C Pod Attending 7a-4p 2/27 Update			
Handoffs	Care Areas	Team	Area Details
<ul> <li><u>7am Usual Workflow</u>:         <ul> <li>7a: 8 new patients brought to C Pod</li> <li>Take signout on any A Ambulance patients moved to C Pod</li> </ul> </li> <li><u>7am High Boarding</u> <ul> <li>Move to PIT and start seeing patients</li> </ul> </li> <li>4p: Sign out to 4p C</li> </ul>	<ul> <li>Usual workflow:</li> <li>C Pod</li> <li>D Pod</li> <li>High boarding:</li> <li>PIT/B Pod</li> <li>D Pod</li> </ul>	• C Pod • 7a-4p Im/EM Resident • 1p-12a C Pod APP	<ul> <li>C pod: 4:1 Prime <ul> <li>16 beds total</li> <li>12 max ED beds with 1 inpatient RN</li> </ul> </li> <li>Holds 8 boarders from 3a-7a</li> <li>2 more ED Nurses (8 beds) open at 7a <ul> <li>If boarding high see below</li> </ul> </li> </ul>
attending • May occur in PIT if boarding high			<ul> <li>D Pod: Many patients will be seen first in "A Triage but some may go direct</li> </ul>

## Other Things to Know

- If boarding is high (10+ floor boarders in A/G+B+CC) C pod will be used as an admitted holding unit at 7am • If this occurs, **you will be re-deployed to PIT**.
  - Your resident should be sent to the A1 team and will remain there
- When boarding decreases to less than 4 non-ICU boarders in A+B+CC, nursing will gradually open C pod to new ED patients. The soonest this will occur is 10am, and much more likely far later in the day.
  - You will be updated about 1 hour before C pod opens to begin to transition care.
- If C pod opens you can keep your vertical patients under the care of the APPs
- The new patients will flow in to C gradually as boarders get beds giving you time to wrap things up
- If you have nothing to do you can float back to PIT to assist
- **D** Pod: You are the primary physician coverage for D Pod, the D Pod APP will staff any patients in D Pod with you. You should assist and see patients primarily downstairs as well as in "A Triage".