



**Preparing for the Worst-Case Scenario in a
Pandemic: Intensivists Simulate
Prioritization and Triage of Scarce ICU
Resources**

**Preparedness
for ICU-resource-
allocation
in a pandemic**

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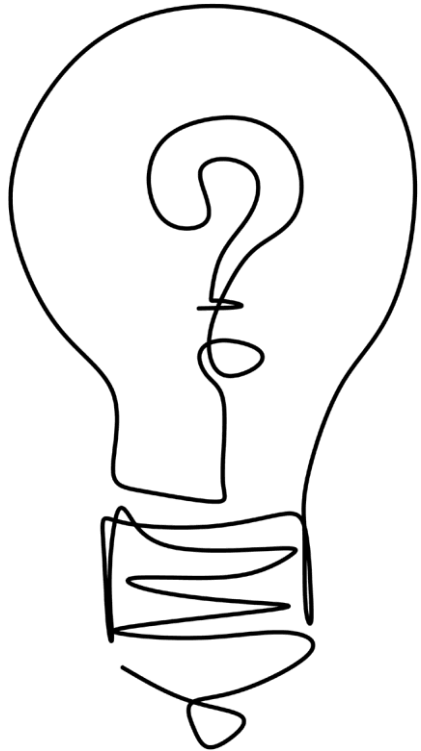
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Who should read the paper?



- Health care professionals (HCPs)
 - Intensivists
 - Other physicians
 - Other HCPs (nurses, psychologists, ...)
- Clinical and organizational ethicists
- Policymakers

What's it about?



How do intensivists evaluate a medico-ethical guidance for prioritization and triage of scarce intensive care resources during a pandemic?

- During the COVID-19 pandemic the allocation of scarce medical resources became necessary
- No consensus has been reached on the criteria that should guide prioritization and triage in the context of intensive care
- If triage became necessary, we do not know how intensivist would implement a proposed triage protocol and what their support-needs would be

Study design

What did the researchers do?

Methodology: Prospective mixed-methods study (convergent parallel-design quant-qual)

Setting: Single-center study, 5 Intensive Care Units (ICUs) at one German University Hospital

Data acquisition and analysis: Quantitative analysis of patient-characteristics and qualitative content analysis (Kuckartz) of focus groups with intensivists

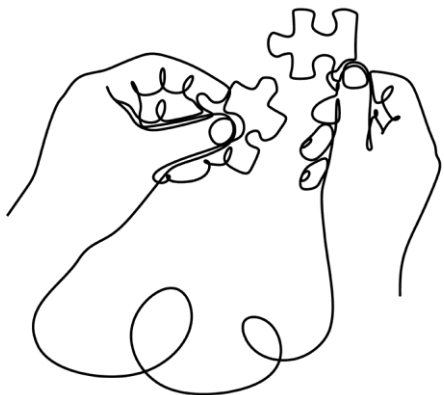
Participants: Intensivists who simulated prioritization during a pandemic in real-world context

Patients: Critically ill ICU patients (n = 53)

Sampling: Purposive sampling (intensivists) and full survey (ICU patients)



What did the researchers find out?

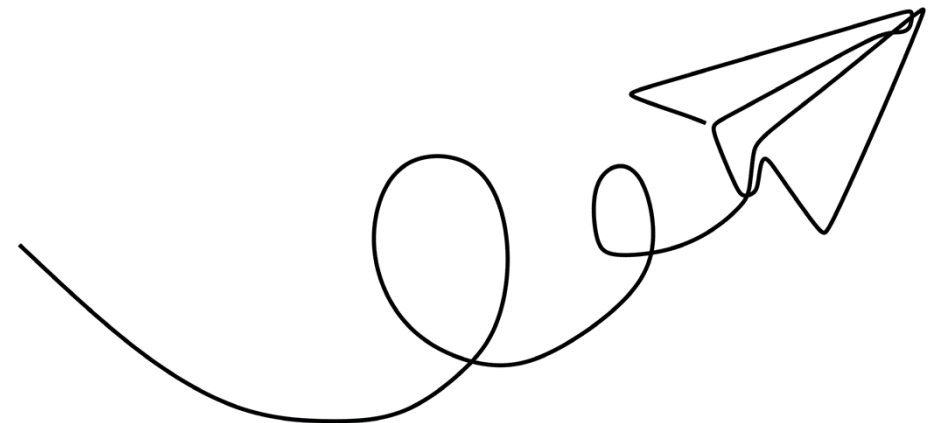


Results of the study

- Implementing the medico-ethical guidance is feasible and acceptable from the perspective of intensivists
- The differentiation of patients with very low chances to survive remains challenging and requires further conceptual and empirical research
- Being confronted with ethical challenges during triage would put a tremendous distress and burden on the clinicians
- Nevertheless, intensivists want to assume the responsibility, if the approach is transparent, legal and based on interdisciplinary deliberation

How can the results be used?

- Key stakeholders deliberation of the right approach to triage can inform the revision or refinement of guidelines and public policy-making
- The results can be used to prepare hospitals for the worst-case scenario if a pandemic-related resource scarcity is to be expected, to make sure the guidance is acceptable, feasible and the clinical-ethical training and support of intensivists is sufficient



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