

Odjel pojačane internističke skrbi s koronarnom jedinicom Opće bolnice "Dr. Ivo Pedišić" Sisak

Division of Advanced Internal Medicine with a Coronary Care Unit of the General Hospital "Dr Ivo. Pedišić" Sisak

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SAŽETAK: Odjel pojačane internističke skrbi s koronarnom jedinicom dio je Službe za interne bolesti Opće bolnice (OB) Sisak. Odjel ima deset kreveta, a zbrinjavaju se bolesnici u hitnim internističkim stanjima. O bolesnicima se skrbi osamnaest medicinskih sestara i tri liječnika internista specijalista kardiologije. Odjel je opremljen svim aparatima i lijekovima potrebnima u slučaju reanimacije. Velik dio bolesnika koji se liječe na odjelu čine kardiološki bolesnici. Prije osnivanja Hrvatske mreže intervencijskog liječenja akutnog infarkta miokarda bolesnici s akutnim infarktom miokarda (AIM) liječili su se fibrinolizom, a danas se ta metoda liječenja malokad primjenjuje. Bolesnici s dijagnozom AIM-a transportiraju se u Klinički bolnički centar Sestre milosrdnice radi perkutane koronarne intervencije, a nakon toga vraćaju se u OB Sisak na nastavak liječenja.

SUMMARY: The Division of Advanced Internal Medicine with a Coronary Care Unit is part of the Internal Medicine Department of the Sisak General Hospital (GH). It has ten beds and houses patients with critical internal medicine conditions. Patients are tended by eighteen nurses and three cardiologists. The department is equipped with all the medical devices and medications required for reanimation. Cardiovascular patients comprise a large part of the patients treated at the department. Prior to the founding of the Croatian Network for Interventional Treatment of Acute Myocardial Infarction patients with acute myocardial infarction (AMI) were treated with fibrinolysis, but this method is rarely applied today. Patients with AMI are transported to the University Hospital Centre "Sestre milosrdnice" for percutaneous coronary intervention, after which they return to Sisak GH to continue treatment.

KLJUČNE RIJEČI: opća bolnica, Sisak, akutni infarkt miokarda, perkutana koronarna intervencija.

KEYWORDS: general hospital, Sisak, acute myocardial infarction, percutaneous coronary intervention.

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Odjel pojačane internističke skrbi s koronarnom jedinicom nalazi se u zgradama stare Interne zajedno s Hitnom internističkom ambulantom i Odjelom kardiologije. U istoj su zgradama i ambulante za ergometriju i ehokardiografiju u kojima rade kardiolozi Opće bolnice (OB) Sisak. Odjel ima deset kreveta, ali se taj broj nerijetko zna povećati i na dvanaest, jer se u prostoru samog odjela zbrinjavaju i bolesnici iz dnevne bolnice kojima je potreban nadzor (monitoring). To su najčešće bolesnici s dijagnozama kratkotrajnog poremećaja srčanog ritma, anafilaktičke reakcije te sinkope i intoksikacije lijekovima ili alkoholom.

Na odjelu se, kako samo ime govori, osim kardioloških bolesnika, liječe i oni s dijagnozama gastrointestinalnog krvarenja, sepsis i septičnog šoka, plućne embolije, plućnog edema, pankreatitisa, ketoacidoze i sl. Svi su bolesnici monitorirani i pod 24-satnim nadzorom liječnika i medicinskih sestara ustanove. Liječnici odjela

The Division of Advanced Internal Medicine with a Coronary Care Unit is located in the old internal medicine building together with the Internal Medicine Emergency Room and Cardiology Department. The same building houses the ergometry and echocardiography clinics staffed by cardiologists from the Sisak General Hospital (GH). The department has ten beds, but this number can often rise to twelve because patients from the day hospital who require monitoring are also cared for at the department. These are most often patients diagnosed with paroxysmal cardiac rhythm disturbances, anaphylactic reactions, and syncope and intoxication with medications or alcohol.

As the name of the department indicates, in addition to cardiological patients the department also treats patients diagnosed with gastrointestinal bleeding, sepsis and septic shock, pulmonary embolism, pulmonary edema, pancreatitis, ketoacidosis, etc. All patients are monitored and un-

pojačane internističke skrbi s koronarnom jedinicom educirani su i izvode postavljanje centralnih venskih katetera, dializnih katetera te privremenih elektrostimulatora. Odjel je opskrbljen svim potrebnim aparatom za potrebe reanimacije, od defibrilatora do respiratora. Za bolesnike na odjelu skrbi se osamnaest medicinskih sestara, od kojih je devet sestara sa srednjom stručnom spremom, osam prvostupnica sestrinstva i jedna diplomirana medicinska sestra te tri liječnika internista specijalista kardiologije. S obzirom na nedostatak liječnika educiranih za rad u koronarnoj jedinici, odjel pokrivaju liječnici ostalih specijalizacija tijekom neradnih dana i dežurstava, kada su odjelni liječnici nedostupni.

Prije stvaranja Hrvatske mreže intervencijskog liječenja akutnog infarkta miokarda bolesnici s akutnim infarktom miokarda (AIM) bili su liječeni fibrinolizom, koja je bila uspješna uz malu učestalost komplikacija. Danas se taj oblik liječenja AIM-a primjenjuje samo u slučajevima kada je transport bolesnika u intervencijski centar u Zagrebu onemogućen, a lijek je izbora alteplaza. Nakon osnivanja mreže, OB Sisak do 2007. godine surađuje s Kliničkim bolničkim centrom (KBC) Zagreb, a od 2007. godine bolesnici s AIM-om transportiraju se u KBC Sestre milosrdnice.

Pri dolasku bolesnika sa sumnjom na dijagnozu AIM-a, osoblje ustanove napravi sve potrebno kako bi se ta dijagnoza potvrdila. Transport bolesnika u drugu ustanovu dogovara se između liječnika kardiologa objiju ustanova, a bolesnik prije transporta dobije svu potrebnu terapiju. Transport se provodi vozilom hitne medicinske pomoći s medicinskom sestrom, a u pratinji je najčešće liječnik specijalizant OB Sisak. Bolesnik se nakon obavljenе perkutane koronarne intervencije vraća u matičnu ustanovu, gdje nastavlja svoje liječenje.

Iako mala i s ograničenim sredstvima, OB Sisak sa svojim osobljem trudi se odgovorno i profesionalno zbrinjavati bolesnike, neovisno o njihovoj dobi i dijagnozama s kojima dolaze. U blizoj budućnosti čeka otvaranje Objedinjenog hitnog bolničkog prijema u zgradbi centralnog paviljona (**slika 1**) koja je trenutačno u izgradnji. Nadamo se da će naše medicinske usluge biti podignute na još višu razinu u korist svih naših sadašnjih i budućih bolesnika.

der 24-hour supervision by physicians and nurses working at the institution. Physicians working at the department are educated in and perform central venous catheter implantation as well as implantation of dialysis catheters and temporary pacemakers. The department is equipped with all medical devices needed for respiration, from defibrillators to respirators. Patients are cared for by eighteen nurses, of which nine are vocational school graduates, eight have a bachelor's degree in nursing, and one is a nursing graduate, in addition to three cardiologists. Given the lack of physicians with the required training and education to work in the coronary unit, the department is also covered by physicians with other specializations during holidays and for call duty when the department's physicians are not available.

Prior to the founding of the Croatian Network for Interventional Treatment of Acute Myocardial Infarction, patients with acute myocardial infarction (AMI) were treated with fibrinolysis with good results and low incidence of side-effects. Today this form of AMI treatment is only applied when transport of patients to the interventional center in the city of Zagreb is not possible, with alteplase is the treatment of choice. After the network was founded, the Sisak GH worked in cooperation with the University Hospital Centre (UHC) Zagreb until 2007, whereas after 2007 patients with AMI are transported to the UHC "Sestre milosrdnice".

Upon admission of a patient in whom the diagnosis of AMI is suspected, the department staff performs all the necessary procedures to establish the diagnosis. Transport of the patient to the other institution is arranged by cardiologists from both institutions, and the patients receives all necessary treatment before transport. The patient is transported using an ambulance vehicle staffed by a nurse and usually accompanied by a specialist physician from the Sisak GH. After percutaneous coronary intervention has been performed, patients are returned to the Sisak GH where they continue their treatment.

Although it is small and limited in funding, the Sisak GH and its staff strive to responsibly and professionally treat its patients regardless of their age and diagnosis. In the near future we will be introducing the Joint Emergency Hospital Admission system in the central pavilion building (**Figure 1**) which is currently under construction. We hope that our medical services will thus be further improved to the benefit of all our current and future patients.

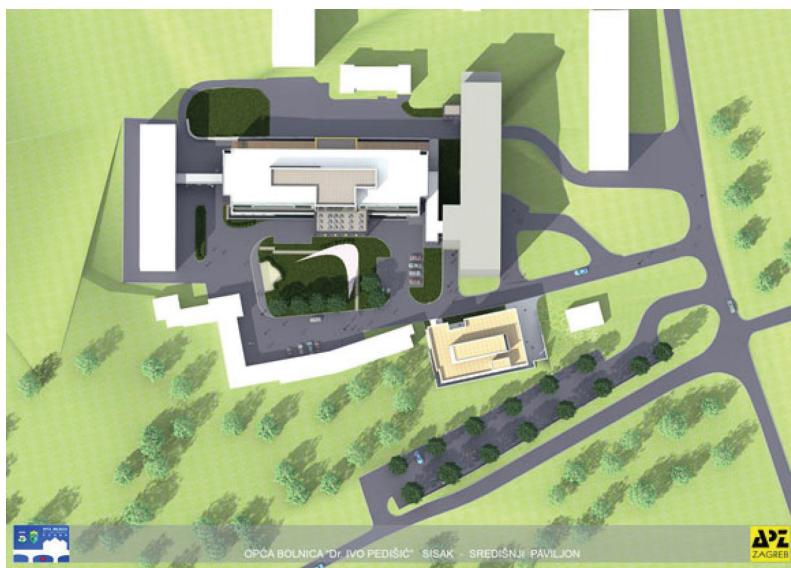


FIGURE 1. Central pavilion building currently under construction.