#### **Hydrotherapy Checklist**

Patient ID:

Date:

### Patient:

Informing patient/family executed Announcing patient at Medium Care (location of pool) executed Check safety criteria and contra-indications executed Patient positioning optimal Copy mechanical ventilation parameters executed In case of possible faeces incontinence insert anal tampon executed Lines disconnected and covered executed Nasogastric tube disconnect and flushed executed Cover insertional openings executed Urine catheter disconnected executed Cover wounds with Tegaderm™ executed Hearing aid removed executed **Endotracheal suctioning** executed Subglottis drainage executed

#### Material:

Laptop/transport ventilation machine present Ventilation machine hose and reserve material present Oxygen cylinder present Resuscitation balloon present Suctioning catheter present Cuff Pressure Measuring Syringe present Tubelint present Vacuumpump present Suctioninghose for vacuum pump present Pulse-oximeter present Tracheal inner cannula and imputational cannula present Bathing clothes present Showergel/shampoo present Extra linen present Incontinence material present

## <u>Staff</u>

Physical therapist present

Ventilation specialist nurse present

Intensive care nurse present

### <u>Procedure</u>

Briefing executed
Discuss treatment policy executed
Discuss what to do in case of emergency executed

# $\underline{\text{After procedure}}$

Mechanical ventilation checkexecutedReconnect infusion and catheters to patientexecutedPatient minimal 1 hour of restexecutedDebriefingexecutedReport in digital patient fileexecuted