

IC-physician versus qualified IC-nurse-based interhospital critical care transport (IQ-transport) study

Submission date 14/02/2006	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered
		<input type="checkbox"/> Protocol
Registration date 14/02/2006	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
Last Edited 12/05/2016	Condition category Other	<input type="checkbox"/> Individual participant data

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

Protocol serial number
N/A

Study information

Scientific Title

IC-physician versus qualified IC-nurse-based interhospital critical care transport (IQ-transport) study

Acronym

IQ-transport study

Study objectives

Interhospital transport of IC-patients can be escorted solely by a registered IC-nurse.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised controlled trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Intensive Care (IC) patients

Interventions

Study strategies:

1. Transport will be performed by a physician-based team: an IC-trained physician will accompany a registered IC-nurse
 2. Transport will be performed solely by a registered IC-nurse. In this strategy, an IC-physician is physically present during inter-hospital transport; however, the physician does not play any role in the treatment of patient until a formal request is made by the IC-nurse.
- In both strategies the ambulance crew is present.

Intervention Type

Other

Phase

Not Specified

Primary outcome(s)

Incidence of critical events defined as:

1. Related to intensive care (lead disconnections, loss of battery power or any other technical equipment failure, airway loss requiring airway manipulation or reintubation, loss of any intravascular device, dislodgment of any thoracostomy tube, Foley catheter, or surgical drain)
2. Clinical deteriorations related to critical illness (death, decrease in arterial saturation of >10% for >10 min, undesired rise or fall in arterial blood pressure [systolic, diastolic or mean, defined as >20 mmHg from baseline for >10 min], hemorrhage or blood loss estimated to be >250 ml, new cardiac arrhythmias with associated hemodynamic deterioration or are generally accepted

as requiring urgent therapy [occasional premature ventricular or atrial contractions were not considered significant], temperature fall below 36 degrees Celsius)

Key secondary outcome(s)

No secondary outcome measures

Completion date

01/02/2008

Eligibility

Key inclusion criteria

Consecutive IC-patients (>18 years of age) transported by the Mobile Intensive Care Unit, Academic Medical Center, University of Amsterdam.

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

IC-patients considered to be too instable to be transported without a physician as team member - one or more of the following criteria:

1. PaO₂/FiO₂ <100 with PEEP >15
2. Mean arterial pressure <60 mmHg despite adequate fluid therapy and inotropics (noradrenalin >0.35 kg/microg/min, dopamine >15 kg/microg/min)
3. Episode of resuscitation (chest compression or cardiac defibrillation) in 24 hours before interhospital transport

Date of first enrolment

01/02/2006

Date of final enrolment

01/02/2008

Locations

Countries of recruitment

Netherlands

Study participating centre
Academic Medical Center (AMC)
Amsterdam
Netherlands
1100 DD

Sponsor information

Organisation
Academic Medical Center (AMC), Mobile Intensive Care Unit (The Netherlands)

ROR
<https://ror.org/03t4gr691>

Funder(s)

Funder type
University/education

Funder Name
Academic Medical Center (AMC)

Alternative Name(s)
Academic Medical Center, AMC

Funding Body Type
Private sector organisation

Funding Body Subtype
Universities (academic only)

Location
Netherlands

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/07/2016		Yes	No