

# Admitting Patients from ED to GIP Hospice

Trigger: Identification of patient warranting inpatient hospice care and/or made CMO in ED

## TWO requirements:

Hospice RN must evaluate patient in ED (within 2 hours)

AND

Family must be present or come to ED to sign consent

**First step:** Consult ED Case Manager (or Social Worker after-hours) who will then place referral call to hospice. ED provider also orders "Hospice Consult" in Lifechart.

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Scenarios:

Scenario #1: Hospice RN unavailable to arrive to ED within 2 hours OR family not available

→ Admit per usual workflow

Scenario #2: Hospice RN signs consent with family present; but bed not available at Hultar Hospice Center OR patient too unstable for transfer



Consents MUST be signed to proceed

→ ED unit secretary calls admitting to create Hospice Guarantor Account

→ Inform admitting physician of GIP Hospice admission, and Admit to accepting service under "GIP Hospice" in the ED Bed Request order

The screenshot shows a web-based form titled "Admit from ED (Bed Request)". At the top right, there are "Accept" and "Cancel" buttons. The form contains several fields: "Service:", "Admitting Diagnosis", "Admitting Provider", and "Attending Provider", each with a search icon. Below these are three radio button options: "Yes", "No", and "Unknown". The "Unit/Room Needs?" section includes checkboxes for "Critical Care", "Medical", "Pediatric", "Psychiatric", "Telemetry", "Surgical", "Intermediate", "Women's Un", and "GIP Hospice". The "GIP Hospice" checkbox is circled in red. At the bottom, there is a "Requested Unit" field and another "Yes/No" radio button section.

Scenario #3: Hospice RN signs consent with family present; and bed available at Hultar Hospice Center

→ Transfer to Hultar for inpatient hospice care