

Institutional Handbook of Operating Procedures Policy 09.01.24	
Section: Clinical Policies	Responsible Vice President: EVP and CEO Health System
Subject: Admission, Discharge and Transfers	Responsible Entity: Nursing Services

I. Title

Admission/Discharge Criteria for Day Surgery Unit (DSU)

II. Policy

To facilitate appropriateness and safety of patient 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 the Day Surgery Unit (DSU).

Patients are admitted to the DSU for preparation and management, including a nursing assessment, patient education and finalization of required documentation prior to undergoing surgery or other procedures.

UTMB respects the diverse cultural needs, preferences, and expectations of the patients and families it serves to the extent reasonably possible while appropriately managing available resources and without compromising the quality of health care delivered.

Patients who are carefully prepared for an operation, both psychologically and physically, experience less anxiety and are more likely to make an uneventful recovery.¹

III. Admission Criteria

Patient population includes pediatrics, adults, and geriatrics.

Patients eligible for admission to the DSU may include, but are not limited to, those scheduled for surgical procedures, special procedures requiring general anesthesia or monitored anesthesia care, or radiological procedures.

IV. Discharge Criteria

Observe and document that the following criteria are met by the patient prior to discharge:

1. A responsible adult is available to accompany the patient home.
2. The patient is oriented to person, place, and time and is able to ambulate independently or with an assistive device, e.g., wheelchair, crutch, cane, etc.
3. Vital signs are within acceptable ranges of preoperative levels (i.e., 20% above or below preoperative levels).
4. Minimal bleeding or discharge.
5. Pain is controlled, and at least thirty minutes has passed since receiving a narcotic.
6. Patient will need to void if a urologic, gynecologic, or intra-abdominal procedure has been performed and/or spinal/epidural anesthesia given.

7. Nausea and vomiting are controlled, and patient is able to tolerate fluids orally.
8. Patient has return of sensory and motor abilities after regional anesthesia.

Notify the physician/designee when the patient is ready for discharge or if criteria are not met prior to unit closing time. The physician will evaluate the patient for admission and or assignment to observation status and document.

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

V. Additional References

Standards of Perianesthesia Nursing Practice (2002). Mosby's Medical Dictionary, 8th edition, © 2009, Elsevier.

VI. Dates Approved or Amended

<i>Originated: 10/30/1994</i>	
<i>Reviewed with Changes</i>	<i>Reviewed without Changes</i>
09/02/2011	10/25/2016
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VII. Contact Information

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