

**BROWN EMERGENCY MEDICINE CDU
GENERAL ADULT DIAGNOSTIC/TREATMENT PATHWAY**

Purpose: To safely manage patients with a need for extended observation care beyond the usual emergency department course at the discretion of the attending physician.

CDU Admission Eligibility Criteria:

- One specific need for CDU admission to facilitate safe disposition. Patients should not have multi-system/social needs that require addressing.
- **Attending physician must complete a note indicating reason for CDU admission, treatment and disposition plan prior to moving the patient to the CDU.**
- To be admitted to the general pathway, the patient must not fit into another defined CDU pathway. If they do meet criteria for another pathway, the intent of those inclusion/exclusion criteria should be respected. The general pathway is not intended to circumvent exclusion criteria.
- The general pathway is not intended to be the “path of least resistance” if another consultation service is involved and is refusing admission.
- Pain as a primary diagnosis is **NOT** eligible for CDU admission at this time (ie. back pain, neck pain, sickle cell pain, extremity pain, etc). This does not apply for the specific pain pathways such as renal colic or chest pain.
- If there are questions, call Dave Portelli MD, 401-714-6566
Ed Godbout PA-C, 401-749-8053

CDU Exclusion Criteria:

- Vital Signs:
 - Temperature > 100.4 F
 - Systolic Blood Pressure <90 mmHg
 - Persistent tachycardia, HR >110
 - RR>30
 - Pulse Oximetry < 92% on room air
- **Poorly managed pain of any etiology**
- Concurrent medical problem requiring admission
- Any condition found on the “CDU Universal Exclusion Criteria” list
- Requiring more assistance for ADLs than the CDU is capable of safely providing (one assist/patient for units with 5:1 maximum staff:patient ratio and no assists for units with >5:1 maximum staff:patient ratio)
- Unlikely discharge within 48 hrs. (ED attending discretion)

Last update: 12/18/22, EEG

GENERAL MANAGEMENT PATHWAY

Pre-observation unit evaluation should include:

1. Appropriate medical/trauma evaluation
2. Attending physician must document observation plan that includes both the reason for admission to CDU, the plan for CDU care and a specific plan for disposition prior to patient being moved to CDU.

Clinical Decision Unit interventions may include:

1. Serial vital signs
2. Home medications
3. Pain medications as required (patient must have well controlled pain)
4. Additional testing/interventions as documented in the attending provider's note

Indications for hospital admission while under CDU observation:

1. Newly and persistently abnormal vital signs
2. Need for additional workup and treatment
3. Inability to be discharged within 24 hours

Discharge Planning:

1. Prescriptions as required
2. Follow up as required