

## Supplemental file 1

**MONITOR-IC post ICU care study | MiCare study**

## Intervention protocol (summarised)

The program is composed of the following phases:

1. Clinical phase
  - A. ICU phase
  - B. Post-ICU clinical phase (general ward)
2. Post clinical phase
  - A. Short-term recovery phase
  - B. Long-term recovery phase

	MiCare protocol	Usual care in the Netherlands
<b>1. CLINICAL PHASE</b>		
<b>A. ICU phase</b>	During ICU period <ul style="list-style-type: none"> <li>- All patients receive early physiotherapy .</li> <li>- A psychiatrist or psychologist will be consulted for patients at risk or suspected for mental or cognitive problems.</li> <li>- A clinical dietician will be consulted for included patients if needed.</li> </ul> At ICU discharge <ul style="list-style-type: none"> <li>- Physiotherapy continues on general ward.</li> <li>- ICU physician sets up a short-term recovery plan according to a structured format of physical, mental and cognitive components. This will be transferred to the patient's general practitioner (GP) as a structured handover (and if needed transfer to other paramedics).</li> <li>- GPs and physiotherapists will be trained in identifying and treating post ICU problems in advance.</li> <li>- Patients receive an information folder concerning post ICU problems, information about the patient association (FCIC/IC Connect) and relevant websites for further information.</li> </ul>	<ul style="list-style-type: none"> <li>- Early mobilisation on indication of ICU health care providers.</li> <li>- Consultation of other (para)medics on the initiative of ICU physician or nurse.</li> <li>- Physiotherapy does not always continue after ICU discharge.</li> <li>- Presence of a general ICU discharge letter to the GP depends on the specific hospitals policy.</li> <li>- Neither GPs nor patients are informed about the presence of post ICU problems and further guidelines or patient associations.</li> </ul>
<b>B. Post ICU clinical phase (general ward)</b>	<ul style="list-style-type: none"> <li>- Physiotherapist updates the short-term physical recovery plan and sends it to a physiotherapist in primary care.</li> <li>- ICU follow-up nurse visits patient for further information/evaluation ICU period.</li> </ul>	<ul style="list-style-type: none"> <li>- Physiotherapy only continues in primary care on the initiative of ICU physiotherapist.</li> </ul>
<b>2. POST CLINICAL PHASE</b>		
<b>A. Short-term recovery phase</b>	<ul style="list-style-type: none"> <li>- Continuation recovery plan by primary care paramedics.</li> <li>- Patient visits post-ICU clinic 3 months after ICU discharge. ICU follow-up team comprising ICU physician and ICU follow-up nurse (and paramedic) prepare this visit using the patient's prefilled questionnaires. A personalised long-term recovery plan is set up, based on patients' reported outcome measures (PROMs) and</li> </ul>	<ul style="list-style-type: none"> <li>- Presence of follow-up care depends on the specific hospitals policy and is always on the initiative of the ICU physician or nurse.</li> </ul>

	<p>patients' needs and preferences. If needed, (advises for) referrals to other (para)medics will be included. A structured, multidisciplinary and personalised long-term recovery plan will be hand over to the patient's GP.</p> <ul style="list-style-type: none"><li>- During post-ICU clinic visit, the mental wellbeing of the patient's relative will be discussed and the ICU will be visited (on patient's request).</li></ul>	
<b>B. Long-term recovery phase</b>	<ul style="list-style-type: none"><li>- 6 weeks after post-ICU clinic, the patient visits the GP.</li><li>- GP can support patient's further recovery using his/her long-term recovery plan.</li><li>- GP can support patient's relative in case of post-intensive care syndrome-family (PICS-F) symptoms.</li></ul>	