home leavers (41%), a quarter sustained moderate or severe sequelae. These sequelae were essentially neurological deficit, resuscitation neuromyopathy and/or pressure sores. The evolution has been fatal in 17% of cases, in the EDICU. The main causes of death were cerebral suffering (8%), septic shock and hypoxemia.

Conclusion: The admission of geriatric patients to the ICU is increasing. Frailty assessment may play an important role in the clinical evaluation of such individuals for triage, but should not be considered a priori as an exclusion criterion for admission. Physicians are aware of the difficulties faced with such patients and the need to promote short admission pathways.

Compliance with ethics regulations: Yes in clinical research.

FC-051

French translation and validation of the Healthy Aging Brain Care-Monitor, Hybrid Version (HABC-M-HV): a new tool for remote post-intensive care syndrome screening

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Rationale: Patients surviving a stay in an intensive care unit (ICU) may experience new or worsening disorders that have been labeled as "post-intensive care Syndrome" (PICS). PICS includes physical weakness, mental disorders and neurocognitive impairments that can affect the patient's quality of life. Authors of the Healthy Aging Brain Care Monitor have developed a hybrid version (HABC-M-HV) suited to the daily needs of their post-ICU follow-up clinic. This is a 30-item questionnaire with 4 subscales for cognitive, functional, psychological and quality of life assessment. The hybrid version of the HABC-M questionnaire (HABC-M-HV) has not yet been validated in its English version. Using rigorous methodologies, the objectives of this cross-sectional observational study were to translate the HABC-M-HV questionnaire into French (HABC-M-HV-F, Fig. 1) and to evaluate the main measurement properties of this new version.

Patients and methods/Materials and methods: The questionnaire was translated following a five-stage validated method for the translation and cross-cultural adaptation of questionnaires. A convenience sample of ICU survivors was recruited in our follow-up clinic to validate the questionnaire. The HABC-M-HV-F was administered by phone. The measurement performances of the questionnaire were tested using internal consistency, test–retest reliability, standard error of measurement (SEM) and smallest detectable change (SDC) calculation, floor and ceiling effect measurement and construct validity.

Results: A total of 51 patients with 14/51 (27.5%) women were recruited between February and September 2021. Their median age was 63 [55–71] years. The internal consistency was very good (Cronbach's alpha coefficient 0.79). The intra- and inter-examinator reliabilities were excellent (Intraclass Coefficient Correlation = 0.99 and 0.97, respectively). Total scores of the HABC-M-HV-F were very similar between test and retest with the same examinator, respectively 9 [4–15] and 8 [4–16], as well as with two examinators, respectively 12 [6–24] and 12 [4–23]. The SEM was 0.62 and the SDC was 1.72. No floor nor ceiling effects were observed. The convergent validity was almost entirely confirmed with 71.4% of our hypothesis confirmed.

Conclusion: The HABC-M-HV-F has been shown to be a valid and reliable tool for standardized PICS screening and follow-up among French-speaking ICU survivors. A remote administration by phone is feasible, making it an advantageous alternative in the growing context of telemedicine.

Compliance with ethics regulations: Yes in clinical research.

Healthy Aging Brain Care Monitor Hybrid Version in French

FC-052

Ceftolozane/Tazobactam use for the treatment of bacterial infections in France: focus on patients with abnormal renal functions

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Rationale: The Conduct study was initiated following a request from the French Health Authorities, to describe the use of Ceftolozane/Tazobactam (C/T) in current clinical practice.

Patients and methods/Materials and methods: This was an observational, prospective, multicenter, French study. Any patient having received at least one dose of C/T was eligible to participate and