



# Physician News Brief

NEWS ABOUT COVENANT HEALTHCARE FROM  
The Office of Physician Relations & Regional Outreach

AUGUST 1, 2018

## Moderate Care beds available on H6M and C6N starting August 5

Recognizing that we frequently have patients experiencing a need for closer observation or intervention than our Med/Surg or Progressive units can accommodate, but less than those required for ICU admission, 24 Moderate Care beds will be designated for care of these patients. Beginning August 5, 2018, the availability of Moderate Care beds on each main campus will support this patient population care needs. 12 beds will be housed on Harrison 6Main and 12 beds will be housed on Cooper 6N. A plan for transition consists of slowly admitting patients into these beds as of August 5. As beds become available and patients are recognized as appropriate for this setting, new admissions and patients with a change in status will filter into the available moderate care beds.

Moderate Care beds should be short term accommodations used to manage the patient at risk of being admitted to the ICU or newly out of the ICU. Patients assigned a Moderate Care accommodation must meet criteria for that type of admission including being hemodynamically stable and requiring care at the frequency defined in the Patient Services Clinical Practice policy CP (pending approval, number unassigned): Admission/Transfer/Discharge: Moderate Care Beds.

Patients with the following clinical findings will be **excluded** from admission to a moderate care bed and shall be admitted to an intensive care unit:

- a. Systolic BP > 250; Diastolic > 120 **unresponsive to treatment**
- b. Systolic BP < 90 **OR** symptomatic with 20% change from patient's baseline
- c. Requiring oxygen > 50% FiO<sub>2</sub> from any device
- d. New onset O<sub>2</sub> sat < 89% **and symptomatic**
- e. Heart rate greater than 120 or less than 40 that is **sustained and causes symptoms**
- f. Temperature > 106° F < 91° F
- g. Arterial pH < 7.25 HCO<sub>3</sub> < 14 mEq/L or pH > 7.50 **and symptomatic**
- h. Urine output < 30cc/hr x 2 hours (average)
- i. K<sup>+</sup> < 3.0mEq/L and significant ventricular ectopy or EKG changes
- j. K<sup>+</sup> > 6.0mEq/L and widening QRS/peaked T waves or EKG changes

These beds will allow for more appropriate patient placement based on care needs. Staffing for those patients meeting criteria will be 3 patients per nurse. Upon resolution of the qualifying criteria, staffing will shift as defined by the staffing grid. Admissions or transfers in question will be discussed collaboratively between the ICU on-call physician and the nursing leadership of the unit to decide appropriate placement. For any questions please contact Leann Chadwick, Director of Critical Care Services, at 583.6196 or Stacey Klump, Director of Medical/Surgical Services at 583.6322.

## Certified Orthotist and Prosthetist joins VNA staff

Covenant HealthCare VNA Home medical would like to announce the addition of a Certified Orthotist and Prosthetist to our Covenant HealthCare team. Darrick Conley is now seeing patients, including pediatric, at the Hamilton building as well as inpatient when needed. For any questions, please call 989.799.6020.

## Watch for Medical Staff Leadership Nomination Ballots- End of Aug/Early Sept



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