

RETU Geriatrics Pathway

Required testing prior to RETU admission (as indicated)

- CBC, chem 7
- EKG
- UA
- CXR

ED Evaluation

Not appropriate for RETU

- Evaluation by Case Management deems an inpatient stay is required
- Altered mental status
- New inability to ambulate
- When there are clear indications for admission

RETU Intake Evaluation

(do not repeat testing if already done in ED)

Exam Focus
(based on diagnosis)

- bCAM
- neuro
- gait assessment

Initial Testing (as indicated)

- Labs: CBC, chem 7, UA
- Imaging: CXR, CTH

DVT prophylaxis

- Consider in patients with predicted >24hrs LOS

Consults

- Social Work
- PT
- Pharmacy
- Geriatrics
- others as indicated

RETU Treatment / Evaluation

Early screening questions for discharge planning:

- Who do you live with?
- Do you have a home attendant?
- Do you need an increase in hours?
- Do you need home PT or equipment?
- Do you need assistance with transportation upon discharge?
- Would you like to see a social worker?

Geriatrics Consultation

- Pager 646-209-6430
- Available 8am – 5pm
- All Martha Stewart patients + Visiting Docs patients >65 yo
- Page **early** for clinical questions and assistance in discharge/dispo planning such as:
 - Complicated discharges
 - Medication adjustments
 - Recent 30 day admission
 - Need for expedited follow up

History of falls or worsening gait instability?

PT consult

Polypharmacy or medication nonadherence?

Pharmacy consult

Needs extra attention, ambulation, hearing amplifiers, glasses, etc?

CARE II Volunteer

Desires home services, increase in aide hours, equipment, home PT, transportation?

Social Work consult

TracED patient or recent 30 day admission?

Case Management
+
Social Work

Disposition Guidelines

Discharge from RETU

- Evaluation by multidisciplinary team deems fit for discharge
- Utilize EQUIPPED medication orderset

Admission to Hospital

- bCAM/delirium positive
- Evaluation by multidisciplinary team leads to admission requirement