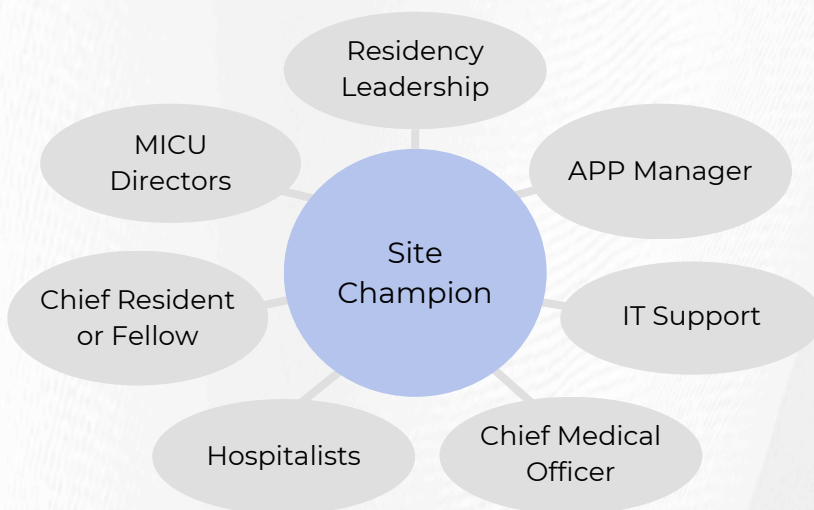# ICU-PAUSE
TOP 4 TIPS FOR BEST IMPLEMENTATION PRACTICES
Developed from interviews with active ICU-PAUSE sites

TIP #1: PARTNER WITH STAKEHOLDERS

Site champions at preceding institutions have engaged multiple **key stakeholders** in ICU-PAUSE, including these individuals:

- Residency Leadership
- MICU Directors
- APP Manager
- Site Champion
- Chief Resident or Fellow
- IT Support
- Hospitalists
- Chief Medical Officer

TIP #2: CREATE A DEDICATED ORIENTATION

To facilitate adoption of ICU-PAUSE, active sites have employed **virtual and/or in-person orientation-style sessions** to familiarize faculty and trainees with the tool. Prior ideas include:

Incorporating ICU-PAUSE into Epic sessions at **residency orientation**

Presenting ICU-PAUSE to residents during planned **didactic time**

Creating a **tips and tricks sheet** or sharing our **informational packet**

TIP #3: REPEAT THE INFORMATION

Repeating information on ICU-PAUSE has been highly important for the sustainability of the tool. Strategies active sites have used include:

Regular repeated **training** or **info session** monthly	**Email reminders** when use of the tool trails
Obtain IT help with adding a **rolling computer screen** with an ICU-PAUSE reminder	Circle back through the ICU on a regular basis to **redistribute and retrain**

TIP #4: GET FEEDBACK

Check in regularly with faculty and trainees using the tool to determine how ICU-PAUSE can best be tailored to your site. From feedback, some sites have modified their template (see example **template modifications** here).

NEED HELP?

Visit our website:

ATS
American Thoracic Society

https://www.thoracic.org/professionals/education/ats-icu-pause-initiative.php

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