

**Tikrit university**  
**College of Nursing**  
**Clinical Nursing Science**



**Fourth Stage/ 2025**  
**Critical Care Nursing**  
**(Introduction to Critical Care Nursing)**

By Dr.Mohammed M.Abdullah

# Introduction to Critical Care Nursing

**Learning Objectives:** At the end of this chapter, the student should be able to:

1. Define concepts of critical care, intensive care units, and critical care nursing.
2. Identify the characteristics and classification of critically ill patients.

## Definition

**Critical care:** is the direct delivery of medical care for a critically ill or injured patient.

**Critical care nursing:** is concerned with human responses to life-threatening problems, such as trauma, major surgery, or complications of illness. The human response can be a physiological or psychological phenomenon. Critical care units range from open-heart recovery units, burn units, and neurologic intensive care units (ICUs) to surgical ICUs, medical ICUs, and cardiac care units.

**Intensive care unit (ICU):** Is part of the hospital that provides aggressive therapy and using invasive and non-invasive monitoring of Critically ill patient.

**Critically ill patients:** are defined as patients who are at high risk for actual or potential life-threatening health problems.

**The Society of Critical Care Medicine endorsed guidelines for critical care services based on three levels of care:**

**Level I:** Comprehensive care for a wide variety of disorders. Sophisticated equipment, specialized nurses, and physicians with specialized preparation (intensivists) are continuously available. Comprehensive support services from pharmacy, nutrition, respiratory, pastoral care, and social work are nearby.

**Level II:** Comprehensive critical care for most disorders but the unit may not be able to care for specific types of patients (cardiothoracic surgical patients).

**Level III:** Initial stabilization of critically ill patients provided but limited ability to provide comprehensive critical care.

**Characteristics of Critically Ill Patients:** The association of critical care nursing continues by identifying and describing eight characteristics of critically ill patients:

1.Resiliency: “The ability to bounce back quickly after insult. ” Patients range along the continuum from being unable to mount a response to having strong reserves.

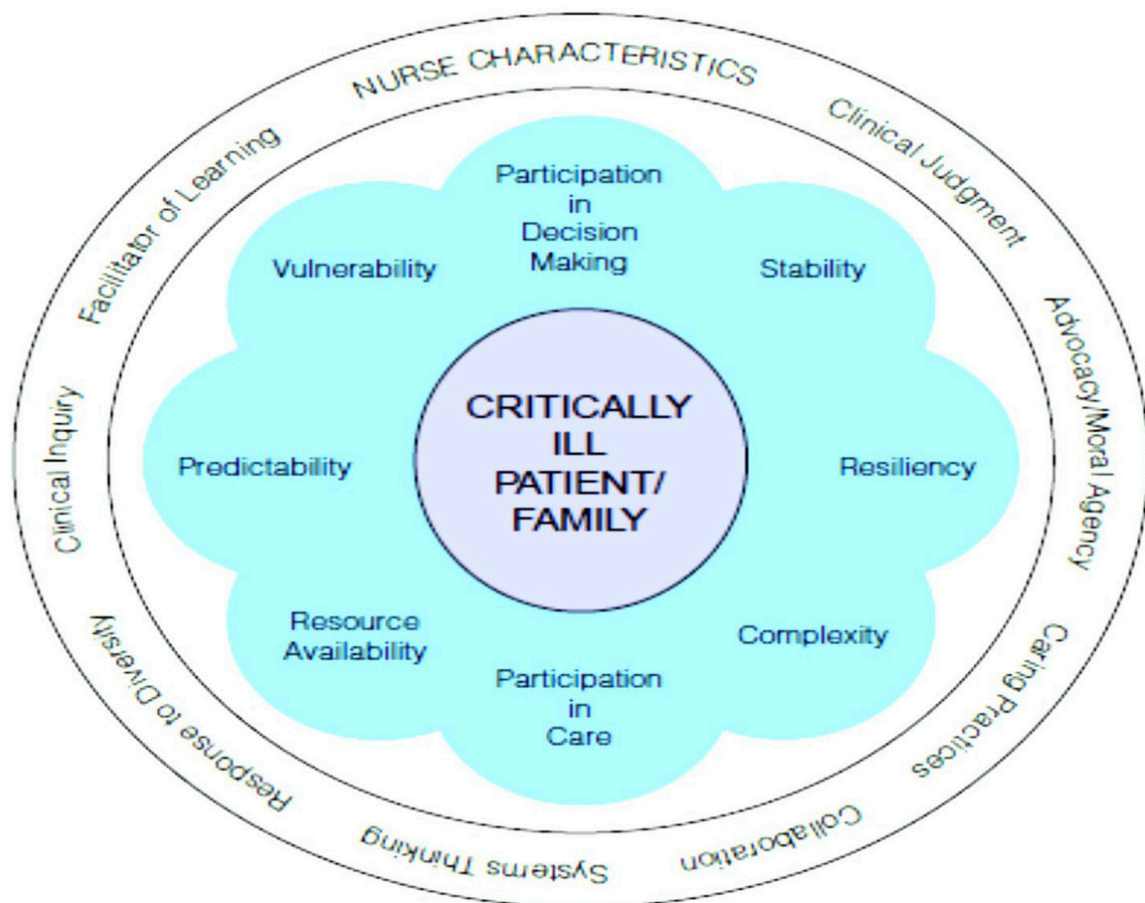
2.Vulnerability: “Susceptibility to actual or potential stressors. ” Patients range from being fragile to being safe or “out of the woods.”Stability: “The ability to maintain steady state equilibrium. ” Patients vary from being unresponsive to therapies and at high risk for death to stable and responsive to therapy.

4•Complexity: “The intricate entanglement of two or more systems (e.g., body, family).” Patients span the gamut from having atypical presentations of an illness or complex family dynamics to simple clear-cut and typical presentations.

5•Predictability: “A characteristic that allows one to predict a certain course of events or course of illness.”Patients range from having unusual or unexpected the course of illness to follow a critical pathway.

6•Resource availability: “Extent of resources the patient, family, and community bring to the situation.”Patients may have few of the resources necessary for recovery available to them or may have extensive knowledge and skills.

7•Participation in care: “Extent to which patient and/or family engage in care.”Patients and families may vary from being unable or unwilling to assist with care to being fully willing and able to participate.Participation in decision-making: “Extent to which patient and/or family engage indecision-making”



# Background and classification critically ill patients:

Definition	Classificatio
Level 0	Patients whose needs can be met through routine ward care in an acute hospital
Level 1	Patients at risk of their condition deteriorating, or recently relocated from higher levels of care, whose needs can be met on an acute ward with additional advice and support from a critical care
Level 2	Patients requiring more detailed observation or intervention, including support for a single failing organ system or postoperative care, and those „stepping down“ from higher levels of care
Level 3	Patients requiring advanced respiratory support alone or basic respiratory support together with support of at least two organ systems. This level includes all complex patients requiring support for multi-organ failure