0007), platelet count (P-value is <0.0180), bowel elimination in last 24 hrs (P-value is <0.0002), routine investigation (P-value is <0.0471), name of drug (P-value is <0.0006) dose (P-value is <0.0048)

4. DISCUSSION

In our study, there is a significant association with all clinical profile with age, sex, religion and occupation. With this proforma, it is easy to assess the critically ill clients admitted in ICU. Application of FAST HUGS BID encourages teamwork and help to improve the quality of care received by intensive care unit patients.[1] Studies similar to our research, experimental research conducted in Toledo, USA. They concluded that the use of the FAST HUG concept decreases the incidence of VAP in a surgical critical care unit in the daily evaluation of mechanically ventilated patients.[11] A study in ICU of a private hospital in Brasilia to find the effectiveness of the checklist and FAST HUGS assessment, they concluded that FAST HUG being a tool to evaluate assessing quality and to assure patients.[16] In the study, FAST HUGS BID: Modified Pneumonic for Surgical patient author concluded that our modified pneumonic was especially useful for centres where the anaesthesia team takes care of surgical ICU along with the operating rooms. By using this pneumonic, the anesthesiologist will not miss anything related to for the care of a surgical patient.[17] Vincent WR, Hatton KW also commented on Give Your Patient a Fast Hug (At Least) Once a Day in seriously ill patients Need "FAST HUGS BID" (An Updated Pneumonic)[18]

5. CONCLUSION

FAST HUGS BID mnemonic may be used to assess critically ill clients in the critical care unit, which will not only help to reduce errors but also improve quality care. This proforma is a useful tool to evaluate clients with mnemonic FAST HUGS BID with every shift. The FAST HUGS BID mnemonic provides a standardized baseline data that ensures change to shift issues managed for safety, progression, and future planning.

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