

Exclusion Criteria:

- A. Medical instability or medical needs beyond resources of unit.
- B. Criminal acts or risks such as violent and/or dangerous behavior that may result in injury to staff or other patients due to non-Axis I conditions or disorders.
- C. Custodial care when inpatient psychiatric treatment fails to stabilize or reverse an existing condition.
- D. Presence of delirium or delirium tremens, requiring medical intervention.
- E. Presence of any of the conditions outlined in the table below:

Yes	No	CRITERION
		Patient is being transferred primarily for aftercare placement disposition or residential treatment.
		Patient is medically fragile requiring nursing home care for serious and/or multiple axis III disorders, including significant alteration of ADLs (bedridden, total care).
		Pregnant and multi-parous at 38 weeks gestation or later.
		Patient requires isolation.
		Patient is being transferred primarily for aftercare placement disposition or residential treatment.
		Patient is medically fragile requiring nursing home care for serious and/or multiple axis III disorders, including significant alteration of ADLs (bedridden, total care).
		Pregnant and multiparous at 38 weeks gestation or later.
		Patient requires isolation.
		<p>Patient’s physical infirmities are such that they might be better treated in a medical facility with support and monitoring available appropriate to their medical conditions such as:</p> <ul style="list-style-type: none"> • Decubitus Ulcer (only stage I accepted). • Continuous oxygen or support equipment (CPAPs, Bi-PAPs, O₂ Concentrator, etc.). • Acute O₂ saturations level below 90%. • Indwelling tubing (feeding tubes only those associated with eating disorders). • Limited IV therapy – existing fluids are to be completed and discontinued within 4 hours of admission. Ongoing IV therapy is reserved for hydration only. • Suctioning • Tracheostomy (requiring maintenance, cannula in place). • Active TB • Post-op stability not demonstrated through labs, vital signs over a 48 hour period. • Complex high blood pressure – hypertensive patient not stabilized to a diastolic less than 110, maintained over at least a 24-hour period. • Brittle diabetics that run uncontrollable blood sugars; specifically insulin dependent diabetes with a sugar over 400 within the last 2 hours. • Temperatures over 101 degrees. • Open wounds and/or wounds requiring sterile equipment to manage; identify and specify. • White blood count over 15,000. • CPK over 1500 or CPK greater than 1000 with elevated temperature and muscular rigidity. • Patients who have overdosed and are in ICU not fully conscious and without stable vital signs for 2 hours post ICU discharge following the overdose. • Anyone with cardiovascular problems who is symptomatic (chest pains, shortness of breath, unstable arrhythmia, and chest x-ray noting pulmonary edema). • Delirium