

Correction

In the January 2021 article by Auriemma et al, "What Matters to Patients and Their Families During and After Critical Illness: A Qualitative Study," *Am J Crit Care*, 2021;30(1):11-20, the title of Table 2 should have read, "Emergent themes of ICU processes of care, postdischarge outcomes, and states worse than death with illustrative quotations." We regret the error.

doi: <https://doi.org/10.4037/ajcc2021507>

Table 2
Emergent themes of ICU processes of care, postdischarge outcomes, and states worse than death with illustrative quotations.

Theme	Illustrative quotations	Participant
ICU processes of care		
Open, transparent, and frequent communication by the medical team	The communication was just crucial, knowing as much, and understanding as much as I could about what was going on with him [the patient], and understanding what the medical staff didn't understand.	Family caregiver, patient survived
	They [family members] should be able to question the doctors and get the right answers. Don't talk to me as if I went to school with you for 12 years, break it down.	Patient
	He [one particular physician] was the first one to say give Ms. X a piece of paper. Then I was able to write and communicate. Why didn't the rest of them [other members of medical team]? . . . I had all these people, but nobody's helping me.	Patient
Ensuring patient comfort and avoidance of pain	I mean that is one thing the doctors and the nurses kept talking about was his [the patient's] comfort level and whether he was comfortable, feeling okay, as much as possible through all of this. I mean that certainly is what matters to family members.	Family caregiver, patient died
	She [the patient] said she didn't want to be in that kind of pain and as a sister who loves her dearly knows that you don't know the feeling . . . I don't know what she was going through. I don't know how the pain was. All I know is I wanted it to be gone, I just wanted it to be gone	Family caregiver, patient died
	That's very difficult to deal with as a family member to see them [the patient] in pain and know you can't do anything about it. I [had] a lot of questions about how well they are controlling it because we don't want a narcotic issue where she's addicted to this or addicted to that, but at the same time you don't want her sitting there hurting all day long because then she can't enjoy herself . . . To me it's extremely important that she not be in pain and can participate and do things and be comfortable. That's like top of the line because it has been a very painful year for her.	Family caregiver, patient survived
Sensing that the medical team was providing exhaustive care	Obviously, you always want to see the loved one comes home but you want to make sure that everything is being done that can possibly be done within reason.	Family caregiver, patient died
	The family was like, "Did you get everything done right?" . . . and I said, "You know what? We know, we were at the hospital. The doctors did all they could. We asked them to do all they could." And I believe that they did all they could.	Family caregiver, patient died
	If you die there [in the ICU] then you know they've done everything they can, or you would hope that they've done everything they can, and it's just your time to go, but at least you'd be around people that tried to take care of you.	Patient
Postdischarge outcomes		
Survival, above all else, is the most important outcome	The main thing is staying alive. In my book, that's important. I don't know what else would be important, I don't know. That's it.	Patient
	Well, ultimately the most important thing is that the patient leaves the ICU on their own accord and not in a body bag. That is the most important.	Family caregiver, patient survived
	Not dying was the big thing.	Patient
Survival is important, but only if you have an acceptable quality of life	As long as you have some quality of life, yes, it's worth it, anything is worth it as long as you have some quality of life, where you know who you are; you know who the people are around you and you can experience life events.	Patient
	Even if they lived what kind of quality of life they had. Was what you did put them in a better position than where they are now.	Family caregiver, patient survived
	Some people would rather have their loved ones irregardless and I think it depends on the person. [My husband] would not want irregardless. He would want his quality of life.	Family caregiver, patient died
Maintaining physical function, particularly independence	I don't really want to be sitting in a bed somewhere and somebody having to wash me and turn me . . . that's not a quality of life to me.	Family caregiver, patient survived
	I would like to live a productive life as long as possible, not necessarily working but just being where I would be productive to keep my facilities, some form of mobility and if I could do those things for as long as I can.	Patient
	Your body does have a tendency if you're not using parts of it not to work right, but she's [the patient's] coming back. She's coming back good . . . her strength is coming back . . . Overall she is better, I would say. I would say it is better for her.	Family caregiver, patient survived

Continued

Table 2
Continued

Theme	Illustrative quotations	Participant
Postdischarge outcomes		
Maintaining cognitive function, particularly ability to communicate with others	I like my mental functioning . . . if you don't have the mental functioning, you ain't worth nothing.	Patient
	Anything is worth it as long as you have some quality of life, where you know who you are, you know who the people are around you, and you can experience life events and know what's happening and who is around you . . . You can't move, so what? As long as you know who you are and what's going on and who is around you.	Family caregiver, patient died
	Well, physical supports you can find those. If the person isn't mentally clear enough to help you, then there's really not a lot you can do. You don't even know what quality of life they're getting at that point if they can't communicate that to you. So being mentally clear and being able to communicate what they need to me is more important than being able to do it themselves.	Family caregiver, patient survive
States worse than death		
There is no outcome worse than death	Dying would be the worst thing that could possibly happen . . . I don't think there's anything worse.	Family caregiver, patient survived
	There is nothing worse than dying.	Family caregiver, patient died
	I don't think so when you weight them side by side. They seem that way at the time but I think when you put them side by side I think given the choice you would take the choice of okay, I have to do this for now if I want to stay alive.	Patient
Inability to communicate with others	If I'm not capable of communicating, no. I don't want to live like that.	Patient
	If I was noncommunicative at all, ventilated and if they just come in and look at me and they don't know whether they are communicating with me or not and whether I can say it or not they don't know. I think they would say okay, we can put up with it so long. We don't think this is what he would want, and I have already spelled that out. Then they would let me go.	Patient
	If you're just going to sit there and not know who you are, know who they are, not be able to interact, no.	Family caregiver, patient died
Physical disability	I think if I couldn't do anything and there's no possibility of me getting back to being able to take care of myself, then I don't think I'd want to go through it.	Family caregiver, patient survived
	I would hate to be where I couldn't do nothing for myself, like have to depend on somebody to even go to the bathroom; bedridden, I'm not sure I want to live like that. I don't think I would kill myself, but I would hope I'd go quickly.	Patient
	The situation I was in where I was immobilized and can't help yourself at all and that's bad. That ain't good at all. When you're doing things for yourself and all of a sudden you're stuck. No, can't work like that.	Patient
Dependence on machines	I think being stuck on a machine would be unacceptable for me. I think there are many other things that I could live with but I think being required, requiring a machine to help you to breath would not be acceptable to me. I would much rather die in the ICU than that.	Family caregiver, patient died
	You don't want to be just kind of there . . . if you are in the ICU and basically the machines are just keeping you going but you're not able to enjoy life, then no.	Family caregiver, patient died
	I think the worst thing would be to be hooked up to machines to keep you alive but having no quality to your life at all would be the worst thing that could happen . . . obviously when you are making the decision it's in the hopes that you are going to get better or somebody that is making it for you has the hope that you will get better. Otherwise, what is the point of hooking you up to all of these machines? And I know that things can go wrong and sometimes you do get worse instead of getting better and to me that would be the worst thing.	Patient
Severe or constant pain	Constant, constant pain...I don't mean just a pain. I am talking about the piercing type of pain that . . . that you definitely would have to be drugged in order to . . . I wouldn't want to live like that.	Patient
	I think just if you're in excruciating pain that is worse.	Family caregiver, patient died
	Suffering, just suffering . . . That's bad to just watch him scream in pain that it's unbearable.	Family caregiver, patient survived

Abbreviation: ICU, intensive care unit