

OBSERVATION UNIT

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System Physician Advisor

OBSERVATION SERVICES

- Medicare definition:

A well-defined set of specific, clinically appropriate services, which include **ongoing short term treatment, assessment, and reassessment** before a decision can be made regarding whether patients will require further treatment as hospital inpatients or if they are able to be discharged from the hospital.

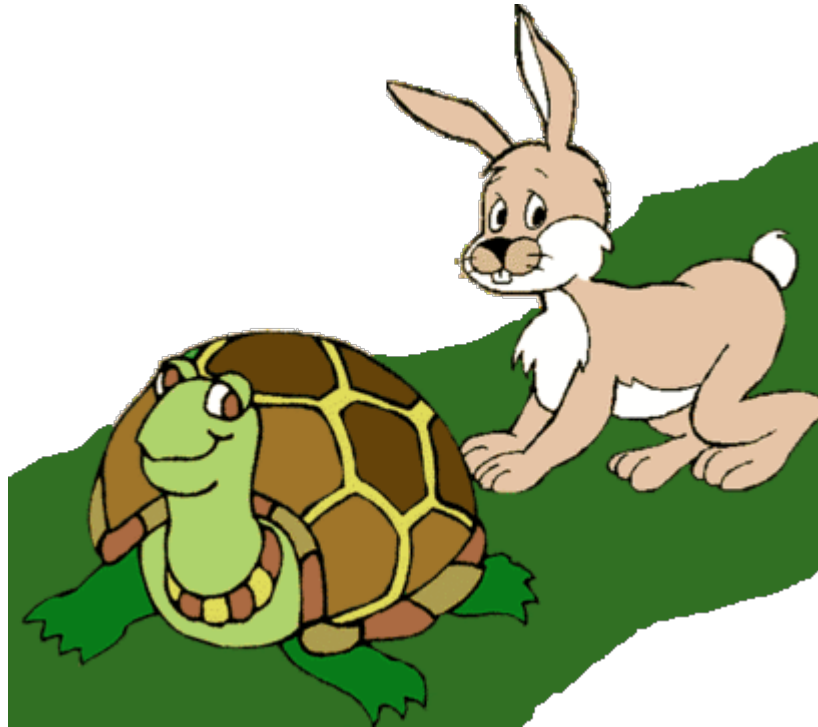
Medicare Benefit Policy Manual, ch 6

Medicare Claims Processing Manual ch 4

- Medicare Beneficiaries
 - 1.5 million obs 2012 1 more night in a hosp
 - 1.4 million long outpt stays
 - 11% at least 3 nights
 - 26% at least two nights
 - Copays increase for pt
 - Affects snf coverage
 - Affects drug payments

THE PROBLEM

- Sprinters
- Marathon



CREATING A COALITION OF THE WILLING

- Education of C-suite
 - Financial
 - Clinical
 - Pat Satisfaction
 - Regulations
 - Process



Live for Speed

WELL CONNECTED.

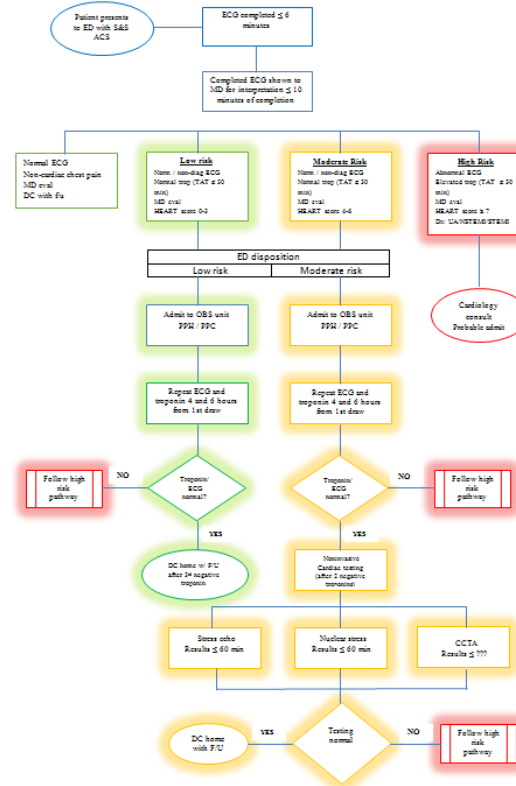
BIWEEKLY MEETING

- Champion Elected
- Defined scope
- Defined players
- Defined space
- Metrics baseline reviewed
 - High volume
 - High variation

CLINICAL PATHWAY

- Chest pain

3S Flow Chart



Risk Stratification Tool: HEART score
LOW RISK PATHWAY (HEART SCORE 0-3)
MODERATE RISK PATHWAY (HEART SCORE 4-6)
HIGH RISK PATHWAY (HEART SCORE 7-10)

DRAFT PHYSICIAN ORDERS

Date/Time: _____

Place in Observation Status: Dr. _____

cardiac stepdown

med surg telemetry

Non-Medication Orders

- Dx: Chest Pain or Chest Pain Equivalent
 - Cardiac Monitoring
 - May go off monitor for testing
- Vitals: every 4 hours
- Saline lock
- Labs: troponin at 3 and 6 hours after 1st lab draw
 - Date _____ time _____
 - Date _____ time _____
- EKG: at 3 and 6 hours after initial ECG
 - Date _____ time _____
 - Date _____ time _____
- CXR PA/Lat: Indication chest pain (if not done in EC)
- EKG as needed for chest pain or Dysrhythmia
- Activity: ambulate if stable & negative enzymes
- Diet : NPO from 4 am on _____ (Date)
- Blood glucose before meals if glucose > 120 or diabetic
- Cardiac Consult Dr. _____
Date/time notified _____

Medication Orders

- Aspirin 81 mg, chew 4 tabs PO now (unless taken in ED)
 - Aspirin not indicated due to: allergy
 - bleeding
 - hematological disorder
 - other _____
- Acetaminophen 650 mg PO/PR every 4hrs as needed
- Zofran 4 mg IVP every 6 hours as needed for nausea/vomiting
- Other Medications:

DRAFT CHECKLIST FOR OBS UNIT

Chest Pain Checklist

Time arrived to OBS unit _____
Time evaluated by MD _____
NPO since _____
Last caffeine intake _____
Troponin results (must be negative)
(time) _____ (result) _____
(time) _____ (result) _____

Stress Testing

Patient INT before coming to stress area
Send medication list with patient
Patient may be transported to tests without nurse

Type stress ordered _____
date _____ time _____

Lexiscan:

Is patient on breathing medications Y / N
Is patient taking theophylline medications Y / N
Are patients lungs clear Y / N

Treadmill:

Shoes to be brought down with patient
Patient to have PJ bottoms on
Is patient able to walk Y / N

Patient arrival time in Nuc med _____
Patient arrival time in stress lab _____

Preliminary stress ECG results:

Signature/time _____

Nuc med results received (time) _____
Echo results received (time) _____

Dispo _____ time _____
DC from OBS unit date _____ time _____

initials/signature _____
initials/signature _____

- **Plan: Team educated**
 - » Physicians, ancillary staff, nurses
 - » Metrics pts / hr visible on unit (daily)
 - » Pilot for three months one unit
- **Do: Health stream for all,**
 - » pt brochures
 - » Physician specific tip sheet
- **Check: Weekly huddles**
- **Act: Report out to committee**
 - » ROI to C- suite by champion



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