

# Mount Sinai Hospital Department of Emergency Medicine

# **ADULT Resus Criteria**

The listed criteria are inclusive. Any patient requiring immediate resuscitation for whom a full assessment by the triage RN with VS would delay life-saving care should be brought directly to Resus.

## **CODES, TRAUMA, BURNS**

- STEMI
- Stroke Code for stabilization/airway before CT
- Trauma Code
- **Burns** with oropharyngeal involvement OR burns over a quarter (25%) of body

# AIRWAY, AGITATION, SEIZURE, OVERDOSE

- Angioedema/Upper Airway Swelling
- Active Seizures
- Agitated Patients requiring medication
- ullet Opioid Overdose: RR < 10, depressed mental status OR Narcan by EMS in last 45 minutes

### **LABOR and DELIVERY**

- Precipitous Delivery
- Maternal Hypertension- gestational age  $\geq$  20 weeks or  $\leq$  6 weeks postpartum with a SBP > 140 or DBP > 90

### TRIAGE VITAL SIGNS

- •**BP**: SBP < 80mmHg
- SpO2 < 80% OR SpO2 < 90% on 4L+ NC if no home O2/ 6L+ if on home O2
- •RR: > 40 OR < 10
- HR: >140 OR < 60 if symptomatic/EMS treated bradycardia OR < 40 all comers

#### LAB VALUES

- Hypoglycemia: FSBG <60 not already resolved
- Hyponatremia: <120 (for patients with outside lab values)

### **DEVICE MALFUNCTIONS and INFUSIONS**

- Vented tracheostomy- unless alternative area approved by ANM or other leadership
- LVAD with Primary Cardiopulmonary complaint or Acutely III or Equipment Malfunction
- Pulmonary HTN Infusions (Remodulin aka treprostinil or Flolan aka epoprostenol) with a Primary Cardiopulmonary complaint or a problem with infusion equipment.



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# **PEDIATRIC Resus Criteria**

The listed criteria are inclusive. Any patient requiring immediate resuscitation for whom a full assessment by the triage RN with VS would delay life-saving care should be brought directly to Pediatric Resus.

## CODE, INJURY, TRAUMA, BURNS

- Cardiac Arrest
- Stroke Code for stabilization/airway before CT
- **Trauma** including critically injured, unresponsive, head trauma (with Altered Mental Status)
- **Burns** with oropharyngeal involvement OR burns over a quarter (25%) of body

# AIRWAY, SEIZURE, OVERDOSE

- Anaphylactic Reactions
- Active Choking
- Flaccid Baby
- Respiratory Arrest/Distress
- Overdoses/Ingestions including Vitamins/Iron
- Vented tracheostomy

### **LABOR and DELIVERY**

• Precipitous Delivery - Triage to Adult Resus, Call Resus Pink

### TRIAGE VITAL SIGNS

- SpO2 < 90%
- •**HR**: Severe bradycardia or tachycardia with signs of hypoperfusion (Reference Peds VS Range chart)
- BP: Hypotension with signs of hypoperfusion
- Fever: (100.4 or greater) Infant < 1 month of age, Solid Organ Transplant, Sickle Cell, or patients receiving Chemotherapy

# **ACUTE ILLNESS, SEIZURES**

- Active Seizures
- Diabetic Ketoacidosis
- Shock/Sepsis with signs of hypoperfusion/dehydration

### LAB VALUES

- Hypoglycemia with change in mental status
- Known Hyperkalemia (for patients with outside lab values)
- **Hyponatremia:** <120 (for patients with outside lab values)