Section 9	Clinical Policies	06/27/03 – Originated
Subject 9.1	Admissions/Discharges/Transfers	09/02/11 – Reviewed w/ changes - Reviewed w/o changes
Policy 9.1.23	MICU/CCU Admission Criteria	Nursing - Author

Admission Criteria – MICU/CCU

Policy

To facilitate appropriateness of care and comply with regulatory criteria for hospitalization as determined by the Centers for Medicare and Medicaid Services (CMS), The Joint Commission, and other regulatory agencies, the following guidelines for patient placement have been established for use by the Medical Intensive Care Unit (MICU) and Cardiac Care Unit (CCU).

All patients will be cared for by members of the Division of Pulmonary Critical Care Medicine or the Division of Cardiology.

1. All orders will be written by the Primary ICU team (Pulmonary or Cardiology) with the following exceptions:
   Nephrology for dialysis orders
   Anesthesia for pre-op orders
2. Other ICU services may admit to this unit after approval from the Hospital Administrator on-call.
3. All orders written by other services must be countersigned by a Primary ICU team member prior to initiation. This applies for all Pulmonary or Cardiology ICU service patients; off-service ICU patients on the unit will have their care directed by their primary service.

Admission Criteria

Patients eligible for admission to the MICU/CCU may include, but are not limited to:

1. Patients requiring mechanical ventilation and/or airway protection.
2. Patients requiring invasive hemodynamic monitoring, including pulmonary artery catheters, arterial catheters, and circulatory assist devices such as Impella.
3. Patients receiving medication and/or treatments requiring continuous hemodynamic monitoring, including vasoactive and antiarrhythmic agents.
4. Patients with Acute MI.
5. Patients with Acute Coronary Syndromes.
6. Cardiac rhythm abnormalities requiring more monitoring.
7. Patients requiring IABP therapy.
8. Patients requiring temporary pacing.
9. Patients with a documented etiology for potential instability, especially patients from the emergency room.
10. Patients requiring initiation and/or titration of inotropic medications as defined in Pharmacy Policy 7.49 Preparation and Administration of Medications via Continuous Intravenous

Admission Criteria, continued

Infusion (Adult)

11. Patients post intervention, such as left main stent placement and certain carotid artery stenting.
12. Patients with sudden cardiac death.
13. Patients who meet the admission criteria for other ICUs, but because space is unavailable, are eligible for admission for the MICU/CCU with approval from the administrator on-call.

Common diagnoses for MICU/CCU admissions include:

1. Multi-system organ failure
2. Respiratory failure/dysfunction
3. Acute/chronic renal failure
4. Drug overdose
5. Gastrointestinal hemorrhage
6. Diabetic ketoacidosis
7. Hypertensive crisis
8. Sepsis
9. HIV/AIDS and related disorders
10. Acute Myocardial Infarction
11. Unstable Angina
12. Cardiogenic Shock
13. Severe Congestive Heart Failure
14. Aortic Dissection
15. Cardiomyopathy

Patients not eligible for admission to the MICU/CCU may include:

1. Do not resuscitate (DNR) patients not expected to benefit from critical care.

Exceptions to the above criteria can be made by the Pulmonary Service Medical Director of the MICU/CCU, Chair of Division of Cardiology, or their respective designees in consultation with the Nurse Manager of the MICU/CCU.

Discharge/ Transfer Criteria

Eligible patients for transfer from the MICU/CCU should meet the following criteria:

1. Substantial resolution of the problems responsible for admission.

Discharge/ Transfer Criteria, continued

1. Anticipation of prolonged medical stability.
2. Establishment of status (e.g., DNR) such that intensive care supervision or intervention is not required even if the patient remains critically ill.
3. Elimination of need for mechanical ventilation/airway protection.
4. Elimination of need for invasive hemodynamic monitoring.
5. Discontinuation of medications/treatments requiring hemodynamic monitoring.
6. Patients who require the continuation of intravenous medications deemed appropriate to continue in a non-ICU setting as defined in Pharmacy Policy 7.49 Preparation and Administration of Medications via Continuous Intravenous Infusion (Adult).
7. All suspected attempted suicide patients must be evaluated by the Department of Psychiatry prior to transfer to a non-ICU setting.

Patients shall not be transferred from the MICU/CCU with:

1. Arterial catheters, including circulatory assist devices such as Impella
2. Pulmonary artery catheters
3. Temporary pacing
4. Ongoing ischemia
5. Life threatening arrhythmias
6. Mechanical ventilation
7. Hemodynamic instability requiring titration of IV vasoactive or antiarrhythmic medications unless the receiving unit can safely monitor and provide such treatment (i.e., transfer is to another intensive care unit or a step down unit).

NOTE: Exceptions to the above criteria may be made at the discretion and upon approval of the unit medical director.

Reference(s)

Pharmacy Policy 7.49 Preparation and Administration of Medications via Continuous Intravenous Infusion (Adult)