



ADULT ICU EARLY REHABILITATION

Activity & Mobility Promotion (AMP) Program

The problem with **the current standard of care in many adult ICUs** is an epidemic of deep sedation, with associated bedrest and immobility. After ICU discharge, patients often experience post-intensive care syndrome, with long-term impairments in physical, cognitive, and mental health.

The Adult ICU Early Rehabilitation Program is a multi-disciplinary approach to critical care for adults that calls for **early intervention to get patients wider awake and moving**. To help hospitals facilitate this important paradigm shift in ICU care, the Adult ICU Early Rehabilitation Program provides both hospital and ICU leaders, as well as front-line clinicians, with the tools needed to design and implement a structured quality improvement (QI) process, including: assembling a multi-disciplinary team to create and sustain culture change; addressing existing cultural and other barriers to changing practice; and designing and utilizing metrics to evaluate progress.

PROGRAM COMPONENTS

- ▲ e-Learning modules
- ▲ Annual CME program
- ▲ Toolkit for training, implementation and maintenance
- ▲ Observerships
- ▲ Consulting

PROGRAM OUTCOMES

Johns Hopkins clinicians and researchers have demonstrated that consistent application of this early rehabilitation model improves patient outcomes, and reduces length of stay.

ABOUT THE INNOVATOR

Dale Needham, M.D., is a professor of medicine at the Johns Hopkins University School of Medicine. He also holds an appointment in physical medicine and rehabilitation. Dr. Needham serves as the medical director of the Critical Care Physical Medicine and Rehabilitation Program and the director of the Outcomes After Critical Illness and Surgery

OTHER AMP PROGRAMS:

PICU Up! Promotes early mobility in the pediatric ICU

AMP - Hospital Implements activity and mobility culture hospital-wide

(OACIS) Group at Johns Hopkins. He earned his M.D. from the McMaster University School of Medicine. He completed his internal medicine residency and his critical care fellowship at the University of Toronto, followed by his Ph.D. in Clinical Investigation at the Johns Hopkins Bloomberg School of Public Health.

WHY CHOOSE A JOHNS HOPKINS SOLUTION?

Since 1889, Johns Hopkins has led the way in both biomedical discovery and patient and population care. Faculty research most often leads to innovative protocols, programs and services, establishing the standard by which others follow and build upon.

Our goal: make these innovations available beyond our walls to improve the health outcomes of individuals and populations—within our community and throughout the world.