

B/Trg Attending: 11p-7a shift - Updated 2/12

Handoffs	Care Areas	Team	Area Details
<ul style="list-style-type: none"> • 11p: Start seeing new patients in PIT - no signouts • 12a: Accept sign out from CDU attending • 12: Signout from D Pod APP on active D Pod patients • 1a: Accept sign out from 4p-1a C attending <ul style="list-style-type: none"> ◦ If C Pod is boarding there is no signout • 2a: Accept sign out from 6p-2a B/Trg attending • 7a - Sign out in B Pod to oncoming team 	<ul style="list-style-type: none"> • Public Triage and B pod • CDU beginning at midnight • D Pod at 1a • C Pod at 1a <ul style="list-style-type: none"> ◦ If there are active patients 	<ul style="list-style-type: none"> • 11p-7a <ul style="list-style-type: none"> ◦ EM2 resident 	<ul style="list-style-type: none"> • Same Vertical Criteria <ul style="list-style-type: none"> ◦ No Telemetry • 20 beds, 5:1 nursing <ul style="list-style-type: none"> ◦ 15 beds from 3a-7a • B-21 and B-26 are dedicated procedure rooms <p style="text-align: center;">***Carry Triage Phone***</p>

Other Things to Know

- **Overnight Public PIT** - Overnight PIT is different than daytime in that you and the resident will both follow your own patients after seeing them in PIT. The expectation is that you will spend more time in PIT during the early shift while B pod is full of leftover patients being managed by the other providers and gradually more time in B pod as you need to dispo your own patients.
- ◦ On recent nights the teams have done so well that there are multiple open beds on B Pod. You can have patients pulled directly into B pod rooms to see them if that is easier - however please communicate with the PIT tech as you must choose these patients. Neither the tech nor triage nurse are trained to determine vertical vs. prime so please help them choose good vertical patients to bring back. Patients that sound like they might need prime are better seen in PIT so they can be started and sent to prime as needed. When B is full and you are able, please keep screening patients in PIT and getting workups started.
- ◦ The flow team will use A Ambulance Beds (when available) for public prime patients (especially overnight) to get them out of the waiting room. Priority patients will only go to an actual nursing assignment or CC if a room is not available in a timely fashion. We are also working to improve PIT nurse and tech staffing - especially from 11p-3a.
- ◦ In general, people have been keeping slightly sicker patients in vertical overnight - which is great to help the A pod team but remember that telemetry is still a hard no and certain medications mandate it.