MSH ED Observation Service (EDOS)

Date Created: 3/20/2024 **Date Reviewed:** 12/06/2024

Reviewed By: Synthia Hoque, Siriesha Patnaik, Tehreem Rehman, Robert

Sellman, Malisha Shah, Erika Stefanchik



Overview:

MSH ED Observation Service (EDOS) provides care to emergency department patients who need ongoing treatment or monitoring to determine appropriate admission or discharge. EDOS will function as a pull model. The ED Observation Service provider will regularly scan the track board to proactively identify eligible cases before rounding with your teams.

RETU workflow is not impacted by this change. Continue placing patients in RETU as clinically indicated. If you are unsure, the RETU PA can triage and determine whether the patient is a better candidate for the ED Observation.

The process excludes pediatric patients and patients requiring critical care or otherwise unstable.

Table of Contents:

Clinical Pathway	2
Goals of this shift	
Start of shift check list	3
End of shift check list	3
Enlisting Observation Provider on the Track board	4
Content for Daily Chats	5
Escalations	5

MSH ED Observation Service (EDOS)

Date Created: 3/20/2024 **Date Reviewed:** 12/06/2024

Reviewed By: Synthia Hoque, Siriesha Patnaik, Tehreem Rehman, Robert

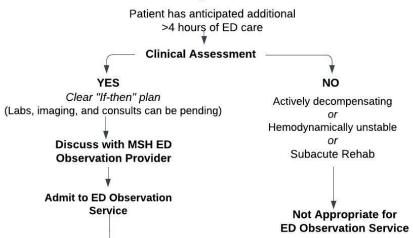
Sellman, Malisha Shah, Erika Stefanchik

Clinical Pathway:



MSH ED Referring Provider

IF



Patient disposition changes to purple "Observation" with yellow "A" when accepted by ED Obs provider

Attending continues to supervise patient care in EDOS

Some examples of cases appropriate for observation level care:	
Pending MRI/CT (including anaphylaxis pre-treatment).	
CT w IV Contrast when 5 or more pending on the Radiology trackboard.	
Repeat CT head after small intracranial bleed.	
High-Sensitivity Troponin Accelerated Diagnostic Pathway for Suspected AC	S.
Patient requiring antiemetics, IV hydration and monitoring of ability to retain o	oral liquids.
Kidney stone observed to determine adequate response to pain control.	
Asthmatic requiring repeat treatments and serial exams to determine respons	se to treatment.
Headache patients requiring repeat treatments and serial exams to determine treatment.	e if they improve with
Abdominal pain patients requiring serial exams to determine response to trea	atment.
Pregnancy-related hyperemsis	
Blood transfusions for anemia	
Intoxicated head injury patient observed to r/o significant injury.	
Questionable overdose observed to r/o significant toxicity.	
Same-day Dialysis	
Complex care planning needs like:	
SW facilitating outpatient detox	
Sober reassesments (including RELAY)	

MSH ED Observation Service (EDOS)

Date Created: 3/20/2024 **Date Reviewed:** 12/06/2024

Start of shift check list

Reviewed By: Synthia Hoque, Siriesha Patnaik, Tehreem Rehman, Robert

Sellman, Malisha Shah, Erika Stefanchik

Goals of this shift

- EDOS has a maximum capacity of 10 patients at a time
- Ensure appropriate patients home medications are ordered during their EDOS stay, as indicated by their clinical presentation

☐ Prior to first shift https://forms.office.com/r/A8HnWLxuVm
☐ Review Clinical Pathway above
\square Sign In under role "ED Observation Service Midlevel" in "Emergency Department" context
$\hfill\square$ When taking sign-out, start a reassessment note for each EDOS patient, pend all notes till end
\square Ensure you are listed on the track board as ED Observation Provider (steps below)
\Box Start an Epic chat in the morning, 3 pm, and 11pm as outlined $\underline{\text{here}}$
\square Review the track board, including radiology track board, to identify patients eligible for EDOS
\Box Introduce yourself to the teams in the ED, regularly round, and run the lists with ED teams every 2-3 hours (including 6am, 2pm, 10pm) during your shift to identify eligible patients for observation.
\square After accepting patients to observation, review home medications and order as appropriate. Use "MSH ED Observation" order set as indicated.
\square Do not change original team assignments to "Observation", even if patient relocated to Zone H.
End of shift check list ☐ If patient gets transferred to RETU, please "Pend" the patient and then place RETU order.

- Round in zones for updates to attending in person & iterate signing-out to incoming attending.
- Make sure to transfer care of each patient to a mid-level on the team & "Pend" the patient & iterate signing-out to incoming midlevel.
- Start an Epic chat with current and incoming attending/mid-level to facilitate sign out.

If there is overnight Observation Provider coverage available

If there is **no** overnight Observation Provider coverage

☐ Sign out to ED teams:

 \square 1 hour prior to end of shift, consider stopping taking new patients.

☐ Sign out to EDOS Provider and assign them as the mid-level on your patients.



MSH ED Observation Service (EDOS)

Date Created: 3/20/2024 Date Reviewed: 12/06/2024

Reviewed By: Synthia Hoque, Siriesha Patnaik, Tehreem Rehman, Robert

Sellman, Malisha Shah, Erika Stefanchik

Enlisting Observation Provider on the Track board

- 1. Navigate to the "ED Message Log"
 - Click on one of the existing messages at the top of the track board
 OR
 - o Navigate to "ED Manager" and select "Message Log" under "Addt'l Tools."
- 2. Edit an existing message about the ED Observation Provider on duty

Create a new message if one does not exist



MSH ED Observation Service (EDOS)

Date Created: 3/20/2024 **Date Reviewed:** 12/06/2024

Reviewed By: Synthia Hoque, Siriesha Patnaik, Tehreem Rehman, Robert

Sellman, Malisha Shah, Erika Stefanchik



Content for Daily Chats

Recipients: All ED attendings, Senior Residents, PAs currently on shift

Hi- I am the EDOS provider, my hours are x-x. There is -/no overnight coverage, x will come by x. I will be by to check-in person. I can support any questions but meanwhile feel free to reach out if you have any questions.

Escalations

- For urgent patient care issues related to this process, please contact MSH ED Physician AOC on Epic Secure Chat or call Physician AOC @ MSH ED on Zoom.
- For general questions regarding the process, please contact Tehreem.Rehman@mountsinai.org.