

Direct admissions of VNSNY home hospice patients to a GIP bed on the PCU

**** VNSNY hospice patients already on home hospice do not need hospice admission nurse to do intake and admission.**

1) Pt already in ED

- a. **ED physician to call VNSNY hospice [212-609-1900](tel:212-609-1900) first.** If the patient elects to stay with hospice because the admission is hospice related AND there is a need for a Mount Sinai PCU bed because pt is unstable to be moved to Haven or if pt insists on staying at Sinai, please call pall care pager 917-632-6906 or 9399 for bed availability.
- b. **PC fellow/attending/ nurse on pager to check with floor charge nurse for bed availability 212-241-5200.**
 - i. Call VNSNY hospice to verify plan to continue hospice, obtain information on diagnosis, symptoms and medications.
 - ii. Call GP2 admitting office (5:30A to 9PM Mon to Fri) to admit the patient. If GP2 is closed then call Bed Mgmnt (4-7461) (**bed board would call MAR**) for "urgent direct admit" to give pt info:
 1. name
 2. MRN
 3. DOB
 4. admitting diagnosis: hospice admitting diagnosis and ICD9 code
 5. attending's name
 6. projected LOS: indeterminate due to end of life care
 - iii. Team notification:
 1. **Regular hours:** Notify ED team, the Medical admitting resident AKA: MAR (pager 7758) and the PCU team that pt is accepted
 2. **After hours:** Notify ED team and the Medical admitting resident AKA: MAR (pager 7758) (MAR would notify night hospitalists to assist with admission and admission orders.) Hospitalists can complete a Hospice progress note (template available on EPIC) and bill for admission with modifier AI, GV and Q5. If hospitalists are not billing then no need to complete hospice admission note, team can complete the next day but a standard admission note will still need to be written.
 - iv. **Transition:**
 1. If the patient is already registered and treated in the ED then the patient will need to be **discharged from the ED** and then admitted to VNS Hospice bed on KP6

2) Pt coming in from home

- a. **VNSNY hospice to call PC fellow/ attending/ nurse via pager 917-632-6906 to see if there are PCU beds. If there are no PCU beds then patient cannot be directly admitted to Sinai's hospice and would consider other inpatient options.**

b. PC fellow/attending/nurse to check floor charge nurse for bed availability 212-241-5200.

- i. Return call to VNSNY hospice to verify plan to continue hospice, obtain information on diagnosis, symptoms and medications.
- ii. Call GP2 admitting office (5:30A to 9PM Mon to Fri) to admit the patient. If GP2 is closed then call Bed Mgmt (4-7461) (**bed board will call MAR**) for "urgent direct admit" to give pt info:
 1. name
 2. MRN
 3. DOB
 4. admitting diagnosis: hospice admitting diagnosis and ICD9 code
 5. attending's name
 6. projected LOS: indeterminate due to end of life care
- iii. Team Notification:
 1. During regular office hours, notify PCU team to expect admission. Pt should come directly to floor.
 2. After hours, notify ED team thru AMAC (ED CALL service at 241-3611 that there is a patient coming in from hospice that is going directly to a hospice bed on KP6 (ED to assist with creating an admission chart.) Pt will need to go through the ED so that they can create the admission before the patient comes up to KP6.
AND
 3. **After hours:** Notify ED team and the Medical admitting resident AKA: MAR (pager 7758) (MAR would notify night hospitalists to assist with admission and admission orders.) Hospitalists can complete a Hospice progress note (template available on EPIC) and bill for admission with modifier AI, GV and Q5. If hospitalists are not billing then no need to complete hospice admission note, team can complete the next day but a standard admission note will still need to be written.