

CCU.8.4 When the patient is discharged from the unit, the coronary care unit physician ensures that the receiving team on the floor is well informed about the patient's status and ongoing patient needs.

CCU.8.4.1 The patient's plan of care and medications are written in detail by the physician including how to continue them on the floor.

CCU.8.4.2 Any special care requirements are documented in the patient's medical record.

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**Standard Intent:**

The continuity of care is one of the most vital aspect in health care institutes and the patient who admitted to the CCU may has another problem that affects cardiovascular problem, therefore, the CCC physician with the primary MRP should jointly discussed patient condition and rational to admit or discharge the patient to CCU. The CCU physician should document all medical management activities and patient progress notes and keep it available for reference at any time to ensure that all health care team have update of the patient's condition. When the discharge from CCU decision taken a comprehensive plan of care should be prepared and endorsed to the unit that the patient will be transferred to. The CCU staff should document and endorsed all of these information to the low acuity unit that the patient is going to as there are some needs that should be monitored and fulfilled for this type of patient as part of their treatment protocol.

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**CCU.9 Nursing staffing plans are available in the coronary care unit.**

CCU.9.1 The nursing staffing plans demonstrate an evidence based nursing to patient ratio.

CCU.9.2 The nursing staffing plans are matching the patient volume and patient acuity.

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**Standard Intent:**

Patient population of the CCU need special treatment and should have adequate number of nursing staff available in the unit. Nursing management should have nurse: patient ratio for the CCU unit and base on this ration a comprehensive nursing staff policy should initiate and maintained all the time. Nursing management should have identified different categories of acuity that may admitted in the unit and considered it when establish staffing plan.

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**CCU.10 Nursing staff in the coronary care unit receive continuous training with competency assessment.**

CCU.10.1 Nursing staff in the coronary care unit receive training and education on the following general and intensive care related needs:

CCU.10.1.1 Assisting physicians in the different procedures performed in the coronary care unit including securing central line access.

CCU.10.1.2 Using pulse oximetry.

CCU.10.1.3 Recognizing critical ECG changes including arrhythmias.



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- CCU.10.1.4 Obtaining arterial blood gas samples and blood drawing from umbilical catheters.
- CCU.10.1.5 Reading central venous pressure (CVP) and swan Ganz monitoring.
- CCU.10.1.6 Knowledge of dosage range, side effects and complications of commonly used medications such as high alert medications used in coronary care including vasopressors, narcotics, and controlled medications.
- CCU.10.1.7 Infection control principles.
- CCU.10.1.8 Blood transfusions.
- CCU.10.1.9 Assessing Glasgow Coma Scale (GSC).
- CCU.10.1.10 Use of defibrillator.
- CCU.10.1.11 Care of patients on ventilators.
- CCU.10.1.12 Care of Endo-tracheal tube (ETT).
- CCU.10.1.13 Care of patients with tracheostomies.
- CCU.10.1.14 Care of the terminally ill and end of life patients.
- CCU.10.2 There is ongoing competency assessment for the nursing staff (e.g., written test, return demonstration).
- CCU.10.3 The competency assessment of the nursing staff is documented.

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**Standard Intent:**

Qualified nursing staff members are hired by the hospital through a process that matches the requirements of the position with the qualifications of the prospective staff member. This process also ensures that nursing staff member's skills are initially and over time consistent with the needs of patients. Ongoing evaluation and competency assessment ensures that training occurs when needed and that the staff member is able to assume new or changed responsibilities. Training and competency assessment should be undertaken for the procedures mentioned in substandard CCU 10.1.1 through CCU.10.1.14

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**CCU.11 The coronary care unit has adequate equipment, supplies, and diagnostic services.**

- CCU.11.1 There are isolation rooms with at least one negative pressure room.
- CCU.11.2 The following equipment are available:
  - CCU.11.2.1 Ventilators.
  - CCU.11.2.2 Suction apparatus.
  - CCU.11.2.3 Airway sets.
  - CCU.11.2.4 Crash cart that includes defibrillator, all emergency supplies and medications as appropriate to the age of the patients.
  - CCU.11.2.5 ECG monitor, pulse oximetry, and vital signs monitor.