

Some of the ways in which the ICU psychology service aims to help our patients and their families:

- Individual appointments with the clinical psychologist to help people who are experiencing psychological or cognitive symptoms related to their critical illness
- Providing self-help resources which aim to provide psychology input to people who might not have individual appointments
- Supporting the families of patients on the ICU, who may also be feeling very anxious, low or experiencing other psychological symptoms.

Contact us

If you would like to be referred to the ICU Clinical Psychology Service, please discuss this with a member of the ICU team or call **01483 571122 ext. 2177**

Contact details

ICU Clinical Psychology Service

Telephone: 01483 571122 **ext** 2177

PALS and Advocacy contact details

Contact details of independent advocacy services can be provided by our Patient Advice and Liaison Service (PALS) who are located on the right hand side as you enter the main reception area. PALS are also your first point of contact for health related issues, questions or concerns surrounding RSCH patient services.

Telephone: 01483 402757

Email: rsc-tr.pals@nhs.net

Opening hours: 9.00am–3.00pm
Monday to Friday

If you would like information documents in large print, on tape or in another language or form please contact PALS.

Past review date: N/A

Future review date: January 2022

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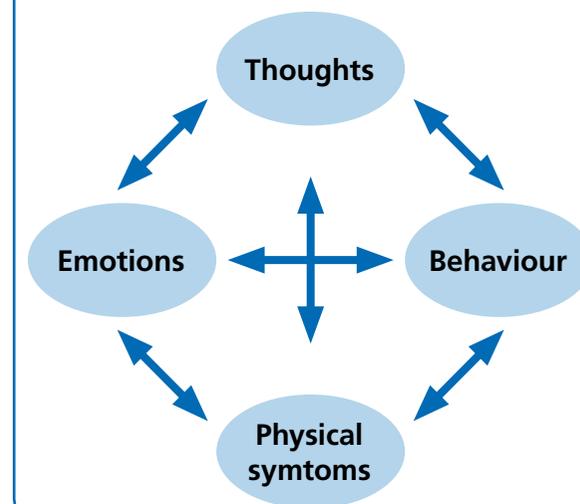
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The Intensive Care Unit (ICU) Clinical Psychology Service

Adult Critical Care

Situation: Recovering from critical illness



Patient information leaflet

This leaflet explains the role of the clinical psychology service in the intensive care unit to help you decide whether you would like to make an appointment.

Why might I need the help of the Clinical Psychology Service in the ICU?

While in intensive care, you may have difficulty remembering what happened to you. You may have upsetting or vivid dreams, nightmares or hallucinations. You may have had thoughts about people deliberately trying to harm you. Upsetting memories of your time in the ICU may keep coming back into your mind. You may feel disorientated or very sad, tense, panicky or hopeless. You may find out that you have behaved in an aggressive or other unusual way, but not understand why.

- *'What actually happened to me?'*
- *'Will I ever be the same again?'*
- *'Were any of those memories real?'*

Unfortunately, these kinds of experiences are common in people who are critically ill.

If you can relate to any of these experiences, it is certainly not your fault. In the Clinical Psychology Service we meet with patients and their families on the unit to address these difficulties.

The Outpatient ICU Psychology Service

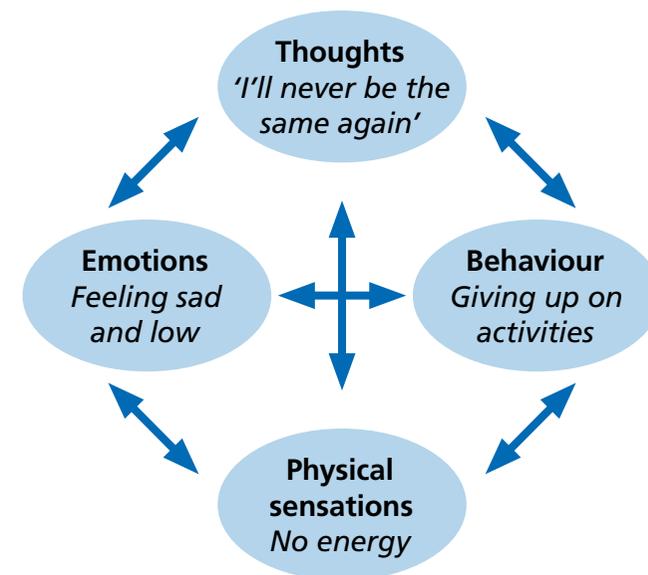
We also meet patients after they have been discharged from intensive care. About 40% of our patients report feeling unusually anxious or low in mood after being discharged from the ICU. Sometimes people describe difficulties with memory, finding the right word, planning or paying attention. You may also experience some of the following:

- Vivid dreams or nightmares
- Flashbacks (memories of intensive care keep coming back into your mind)
- Hallucinations (seeing or hearing things you suspect are not really there)
- Feeling tense, anxious or panicky
- A loss of confidence
- Forgetting things
- Feeling low or hopeless
- Having difficulties sleeping
- Anger and irritability

What would happen if we met?

If you met with the ICU psychologist, we would work together to identify any thoughts, emotions or behaviours that might be impacting on your health and quality of life.

Situation: Recovering from critical illness



Once we have identified these factors, we would work together to plan some strategies to address them, in order to help you achieve your goals. We aim to help our patients achieve best possible physical and psychological rehabilitation following an intensive care admission.