

Category :**ICU organization**

A27 - Green icu: a proposed protocol to greenify intensive care – a single center experience

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Introduction:

If healthcare in the global scale were a country, it would be the fifth biggest carbon emitter on the planet. This awareness has globally increased concern. Within the hospital, the intensive care unit (ICU) is one of the considerable waste generators. Although challenging, awareness regarding this issue is important, and measures can be undertaken to reduce this impact.

Methods:

A literature review identified the problem's magnitude and potential targets for improvement regarding the environmental waste and pollution associated with the ICU. The project is running at an urban, tertiary care, university hospital. Accordingly, we identified and proposed an integrated pool of measurements designed to have impact on waste production and treatment at the ICU level. In a Delphi-like manner, the measures to implement were selected.

Results:

Of the proposed measurements, subscription rate >80% evolved the following: recycling all the confidential paper waste – with a witnessed recycling preserving the confidentiality; recycling all the non-contaminated plastic and cardboard waste; developing regular scientific dedicated internal meetings; abolishing pre-made central venous catheters kits – with unnecessary material – and replace it with individually selectable material; reserve the single-use bronchoscope to emergency situations and installation of light sensors on the halls to prevent lighting when not needed. For each measurement we selected a work group dedicated to its implementation. The first three listed are already implemented and the remaining ones are in assessment, logistics scouting and implementation process. Assessment of fulfillment by professionals revealed a high level of adherence.

Conclusion:

There's an unavoidable environmental impact of health care in general. Nevertheless, it's possible to reduce such impact by modulating simple practices. Green-ICU teams and green-ICU bundles produce awareness and can be motors to foster specific practice changes personalized to each ICU.