## Choosing Wisely® For Critical Care Daily Care ROUNDING CHECKLIST

The goal of the Society of Critical Care Medicine's (SCCM) Choosing Wisely® daily care rounding checklist is to provide a structured approach to maximize integration of evidence-based practices, avoid waste, and deliver safe, high-value critical care. Consideration should be given to the patient's clinical status and acuity level when considering each recommendation for implementation that day. Other interventions based on local protocols and ICU type can be added to this list.

Visit sccm.org/choosingwisely CHOOSE YES, NO, OR N/A FOR EACH ACTION TAKEN. Day 2 Day 3 Day 4 Day 5 Day 6 Day 7 Comments Day 1 Date: **ACTION** Date: Date: RECOMMENDATION Date: Date: Date: Date: Spontanous awakening trial (SAT) 2021: Do not delay mechanical ventilator weaning ☐ YES  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO has been performed. unless there is clinical evidence of need.  $\square$  NO □ N/A Spontaneous breathing trial (SBT) 2021: Do not delay mechanical ventilator weaning ☐ YES ☐ YES ☐ YES ☐ YES ☐ YES ☐ YES □ YES unless there is clinical evidence of need.  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO has been performed.  $\square$  NO □ N/A 2015: Do not deeply sedate mechanically ventilated ☐ YES □ YES ☐ YES ☐ YES ☐ YES ☐ YES ☐ YES Sedation goals have been set.  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO patients without a specific indication and without  $\square$  NO daily attempts to lighten sedation. □ N/A □ N/A □ N/A  $\square$  N/A □ N/A □ N/A □ N/A ☐ YES Patient has been mobilized. 2021: Do not delay mobilizing ICU patients. ☐ YES ☐ YES ☐ YES ☐ YES ☐ YES ☐ YES  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO □ N/A Assessment has been completed 2021: Do not leave lines, tubes, or drains in ICU ☐ YES  $\square$  NO patients that have not been evaluated at least once  $\square$  NO  $\square$  NO  $\square$  NO for central line needs. daily and judged to provide continued patient benefit. □ N/A ☐ YES ☐ YES ☐ YES ☐ YES ☐ YES □ YES Assessment has been completed 2021: Do not leave lines, tubes, or drains in ICU ☐ YES for bladder catheter needs. patients that have not been evaluated at least once  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO daily and judged to provide continued patient benefit. □ N/A  $\square$  N/A  $\square$  N/A □ N/A □ N/A □ N/A □ N/A ☐ YES 2022: Do not delay providing nutrition, preferring ☐ YES ☐ YES ☐ YES ☐ YES ☐ YES Nutrition needs have been ☐ YES  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO discussed. enteral over parenteral, to critically ill patients  $\square$  NO  $\square$  NO  $\square$  NO during the first 24-36 hours of a critical illness.  $\square$  N/A □ N/A □ N/A  $\square$  N/A □ N/A □ N/A □ N/A ☐ YES ☐ YES ☐ YES ☐ YES ☐ YES ☐ YES Diagnostic tests have been 2015: Do not order diagnostic tests at regular ☐ YES  $\square$  NO reviewed intervals (such as daily) but rather in response to  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO □ N/A □ N/A specific clinical questions. □ N/A □ N/A □ N/A □ N/A □ N/A Assessment has been completed 2015: Do not transfuse red blood cells in ☐ YES  $\square$  NO  $\square$  NO NO  $\square$  NO  $\square$  NO for transfusion needs. hemodynamically stable, non-bleeding ICU patients with a hemoglobin concentration greater than 7 g/dL. □ N/A 2021: Do not delay discontinuation of antibiotics ☐ YES ☐ YES ☐ YES ☐ YES ☐ YES ☐ YES □ YES Assessment has been completed for antibiotic needs. in culture-negative and asymptomatic patients with  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO  $\square$  NO sterile cultures beyond 48 hours. □ N/A ☐ YES Patient goals of care have been 2021: Do not provide care that does not align with the documented patient's and family's goals, values, reviewed with patient and/or family  $\square$  NO  $\square$  NO or surrogate decision-maker. and preferences for healthcare. □ N/A □ N/A  $\square$  N/A □ N/A □ N/A □ N/A □ N/A ☐ YES ☐ YES ☐ YES ☐ YES ☐ YES ☐ YES Code status has been 2015: Do not continue life support for patients at ☐ YES high risk for death or severely impaired functional  $\square$  NO documented. □ N/A recovery without offering patients' families the □ N/A  $\square N/A$  $\square$  N/A □ N/A □ N/A □ N/A alternative of care focused entirely on comfort.