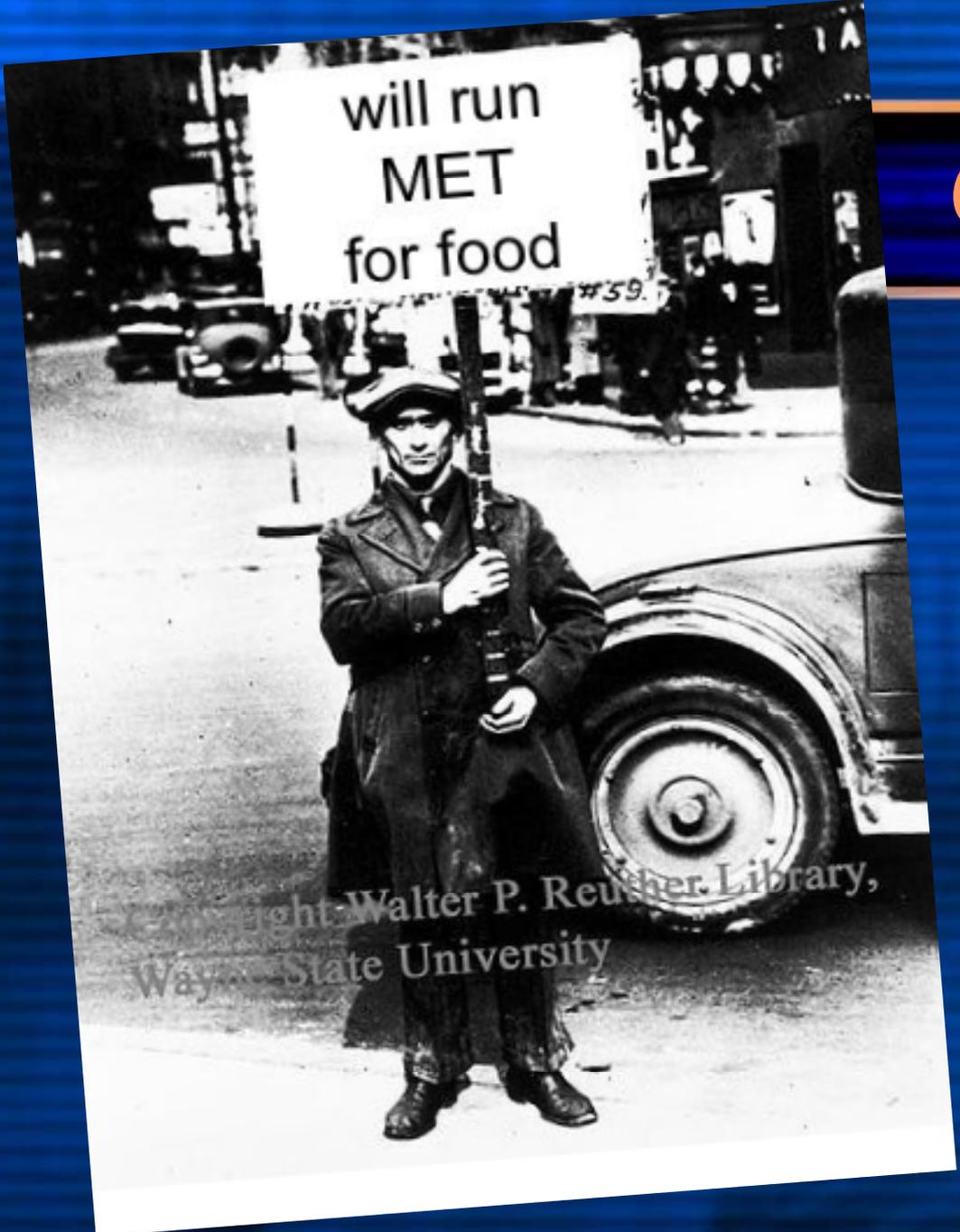


MET versus RRT

Which would you want?

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RAMP UP (Nursing)

- Pro

- Takes care of most
- Cheaper
- Less wasted time
- Step up in number of staff

- Con

- Inadequate for a few
- (Perhaps death)
- Not billable
- Not necessarily a “step up” in care expertise

Ramp down (physician)

- Pro

- Always sufficient resources
- Billable
- Always a step up in care expertise and number
- Data show benefit

- Con

- Costs more
- Possible waste of time for some events

Is there data?

- Not really
 - JAMA
 - CCM Bellomo/Chen

Other considerations. . .

- Educational missions
- If protocols are utilized in place of physician, they have some limitations:
 - Vague end points
 - Concurrent conditions with opposite therapeutic goals
- Conversion to comfort care

Which would you want?

- When lives are at stake, and time is limited, providing more and taking away unnecessary is safer though more costly than providing less and adding more if needed.
- The time required to ramp up may be not different from the antiquated system that RRS are intended to replace